

# Defense Suicide Prevention Office Video Transcript

# Fireside Chat: Sexual Assault Prevention and Response Office (SAPRO)

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#### Dr. Liz Clark:

Hi, and welcome to the Defense Suicide Prevention Office Fireside Chat series. Today, I'm extremely excited to talk with Dr. Nate Galbreath, who is the director of the Sexual Assault Prevention and Response Office, or we call SAPRO. Dr. G is an Air Force veteran and the Department's expert for prevention of response programs and the relationship to behavioral health, forensic science, criminal investigation, and sex offender assessment and treatment. Dr. G holds a Ph.D. in clinical psychology from USUHS, or the Uniformed Services University of the Health Sciences, and a Master of Forensic Science from The George Washington University. He's been affiliated with SAPRO since 2007, when he served as SAPRO'S first military deputy director before retiring from the Air Force in 2009.

Dr. G, again, we're just thrilled and honored to speak with you today. Thank you so much for being here to inform our audience about the connection of SAPRO with our shared mission space with preventing suicide. And just with that, if you could tell us a bit more about SAPRO and the work being done to prevent sexual assault in the military.

#### Dr. Galbreath:

Absolutely. Thank you so much for having me here. It is a pleasure to be able to talk about our shared mission space. And so SAPRO was founded in 2005 as the Department's, essentially, policy and program office for the prevention and response to sexual assault. And so, we published the policy that governs the services that we make available for individuals reporting sexual assault in the military. We also work to help establish training requirements and certification for credentialing of sexual assault response coordinators, victim advocates out in the field, and also the program managers that help run this program throughout the military Services.

So, we've been in existence for quite some time. I've been with SAPRO for all but two years of its existence, and so that means I'm old. Nonetheless, I'm happy to talk a little bit about some of the work that we've been doing more recently, and that is with regard to prevention, you know, the Secretary of Defense back in 2021, when he came on board, essentially said, hey, you all need to do more to address sexual assault in the military, and rightfully so. We've had a number of challenges; ongoing rates of sexual assault in the military and sexual harassment have been on the rise for quite some time, and so, in addition to that, we probably didn't have as much visibility for in the senior leader portfolio as we've had in previous years.

And so I think was really helpful when this secretary came on board and directed that we do a number of things, including having an independent review commission on sexual assault in the military to take a peek at all of the different things that we were doing, and they made recommendations in four different areas and two of those areas have a lot to do with prevention. So, for example, prevention of sexual







assault in general, but also climate and culture, which are huge factors associated with sexual assault, because we know that military units that have climate challenges tend to have greater rates of sexual assault and sexual harassment. And so, a lot of our work recently has been to implement those recommendations to improve prevention and also response and victim care within the Department.

#### Dr. Clark:

When you think about, many times I talk about with suicide prevention as not just focusing on death prevention but truly making life worth living. And when we think about from your mission space and preventing sexual assault, can you talk a little bit about, from your perspective, on how sexual assault prevention and response is also helping prevent suicides?

### Dr. Galbreath:

Absolutely; first of all, both your program and my program is a risk and protective factor approach, right? We look at those factors out in the military population as a whole that either protect against having bad outcomes occur, like sexual assault or self-harm, and also those things that also make those outcomes more likely; those are risk factors, and so our interventions largely target those risk factors and those protective factors to ensure that we are moving the needle, that we're actually making progress with regard to stopping the crime before it occurs and also ensuring that everybody knows that there are lots and lots of services out there.

One of the shared pieces in our programs, I think, is the hope that we try to instill in folks that come to us for assistance. I think hope is the number one thing that people have to have in order to get back on the road to recovery. Survivors oftentimes are feeling like their life is fundamentally changed, and it's going to stay the same forever. And there's this horrible outcome associated with the crime that they've experienced, and while it is very challenging and it is often not an easy road back to recovery for survivors, the one thing that can sustain you is hope and that hope that things will be different, hope that things will change, and understanding that you will have a different perspective if you give yourself the time, 10 years, maybe 15, to be able to, then to look back and say, yeah, that was an awful time, but I overcame.

I was able to not let that offender take my life and forever change it. Instead, I was able to get back on the road to recovery. I accessed all the different ways that I could heal and put my life back on track. And that's the hope that we have for all survivors that come in and want to get assistance for an incident that they've experienced.

### Dr. Clark:

I mean, just hearing hope and healing, we in our space many times talk about connection, and so when I kind of thread those together of this hope, healing and connection and empowerment, just I can see how preventing suicide is just, you know, really weaved in throughout your all's mission space as well, but kind of moving a little bit differently is that it's not often in our areas that we can talk about good







news. But this year, you all, for the first time in ten years, saw a decline in sexual assaults in the military from your latest report on sexual assault in the military. Can you talk a little bit about what you're seeing with that decline?

#### Dr. Galbreath:

Absolutely. Every two years, the Department goes out and assesses how well we're doing with surveys of the Active and Reserve component. And these are scientific surveys that have withstood a lot of scrutiny be, so they're very accurate. One of the things that we were noticing prior to this year was the rates of sexual assault and sexual harassment that we were seeing in the force were increasing; matter of fact, they had been increasing for quite some time, and this is, of course, very concerning to us.

Some of the plans that we have as to, you know, that if you're going to change the outcomes of these types of problems in a population, you have to invest. You have to sink money, time, people, and helpful and proven components, in to making changes within our population in order to see changes in these rates. Well, for the first time, we are cautiously optimistic that all the investment made by the Department since 2021 in this problem has actually turned the corner. And that we saw rates of sexual assault for Active Duty women decreased in a statistically significant way between 2021 and 2023, and then, while there wasn't a statistical change, but the rates for men actually trended downwards; at least they headed in the right direction. And so, again, we are cautiously optimistic that we are, making a change in this problem and that sexual assault will continue to be less of a problem for the folks in the military.

That being said, we have a lot more work to do. And this is, we certainly aren't going to rest on our accomplishments here, because we have a great deal more implementation of our recommendations and changes that we need to make in the military.

### Dr. Clark:

Yeah, just phenomenal work that you all have done, as well as the folks down at the plate and, you know, down in the trenches, so just thank you for your relentless efforts of trying to get to prevent sexual assault and responding to kind of with that, for those who are listening to this, if they've experienced sexual assault or if they know somebody who has experienced sexual assault, can you talk a little bit about the resources available?

### Dr. Galbreath:

We have a great deal of resources for folks, and the whole idea behind the program, the Sexual Assault Prevention Response Program in the Department, is to give people choices. There is no one-size-fits-all for folks who are considering what to do next after an experience of sexual assault. So, from that perspective, we want to give people as many choices as they possibly can have so that whatever they pick is right for them.







We are sexual assault response coordinators, and our victim advocates are all trained to help empower the decision-making of survivors to be able to pick the right things that are going to be most meaningful and helpful to them. So, the easiest, most personable way that you could get assistance for an incident of sexual assault is to contact your local installation, sexual assault response coordinator, or victim advocate there on your, wherever you are in the world. They are everywhere, and so from that perspective, there are people waiting to talk to you, and those numbers are well published.

However, if you are not sure and you are concerned about your privacy and whether or not this information, you know that your experience will get out...

SARC and VAs, you know, they're sworn to secrecy, but ultimately, what I will tell you is, is that we have a way for people to understand what their options are at our helpline, which is called Safe Helpline, and you can find that at www.safehelpline.org. This helpline is run for us by the Rape Abuse Incest National Network. That's the country's largest advocacy group, and they have a presence in all 50 states. And as a result, we have trained operators that are willing to talk to you and discuss your circumstances, your situation, and help you understand what choices and options you have for healing.

But if you don't want to talk to somebody, we are also 21st-century enabled. We have folks that can chat with you too. So you can go online and at Safe Helpline and click the chat button and someone can chat if you don't feel like you can call and/or you wanted actual to talk to somebody.

Another option that's on Safe Helpline, too, is if you are looking for resources that might not only be in the military community but also in the civilian community. Safe Helpline has a place for you to type in your zip code or your installation name and it will show you every single military resource and civilian resource that's out there that you can contact without ever having to talk to anybody within the Department of Defense. And so all of this range of help is right there at Safe Helpline.org, ready for you to figure out which one do you want to use in order to know what your options are.

### Dr. Clark:

Well, thanks so much, Dr. G, for your time and well just one last question, is anything else that you would want to share about, about your program? About anybody that's listening to this Fireside Chat that you would want to share with them?

#### Dr. Galbreath:

Absolutely. So, a lot of times, for our folks that have made a restricted report or, even sometimes folks that have made an unrestricted report, but, law enforcement doesn't know who the alleged offender might be. They still want to do something, right? Not only do they want to heal, but they also want to participate somehow, but maybe they're just not ready for participation in a criminal investigation. So, we have the Catch a Serial Offender Program, and this program is something that you can find more about both on my website at www.SAPR.mil and by just going to the link there that talks about the Catch a Serial Offender program.







If you would like to participate in it, you have to contact your local SARC and they can tell you about how to submit information about the alleged offender into anonymously into a criminal investigative database run for us by our military criminal investigative organizations, that's like CID, OSI, Naval Criminal Investigative Service, those folks. And so in that one, if one person's submission about an alleged offender's name, or screen name, or information about them matches another, then the criminal investigators let the SARC know that there's been a match, and then the individual who submitted the information can consider whether or not they want to unrestrict their report and participate in a criminal investigation. So, that's another option out there if you're if you're interested.

### Dr. Clark:

All right. Well, thank you so much for your time, Dr. G. We so appreciate you. And for those listening, if you're a Service member or a family member in crisis, please do dial 988 and press one for the Veterans and Military Crisis Line. You can also access the crisis line by texting 838255. And with that, to Dr. G., thank you for your partnership, your support, and all of these efforts to make lives worth living, and we're grateful for your time today. Thank you so much.

Dr. Galbreath:

Thank you.



