



NATIONAL GUARD BUREAU

1636 DEFENSE PENTAGON
WASHINGTON DC 20301-1636

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MEMORANDUM FOR THE ADJUTANTS GENERAL AND THE COMMANDING GENERAL OF THE DISTRICT OF COLUMBIA

Subject: National Guard Integrated Primary Prevention Strategy

References: (a) USD(P&R) Memo "Execution of Department of Defense Plan of Action 2.0 (2022-2024)," 27 May 2022
(b) DoD Instruction 6400.09, "DoD Policy on Integrated Primary Prevention of Self-Directed Harm and Prohibited Abuse or Harm, 11 September 2020

1. In accordance with the references, please see the attached National Guard Integrated Primary Prevention Strategy which will help adjust the approach used to address harmful behaviors that plague the health and well-being of our Soldiers, Airmen, family members, and Civilians and increase overall readiness.
2. The strategy will bring coherence, direction, and understanding in implementing an integrated prevention approach.
3. While the prevention workforce is a new capability in support of leaders, it cannot achieve the intent of this strategy on its own. National Guard members at every level will embrace and prioritize integrated prevention as an enduring capability.
4. Point of contact is MG Eric K. Little; Director, National Guard Bureau Manpower and Personnel Directorate; 703-601-0953.

A handwritten signature in blue ink, reading "Daniel R. Hokanson", is positioned above the printed name and title.

DANIEL R. HOKANSON
General, USA
Chief, National Guard Bureau

Attachment:
As stated

**THE
NATIONAL GUARD
INTEGRATED PREVENTION
STRATEGY AND FRAMEWORK**

SEPTEMBER 2022

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EXECUTIVE SUMMARY

Overview

The National Guard Integrated Prevention Strategy provides an overarching framework to prevent harmful behaviors and build cohesive organizations. While drawing upon both past efforts and proven public health approaches, it represents a bold, distinctly new approach to caring for our most critical weapon system – our People. Taken collectively, the strategy’s initiatives represent one of the largest reorganizations of the National Guard’s “people” space in decades.

The framework briefly explores how the National Guard has arrived at the current state, examines the shortcomings of today’s approach, defines the desired prevention system, explores the demands such a system will face in the future, and sets a course for a systematic approach to Integrated Prevention.

While this strategy proposes comprehensive, enterprise-wide reforms necessary to drive toward a conspicuously different outcome, it also provides direction and focus for States/Territories/District of Columbia and their commands to develop tailored, but nested approaches, effectively operationalizing these concepts in a way that best addresses their unique environments, missions, and challenges.

Ultimately, however, preventing harmful behaviors requires steadfast leadership at every echelon. The National Guard’s challenges can only be addressed through a resolute effort across the whole of the force, driven persistently from the top and by every level of leadership. Changing course will require genuine, authentic leadership and persistent engagement. Our Servicemembers, Civilians, and Families deserve no less.

Purpose

The National Guard Prevention Strategy seeks to bring coherence, direction, and understanding to how the National Guard will implement an integrated prevention approach that increases readiness of all people — Soldiers, Airmen, their Families, and Civilians.

Establishing holistic wellness through a prevention system is a necessary component to building an agile, ready, and lethal National Guard capable of meeting the demands of a rapidly changing environment. The National Guard must remove structural barriers that impede success and enhance the systems that maximize human potential. This work

builds on the lessons learned from previous efforts and recognizes existing work underway to improve the National Guard.

Background

The presence of suicide, domestic violence, sexual assault and sexual harassment within our ranks erodes the readiness of our Force, the cohesion within our formations, and the trust between our Servicemembers, Leaders, the National Guard and the American people. Our people are the foundation of our organization; when our people break, the National Guard breaks.

Current State

The National Guard's processes to integrate major Army and Air Force programs, resources, services, and policies that work together to prevent harm to the Total Force is not delivering expected results. The current system is not set up to learn, anticipate or adapt to an ever-changing environment. There is a lack of accountability for prevention activities, resourcing oversight, and allocation of resources to meet the demands of a rapidly changing operational environment. The net result is Soldier, Airmen, Family, and Civilian challenges are often met with fractured programs and a set of partially integrated solutions.

Today across the National Guard, prevention is not widely understood in a public health sense; as a continuum consisting of primary prevention, intervention, and response. In this context, the vast majority of the National Guard's programs, efforts, and initiatives to address harmful behaviors would be categorized as intervention and response, not primary prevention. If the National Guard desires to better prevent harmful behaviors, a substantive weight-of-effort shift is required, one that places a premium on primary prevention.

Future State

The National Guard will implement an adaptive, integrated prevention system to reduce harm to Soldiers, Airmen, their families and civilians, while strengthening cohesion across the force. The system will allow the National Guard to continuously understand how a changing environment contributes to risk factors, to share and disseminate shared understanding, and act swiftly and effectively using a systematic approach.

The National Guard prevention system will:

- Center on addressing shared risk and protective factors
- Provide a more supportive environment for teams, units, and communities
- Acknowledge the impacts of an ever-changing environment
- Align authorities and responsibilities in a way that provides coherence

- Expand prevention activities across the whole of the continuum, with an emphasis toward “upstream,” primary prevention efforts
- Leverage data and research to ensure accountability, focus efforts, drive continuous improvement and innovation
- Broaden risk to include vulnerabilities as well as threats

Approach

The National Guard Prevention Strategy leverages a proven public health approach to prevention of harmful behaviors. The National Guard Prevention Strategy pursues three primary goals:

Goal 1: Establish Integrated Prevention Infrastructure: A change in governance and a broader cultural shift toward prevention will establish infrastructure required to deliver integrated prevention across the National Guard enterprise. Governance will drive unity of effort towards continuous improvement and modernization of the National Guard’s prevention system and supporting programs through integrated solutions.

Goal 2: Execute Integrated Prevention: An integrated prevention system focuses on identifying and mitigating risk to individuals and units while simultaneously identifying the actions necessary to increase protective factors, thus providing a web of support to both organizations and individuals.

Goal 3: Become a Learning Organization Optimized for Prevention: The importance of data and research in both informing prevention efforts and providing an evidence-based approach for continual system improvement cannot be overstated. Unlocking data’s untapped potential to help echelons understand their environment and see themselves in an actionable, predictive way is both powerful and an essential element to any successful approach.

Given these goals, the strategy builds upon this framework with the following supporting objectives and guidelines:

Goal 1 - Establish Integrated Prevention Infrastructure

SO 1. Align and integrate Bureau policies and processes to prevent harm

SO 2. Operationalize prevention and the National Guard’s Prevention System

Goal 2 – Execute Integrated Primary Prevention

SO 1. Establish Integrated Prevention Systems

SO 2. Identify and mitigate risk factors

SO 3. Increase protective factors

SO 4. Professionalize prevention workforce

SO 5. Reform education and training

Goal 3 - Become a Learning Organization Optimized for Prevention

SO 1. Implement a rigorous, evidence-based system for prevention system review and reporting to drive outcomes

SO 2. Measure and report the human factors of readiness.

INTRODUCTION

Historically the National Guard has operated in a cycle of response when addressing harmful behavior. Over the past several years, the National Guard stood up an array of new programs to address harmful behaviors. These programs produced bodies of work aimed at building cohesive teams but were not consistent in their effort, and lacked tangible, measurable outcomes to establish a clear and effective solution to some of these big problems. Past efforts have often been reactive, which can limit National Guard's ability to address the "upstream" factors that often serve as precursors to negative behaviors and adverse outcomes. This dynamic has yielded a combination of policy responses, ad-hoc organizations, programs, and initiatives without considering the impact or interrelation to other efforts within a holistic prevention system. Acknowledgment of this reality provides a valuable reference point to identify and address gaps during future prevention efforts.

This strategy puts forth a broad framework of reform, setting the foundation for a systems-based approach to prevention. It is designed to empower leaders at all echelons to make timely, relevant, and data informed decisions to reduce risk and increase protection along the continuum of prevention. While the National Guard Prevention Strategy identifies several areas for immediate action, other areas of the prevention system require further development and additional analysis.

Prevention must be operationalized at every echelon. Effective implementation will require focused action at the strategic (National Guard Bureau), operational (State/Territories/District of Columbia), and tactical (Wing/Brigade echelons and below). Every commander and leader must understand risk and protective factors and take proactive measures to mitigate harm. Engaged leadership is imperative.

The strength of the National Guard relies upon the strength of its people. In the coming years, the National Guard will increasingly have to compete for talent to maintain multi-domain capability and the all-volunteer force. Who the National Guard assesses into its ranks will also increasingly present challenges. While the pool of military-eligible youth continues to decline, the full effects of both a global pandemic and a national epidemic of loneliness¹ among young adults is yet to be realized.

Maintaining the status quo is simply not acceptable to address these readiness challenges. Unless the National Guard adapts existing stove-piped prevention processes and programs into an integrated approach, it risks both eroding the trust of

¹ <https://mcc.gse.harvard.edu/reports/loneliness-in-america>

the American people and failing to recruit and retain the human capital necessary to meet readiness and modernization objectives.

PURPOSE AND VISION

The National Guard Integrated Prevention Strategy provides a coherent, integrated approach to protect the Soldiers, Airmen, and Civilians of the National Guard and enables the National Guard to execute a comprehensive, integrated prevention system. The National Guard institutionalizes primary prevention in our policies and programs down through the States, Territories, and the District of Columbia (hereinafter referred to as “States”), units, teams, Servicemembers, Families, and Civilians using integrated strategies. Integrated primary prevention (IPP) is a mutually reinforcing, collective effort at all levels to enhance protective factors and mitigate risk factors that diminish individual and collective readiness. The systems approach connects actions impacting risk and protective factors and leverages relationships between all levels of the enterprise. This strategy sets the conditions to operationalize prevention through the application of primary prevention, risk management, and principles of protection.

The National Guard must consistently and proactively apply prevention as a foundational element of Readiness. As the National Guard moves toward primary prevention, current National Guard programs designed for intervention and response, targeted toward identifying high-risk individuals and outlining actions to take in the immediate moments leading up to and after the occurrence of a harmful behavior will be enhanced. Capabilities to intervene have great value and must be sustained and improved. The National Guard will:

- a. Develop and implement an integrated prevention system that increases readiness and reduces harmful behaviors.
- b. Build on lessons learned from previous efforts and incorporate the work presently underway to improve the National Guard.

PROBLEM STATEMENT

The National Guard’s process to integrate policies, major programs, resources, and services to prevent harmful behaviors is not delivering a decrease in the incidents and impact of harmful behaviors. This “identify and refer” approach attempts to mitigate further harm to high-risk Servicemembers but does little to prevent them from becoming high risk.

Young adults represent one of the highest risk populations for harmful behaviors. Young Servicemembers are at particular risk, and national trends will continue to impact the future Force. Society is beginning to realize the negative effects of social media on youth and young adults. Mental health challenges will remain pervasive and additional

variables in the human domain will stress the National Guard in the coming decade. Servicemembers have a variety of backgrounds and experiences when they join the military, and closing the gaps in life skills, values, and beliefs requires persistent engagement.

Harmful behaviors exist along a dynamic continuum. This continuum refers to the range of behaviors and actions of a healthy Servicemember (SM) within a healthy environment on one end, and a violent or negative SM on the other. Servicemembers are at varying points along the continuum throughout their life, given the presence of individual or collective risk and protection. Therefore, every SM and every unit falls along the continuum with some level of vulnerability. Vulnerability is the result of a continuous interactive process between the social context in which a person lives and a set of underlying factors that contributes to a person being at risk for negative behaviors. They are connected: healthy environments with significant protective factors contribute to a healthy individual. Servicemembers and unit vulnerability are influenced by a variety of factors including upbringing, physical environment, and social environment. This strategy outlines how the National Guard will set the conditions and provide support to bolster protective factors and mitigate risk.

BACKGROUND

Prevention is the action of stopping something from happening or arising whereas integrated primary prevention is the result of activities that simultaneously mitigate risk and increase protective factors across multiple levels of influence while encompassing more than one harmful behavior. Protective factors are behaviors or conditions that reduce or buffer against negative outcomes and behavior. Risk factors are behaviors or conditions that increase the risk and likelihood of violence and negative outcomes. The DoD's Tenets of Prevention are outlined in DoDI 6400.09 (Violence Prevention Integration) and the Prevention Plan of Action (PPoA) 2.0. Key concepts for understanding risk and protective factors include:

1. Risk and protective factors exist in multiple contexts
2. Risk and protective factors are correlated and cumulative
3. Individual risk and protective factors can be associated with multiple outcomes
4. Risk and protective factors are influential over time
5. Not all people or populations have the same level of risk

At the individual level, risk and protective factors are a condition of an individual's current and past environment and its impact. Individually and collectively, risk and protective factors are influenced by the current environment and influences that extend

beyond the individual. This underscores the importance of healthy climates and culture because the effectiveness of the system relies upon them.

To understand the influence of environmental conditions, one must consider the Social Determinants of Health (SDoH). The SDoH are conditions in the environment where people are born, live, learn, work, eat and drink, play, and worship that affect a wide range of health and quality-of-life risks and outcomes. The five domains of the Social Determinants of Health are:

1. Health care access and quality
2. Education access and quality
3. Economic stability
4. Neighborhood and built environment
5. Social and community context

The SDoH are contributors and may even be root causes for some forms of harmful behaviors. The prevention system, and how National Guard leaders conceptualize prevention, must evolve to include understanding of how community, unit environments contribute to the remediation of harm, as well as its cause.



Figure 1 -Social Determinants of Health-Army Public Health Command adapted from U.S. Department of Health and Human Services, Office of Disease Prevention and Health Promotion, Healthy People, 2030.

Risk and protective factors, understood through the context of the SDoH, are assessed and actioned through the levels represented by the Centers for Disease Control and Prevention’s social-ecological model (SEM). The SEM considers the interplay between individual, relationship, community, and societal factors. It facilitates understanding of a range of factors that put people at risk or protect them from experiencing or perpetrating harm. The overlapping levels of the model illustrate how factors at one level influence factors at another level. From an National Guard perspective, the model demonstrates how behavior is shaped at

each level over time:

1. Servicemen and Leaders (Individual)
2. Family/Peers (Relationship)
3. Organization/Unit (Climate)

4. State/Territory/District of Columbia (Community)

The system is designed to maintain an environment where all leaders and Servicemembers understand risk and protective factors to address problems before they become critical. The prevention system frames risk as a function of hazards and threats exploiting vulnerabilities that affect mission readiness. This non-operational consideration of threats to people capitalizes on a doctrinal understanding of composite risk management along with the application of principles of protection; risk and protection must be understood and applied at each socio-ecologic model level. The principles of protection and prevention are synonymous, effective practices. Each are comprehensive, integrated, layered, redundant, and enduring, and should be incorporated into prevention development.

Effective prevention activities are matched to the target population and assessed a level of risk. These include the following three characteristics:

1. Universal programs and practices. These take the broadest approach and are designed to reach entire groups.
2. Selective programs and practices. These target individuals or groups who experience greater risk factors that are put at a higher level of risk than the majority of the population.
3. Indicated programs and practices. These target individuals who exhibit signs of harm. The integrated prevention system addresses the need for selective and indicated prevention activities while emphasizing the collective strength of universal programs to provide the greatest protection to the force.

The mitigation of risk and promotion of protection among all SEM levels represents the most significant shift in how the National Guard will approach prevention.

CURRENT STATE

We do not have a shared understanding of which efforts are effective within a military environment due to the lack of evaluation data demonstrating program effectiveness. This strategy establishes the necessary framework for which all prevention policies, programs, and activities are understood, resourced, and evaluated regardless of whether it is unified, localized, integrated, or addresses a singular harmful behavior.

As National Guard priorities have shifted over time, competition for resources increased and prevention resources declined and prevention as a capability has not endured. Program-based requirements stagnate, adapting or changing only because of another crisis. Current programs and processes remain rooted in long-held beliefs that harmful

behaviors occur as a result of individual action that can be prevented through targeted intervention, education, and awareness. Without change, prevention activities will remain predominately training and awareness campaigns, and likely ineffective.

ASSUMPTIONS

The presence of harmful behaviors in society will contribute to the presence of harmful behaviors in the National Guard. The National Guard budget will continue to be constrained and the competition for both fiscal and human resources will continue to remain a challenge. The National Guard will remain an all-volunteer force. The National Guard will be able to acquire the necessary prevention workforce talent at all echelons as envisioned by the Office of Secretary of Defense (OSD); OSD will not substantively change prevention workforce requirements. A public health approach to prevention can be adopted for, and effective within the National Guard's unique environment.

RISK

If the National Guard does not implement a prevention system, it risks failing to reduce harmful behaviors, meet the future readiness requirements for operations and sustainment of the All-Volunteer Force at a time when competition for talent is high. Support to our communities and our Servicemembers, and the National Guard cannot focus on its domestic and global mission without an enduring focus on its people.

FUTURE STATE

The desired future state is an adaptive, integrated prevention system, implemented at echelons that reduces the incidences and prevalence of harmful behaviors and protects the Force. As defined by the DoD PPOA 2.0, the three pillars of the prevention system include Human Resources, Collaborative Relationships, and Infrastructure. In an optimized prevention system, there is strong leadership support, and a growth mindset approach toward positive cultural change. The foundation of the two taken together empowers human resources capability to: attain and sustain prevention specific knowledge and skill development, and support productive

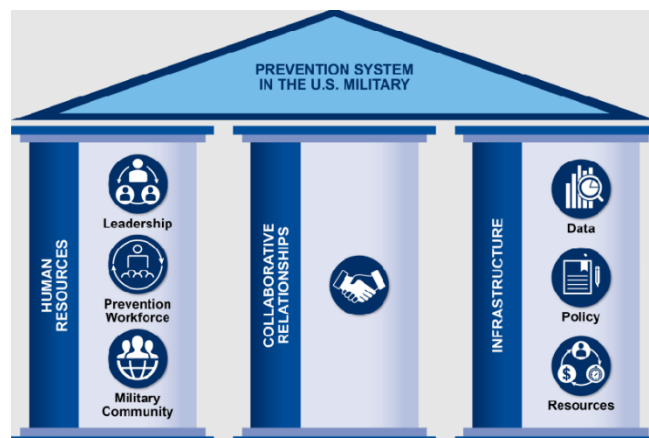


Figure 2 – Primary Prevention System

collaborative relationships among stakeholders, between service providers, and throughout the enterprise. These pillars set conditions for effective and enduring facilitation of and institutional action that drive planning, policy refinement, evaluation, and quality improvements.

The National Guard Prevention System will be nested with operational and tactical level systems, operating with common principles developed from evidence-based research and technical expertise. Although each State, Brigade, and Wing will have unique aspects, all systems must have the three pillars (Human Resources, Collaborative Relationships, and Infrastructure) and their subcomponents. The strength of these pillars should be the guidepost by which to measure and ensure effective execution of the prevention process. The system is critically important because a gap or deficiency in any element of the prevention system will degrade the quality of prevention activities.

The integrated prevention system operates and is influenced by the individuals and members of the teams, units, and communities and the context of policies and culture that shape the National Guard. This strategy aligns contemporary theories of prevention to an infrastructure that is informed by quality data and ensures continual monitoring and evaluation of the system. To achieve desired outcomes, the system should have upstream focus with emphasis on primary prevention, an integrated and collaborative approach, be data driven, and maintain a culture of continuous quality improvement and accountability.

Approach

This prevention strategy recognizes that current prevention, intervention, and response programs must evolve to remain relevant; it is people-centered and focuses on the programs, processes, activities, environment, and infrastructure integral to addressing harmful behaviors. The strategy at all echelons with support and augment current program managers and the prevention workforce.

Programs not previously viewed as prevention, such as Family and Morale, Welfare, and Recreation services impact quality of life, the environment in which Servicemembers live, work, eat and drink, play, and enhance overall community well-being; they are critical enablers of primary prevention and a local integrated prevention system. An integrated prevention portfolio brings all vital resources and capabilities to address prevention.

Effective implementation requires focused action at multiple levels of execution: Strategic (National Guard Bureau), Operational (States), Tactical (Brigades/Wings). While actions at the strategic and operational levels are critical to set conditions for

integrated prevention, success is achieved at the tactical level. Integrated prevention deployed effectively at the local level is an essential component required to build cohesive teams to build and maintain readiness.

The Prevention Workforce

The Prevention Workforce is the core of the human resource component of a prevention system. The Prevention Workforce will work collaboratively with existing programs such as Family Advocacy, Suicide Prevention, Sexual Assault Prevention, and Response, and Diversity Equity and Inclusion and others to develop integrated prevention strategies and activities based on specific local needs and conditions. The recruitment and retention of a professional and dedicated Prevention Workforce enables Commanders to execute this strategy by providing the technical expertise to link the science of prevention and the art of Command within an optimized prevention system. This workforce is additive and does not replace existing personnel that will continue to lead secondary and tertiary prevention efforts as mandated by law and National Guard regulation. The dedicated Prevention Workforce will be the National Guard's enabler to ensure the integrated prevention process is expert-led and data-driven.

The Prevention Workforce will develop strategies and implement research-based primary prevention activities to mitigate risk factors and promote protective factors within the National Guard community. They will do this by using a four-step Prevention Process:

1. Understand the problem
2. Develop a comprehensive approach
3. Ensure quality implementation
4. Continuous Evaluation

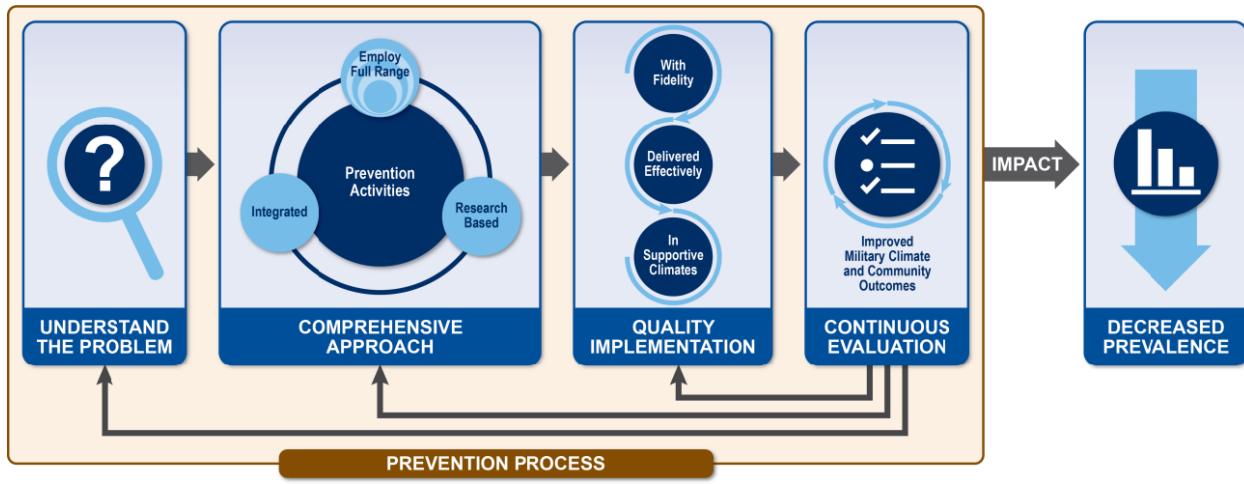


Figure 3: Four-Step Prevention Process

At every echelon the Prevention Workforce will develop and measure process and outcome-based metrics to assess the effectiveness of prevention activities and share this information with National Guard leaders. This will assist in planning and decision-making for the enduring allocation of prevention resources.

1. Describe and explain how harmful behaviors are a social and public health problem
2. Apply prevention science to military context
3. Access, interpret, use, and present data on harmful behaviors and the factors that contribute to those behaviors
4. Design, adapt, and implement IPP activities
5. Conduct public health evaluations to determine effectiveness of IPP activities
6. Build and manage an IPP system that will disseminate information to and collaborate with the community, other professionals, key policymakers, and leaders
7. Build the prevention capacity of the military community through outreach and education
8. Stimulate change through improvement of policies, programs, and practices
9. Provide expertise surrounding understanding of risk and protective factors associated with childhood maltreatment and trauma.

GOALS AND STRATEGIC OBJECTIVES

National Guard leaders, informed by public health professionals and prevention experts, increasingly understand that Servicemembers, their Families, and Civilians make decisions about their health and well-being, based on the surrounding social, physical, and economic environments, and the resources available to them. These environment

and resource allocation considerations significantly contribute to the risk of harm, resulting in outcomes that are better or worse. A systems approach to prevention is necessary to understand and effectively influence a broad array of factors. This systems approach serves as the foundation for the goals and their associated objectives.

Goal 1: Establish Integrated Prevention Infrastructure

A change in governance and a broader cultural shift toward prevention will establish infrastructure required to deliver integrated prevention across the National Guard enterprise. This top-down approach includes consolidating primary prevention systems under the National Guard Bureau (NGB) J1 Directorate. This framework represents a fundamental change in the status quo; an optimized governance structure that unites all prevention-intervention-response programs, pilots, and initiatives into a strategic portfolio for an integrated prevention approach for the National Guard. It also provides the mechanism to scale well-designed programs and empower commanders with the authorities needed to apply resources in a more appropriate manner.

Strategic Objective 1: Align and Integrate Bureau policies and processes to prevent harm

Part of the integrated prevention system unifies all National Guard prevention-intervention-response programs and resources into a strategic portfolio. To establish an integrated prevention portfolio, appoint a NGB staff principal as the lead for prevention programming. The programming staff lead would be responsible for unifying prevention program stakeholders in the identification of requirements, validation, prioritization, and modernization of all prevention efforts. Creation of the prevention portfolio enhances programmatic relationships with other NGB entities for Prevention (i.e., Joint Surgeon, Chief of Chaplain), develops a holistic depiction of the National Guard's prevention programming, and enables efficient resourcing across the prevention continuum through implemented measures of effectiveness and economy of resources.

Strategic Objective 2: Operationalize prevention and the National Guard's Prevention System

Leaders leveraging prevention programs and enabling activities to promote protective factors and mitigate risk factors in their units are at the center of the National Guard's prevention system. The National Guard must operationalize prevention to better enable leaders to create prevention systems at their echelon. At the NGB level, establish an Integrated Prevention Branch to direct the coordination, integration, and synchronization of all programmatic and supporting efforts that prevent harmful behaviors. The Integration Branch would be responsible for synchronizing prevention efforts with other

National Guard priorities and strategic requirements to enable unity of effort and lessen training fatigue. The Integrate Prevention Branch would synchronize prevention activity integration across the National Guard; advise on the development and integration of institutional prevention training portfolios; integrate the prevention strategy into National Guard strategy processes; provide the staff linkage to the National Guard's proponent for prevention requirements validation and prioritization; develop strategic communication for the prevention strategy; synchronize National Guard prevention initiatives such as the *Chief of Chaplains Spiritual Readiness Initiative*, Cohesive Assessment Team (CAT/CAB), CR2C, and integrated prevention system changes into the POM. The Integrated Prevention Branch shall be fully assessed NLT by the end of FY23 at Full Operational Capability (FOC).

Goal 2: Execute IPP

Prevention is a critical responsibility of leaders at all levels. Like safety, prevention is a responsibility of every member of the organization. It is proactive in nature and

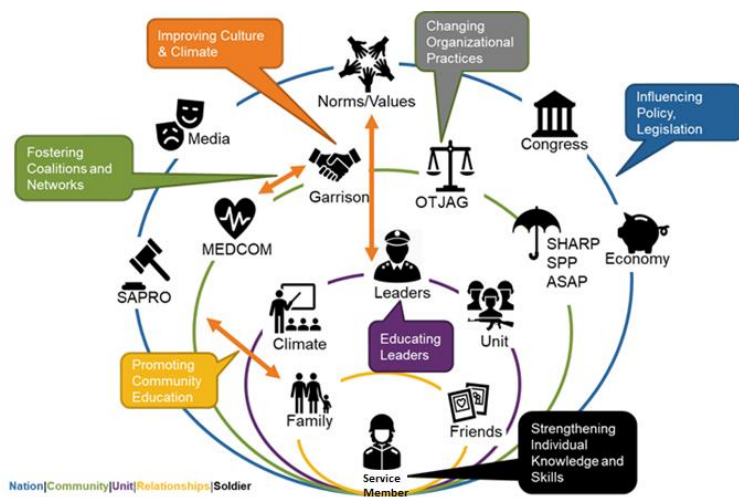


Figure 4: Social Ecological Model & Prevention Spectrum

essential to maintaining a ready force. Our rapidly changing environment requires increased understanding of the relationship between risk and protection and a coherent prevention program that balances risk and protective factors as referenced in figure 4. An integrated prevention system creates the conditions for health, readiness, and resilience across all levels of the SEM. It further focuses on identifying and mitigating collective risk while

simultaneously identifying the actions necessary to increase protective factors, providing a web of support to both organizations and individuals.

Strategic Objective 1: Establish Integrated Prevention Systems

Integrated prevention at the State level is shifting from a focus of specific individual risk and the identify and refer approach, to recognizing shared risk, and developing strategies to address underlying causal factors prior to manifestation such as poor diet, unhealthy relationships; substance abuse; suicidal ideations; workplace aggression; social isolation; economic insecurity; and declining performance. States will establish an integrated prevention system that not only focuses on reducing individual and collective risk factors, but also recognizes the importance of protective factors to include

social connectedness; life and coping skill sets; ensuring access to care and resources; and a healthy organizational culture and climate. IPP is community-based, with an emphasis on data-sharing, environmental/contextual factors.

States are responsible for developing an Integrated Prevention System that is comprehensive, integrated, layered, redundant, and enduring. This prevention system must:

1. Incorporate values of inclusivity, connectedness, dignity and respect
2. Have inherent ability to recognize emergent risks and adjust plans, processes, and training to be responsive to emerging issues
3. Align and find common principles across prevention efforts and various responsible individual program offices
4. Incorporate multiple lines of effort at individual, organizational, unit, and community levels.

The States must ensure their Integrated Prevention System enables them to:

1. Understand the problem, not only the risks but also the protective factors and the interrelationships between the two
2. Develop a comprehensive approach to address risk and protective factors
3. Ensure quality implementation of policies, programs, and practices
4. Continuously evaluate the system both outputs and outcomes to assess effectiveness

Strategic Objective 2: Identify and mitigate risk factors

Leaders are responsible for assessing the unit operating environment, identifying conditions that contribute to harmful behaviors, and affecting positive change. Leaders must understand that risk factors may exist at the individual, unit, community, States, and NGB levels regardless of composition. Risk factors exist in multiple contexts – from the individual to the team, to the organization and across the relationships between them. Targeting only one context will not successfully change outcomes. To prevent harmful behaviors, leaders must proactively focus on understanding the holistic nature of a unit's, State's, and or community's risk. Understanding the nature of risk can be complex and the most visible risk factor may not represent the totality of risk. It is important to recognize that most of this risk may have occurred before a Servicemember joined the National Guard. Our SMs may have experienced prior sexual assault and lived in economically insecure environments with limited quality education. Major risk factors across harmful behaviors include prior suicidal ideations, substance abuse and high-risk alcohol consumption, social isolation, poor diet, and

unhealthy relationships, economic insecurity, poor command climate, and a history of aggression or hostility towards others.

Leaders must have access to, and use of, comprehensive data and information to identify high leverage points and ensure execution of integrated and informed risk-mitigation actions. Risk mitigation must address how specified efforts will affect the real change in the organizational environment. Risk identification and mitigation is not static. It is a perpetual process and leaders at all levels must continually scan their environments to identify individual and collective risk. Risk factors may present at varying times, the absence of risk at an early point in a leader's tenure is not sufficient to prevent risk from further occurring.

Strategic Objective 3: Increase protective factors

Leaders will implement high leverage actions to enhance protective factors for their Servicemembers, organizations, and communities. Protective factors may mitigate risk factors and exist at both the individual unit, Joint Forces Headquarters (JFHQ), and NGB level, regardless of composition. By addressing multiple levels of protective factors, the National Guard will achieve better outcomes.

Leaders must understand the presence or absence of protective factors within their formations including fostering supportive environments and understanding the importance of increasing social connectedness beyond virtual means. Using comprehensive data and information to identify leverage points, leaders will execute integrated and informed actions to promote holistic well-being. Actions to increase protective factors must address how specified efforts will affect the individual and collective, how they interconnect, and how they will affect real change in the organizational environment. Organizational and State-based prevention experts provide an important foundation to determine gaps in community-based resources and identify prevention activities. Some prevention activities will require access to dedicated, predictable resources for prevention; the National Guard must make this a priority to enable success of the prevention workforce.

Strategic Objective 4: Professionalize prevention workforce

The National Guard must professionalize the prevention workforce at all echelons to ensure the appropriate skills, attributes and knowledge are available to support Commanders. The prevention workforce will provide expert level analysis and research-informed recommendations to Commanders and leaders. The National Guard will remain in step with overarching guidance provided by the DoD in support of the DoD IRC recommendations. This additive capability does not replace Command authority

and responsibility, leader responsibility, or existing prevention-oriented programs and personnel.

OSD identified prevention workforce functions and responsibilities include:

1. Implement the prevention system, data-informed actions, and elements of integrated prevention as applied to the military context.
2. Identify, adapt, implement, and evaluate research-based prevention programs, policies, and practices effectively and in collaboration, as appropriate, with individual(s) or entities responsible for prevention programming and other relevant oversight entities in accordance with federal laws and applicable regulations.
3. Consult and collaborate with leaders and prevention stakeholders within the military and civilian community to optimize the access and usage of resources, in accordance with applicable laws and DoD policy and regulations.

Strategic Objective 5: Reform education and training

Education and Training must be reformed to achieve the end state envisioned by this strategy. Awareness campaigns alone are not effective modes of training and changing behavior. Commanders, Senior Enlisted Leaders, Senior NCOs, and first line supervisors at all echelons must be educated and trained to recognize and mitigate risk and apply the principles of IPP within their scope of authority and responsibility. They must incorporate prevention efforts into daily operations. Servicemembers come from a variety of backgrounds and often with gaps in basic life skills that necessitate education that is both frequent and research informed; education must occur to strengthen individual knowledge and skills to identify and mitigate risk. The Prevention Workforce will be instrumental in developing and delivering this training and education, ensuring that we become a learning organization that develops appropriate metrics to aid in the prevention of harmful behaviors.

Goal 3: Become a Learning Organization Optimized for Prevention

The importance of data and research for both informing prevention efforts and providing an evidence-based approach for continual improvement cannot be overstated. While the goals of a prevention strategy may never change, our methods must continually adapt and evolve to keep pace with the transforming character of society and the dynamic human condition. To this end, the supporting data objectives outlined reinforce the preceding strategic goals, synergistically amplifying their desired effect.

Data and information support the National Guard's decision-making paradigm and must pivot to include the dynamic conditions, interconnectedness, and environment in which harmful behaviors take place. The National Guard must embrace, understand, and

have access to timely, full spectrum, integrated data to bring comprehensive change to the individual, and the communities and environments in which they live and work. This data must inform the prevention system to enable decision-making and ensure vital resources are applied most effectively and efficiently.

Research in the prevention space will inform Senior Leader decision-making by providing a clear understanding of the current environment and identifying high-leverage points for action. Effective prevention research will incorporate knowledge of military conditions and environment into an evidence-based systems approach. This will enable recommendations for targeted prevention activities and high-quality evaluations of effectiveness. The National Guard must streamline research efforts across the department and reduce the time to implement changes based on results.

Strategic Objective 1: Implement a rigorous, evidence-based system for prevention program review and reporting to drive outcomes

Adopting an evidence-based approach to monitoring and evaluating the prevention system is necessary to move the National Guard toward becoming a prevention-based, learning organization. The conduct of evaluations of the effectiveness of current prevention programs, practices, and policies, with the goal of moving toward proven, evidence-based prevention activities will ensure continual program improvement and innovation. Every program within the consolidated portfolio would require clear metrics – both measures of performance and effectiveness. Such a systematic review process will help to identify potentially redundant efforts within a consolidated prevention portfolio and reduce the number of disparate pilots and initiatives currently underway.

Strategic Objective 2: Measure and report the human factors of readiness

Human factors of readiness, a component of individual and collective risk and protection, is significantly influenced by organizational climate. Current operational processes allow units with negative climate to be operationally assessed as ready, indicating a potential disconnect between readiness assessments and the human factors that enable readiness. To address this gap the National Guard should examine how best to systematically integrating organizational climate as part of the readiness assessment process. Doing so would operationalize prevention within units and leverage existing connections with regulatory guidance and doctrine.

IMPLEMENTATION STRATEGY

Strategic Level (NGB)

The National Guard Bureau Integrated Prevention Branch in the NGB J1 will design the National Guard's Prevention System to align with OSD guidance and this strategy, while also collecting and reporting data performance metrics to NGB leadership via ADVANA. The Prevention Workforce will support execution of the SecDef-directed Prevention Workforce process evaluation and manpower study. The NGB J1 will also develop guiding documents, ensure the capability is institutionalized and create mechanisms for continuous learning.

Tasks within the branch include but are not limited to:

1. Advise leadership at strategic and operational levels on prevention program implementation and training. Develop, or inform the development of, policy and guidance on prevention. Manage the overall design of the prevention program and advise on primary prevention implementation activities.
2. Collaborate and coordinate with prevention experts, policymakers, and other relevant prevention stakeholders in and outside the military.
3. Manage resources for all prevention programs and activities. Identify, connect with, and advocate for resourcing to meet the needs of the prevention workforce.
4. Consolidate and analyze evaluation data collected by operational and tactical level personnel to monitor the effectiveness of program activities across the organization. Use data collected to guide program priorities and determine resource needs across the National Guard.
5. Communicate research findings and program implementation status to leaders, the Integrated Prevention Workforce (IPW), policymakers, and other stakeholders through diverse communication channels to inform the development of prevention policy and guidance.
6. Review existing best practices, leverage available data, direct any new data collection efforts, and analyze data on violence risk and protective factors collected by personnel at the operational and tactical levels.
7. Develop training materials for prevention personnel in coordination with relevant sections.

Operational Level (JFHQ or Equivalent)

The States have two critical roles in prevention. (1) These leaders are responsible to ensure all units within their command meet the intent of this strategy and (2) they have complete oversight of the resources provided to them by NGB.

States have a significant role in executing this strategy. They deliver programs and services based on requirements established within the organizations process and collaborate and coordinate with other supporting organizations. This strategy recognizes the nuance that exists between NGB and the States on the flexibility they have to responsibly execute and distribute the resources they are provided. Productive collaborative relationships and partnerships between the strategic and operational echelons is vital to a Commander's success to establish a local integrated prevention system.

At the operational level, the Prevention Workforce will include a Prevention Program Manager, Senior Prevention Analyst (Large States), and Prevention Program Lead . This team is tasked with applying the NGB guidance within their organizational sphere of influence and provide tools and technical assistance to the tactical level Prevention Workforce. The operational level Prevention Workforce will routinely engage with key staff members such as the members of their Joint Staff to see how their prevention-related programs can support the organization.

The Prevention Program Manager and Prevention Support personnel will:

1. Serve as the States' integrated prevention subject matter experts.
2. Liaise with NGB-J1 Integrated Prevention Branch to support enterprise governance actions.
3. Enable integrated prevention per the TAGs/CGs guidance.
4. Ensure documentation and use of organizational climate measures in prevention planning.
5. Maximize use of health, wellness, and environmental data to surveil social readiness and assess impact toward improved protective factors.
6. Facilitate monthly prevention work groups with stakeholders in support of CR2C and CAT/CAB forums.
7. Fully integrate prevention surveillance, prevention activities, evaluation, and governance equities into organizational documents such as TAG/CG Guidance, execution orders, and the on-going Organizational Inspection Process (OIP).
8. Ensure time for continuous skill development for Prevention Workforce staff.
9. Educate Commanders and Senior Enlisted Leaders on the importance of Integrated Prevention at the BDE and Wing levels.

Tactical Level (Brigade/Wings)

Commanders are responsible for implementing this strategy and establishing a Prevention System at the local level based on local conditions. Collaborative

relationships and partnerships between commands supporting the TAG and CG are vital to the success of the local integrated prevention system. Artificial barriers and obstacles, that impede a coherent prevention system, must be removed for unity of effort and program synergy, while adhering to authorities, roles and missions as assigned by this strategy and existing regulations.

To execute integrated prevention Commanders, Senior Enlisted Leaders and first line leaders can also leverage several medical and non-medical resources such as behavior health, Chaplains, Holistic Health and Fitness (H2F), Sexual Assault Prevention and Response, Equal Opportunity, Exceptional Family Member Program, Financial Readiness, Morale Welfare and Recreation, Military and Family Life Counselors, dieticians, and other resources in the local community.

Commanders will be supported by an Integrated Prevention Specialist. The Prevention Specialist will report directly to the Integrated Prevention Manager at the Operational level. They oversee planning, implementation, and evaluation of prevention activities at the local level. The Prevention Workforce is key for empowering leaders to take corrective actions and implement research-based prevention activities. They will collect data to build the body of knowledge to support how primary prevention should be operationalized effectively across the National Guard.

The unit Commander will be assisted in the execution of these responsibilities by the

Prevention Workforce at the tactical level. The responsibilities of the Prevention Workforce at the tactical level include but are not limited to:

1. Leading the refinement and/or building of a local prevention system, by operationalizing Prevention Activities.

2. Participate and support quarterly CR2C and CAT/CAB strategic process to monitor compliance and effectiveness of integrated prevention performance measures, develop leadership buy-in (at all levels), and stay abreast of emerging positive and negative organizational and community trends and prevention efforts.

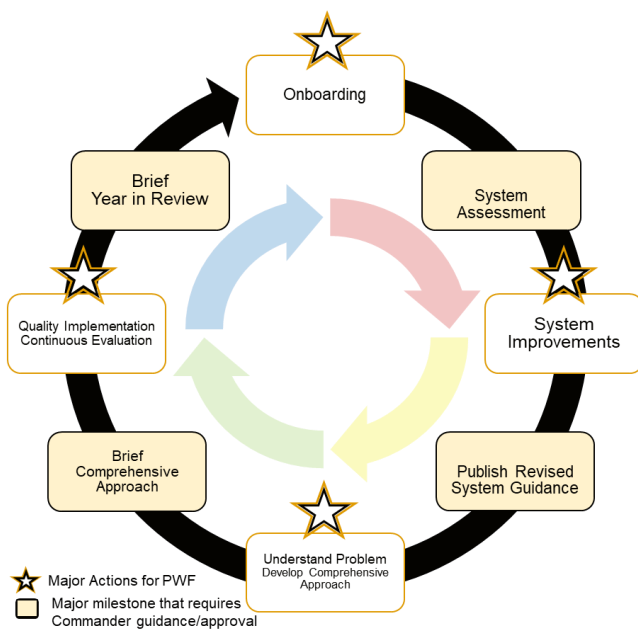


Figure 5: A Year in the Life of PWF

3. Inform Brigade and Wing Command Teams of Unit Health Promotion Team data collection (e.g., risk and protective factors and culture and climate indicators) and data sharing in support of the CR2C and CAT/CAB processes.

4. Monitor resources (e.g., money, people, time) that are earmarked to support IPP activities.

5. Modeling a growth mindset for leaders by being open to new idea and innovative recommendations to address identified problem areas and/or collect data to better understand the impact of community level protective factors.

6. Educate Commanders, Senior Enlisted Leaders, and Leaders at all levels on the importance of Integrated Prevention in their formations.

7. Coordinate, develop and deliver education materials and training, essential to implement integrated prevention in their organizations.

Mitigating risk is uniquely a leader responsibility enabled by the TAG or CG and community partners. At the tactical level commanders will develop and sustain partnerships and local community partners to protect their forces. This enables the deployment of integrated synchronized protective factors to provide social and spiritual connectedness opportunities including recreational Morale, Welfare, and Recreation programs, life skill development, self-esteem, public safety, and access to care. These protective factors establish the safety net at the tactical level and provide expert level support to Commanders to mitigate risk factors.

For those Servicemembers and Commanders assigned to more remote units the concept of the integrated prevention system must be modified and requires centralized prevention program management at the operational level to provide greater support and may rely on virtual distribution of capabilities and greater integration of local community capabilities. Commanders and Senior Enlisted Leaders of these organizations remain responsible for executing the intent of an integrated prevention strategy.

INTEGRATED PREVENTION DOMAINS

SEXUAL ASSAULT

The primary goal of the National Guard Sexual Assault Preventionist is to ensure a safe and secure working environment for our National Guard SMs and Civilian employees, free from sexual assault, that promotes a culture of safety. In addition, address the risk and protective factors for sexual assault through education and training for SMs, Civilian employees, and all levels of leadership.

To establish the Sexual Assault portion of the integrated prevention strategy, the prevention workforce will include positions at both the national and state level. At the national level, the Sexual Assault Prevention and Response (SAPR) Specialist will be located in the J1 directorate in the J1 Sexual Assault Prevention and Response division. At the state level, a Sexual Violence Prevention Analyst will be dedicated to the prevention of sexual assault for each State/Territory/District of Columbia.

1. At the national level, the Sexual Assault Prevention and Response Specialist provides policy and programming, data-driven tools, evidence-informed prevention strategies and program evaluation support. The SAPR Specialist will provide strategic structure and oversight for the operational Sexual Violence Prevention Analyst and ensure collaboration with existing offices at NGB with prevention equities to mitigate actions relating to sexual assault exposure.

2. At the state level, a Sexual Violence Prevention Analyst will be provided to address the risk and protective factors for sexual assaults, including in the context of military life through:

(1) An emphasis on promoting a military culture that rejects the use of sexual violence, harm, or controlling behaviors in military relationships, and promotes the dignity and equal worth of fellow Servicemembers and Civilian employees.

(2) Identification of risk and protective factors that lead to or protect against unhealthy or unsafe behaviors and the promotion or mitigation of actions relating to sexual assault exposure. The Sexual Violence Prevention Analyst will identify opportunities to capture data that informs prevention planning, evaluation, and effectiveness.

(3) Support for leaders at all levels to engage SMs and Civilian employees early and throughout their career to develop and enhance communication and conflict management skills. Commanders will be equipped with knowledge to detect risk and protective factors for sexual assault.

(4) Direct support to the development and execution of policies, programs, and procedures for implementing IPP activities relating to sexual assault.

(5) Lead outreach efforts through command and peer support for Servicemembers and Civilian employees to proactively seek help for sexual harassment or sexual assault behaviors.

(6) Apply the strategic guidance to their sphere of influence and provide tools and technical assistance to prevention professionals at the tactical level to facilitate the execution of the strategic guidance.

3. Service Delivery:

(1) The Sexual Violence Prevention Analyst will act as the Subject Matter Expert (SME) on IPP as it applies to sexual assault prevention.

(2) Service delivery must optimize military-civilian, inter-department, and inter-agency collaboration opportunities.

4. Sexual Assault Outreach:

(1) The Sexual Violence Prevention Analyst must conduct regular awareness and outreach to command representatives, State Family Readiness Staff, Sexual Assault Prevention & Response Workforce, Directors of Psychological Health, Chaplains, State Equal Opportunity Managers, IPP Workforce, Servicemembers and families, and civilian service providers.

(2) The Sexual Violence Prevention Analyst will promote connectiveness across the military community, with special attention to command climates, Servicemembers, and intimate partners.

(3) The Sexual Violence Prevention Analyst will equip commanders with knowledge to detect risk for sexual assault and unhealthy command climates among the Servicemembers in their units.

5. Sexual Assault Prevention Core Competencies and Training for Commanders, Senior Enlisted Leaders, Senior NCOs, and first line supervisors:

(1) The successful implementation of the Prevention Workforce requires a set of core competencies in hiring Prevention Workforce personnel. Additional work experience that complements and enhances DoD SPARX training is recommended.

(2) IAW the National Guard Integrated Prevention Workforce Implementation Guide, all members of the Prevention Workforce must meet DoD credentialing requirements within one year of hire and maintain credentialing as a condition of employment.

SELF-DIRECTED HARM

The primary goal of the National Guard Self-Directed Harm Preventionist is to implement the goals of the overall strategy to meet the recommendations from the Office of the Secretary of Defense IRC within the NG.

The prevention workforce includes an Integrated Resilience Specialist (Self-Directed Harm Primary Prevention SME) located in the J1 directorate in the J1 Warrior Resilience and Fitness Division dedicated to the prevention of self-directed harm for the States.

1. The Self-Directed Harm Primary Prevention SME will:

- (1) Provide recommendations for policy and programming, data-driven tools, evidence-informed prevention strategies and program evaluation support.
- (2) Provide strategic oversight for the Self-Directed Harm Prevention Analysts (SDHPAs) assigned to the State JFHQ or equivalent at the operational level.
- (3) Ensure collaboration with existing offices at NGB with prevention equities to mitigate actions relating to environmental exposure.

2. At the state level, the SDHPA will be provided to address the risk and protective factors for self-directed harm, including in the context of military life through:

- (1) An emphasis on promoting a military culture that supports help seeking, decreases barriers to care, and reduces stigma.
- (2) A focus on support for commanders to engage Servicemembers early and throughout their career to develop and enhance self-skills such as financial planning, healthy relationships, effective coping strategies, among others.
- (3) An effort to address the risk and protective factors for self-directed harm through education and training to the Servicemembers and their families at multiple ages and stages of life to help them learn new skills, manage stress, acknowledge the difficulties of military life, and promote help seeking mentality.
- (4) Direct support to the development and execution of policies, programs, and procedures for implementing IPP activities relating to self-directed harm (i.e., suicide, cutting, and substance misuse).
- (5) Identification of risk and protective factors that lead to or protect against unhealthy or unsafe behaviors and the promotion or mitigation of actions relating to environmental exposure.

3. Service Delivery:

(1) The SDHPA will act as the SME on IPP as it applies to self-directed harm prevention. Specifically, the service delivery at the State will:

- (a) Maximize opportunities to work with the command to regularly share information (e.g., outreach events, points of contact, locations of services, and availability of services) with Servicemembers and their families.
- (b) Promote awareness of services and encourage proactive engagement by unit liaisons, Servicemembers, family members, and civilian service providers. This will be accomplished by attending and briefing at Joining Community Forces meetings, family days, deployment events, Soldier & Family Readiness Group meetings, and other networking and education outreach opportunities.

(c) Ensure access to services by remote and isolated Servicemembers and families.

(2) Service delivery must optimize military-civilian, inter-department, and inter-agency collaboration opportunities to:

(a) Augment services, and close service delivery gaps, as appropriate.

(b) Provide self-directed harm prevention outreach to remote and isolated Servicemembers and families.

(c) Identify and eliminate duplication of service.

(d) Promote timely and appropriate referrals of Servicemembers and families to services as applicable.

4. Self-Directed Harm Prevention Outreach:

(1) In consort with State Suicide Prevention Program Manager, Resilience Risk Reduction and Suicide Prevention Program Manager and other existing self-directed harm prevention assets, the SDHPA must conduct regular awareness and outreach to command representatives, State Family Readiness Staff, Sexual Assault Prevention & Response Workforce, Directors of Psychological Health, Chaplains, State Equal Opportunity Managers, IPP Workforce, Servicemembers and families, and civilian service providers.

(2) The SDHPA will lead self-directed harm outreach efforts through command and peer support for Servicemembers and their spouses or intimate partners to proactively seek help for unhealthy relationships before the onset of a crisis, such as through the Suicide Prevention Program IAW DoDI 6400.01 if eligible for active-duty services, or through applicable Memorandums of Understanding (MOUs) or Memorandums of Agreement (MOAs) established with community partners.

(3) The SDHPA will promote connectiveness across the military community, with special attention to military couples, spouses, and intimate partners through programs such as Strong Bonds and the Yellow Ribbon Reintegration Program, particularly on return from deployment.

(4) In coordination with existing state self-directed harm assets, the SDHPA will equip commanders, Senior Enlisted Leaders, Senior NCOs, and leaders throughout the organization with knowledge to detect risk for self-directed harm and operational stress among the Servicemembers in their units and, in high-risk cases, encouraging them to conduct safety checks for access to firearms or other lethal means inside the home and implement plans to mitigate risk.

(5) The SDHPA will inform military behavioral and physical health providers in their role in promoting early intervention for self-directed harm when they recognize risk for violence or harm.

(6) The SDHPA will provide referral and warm hand-off to State Family Program Directors, Directors of Psychological Health, Airman & Family Readiness Program Managers, Chaplains, Victim Advocates, Sexual Assault Prevention & Response, Military Family Life Counselors, and Financial Readiness Staff as required.

(a) Clinical and non-clinical support services are provided via the Director of Psychological Health, Psychological Health Coordinators, Chaplains, dieticians, and medical providers.

(b) The SDHPA will be responsible for performance management and program metrics related to the IPP as it applies to self-directed harm prevention, specifically.

(c) Maintains insight into NGB IPP office to track efforts, measurements, and participation in workgroups/councils.

(d) Supports engagement in existing state tools and programs for data management.

(7) The SDHPA will employ NGB provided measures and collect data to document program and policy efficacy by establishing a base line and subsequent continuous evaluation. These findings will be reported to the rest of the Prevention Workforce, leaders, and NGB as appropriate for the adjustment of plans, realignment of resources, and future planning efforts.

5. Self-directed harm Core Competencies and Training:

(1) The successful implementation of the Prevention Workforce requires a set of core competencies in hiring Prevention Workforce personnel. Additional work experience that complements and enhances DoD SPARX training is recommended. FVAPA personnel will be able to:

(a) Demonstrate a deep understanding of prevention science and an ability to implement strategies to reduce incidents of self-directed harm and other prohibited abuse and mitigate the impact to individuals and systems when such incidents occur.

(b) Describe and explain the public health approach to prevention and how to apply it in a National Guard context.

(c) Access, interpret, use, and present data related to harm or abuse

(d) Select, implement, and evaluate IPP system activities.

(e) Coordinate and monitor quality implementation and fidelity of IPP activities.

(f) Disseminate and effectively communicate information related to IPP to the National Guard community (i.e., leaders, professionals, policymakers, stakeholders, etc.) through diverse communication networks.

(g) Stimulate change related to IPP through policies, programs, and practices.

(h) Establish collaborative relationships with leaders, prevention stakeholders,

prevention experts, and military and civilian community-based resources.

(2) IAW the DoD Prevention Workforce Model, all members of the Prevention Workforce must meet DoD credentialing requirements within one year of hire and maintain credentialing as a condition of employment. At a minimum each Prevention Workforce member will attend the DoD SPARX training which consist of 63 hours of prevention specific training. Other job specific requirements are outlined within the position descriptions below. A list of upcoming training events and accepted continuing education offerings, will be distributed to each State by the NGB Manpower and Personnel Directorate, Warrior Resilience and Fitness Prevention Workforce Branch.

DOMESTIC ABUSE

The primary goal of the National Guard Domestic Abuse Preventionist is to implement the goals of the overall strategy to meet the recommendations from the Office of the Secretary of Defense within the National Guard.

Our goals are two-fold. Promote a military culture that rejects the use of violence, harm, or controlling behaviors in spouse and intimate partner relationships, and promotes the dignity and equal worth of spouses and intimate partners. In addition, address the risk and protective factors for child abuse and neglect through education and training to the Servicemembers and their families for new or expecting military families, as well military parents of children at multiple ages and stages of life to help parents learn new skills, manage stress, acknowledge the difficulties of parenting, and promote help seeking mentality.

To establish the Domestic Abuse portion of the integrated prevention strategy, the prevention workforce will include positions at both the national and state level. At the national level, the Domestic Abuse Program Manager will be located in the J1 directorate in the J1 Readiness Family Readiness branch. At the state level, a Family Violence and Abuse Prevention Analyst (FVAPA) will be dedicated to the prevention of domestic abuse for each State.

1. At the national level, there will be three objectives. Provide policy and programming, data-driven tools, evidence-informed prevention strategies and program evaluation support. Provide strategic structure and oversight for the operational FVAPAs. Ensure collaboration with existing offices at NGB with prevention equities to mitigate actions relating to environmental exposure.

2. At the state level, we will provide a FVAPA to address the risk and protective factors for domestic abuse, including in the context of military life through:

- (1) An emphasis on promoting a military culture that rejects the use of violence, harm, or controlling behaviors in spouse and intimate partner relationships, and promotes the dignity and equal worth of spouses and intimate partners.

- (2) A focus on support for commanders to engage Servicemembers early and throughout their career to develop and enhance communication and conflict management skills.

- (3) Direct support to the development and execution of policies, programs, and procedures for implementing IPP activities relating to family violence and abuse (i.e., child abuse, domestic violence, and intimate partner violence).

(4) Identification of risk and protective factors that lead to or protect against unhealthy or unsafe behaviors and the promotion or mitigation of actions relating to environmental exposure.

(5) Lead domestic abuse outreach efforts through command and peer support for Servicemembers and their spouses or intimate partners to proactively seek help for unhealthy relationships before the onset of a crisis, such as through the Family Advocacy Program IAW DoDI 6400.01 if eligible for active duty services, or through applicable MOUs or MOAs established with community partners.

(6) Promote connectiveness across the military community, with special attention to military couples, spouses, and intimate partners through programs such as Strong Bonds and the Yellow Ribbon Reintegration Program, particularly on return from deployment.

(7) Equip commanders with knowledge to detect risk for domestic abuse and family stress among the Servicemembers in their units and, in high-risk cases, encouraging them to conduct safety checks for access to firearms or other lethal means inside the home.

(8) Inform military behavioral and physical health providers in their role in promoting early intervention for domestic abuse when they recognize risk for violence or harm.

(9) Provide referral and warm hand-off to State Family Program Directors, Directors of Psychological Health, Airman & Family Readiness Program Managers, Chaplains, Domestic Abuse Victim Advocates, Sexual Assault Prevention & Response, Military Family Life Counselors, and Financial Readiness Staff as required.

(a) Domestic abuse prevention, victim advocacy, and clinical and non-clinical support services are provided via the Family Advocacy Program if the Servicemembers or family members of domestic abuse victims or alleged abusers are in a Title 10 status pursuant to DoDI 6400.06.

(b) Referral to Domestic Abuse Victim Advocates at JFHQs is mandatory for domestic abuse response for restricted and unrestricted reporting for those not in an active duty status.

3. Domestic Abuse Core Competencies and Training:

(1) The successful implementation of the Prevention Workforce requires a set of core competencies in hiring Prevention Workforce personnel. Additional work experience that complements and enhances DoD SPARX training is recommended. State Domestic Abuse personnel will be able to:

(a) Demonstrate a deep understanding of prevention science and an ability to implement strategies to reduce incidents of self-directed harm and other prohibited abuse and mitigate the impact to individuals and systems when such incidents occur.

(b) Describe and explain the public health approach to prevention and how to apply it in a National Guard context.

(c) Access, interpret, use, and present data related to harm or abuse

(d) Select, implement, and evaluate IPP system activities

(e) Coordinate and monitor quality implementation and fidelity of IPP activities.

(f) Disseminate information related to IPP to the National Guard community (i.e., leaders, professionals, policymakers, stakeholders, etc.) through diverse communication networks.

(2) IAW the DoD Prevention Workforce Model, all members of the Prevention Workforce must meet DoD credentialing requirements within one year of hire and maintain credentialing as a condition of employment. At a minimum each Prevention Workforce member will attend the DoD SPARX training which consist of 60 hours of prevention specific training. Other job specific requirements are outlined within the position descriptions below. A list of upcoming training events and accepted continuing education offerings, will be distributed to each State by the NGB/J1-WRF Prevention Workforce Branch.

HARASSMENT

The primary goal of the National Guard Harassment Preventionist is to implement the goals of the overall strategy to meet the recommendations from the Office of the Secretary of Defense within the National Guard.

The goal is to promote a military culture that rejects workplace harassment, use of violence, harm or controlling behaviors. In addition, address the risk and protective factors for sexual harassment through education and training to the Servicemembers and Civilian employees and all levels of leadership.

To establish the Sexual Harassment portion of the integrated prevention strategy, the prevention workforce will include positions at both the national and state level. At the national level, the Workplace Harassment SME will be located in the Diversity, Equity, and Inclusion directorate. At the state level, a Workplace Harassment Prevention Lead will be dedicated to the prevention of workplace harassment for each State.

1. At the national level, the Workplace Harassment SME provides policy and programming, data driven tools, evidence-informed prevention strategies and program evaluation support. Provide strategic structure and oversight for the operational Workplace Harassment Prevention Lead. Ensures collaboration with existing offices at NGB with prevention equities to mitigate actions relating to workplace harassment exposure.

2. At the state level, we will provide a Workplace Harassment Prevention Lead to address the risk and protective factors for workplace harassment, including in the context of military life through:

(1) Emphasis on promoting a military culture that rejects the use of harassment or controlling behaviors in relationships and promotes dignity and respect within the workplace.

(2) Direct support to the development and execution of policies, programs, and procedures for implementing IPP activities relating to workplace harassment.

(3) Identifying opportunities to capture data that informs prevention planning, evaluation, and effectiveness. Identification of risk and protective factors that lead to or protect against unhealthy or unsafe behaviors and the promotion or mitigation of actions relating to workplace exposure.

(4) Support for commanders to engage Servicemembers early and throughout their career to develop and enhance communication and conflict management skills. Equip commanders with knowledge to detect risk for workplace harassment among Servicemembers and Civilian employees.

(5) Leading outreach efforts through command and peer support for Servicemembers and Civilian employees to proactively seek help for unhealthy relationships before the onset of a complaint.

(6) Applying the strategic guidance to their sphere of influence and provide tools and technical assistance to prevention professionals at the tactical level to facilitate the execution of the strategic guidance.

3. Service Delivery:

(1) The Workforce Harassment Prevention Lead will act as the SME on IPP as it applies to workplace harassment prevention.

(2) Service delivery must optimize military-civilian, inter-department, and inter-agency collaboration opportunities.

4. Workplace Harassment Outreach:

(1) The Workplace Harassment Prevention Lead must conduct regular awareness and outreach to command representatives, State Family Readiness Staff, Sexual Assault Prevention & Response Workforce, Directors of Psychological Health, Chaplains, State Equal Opportunity Managers, IPP Workforce, Servicemembers and families, and civilian service providers.

(2) The Workplace Harassment Prevention Lead will promote connectiveness across the military community, with special attention to command climates, Servicemembers, and Civilian employees.

(3) The Workplace Harassment Prevention Lead will equip commanders with knowledge to detect risk for workplace harassment and unhealthy command climates among the Servicemembers in their units.

5. Workplace Harassment Core Competencies and Training:

(1) The successful implementation of the Prevention Workforce requires a set of core competencies in hiring Prevention Workforce personnel. Additional work experience that complements and enhances DoD SPARX training is recommended. Demonstrate a deep understanding of prevention science and an ability to implement strategies to reduce incidents of self-directed harm and other prohibited abuse and mitigate the impact to individuals and systems when such incidents occur.

(2) IAW the National Guard Integrated Prevention Workforce Implementation Guide, all members of the Prevention Workforce must meet DoD credentialing requirements within one year of hire and maintain credentialing as a condition of employment.

INTEGRATED PREVENTION WORKFORCE DELIVERABLES

Daily responsibilities of IPW personnel is multi-faceted and will fluctuate from day-to-day, depending on leadership and program priorities. Duty often involves integrating multi-agency data and resources and ensuring primary prevention efforts are synchronized, collaborative, and cross-cutting to have the greatest impact on reducing negative outcomes. Multiple evidence-informed and research-informed prevention strategies are applied at different levels, such as building knowledge and skills at the individual level and establishing or sustaining positive social norms at the organizational level – and ensuring evaluation efforts.

1. Develop a culture of primary prevention amongst leadership and key personnel. IPW personnel focus on stopping harmful behaviors before they occur. In a non-clinical capacity, IPW personnel oversee primary prevention programs and activities to mitigate risk and enhance protective factors. This begins with educating and engaging with key personnel.

(1) Educate leadership and other key personnel frequently and consistently on the difference between prevention and response.

(2) Engage different programs and leaders in discussions on what primary prevention is and their roles in primary prevention

2. Collaborate with existing autonomous prevention programs for an integrated and comprehensive prevention system. IPW personnel focus on non-clinical and IPP of

harmful behaviors. This involves an integrated, holistic, multiagency, and collaborative approach with other programs/offices on primary prevention efforts. It also requires the use of programs, policies, and practices across individual, interpersonal, organizational, community, and policy.

(1) Work with different programs/offices to determine what is being done (across prevention and response) and how efforts can (and should) complement each other.

(2) Share information on the impacts of the various forms of harmful behaviors and shared risk and protective factors and identify areas where integrated prevention efforts can increase efficiency and make the best use of scarce resources.

(3) Identify areas of shared interest across programs/offices for shared activities.

(4) Develop plans that are aimed at preventing harmful behaviors to include programs, policies, and practices for each harmful behavior

3. Monitor local data and analyze trends. Prevention personnel are responsible for understanding the problem and selecting and implementing prevention activities that appropriately address the identified needs. Prevention Personnel must identify emerging issues and assess the organizational climate, values, beliefs, and quality of life to determine which prevention activities are needed. Prevention personnel regularly develop, collect, and share pertinent information/data from their respective functional perspective to analyze trends and implications.

(1) Conduct regular community needs assessments that assist in determining the needs of a military community

(2) Compile data, gather local data that is needed to fill data gaps, and analyze data to assess trends and compare with any state/national trends

(3) Educate leadership on the needs of the military community and allow them the opportunity to make data-informed decisions

4. Select and implement evidence-informed prevention activities. Prevention personnel are responsible for selecting and implementing evidence-informed prevention programs, policies, and practices to address priority issues of the military community. Where possible the prevention activities are integrated and are focused on individual, interpersonal, organizational, community, and policy levels.

(1) Implement prevention education that is focused on building skills and knowledge

(2) Develop, implement, and constantly reinforce positive messages focused on healthy behaviors and attitudes. IPW personnel will take steps year-round to integrate prevention and awareness efforts in communities as part of the comprehensive plan.

(3) Identify policies or practices that may have impacts on the system and advocate for implementation of these policies/practices with leadership and other stakeholders.

5. Evaluate prevention activities for impact. Prevention personnel are responsible for evaluating prevention programs, policies, and practices for their impacts on the behaviors, attitudes, and beliefs they were designed to address. Impacts may be assessed on long-term outcomes like sexual assault, child abuse and neglect, suicide, or other harmful behaviors but these impacts are not observed immediately. IPW must also assess the risk and protective factors that are associated with harmful behaviors.

(1) Identify and select measures/surveys that have good reliability and validity for assessing short, intermediate, and long-term outcomes. Preference is given to measures that have been used previously, as opposed to developing a new measure/survey.

(2) Determine the occurrence of assessing outcomes and other methods, such as whether a comparison group will be used and how many people will be recruited.

(3) Identify partners who can support evaluation efforts and data analysis.

COMPLIANCE

Continuous evaluation of prevention efforts will enable the NGB to assess the implementation of IPP Systems and the State's Prevention Workforce to measure progress made within DoD and NGB measurable items, and State's PPOA. Possible assessment items include but are not limited to:

1. A review of the State's PPOA and incremental changes since the last review period. As such the State's PPOA must include measurable outcome objectives.

2. A review of program evaluation efforts including evaluation plans, outcomes, and methodology.

3. A review of employed evidence-based/informed programs, policies, and plans.

4. Documentation of State's integrated policy.

5. Review of State's Joint Prevention Counsel or similar including current initiatives, goals, and working groups.

6. Documentation of collaborative relationship across and outside the State's National Guard and the nature of the collaboration as it relates to IPP.

7. A review of risk and protective factors affecting Servicemembers and plans to mitigate risk.

CONCLUSION

The National Guard Integrated Prevention Strategy provides the foundation for preventing harmful behaviors within the National Guard and further sets the conditions for how expert level assessments and recommendations can be implemented throughout the force. Subsequent policies and the Integrated Primary Prevention CNGBM will provide greater details for what the National Guard will do to achieve these ends. These actions are taken to elevate and institutionalize prevention as a capability cannot be considered final upon completion. The prevalence of harmful behaviors in society requires steadfast commitment and persistent engagement by all leaders and Servicemembers to prevent harmful behaviors in the National Guard. To transform culture and climate while expanding the integrated primary prevention capability at the operational and tactical levels, the National Guard must collectively apply a growth mindset. This organizational shift towards primary prevention combined with leader investment at all levels to increase individual, organizational, and community level protective factors will effectively address risk for to harmful behaviors. The strength of the National Guard relies upon the strength of its people. Effective prevention builds and maintains strength of our Servicemembers and our units and the National Guard enterprise.

REFERENCES

- a. The Civil Rights Act of 1964
- b. National Defense Authorization Act (NDAA), 2022
- c. Office of the Secretary of Defense Independent Review Commission (IRC) to End Sexual Assault in the Military
- d. DODI 1350.02, 04 September 2020, "DoD Military Equal Opportunity Program"
- e. DoDD 1020.02E Diversity Management and EO in the DoD
- f. DODI 1020.03, 08 February 2018, "Harassment Prevention and Response in the Armed Forces," incorporating change 1, 29 December, 2020
- g. DODI 1300.28, 30 April 2021, "In-Service Transition for Transgender Servicemembers"
- h. DODI 6400.09 Violence Prevention Integration
- i. DODI 1020.05 DOD D&I Management Program
- j. DoDI 1342.22, Military Family Readiness, 2021
- k. DODI 6400.06, Self-directed harm Involving DoD Military and Certain Affiliated Personnel, 2021
- l. DODD 5105.77 NGB
- m. DAFI 36-2710 EO Program
- n. DOD Prevention Plan of Action 2019-2023
- o. NGR 600-21 ARNG EO Program
- p. CNGBI/M 9601.01 Complaints Management
- q. CNGBI 9651.01A National Guard D&I and other laws, instructions and regulations
- r. CNGBI 0300.01 National Guard Warrior Resilience and Fitness Program

s. National Guard Integrated Prevention Workforce Implementation Guidance

GLOSSARY
PART I. ACRONYMS

CAIB	Community Action Information Board
CAT	Community Action Team
CG	Commanding General
D&I	Diversity and Inclusion
DoD	Department of Defense
FVAPA	Family Violence and Assault Prevention Analyst
IAW	In accordance with
IPP	Integrated Primary Prevention
IPW	Integrated Prevention Workforce
IRC	Independent Review Commission
JFHQ	Joint Forces Headquarters
MOA	Memorandum of Agreement
MOU	Memorandums of Understanding
NGB	National Guard Bureau
OSD	Office of the Secretary of Defense
PPoA	Prevention Plan of Action
State(s)	States, Territories, and the District of Columbia
SDHPA	Self-Directed Harm Prevention Analyst
SME	Subject Matter Expert
TAG	The Adjutant General
WRF	Warrior Resilience and Fitness Division
WRFII	WRF Innovation Incubator

PART II. DEFINITIONS

Bullying -- Bullying has the intent of harming the targeted employee either physically or psychologically, bullying may involve the singling out of an individual from their coworkers, or unit, for ridicule because they are considered different or weak. It often involves an imbalance of power between the aggressor and the target person.

Hazing -- Hazing may potentially harm the employee physically or psychologically for the purpose of, initiation into, admission into, affiliation with, change in status or position within, or a condition for continued membership in an organization. Hazing may manifest as such but not limited to examples from DoDI 1020.03.

Note: Hazing and Bullying are both a form of harassment. Both hazing & bullying can be conducted through the use of any form of electronic communication devices (e.g., phone, social media, etc.), as well as in person. Both hazing and bullying can be evaluated by a reasonable person standard. Supervisors, managers, civilian employees, or contractors may be responsible for an act of hazing or bullying even if there was actual or implied consent from the victim and regardless of the grade or rank, status, or Service of the victim. Hazing & Bullying is prohibited in all circumstances and environments, including off-duty or "unofficial" unit functions and settings.

Harassment – Harassment can take many different forms. It can involve verbal, physical, or visual conduct and can occur on or off work site. It can happen to any National Guard member or in any situation.

- a. May be individual of any gender, sexual orientation, or gender identity, race, color, national origin, or religion.
- b. May be a supervisor, an agent of the employer, a co-worker, or a non-employee.
- c. May be anyone affected by the offensive conduct.
- d. May occur without economic injury to or discharge of the victim.
- e. May occur through electronic communications, including social media (e.g., web-based tools, website, applications, media that connect users and allow them to engage in dialogue, share information, collaborate, and interact), other forms of communication, or in person.

Hostile Work Environment -- Sexual Harassment behavior is present when:

a. Such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creates an intimidating, hostile, or offensive environment; is so severe or pervasive that a reasonable person would perceive, and the victim does perceive, the environment as hostile or offensive.

b. Any use or condonation, by any person in a supervisory or command position, of any form of sexual behavior to control, influence, or affect the career, pay, of a civilian employee or contractor of the DoD.

c. Any deliberate or repeated unwelcome verbal comments or gestures of a sexual nature by any member of the National Guard (military or civilian employee).

d. There is no requirement for concrete psychological harm to the complainant for behavior to constitute harassment. Behavior is sufficient to constitute harassment if it is so severe or pervasive that a reasonable person would perceive, and the complainant does perceive, the environment as hostile or offensive.

Integrated Primary Prevention -- The result of activities that simultaneously mitigate risk and increase protective factors across multiple levels of influence and encompasses more than one harmful behavior.

Microaggressions – Everyday verbal, nonverbal, and environmental slights, snubs, or insults, whether intentional or unintentional, which communicate hostile, derogatory, or negative messages to target persons based solely upon their marginalized group membership. In many cases, these hidden messages may invalidate the group identity or experiential reality of target persons, demean them on a personal or group level, communicate they are lesser human beings, suggest they do not belong with the majority group, threaten and intimidate, or relegate them to inferior status and treatment.

Prevention -- the action of stopping something from happening or arising Protective factors are behaviors or conditions that reduce or buffer against negative outcomes and behavior. Risk factors are behaviors or conditions that increase the risk/likelihood of violence and negative outcomes.

Quid Pro Quo -- harassment behavior is present when:

a. Submission to such conduct is made either explicitly or implicitly a term or condition of a person's job, pay, or career.

b. Submission to or rejection of such conduct by a person is used as a basis for career or employment decisions affecting that person.

Unlawful Discrimination -- adverse treatment or action taken against an applicant or employee because of their (race, color, religion, sex, national origin, age (40 or older), disability, or genetic information). May include but not limited to examples provided in DoDI 1020.03.

Unlawful Workplace Harassment -- Unwelcome behavior that is discriminatory in nature and based on (protective categories) race, color, religion, sex (sexual or non-sexual an example - gender identity or sexual orientation), national origin, age (40 or older) and disability for civilian personnel is considered unlawful harassment.