Sexual Trauma Response and Treatment (START) Act

Sexual harassment and violence is a persistent challenge for our military. According to DOD's *Annual Report on Sexual Assault in the Military*, reports of sexual assault involving servicemembers increased by nearly 10% in 2017. Data from the VA's national screening program indicate that approximately 1 in 4 female veterans and 1 in 100 male veterans have experienced military sexual trauma (MST), defined as sexual assault or repeated and threatening sexual harassment experienced during military service.

MST can be a significant source of traumatic stress for survivors. MST is correlated with a variety of mental health conditions, including post-traumatic stress disorder (PTSD), depression and anxiety disorders, and substance abuse. MST survivors may also be at risk for behaviorally-linked health conditions, including liver or pulmonary disease and hypertension. In some cases, survivors of domestic or sexual violence can suffer from traumatic brain injury incurred as a result of their MST.

The military can learn from clinical programs pioneered at civilian medical centers. The Veterans Health Administration provides counseling and inpatient treatment options for veterans who experienced MST during their military service. But non-VA medical centers have significant experience treating trauma associated with sexual assault in the civilian world as well. Some MST survivors benefit from treatment in civilian intensive clinical programs outside the VA system, including through programs that treat caregivers and family members as well as the servicemember.

The START Act would

- Establish an intensive outpatient treatment pilot for the MST survivor population. The bill would establish a three-year pilot designed to assess the feasibility of using intensive outpatient programs to treat servicemembers suffering from PTSD as a result of military sexual trauma.
- Provide comprehensive care for MST survivors. Participating institutions would be required to provide comprehensive treatment for psychological and neurological conditions that occur in the MST survivor population, including PTSD, traumatic brain injury, substance abuse, and depression. They would also be required to provide care and support for family members supporting the impacted servicemember.
- Set rigorous standards to evaluate PTSD treatment for MST survivors. The bill would require DOD to establish evaluation metrics at the beginning of the pilot and conduct an annual assessment of treatment outcomes. Partner institutions would be required to provide evidence-based and evidence-informed treatment strategies, and share clinical and outreach best practices with other organizations and institutions participating in the pilot program.