

The Center for the Study of Sexual Minorities in the Military,
University of California, Santa Barbara

“Don’t Ask, Don’t Tell” Report Card



June 2006

MENTAL HEALTH CLASSIFICATION

A current Department of Defense Instruction (1332.38) addressing “Physical Disability Evaluation” lists homosexuality as a “mental disorder.” The American Psychiatric Association announced in 1973 that homosexuality is not a mental disorder.

F

ANTI-GAY HARASSMENT & COMMAND CLIMATE

In 1999, the Army conducted a review and survey of climate in the service and an anti-gay harassment action plan (AHAP) was initiated. In 2004, the Department of Defense stated that “the overarching directive recommended by the Plan is not necessary.”

F

EVIDENCE-BASED ASSESSMENT OF “DON’T ASK, DON’T TELL”

The government claims that it has relied on evidence and facts in determining the needs of personnel policy regarding the service of gay troops. Yet social science and every Department of Defense report on the subject has indicated that openly gay troops pose no threat to unit cohesion.

F

SUICIDE PREVENTION

Rates of suicide among service members increase during wartime. Military programs offer support to at-risk troops, yet there is no guarantee of confidentiality in medical or mental health services for gay and lesbian service members. “Don’t ask, don’t tell” makes it unsafe to confide in military psychologists or to identify family members whose gender could get a service member discharged.

D

FAMILY SUPPORT

Family support structures are a fundamental part of troop readiness. “Don’t ask, don’t tell” strains family connections by punishing gay and lesbian service members for identifying or communicating with their loved ones.

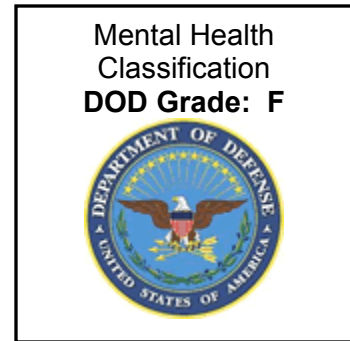
F

The Center for the Study of Sexual Minorities in the Military,
University of California, Santa Barbara

“DON’T ASK, DON’T TELL” Report Card
Mental Health Classification

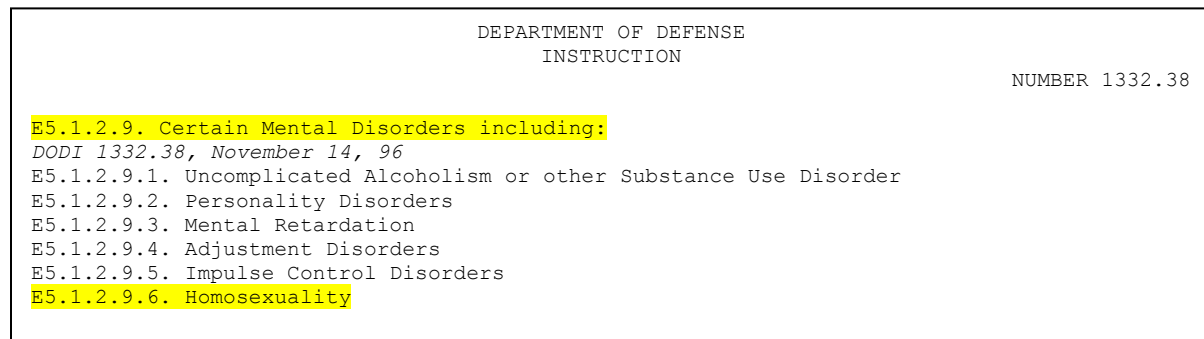
Background

The Department of Defense provides a wealth of resources designed to maintain the mental health of its troops and to diagnose and treat conditions when they arise. These include the Defense Health System that conducts research into combat-related mental health issues; mental health advisory teams that conduct ongoing assessments of personnel; and the Millennium Cohort study that follows 70,000 service members in longitudinal research to evaluate the health consequences of military service.



Pentagon Position

The Pentagon claims that it engages in “outreach and treatment programs to ensure that mental health concerns are understood and that barriers to access have been removed.” It also professes to “have led the nation in the development and fielding of evidence-based” practices to ensure the highest standards of mental health care, claims to be “on the leading edge of research related to mental health concerns” and states that it disseminates “the most current clinical guidance” in its deployment training.¹



Findings

In a Department of Defense Instruction (1332.38) addressing “Physical Disability Evaluation,” DoD lists homosexuality as a “mental disorder” defined as “conditions and defects of a developmental nature” designated by the Secretary of Defense. The directive governing the Instruction (DoD Directive 1332.18) was re-certified as “current” under the Bush administration in 2003.²

The classification of homosexuality as a mental disorder is contradicted by a broad consensus of medical and social scientific research. The American Psychiatric Association announced in 1973 that homosexuality is not a mental disorder.³ The American Psychoanalytic Association has affirmed that homosexuality is not a psychopathology, that anti-homosexual sentiment “negatively affects mental health,” and that efforts to change homosexual orientation (called “reparative therapy”) can result in “substantial psychological pain.”⁴ Yet despite this consensus and the fact that there is “no convincing evidence of the efficacy of these approaches” and despite evidence of the harm that results from its practice, documentation shows that chaplains in the military have attempted reparative therapy.⁵ This is one example of the damaging result that can occur when an institution fails to properly classify the mental health status of its personnel, and so in this area, the Department of Defense has earned an ‘F.’

¹ Letter to Congress, May 16, 2006, signed by William Winkenwerder, Jr., MD, Assistant Secretary of Defense; D.C. Arthur, Vice Admiral, USN, Surgeon General of the Navy; Kevin C. Kiley, MD, Lieutenant General, US Army, Surgeon General of the Army; George Peach Taylor, Jr., Lieutenant General, USAF, MC, CFS, Surgeon General of the Air Force.

² Department of Defense Instruction, Number 1332.38, November 14, 1996; for certification as of December 1, 2003, see: <http://www.dtic.mil/whs/directives/corres/html2/d133218x.htm>.

³ See American Psychiatric Association Committee on Gay, Lesbian and Bisexual Issues, “Homosexuality and the Armed Forces,” *American Journal of Psychiatry*, 148, 1991.

⁴ American Psychoanalytic Association, Committee on Gay and Lesbian Issues, Position Statement on Reparative Therapy, 1999.

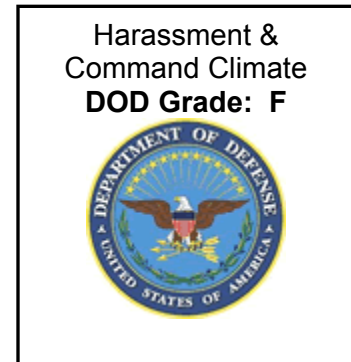
⁵ W. Brad Johnson and Robin A. Buhrke, “Service Delivery in a ‘Don’t Ask, Don’t Tell’ World: Ethical Care of Gay, Lesbian and Bisexual Military Personnel,” *Professional Psychology: Research and Practice*, Vol. 37, No. 1, 2006; Gregory Herek and Aaron Belkin, “Sexual Orientation and Military Service: Prospects for Organizational and Individual Change in the United States,” in *Military Life: The Psychology of Serving in Peace and Combat*, Thomas W. Britt, et. al., eds (Greenwood Press, 2006); Bonnie Moradi,

The Center for the Study of Sexual Minorities in the Military,
University of California, Santa Barbara

“DON’T ASK, DON’T TELL” Report Card
Harassment & Command Climate

Background

Leadership in the military is universally recognized as essential to an effective fighting force. The style of leadership at a command or base sets the tone for the proper and effective completion of the mission. Following the anti-gay murder of Army PFC Barry Winchell in 1999, the Army conducted a review and survey of climate in the service. The survey found widespread harassment and use of anti-gay comments in the Army. In response, then Secretary of Defense William Cohen recommended the creation of an anti-harassment action plan (AHAP) that included a directive stating that no mistreatment based on sexual orientation would be tolerated and that leaders would be held accountable to enforce the directive.⁶



Pentagon Position

In 2003, following reports of continued anti-gay harassment and indications that AHAP was not being fully implemented, DoD was asked by 22 members of Congress to re-issue Secretary Cohen’s directive. DoD’s response in 2004 stated, “the overarching directive recommended by the Plan is not necessary.” The Pentagon also wrote that anti-gay harassment policies were now being managed by the individual services. In addition, the Army pointed to its homosexual conduct policy training manual of “Dignity and Respect” for all service members as a model for avoiding anti-gay harassment in the services.

Findings

The “Dignity and Respect” Army training manual was circulated, but reports suggest it has been discontinued⁷. Moreover, the AHAP does not appear to be in existence.⁸ Despite the directive calling for accountability regarding enforcement of the “don’t harass” clause of “don’t ask, don’t tell,” there is negligible accountability on the part of those who mistreat service members or permit the harassment of service members on the basis of their real or perceived sexual orientation. The current administration has even promoted general officers whose records include questionable anti-gay command climates, such as Lt. General Robert Clark, formerly of Fort Campbell, KY, where the Barry Winchell murder occurred.

Evidence shows that officers and enlisted personnel do not understand the “don’t ask, don’t tell” policy and display “inconsistency in the way sexual orientation is addressed.” A disproportionate number of commanders perpetrate or witness anti-gay harassment.⁹ Research also suggests that the presence of a discriminatory policy against gays prevents enforcement of anti-gay harassment because the two policies work at cross-purposes.¹⁰ Instead of a strong command climate, the military has produced a leadership vacuum that has created uncertainty, insecurity and permissiveness around anti-gay harassment, and it therefore earns a grade of ‘F’ for command climate.

⁶ Memorandum from Under Secretary of Defense Rostker to Services outlining DoD approved plan, July 21, 2000.

⁷ <http://www.cmrlink.org/>

⁸ Congressional letter to Undersecretary of Defense David Chu signed by 22 members of the House of Representatives, August 2004.

⁹ W. Brad Johnson and Robin A. Buhrke, “Service Delivery in a ‘Don’t Ask, Don’t Tell’ World: Ethical Care of Gay, Lesbian and Bisexual Military Personnel,” *Professional Psychology: Research and Practice*, Vol. 37, No. 1, 2006; Gregory Herek and Aaron Belkin, “Sexual Orientation and Military Service: Prospects for Organizational and Individual Change in the United States,” in *Military Life: The Psychology of Serving in Peace and Combat*, Thomas W. Britt, et. al., eds (Greenwood Press, 2006); Bonnie Moradi, “Perceived Sexual-Orientation-Based Harassment in Military and Civilian Contexts,” *Military Psychology*, 2006, 18(1).

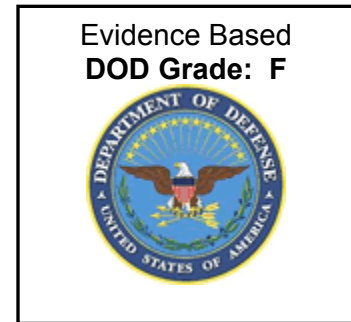
¹⁰ Sharon Terman, “The Practical and Conceptual Problems with Regulating Harassment in a Discriminatory Institution,” 2004, www.gaymilitary.ucsb.edu.

The Center for the Study of Sexual Minorities in the Military,
University of California, Santa Barbara

“DON'T ASK, DON'T TELL” Report Card
Evidence-Based Assessment of the Gay Ban

Background

An enormous amount of social scientific research data provides evidence about the impact of openly gay and lesbian service on military forces and similar institutions in the U.S. and around the world. Studies on group cohesion, team building, mission focus, combat performance, morale and the role of cultural beliefs and leadership on military effectiveness abound, and have yielded a wealth of information about what happens when gay bans in such organizations are lifted.



Pentagon Position

The government claims that it has relied on evidence and facts in determining the needs of personnel policy regarding the service of gay troops. A federal court upholding the constitutionality of "don't ask, don't tell" held that the testimony of military officials and the deliberations of Congress "provide a 'reasonably conceivable state of facts' to uphold" the law. Additionally, a Senate committee noted that the exclusionary policy represented "a prudent evaluation of the impact of [homosexual] behavior on the armed forces."¹¹

Findings

The evidence for the actual impact of openly gay service on military effectiveness starkly contradicts these claims of an evidence-based policy. Several exhaustive studies have concluded there is no negative impact on unit cohesion or combat effectiveness when gays and lesbians are permitted to serve openly. These studies include thorough assessments of what happened when gay bans were lifted in Israel, Britain, Canada and Australia, where none of the available military experts reported any deterioration of their fighting forces once openly gay troops were allowed to serve.¹²

They also include specific instances in which government reports challenged the existing anti-gay military policy. In 1993, the military commissioned a study by a Pentagon creation, the RAND Corporation's National Defense Research Institute, to assess organizational and institutional policies on gay and lesbian personnel. RAND concluded that gays could serve openly in the military. However, Pentagon officials ordered that the study be kept from the public because the Joint Chiefs of Staff disagreed with its conclusions.¹³

In 1989, a Defense Department research center (PERSEREC) issued a report which assessed the notion that gays were security risks. This report found no appreciable security risk and, in fact, no reason for the gay ban at all. Senior officials rejected the study, saying it exceeded its mandate. Military officials had the report labeled a "draft" so it would not have to be released to the public and ordered a new version of the study with a narrower mandate. And in 1957, the Navy's Crittenden Report also concluded that gays and lesbians did not undermine the military. This report was also buried.¹⁴

For its refusal to consider the overwhelming evidence that no military impairment results from the presence of openly gay troops in the armed forces, the Department of Defense receives an 'F' for evidence-based approach to gay service in the military.

¹¹ Michael J. Sullivan, U.S. Attorney and Mark T. Quinlivan, Assistant U.S. Attorney, "U.S. Government Brief in Support of Defendants' Motion to Dismiss," United States District Court, District of Massachusetts, Civil Action No. 04-12546 GAO, February 7, 2005.

¹² Aaron Belkin, "Don't Ask, Don't Tell: Is the Gay Ban Based on Military Necessity?" *Parameters*, 33, 2003; Geoffrey Bateman and Sameera Dalvi, "Multinational Military Units and Homosexual Personnel," 2004, www.gaymilitary.ucsb.edu.

¹³ National Defense Research Institute, "Sexual Orientation and U.S. Military Personnel Policy: Options and Assessment," 1993; Eric Schmitt, "Pentagon Keeps Silent on Rejected Gay Troop Plan," *New York Times* July 23, 1993.

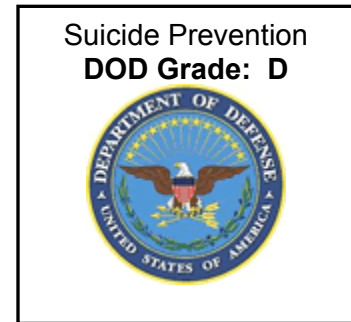
¹⁴ Allan Berube, *Coming Out Under Fire: The History of Gay Men and Women in World War Two* (Free Press), 1990.

The Center for the Study of Sexual Minorities in the Military,
University of California, Santa Barbara

“DON’T ASK, DON’T TELL” Report Card
Suicide Prevention

Background

The suicide rate for soldiers fighting in Iraq has risen to its highest level since the war began, and suicide constitutes nearly a fifth of all non-combat deaths in the Army. According to a recent in-depth investigation by the Hartford Courant, troops who are known to be mentally unfit and prone to suicidal ideation have been sent to fight, often on multiple tours, and medicated "without adequate counseling or monitoring of medication." The Courant called for "comprehensive, objective screening" of recruits and recommended that "those flagged for possible psychological problems should be examined by a mental health professional."¹⁵



The conditions of war are difficult for every service member, but gays and lesbians face added burdens because of “don’t ask, don’t tell.” In the civilian world, gay suicide rates are consistently found to be higher than that of the heterosexual population.¹⁶ Special sources of stress for gays in the military include the fear that discussing their personal lives can jeopardize their careers since they can be discharged under "don't ask, don't tell" for confiding in their military chaplain or military psychologist. As a result, some service men and women experience distress, depression, isolation, mood problems and suicidal ideation, and are reluctant to seek military mental health resources because they cannot be assured of confidentiality.¹⁷

Pentagon Position

The Surgeons General of the Army, Navy and Air Force and the Assistant Secretary of Defense for Health Affairs recently signed a letter stating that the Defense Health System ensures a "full continuum of care," buttressed by a "confidential counseling program" and healthcare for military families, which can be essential in minimizing the stresses of deployed troops. A congressional mandate requires that the military assess the mental health of all deploying troops, and the Surgeons General letter states that "each military member receives a healthcare visit with a trained healthcare provider" to ensure appropriate treatment is provided in case of specific mental health needs.¹⁸

Findings

Full mental health assessments, confidential counseling and family healthcare are not available to gay and lesbian service members because “don’t ask, don’t tell” makes it unsafe to confide in military psychologists or to identify family members whose gender could get a service member discharged. According to research, gay service members may “be unwilling to seek traditional mental health services” and may “avoid seeking assistance until they are involuntarily referred,” sometimes for suicide risk. Both chaplains and military psychologists lack the training and guidance to adequately monitor and treat gay and lesbian service members. Studies conclude that military psychologists “may be hampered by confusing and conflicting [DoD] recommendations” in treating the mental health needs of gays and lesbians and that psychologists “have not received consistent guidance regarding how best to respond to” gay service members.¹⁹ For its inability to properly monitor and treat the conditions that can lead to suicide, the Department of Defense earns a ‘D’ in suicide prevention for its gay and lesbian service members.

¹⁵ Lisa Chedekel and Matthew Kauffman, "Mentally Unfit, Forced to Fight," Hartford Courant, May 14, 2006; "Troops Deserve Better Care," Commentary, May 21, 2006.

¹⁶ Gary Remafedi, "Sexual Orientation and Youth Suicide," Medical Student Journal of the AMA, Oct. 6, 1999, Vol. 282, no. 13.

¹⁷ W. Brad Johnson and Robin A. Buhrike, "Service Delivery in a 'Don't Ask, Don't Tell' World: Ethical Care of Gay, Lesbian and Bisexual Military Personnel," Professional Psychology: Research and Practice, Vol. 37, No. 1, 2006.

¹⁸ Letter to Congress, May 16, 2006, signed by William Winkenwerder, Jr., MD, Assistant Secretary of Defense; D.C. Arthur, Vice Admiral, USN, Surgeon General of the Navy; Kevin C. Kiley, MD, Lieutenant General, US Army, Surgeon General of the Army; George Peach Taylor, Jr., Lieutenant General, USAF, MC, CFS, Surgeon General of the Air Force.

¹⁹ W. Brad Johnson and Robin A. Buhrike, "Service Delivery in a 'Don't Ask, Don't Tell' World: Ethical Care of Gay, Lesbian and Bisexual Military Personnel," Professional Psychology: Research and Practice, Vol. 37, No. 1, 2006.

The Center for the Study of Sexual Minorities in the Military,
University of California, Santa Barbara

“DON’T ASK, DON’T TELL” Report Card
Family Support

Background

The military devotes vast resources to provide support and outreach for military families, not only because it understands its obligation to the spouses and children of its soldiers, but because troop morale and readiness depend fundamentally on the assurance that their families are safe and provided for.²⁰ With nearly a quarter million National Guard and Reserve forces deployed in Afghanistan and Iraq, there are now more openly gay and lesbian service members in the U.S. military than at any period in history.²¹ Many of these service men and women have families at home, including children, partners and spouses.



Pentagon Position

Secretary of the Army, Francis Harvey, has repeatedly said that caring for service members and their families is his number one priority.²² Admiral Mike Mullen, Chief of Naval Operations, has echoed this sentiment, saying “the overall readiness [of the Navy] is tied directly to our family readiness and I've put a lot of emphasis on making sure our families are in good shape.”²³ Other military officials and commanders routinely assert the centrality of family support to the readiness and well-being of their troops. For example, Capt. Lisa Eichenauer of the 102nd Public Affairs Detachment of the Louisiana National Guard, told a reporter, “Families are a big part of our soldiers' readiness. If soldiers are deployed and worried about their families at home, they won't be able to keep their minds on their jobs.”²⁴

Findings

If family support is a fundamental part of readiness, the military has failed its gay and lesbian troops. “Don’t ask, don’t tell” strains family connections by punishing gay and lesbian service members for keeping photos of or emailing their loved ones. Because gay troops are forbidden by law from revealing their sexual orientation, their partners and families have no way to access the vast resources offered to most military families. As a result, gay and lesbian service members report added stress and anxiety which can interfere with their morale, readiness and mission focus. Deprived of the opportunity to communicate with family support groups, gay and lesbian soldiers are shut out of critical information designed to assure them that their loved ones are cared for. The families of gay and lesbian troops are also denied access to crucial information about deployed family members, including their status, condition, return dates or even whether they have been killed. They are also prohibited from the benefits and services that all other service members and their families have access to, including housing, healthcare, life insurance and counseling.²⁵

For the damage to morale and readiness wrought by the “don’t ask, don’t tell” policy, the Department of Defense earns an ‘F’ for family support for gay and lesbian troops.

²⁰ Tanya Biank, "The Home Fires Are Burning" New York Times op-ed, March 13, 2006.

²¹ <http://usmilitary.about.com/od/terrorism/a/deploymentrates.htm>

²² Kansas City's Morning News, Radio Interview with Francis Harvey, Secretary of the Army, Federal News Service, April 21, 2006.

²³ The G. Gordon Liddy Show, Radio Interview with Admiral Mike Mullen, Chief of Naval Operations, Federal News Service, April 19, 2006.

²⁴ Sarah Brown, "Guard Members Get Family Support; Deployment Creates Emotional Needs," New Orleans Times-Picayune, December 16, 2004.

²⁵ Nathaniel Frank, "Gays and Lesbians at War: Military Service in Iraq and Afghanistan under "Don't Ask, Don't Tell," 2004, www.gaymilitary.ucsb.edu.