Finding 8

In collaboration with

Funding for the 2020 Military Family Lifestyle Survey is provided through the generosity of our presenting sponsor USAA and from supporting sponsors Lockheed Martin, AARP, CSX, Hunt Companies, BAE Systems, The Barry Robinson Center, Comcast, Northrop Grumman, Walmart Foundation, and The Boeing Company.
Relocation can be disruptive for many active-duty families, but especially for families with children who have special needs, whether those needs are for special education services or a health- or mental health-related need. Most active-duty family respondents (80%) have a child 18 years of age or younger at home, and nearly one-fourth of them have a child with special needs (22%). For these families, frequent relocation requires repeatedly locating and setting up educational- or health care-related support services with each PCS.

ISSUES AND CONCERNS

While many active-duty families make choices that balance the needs of their family with their military lifestyle, these choices can be more complicated for families with a child with special needs. “Dependent children’s education” is the top military life issue among respondents who have children with special needs, and “financial issues and stress” is the top stressor they experience in their military life, compared to families without a child with special needs who ranked “time away from family” as the top issue and “isolation from family and friends” as the top stressor. Although military family respondents continue to report that “time away from family” is a top issue, military families with children who have special needs often voluntarily live apart from their service member (“geobach”) to provide stability for their children’s education.

In fact, 23% of all active-duty family respondents reported geobaching in the last five years. Among geobaching families who had a child with a special education plan (Individualized Education Program (IEP) or 504 Plan), 65% cited their “children’s education” as one of their reasons to geobach. By contrast, half (49%) of geobaching families with children not enrolled in special education reported children’s education as one of the reasons for geobaching.

“We have considered moving away from our military member for the sake of finding better education at our home of record ... I hope that at some point, the DOD listens to members and families and [...] starts moving bases/posts to locations that can support the mission and the families better to include education for children, medical support for families, and opportunities for working spouses/partners. COVID has only amplified the obvious deficit in our current community in these areas.” — Air Force Spouse
When considering preferences for their next duty station, “education options for children” was a top factor for all active-duty service member respondents with children under 18 (64%), but for families who have children with special needs, “support for a family member with special needs” (59%) was also a top consideration.

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<thead>
<tr>
<th>When asked to provide preferences on your next duty station, which of the following factors are/were most important to you and your family?</th>
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<tbody>
<tr>
<td><strong>Active-Duty Service Member Respondents With Children With Special Needs</strong></td>
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<tr>
<td>Education options for your child(ren) (64%)</td>
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<tr>
<td>Support for a family member with special needs (59%)</td>
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<td>Promotion opportunities for service member (43%)</td>
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**ACCESS TO EDUCATION SUPPORTS**

Access to education support is a vital need for all families who have children with special needs. However, for active-duty military families, this access can be disrupted or even cease while moving to a new duty station. Students in K-12 who are struggling in school can obtain formal help with either an Individualized Education Program (IEP), which is mandated under the Individuals with Disabilities Act, or a 504 Plan, which is a plan created under Section 504 of the Rehabilitation Act of 1973.\(^1\) Despite the fact that the transferability of IEP and 504 Plans has been a concern of military families for many years, the problem still persists.\(^2\)

**COVID-19 IMPACTS ON EDUCATION SUPPORT**

While some respondents noted that COVID-19-related closures provided an advantage for families who could now enroll students in a new school online after a move, for many active-duty families who have children enrolled in special education (28%), these closures complicated an
already challenging process of transferring special education services to a new school. These respondents reported their top challenge when transferring to a new school during COVID-19 was transferring their IEP and/or 504 Plan. Despite the Interstate Compact on Educational Opportunity for Military Children having been signed by all 50 states and the District of Columbia, which states that “the receiving State shall initially provide comparable services to a student with disabilities based on his/her current Individualized Education Program (IEP),” half of active-duty family respondents with a child enrolled in special education who PCSed since March 2020 reported they had trouble transferring their child(ren)'s IEP (51%) or 504 Plan (48%) to their new school. The FY21 NDAA included language to allow service members the ability to request a continued stay at their current location when there is a “documented substantial risk of transferring medical care or educational services to a new provider or school at the specific time of permanent change of station.” While this provision would not solve the difficulty military families face in transferring their child(ren)'s IEP, it would allow them to potentially avoid having to do so at inopportune times. Moreover, the FY21 NDAA allows service members to request a second review of their new assignment if they believe the gaining location would cause undue hardship on their family. The move to virtual education during COVID-19 also impeded necessary in-person evaluations for educational services, and delayed many families from obtaining an initial IEP and/or 504 Plan for their children.

Even families who did not transition to a new school found COVID-19-related closures curtailed their child's support services. Active-duty family respondents with a child receiving educational services reported their child either could not retain any (39%) or could retain only some (39%) of their existing educational supports during COVID-19. Less than one-fourth (22%) reported they could retain all educational supports during COVID-19.

**ACCESS TO HEALTH CARE**

In addition to educational support, active-duty families who have children with special needs must have the ability to maintain continuity of health care. While the increased use of telemedicine during COVID-19 was theorized to increase health care accessibility, families with children who have special needs continue to report difficulty obtaining health care, regardless of whether they had a recent PCS. Of families who relocated during COVID-19, 50% of active-duty family respondents with a child with special needs disagreed that they were able to get a referral and see a specialist in a reasonable amount of time, compared to 38% of their peers. One-fourth of active-duty family respondents (24%) stated they had a family member enrolled in the Exceptional Family Member Program (EFMP), and of those, 74%

“We are new to this district and during IEP evaluation, was told that it would be quite a while before my child could be evaluated for services and my other child needs additional support that we have not been able to get evaluated for due to lack of in-person services being provided.” — Army Spouse

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were enrolled for their child(ren). While the EFMP intends to ensure access to special health care and educational needs for families who require them, EFMP-enrolled families encounter the same challenges with obtaining appointments after relocation. For active-duty family respondents who had a family member enrolled in EFMP and had a recent PCS, half (48%) disagreed they were able to get a referral and see a specialist in a reasonable amount of time after relocating to a new duty station.

**LIMITATIONS**

While there is overlap in the groups, not all families with children who have special needs are enrolled in special education services, nor are they all enrolled in EFMP. Almost two-thirds (64%) of children of active-duty family respondents who are enrolled in EFMP are also in special education. Thirty-six percent of children of active-duty family respondents are enrolled in EFMP but are not in special education. Families with children who have educational supports may not identify as caring for a child with special needs. References to “families with children who have special needs,” “families with children enrolled in special education,” and “EFMP-enrolled families” are three different, but overlapping groups. The appropriate reference group is included with each data point in this finding. Additionally, the term “special needs” includes a range in both the types and severity of education and medical/health care needs. Families with different types of special needs may have different experiences.

**RECOMMENDATIONS**

**SCHOOLS/STATES**

- Ensure IEP/504 Plan transferability for up to six months after a PCS. Current requirements under the Interstate Compact are to maintain supports to the extent possible but do not require a time frame.

**MILITARY**

- Fast-track referrals to chronic health specialists for EFMP families by not requiring a Primary Care Manager (PCM) referral for chronic health conditions.
- Allow special needs/EFMP families enrolled in TRICARE Prime to make appointments at their new duty station before they move.
- Enable online school enrollment to enhance the "warm hand-off" between the sending and receiving districts, and to minimize disruptions in special education services.*
- Provide special education attorneys and advocates across all service branches in densely-populated EFMP locations.

**WHITE HOUSE/CONGRESS**

- Instruct State Education Agencies and the U.S. Department of Education to gather and provide data on special education disputes involving military children, using the existing Military Student Identifier.
- Establish a committee to advise the Secretaries of Defense and Education on matters concerning the education of military children with special needs, and on the model of the National Advisory Council on Indian Education.

* More information in Recommendations Chapter of Comprehensive Report


5. Ibid


10. Ibid