



**BLUE STAR
FAMILIES**

**MILITARY
FAMILY
LIFESTYLE
SURVEY**

2020 Military Family Lifestyle Survey Comprehensive Report

In collaboration with

S Syracuse University

**Institute for Veterans
& Military Families**

JPMorgan Chase & Co., Founding Partner

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.

BLUE STAR FAMILIES (BSF)

Blue Star Families builds communities that support military families by connecting research and data to programs and solutions, including career development tools, local community events for families, and caregiver support. Since its inception in 2009, Blue Star Families has engaged tens of thousands of volunteers and served more than 1.5 million military family members. With Blue Star Families, military families can find answers to their challenges anywhere they are.

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Syracuse University's Institute for Veterans and Military Families (IVMF) is the first national institute in higher education singularly focused on advancing the lives of the nation's military, veterans and their families. Through its professional staff and experts, the IVMF delivers leading programs in career and entrepreneurship education and training, while also conducting actionable research, policy analysis, and program evaluations. The IVMF also supports veterans and their families, once they transition back into civilian life, as they navigate the maze of social services in their communities, enhancing access to this care working side-by-side with local providers across the country. The Institute is committed to advancing the post service lives of those who have served in America's armed forces and their families. For more information, visit ivmf.syracuse.edu.

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The advent of the All-Volunteer Force ushered in a new era of American defense. The end of the draft resulted in a stronger, more professional U.S. military; however, it has also decreased understanding of military service and sacrifice within the broader American society.

Roughly 0.5% of the American public has served on active duty at any given time since 9/11. This number is expected to continue to decline as a result of continued voluntary service and evolving technology. While the smaller percentage of Americans in military service alone is not a cause for concern, the resulting decrease in understanding between the military and the broader U.S. society presents significant challenges for the future of American defense.

Blue Star Families' annual Military Family Lifestyle Survey provides a comprehensive understanding of the experiences and challenges encountered by military families. Military families are, first and foremost, American families. As such, they are very similar to their civilian neighbors. Many need dual incomes to be financially secure, are concerned about their children's education and well-being, and want to establish roots and contribute to their communities. However, the unique demands of military service mean families must serve and sacrifice along with their service member, and this results in exceptional issues and challenges for the entire military family.

Supporting military families strengthens national security and local communities, and is vital to sustaining a healthy All-Volunteer Force. Toward this end, Blue Star Families, with help from its valued partners, conducts a survey and produces a report on the state of military families each year.

The 2020 survey was designed and analyzed by a team led by the Department of Applied Research at Blue Star Families, in collaboration with Syracuse University's Institute for Veterans and Military Families (IVMF).

The survey results are intended to:

- identify key aspects of military life to effectively target resources, services, and programs that support the sustainability of military service and the All-Volunteer Force; and
- facilitate a holistic understanding of service member, veteran, and military family experiences so that communities, legislators, and policymakers can better serve each of their unique needs.

Blue Star Families' annual **Military Family Lifestyle Survey (aMFLS)** has been providing a comprehensive understanding of the experiences and challenges encountered by military families since 2009. It offers crucial insight and data to help inform national leaders, local communities, and philanthropic actors – functions that are even more important as decision makers assess how to support military and veteran families while the nation recovers from a global pandemic. The survey also presents the opportunity to increase dialogue between the military community and broader American society by highlighting areas for improvement and offering solutions to **bridge the civil-military divide, strengthen communities, and bolster the health and sustainability of the All-Volunteer Force.**

Blue Star Families conducted its 11th annual Military Family Lifestyle Survey from September to October 2020. Capturing experiences of **nearly 11,000 respondents** worldwide, and generating millions of data points, it remains the **largest and most comprehensive survey of active-duty, National Guard, and Reserve service members, veterans, and their families.**



OVERVIEW OF TOP MILITARY FAMILY ISSUES

The widespread impacts of the COVID-19 pandemic may have magnified long-standing issues for military families. Time away from family, already a top concern, may have been intensified by unexpected quarantines and extensions, or have had a greater impact on service members and family members managing work and home demands in an unprecedented work, school, and home environment. Balancing work, child care, child education, and home obligations in a global pandemic brought new challenges to the perennial issues of spouse employment, child education, and military family quality of life.

- Amount of time away from family due to military service remains the top issue for active-duty service members, veteran families, National Guard families, and Reserve families; however, it was the second top concern for spouses, behind military spouse employment.
- Military spouse under- and unemployment – consistently a top issue for active-duty spouse respondents – may have intensified due to COVID-19 impacts; this issue rose to the top five issues for active-duty service member respondents for the first time.
- Access to pay and benefits earned through military service, such as military pay, support for PTSD and combat stress, and health care and benefits, summarize veteran family concerns.

	Active-duty Spouses	Active-duty Service Members	Veteran Families	National Guard Families	Reserve Families
Spouse employment	52%	31%	19%	12%	17%
Time away from family	46%	52%	38%	52%	51%
Child(ren)'s education	42%	33%	19%	12%	17%
Quality of life	29%	29%	17%	17%	23%
Military pay	27%	29%	31%	27%	25%
Family stability	26%	34%	18%	17%	23%
Military career control	22%	29%	18%	24%	18%
PTSD/combat stress/TBI	9%	8%	30%	21%	18%
Military/VA health care	11%	12%	28%	19%	22%
Military benefits	10%	13%	24%	23%	21%
Deployment impact on family	22%	18%	23%	38%	34%

Active-Duty Spouses (n=3,647) Active-Duty Service Members (n=791)
 Veteran Families (n=2,690) National Guard Families (n=375) Reserve Families (n=348)

TOP 5 ISSUES FOR EACH SUBGROUP IN RED

SUPPORTING MILITARY FAMILIES STRENGTHENS NATIONAL SECURITY & LOCAL COMMUNITIES

The tumultuous events of 2020 intensified some pre-existing concerns common across military families. Military spouses, who already encounter considerable barriers to employment due to the military lifestyle, often found their tenuous connection to the workforce snapped as employment opportunities shrank and responsibilities of managing their children’s education landed on their shoulders. Military children, who already experience educational transitions because of frequent relocation, adjusted to new methods of learning, often shifting between virtual learning, in-person learning, and homeschooling. Service members, who are already concerned with the amount of time their service requires them to be away from family, experienced extended deployments and some saw more activations.

This year’s events underscored the importance of addressing these long-standing concerns, while also shining a spotlight on systemic problems. Civil unrest and national conversations of racial inequity brought more attention to the experiences of people of color, increasing awareness of challenges that



have long been overlooked. The global transition to remote work demonstrated how the nation can harness the power of technology to improve outcomes for military families on issues as wide-ranging as military spouse employment (through telework), to concerns about continuity of health and mental health care (through access to telehealth), to easing school transitions (through online enrollment and virtual schooling). Abrupt shifts to virtual schooling shed light on the tremendous support many military families rely on local schools to provide and the issues that are exacerbated when those services become unavailable, from supplemental food assistance to a variety of therapies and services for children with special needs. While the stormy year of 2020 created significant challenges, it also clarified issues and sparked changes, giving stakeholders interested in supporting military and veteran families a clearer view of the path to recovery.

The 2020 Military Family Lifestyle Survey Comprehensive Report examines these shifts and opportunities through the social determinants of health, exploring the five pillars that set the conditions for individual and family health and well-being: community and social context, health care access, education access and quality, neighborhood and the built environment, and economic stability.¹ The community and social context lens examines how relationships can impact well-being positively or negatively, including experiences of discrimination, sense of belonging to the unit, supports during stressful times like a deployment, and the military family lifestyle cultural competence of the local civilian community. Access to and desire for mental health care, as well as access to health care services after a relocation, are examined through the health care access and quality lens. High-quality education access sets the conditions for healthy children and families; military children's education is a perennial concern that has been worsened by COVID-19-driven instability. Housing and neighborhood quality have received increasing attention in recent years² and are indelibly tied to a family's economic condition. In turn, economic stability, the final social determinant, is connected to affordable, available child care and spouse employment challenges.

TOP FINDINGS FOR 2020

Community and Social Context

Service members reported experiencing racial and gender discrimination, potentially impacting readiness and retention. Most did not report the most recent incident of discrimination. Also, a smaller proportion of those active-duty service member respondents who experienced military-connected racial discrimination (43%) would recommend service than those who had not experienced discrimination (63%). Nearly one in 10 veterans of color reported racial discrimination was one of the reasons they left military service.

Fewer than half of service members reported feeling a sense of belonging to their unit. The number was even lower for female service members. Fewer than half agreed their command communicates well, and makes good decisions, but those who did agree reported significantly less stress.

More than half of families who experienced a deployment or activation during COVID-19 experienced an unanticipated extension of their time apart. Service members and their family members reported their top needs during deployment include communication, opportunities to exercise, and access to medical care and mental health resources.

Reserve and National Guard service members reported negative employment consequences during their career after an activation or deployment. Despite federal legal protections, nearly a quarter (23%) of National Guard and a third (34%) of Reserve service member respondents noted negative consequences with their civilian employers after returning from activation, such as losing promotion or training opportunities, involuntary reductions in hours or pay, or loss of employment. Over half of National Guard family respondents reported an activation since March 2020.

Health Care Access

Families still experience barriers to mental health care; 21% would like to receive care but don't currently. Nearly one-quarter (23%) of active-duty spouse respondents and 16% of active-duty service member respondents indicated having a current diagnosis for Generalized Anxiety Disorder. Despite increased use of telehealth services, active-duty family member respondents continue to report difficulty scheduling appointments, difficulty getting time off work for treatment, difficulty finding child care, and concerns about confidentiality.

Education Access and Quality

Families with kids who have special needs have difficulty maintaining educational and health care services during COVID-19 or after a PCS. The majority (78%) of active-duty family respondents with a child receiving special education services lost those educational support services during COVID-19 closures. Those transitioning to a new duty station encountered additional challenges; 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. Families are choosing to live apart ("geobach") to avoid these challenges.

Virtual education tripled in the last year, and more families are moving to homeschooling. Fifty-one percent of active-duty family respondents reported their oldest child participated in virtual education delivery in the 2020-2021 school year; 13% reported homeschooling. The shift to virtual education has impeded spouse employment; 36% of active-duty spouse respondents who are not working reported they were not working so they could homeschool their child(ren) or supervise virtual schooling.

Neighborhood and the Built Environment

Most families pay well over the monthly out-of-pocket housing costs the Department of Defense projects they should be paying (\$70-\$158); of those active-duty families who reported out-of-pocket costs, 77% pay more than \$200 out-of-pocket each month. When choosing housing, families prioritize proximity to base, family safety, a desirable school district, pet acceptance, and whether BAH will cover the costs. Financial stress increases with greater out-of-pocket housing costs.

Economic Stability

Child care remains a top barrier to spouse employment, and it has intensified during COVID-19; it's a greater challenge for families with kids with special needs. Lower-income families have a harder time finding child care that works for their situation, but higher-income families still encounter challenges. Over half of service member respondents reported "permission to work remotely" would alleviate child care and schooling challenges.

While low food security is most prominent among junior enlisted family respondents (29%), higher-ranking enlisted families also experience it. Fourteen percent of enlisted active-duty family respondents reported low or very low food security. Improving military spouse employment could be a sustainable upstream solution; enlisted spouses who are employed reported lower food insecurity (10%) than those who were not working but need or want to work (20%).

The spouse unemployment rate is higher in active-duty spouse respondents of color (27% vs. 17%) and recently relocated spouses (31% vs. 16%). Since March 2020, 42% of active-duty spouse respondents who had been working prior to the pandemic reported they had stopped working at some point during it, with layoffs and furloughs as the top reported cause. Most (68%) of those who stopped working remained unemployed at the time of survey fielding. Spouses identified remote/telework, transferring to a new location within the same company, and more flexibility from their service member's command over their day-to-day job demands as preferred solutions.

TOP MILITARY FAMILY STRESSORS RELATED TO TIME IN THE MILITARY

To better understand the impact of individual stressors common to the military lifestyle, respondents were asked:

“During your time associated with the military, what are/were the biggest stressor(s) in your military family? Please select up to 5 top stressors.”

	Active-duty Families	Veteran Families	National Guard Families	Reserve Families
Civilian spouse’s employment challenges	44%	20%	12%	18%
Isolation from family/friends	43%	25%	16%	25%
Financial issues/stress	39%	47%	39%	40%
Deployments	38%	41%	45%	43%
Relocation	36%	25%	6%	16%
Emotional/mental health issues	23%	28%	29%	25%
Marital or relationship issues	18%	27%	24%	28%
Job stress	25%	26%	32%	28%
Impact of military life on children	29%	20%	34%	30%
Separation due to military service, not deployment	21%	20%	31%	29%

Active-duty Families (n=4,397) Veteran Families (n=2,669)
National Guard families (n=366) Reserve families (n=343)

TOP 5 STRESSOR FOR EACH SUBGROUP IN RED



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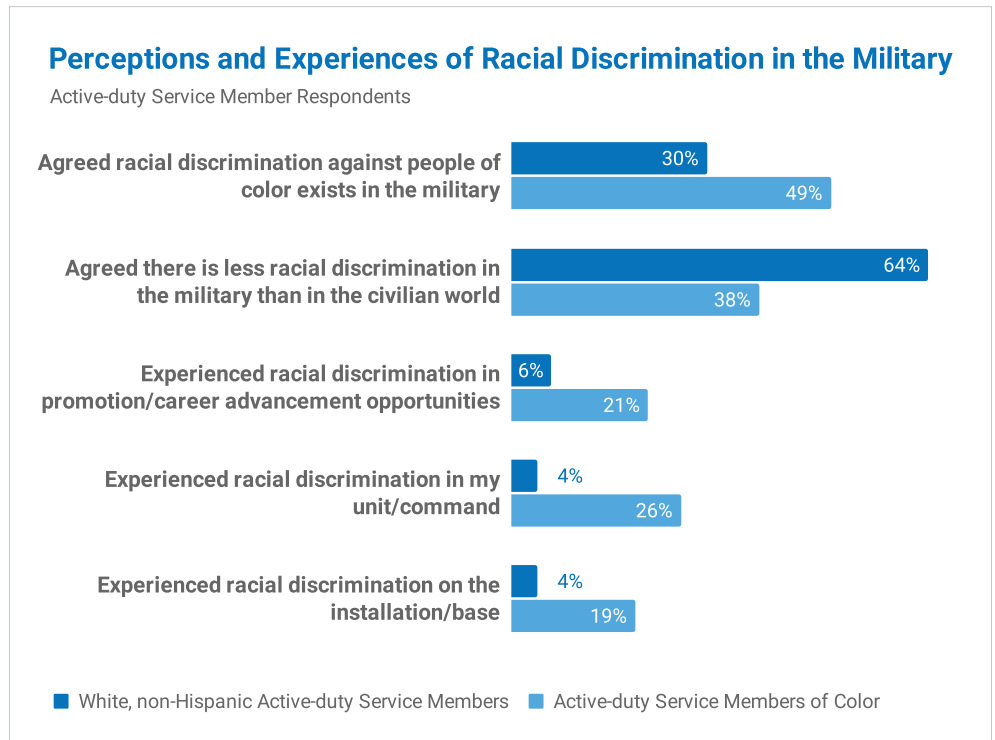
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Community and Social Context

Active-duty service members in underrepresented groups — service members of color, female service members, and LGBTQ+ (lesbian, gay, bisexual, transgender, queer) service members — not only recognize discrimination in the military that their peers do not, but they also consider it in their decision to leave the service.

The events of 2020 brought into focus the experiences of members of underrepresented groups across the United States, specifically people of color, but also women and those who identify as LGBTQ+ (lesbian, gay, bisexual, transgender, queer), both within the civilian population and the military. While the military has a long history of leading diversity and inclusion efforts,¹ the perception and recognition of discrimination reported by service members in minority groups indicates the work is not done. Corroborating recent DoD reports,² this year’s Military Family Lifestyle Survey found that active-duty service member

respondents in underrepresented groups — service members of color, female service members, and LGBTQ+ service members — perceive discrimination that went undetected by their peers.



SERVICE MEMBERS OF COLOR

Service member respondents of color perceive racial discrimination that their white, non-Hispanic peers do not; 64% of white, non-Hispanic active-duty service member respondents agreed there is less racial discrimination in the military than in the civilian world, compared to 38% of their peers of color

reporting the same. Similarly, fewer than one-third (30%) of white, non-Hispanic active-duty service member respondents agreed that racial discrimination exists in the military, though nearly half (49%) of active-duty service member respondents of color said the same.

26% of active-duty service member respondents of color reported experiencing racial discrimination in their unit or command; **21%** reported experiencing it in **promotion or career advancement opportunities**

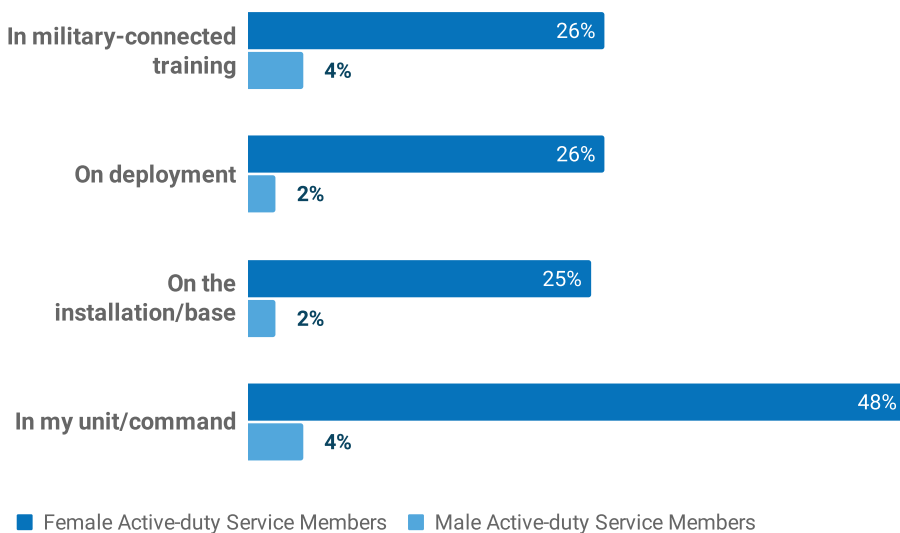
“Representation matters. It feels like the Army doesn’t care about my family. A lot of the changes from HRC are not very well explained to the force and had adverse effects on the family. Project inclusion does not seem to get to the root of racism that lingers in the military and within the civilian force. If the service member is treated unfairly then the family is also. **Leaders seem afraid to deal with race head on.**” — Black Female Army Service Member

FEMALE SERVICE MEMBERS

Female active-duty service member respondents (68%) also reported the perception of gender-based discrimination at higher frequencies than their male counterparts* (34%). This is consistent with a DoD report, which found that male service members are “less likely to recognize gender-based discrimination than female service members.”³

Experiences of Gender-Based Discrimination in the Military

Active-duty Service Member Respondents Reporting Gender-Based Discrimination



DISCRIMINATION BASED ON SEXUAL ORIENTATION

The “Don’t Ask, Don’t Tell” policy was repealed almost a decade ago, but for many LGBTQ+ service members, being open about their sexual orientation while acting in their military capacity is still uncomfortable.⁴ While only 4% of active-duty respondents in this sample identified as LGBTQ+, more than one-third (37%) of all active-duty respondents agreed that there is sexual orientation-based discrimination against LGBTQ+ people in the military. Although the sample of respondents identifying as LGBTQ+ is too low to report specific descriptive statistics, exploratory analysis suggests they experience a similar dynamic to service members of color and female service members.

EXPERIENCES OF REPORTING DISCRIMINATION

The majority (61%) of active-duty service member respondents who indicated they have experienced discrimination of any kind said the most recent incident of discrimination went unreported. Respondents who reported the incident remained unsatisfied with the result; while 35% indicated the reported incident was resolved appropriately, 65% indicated it was not. When asked in an open-ended question to describe what happened after they reported an instance of discrimination, 24% said their report was dismissed by leaders who covered up the behavior, they were told to ignore the behavior, or it was suggested that the available evidence wasn’t sufficient to justify an investigation. These responses echo findings from other recent reports,⁵ including the DoD.⁶

*The sample of gender non-conforming/transgender active-duty service members was too small (n=34) to allow comparison with male and female active-duty service member groups.

“I have a Master Chief that let it be known that he believed that women should not be in the military. He told my chief he didn’t like me and would make sure ... my career was over. **The Master Chief ended my career and it made me very suicidal.**” — Female Navy Veteran

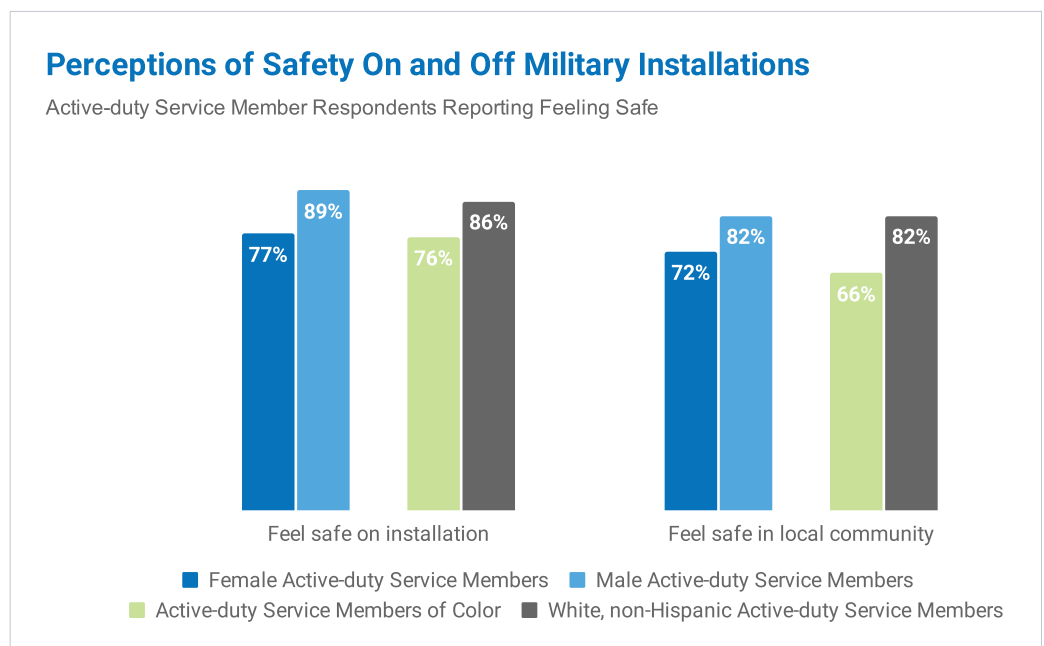
While DoD and civilian communities are actively working to prevent discrimination, underrepresented groups do not always feel these efforts are inclusive. Over two-thirds (69%) of male active-duty service member respondents agree that “the military provides activities that promote diversity and inclusion for service members and their families,” yet only 50% of female active-duty service member respondents say the same. A similar disparity exists among service member respondents of color (48% agree, compared to 64% of white, non-Hispanic peers), and service members who identify as LGBTQ+ around the provision of activities that promote diversity and inclusion. Overall, nearly two-thirds (65%) of all active-duty service member respondents reported they agree civilian organizations that serve the military and veteran families are racially and ethnically inclusive, though only 38% agree civilian organizations that serve military and veteran families are inclusive of the LGBTQ+ community.

IMPLICATIONS

Discrimination within the military has far-reaching implications to

readiness, impacting service members’ feelings of safety, a foundational human need. While the majority of active-duty service member respondents reported feeling safe both on and off the installation, fewer female service members, service members of color, and LGBTQ+ service members reported feeling safe on military installations.

Furthermore, discrimination can impact recruitment and retention, potentially leading to a departure of service members in underrepresented groups for preventable reasons, further undermining DoD efforts to increase diversity within the ranks.⁷ Responses from the survey show that only 43% of those who have experienced military-connected racial discrimination would recommend military service to a young person, compared to 63% of those who have not experienced racial discrimination. Similarly, 47% of those who have experienced gender-based discrimination would recommend military service, compared to 64% of those respondents who have not experienced gender-based discrimination. Because the military currently operates with an “up or out” promotion model,⁸ many service members may not be eligible to stay until retirement, even if they would like to. Service members from underrepresented groups, however,



report harassment and discrimination are some of the reasons they would leave active-duty service. Other than retirement or medical/administrative discharge, 12% of female active-duty service member respondents indicated gender discrimination was one of the primary reasons why they would leave the military (compared to 1% of their male peers), and 8% indicated sexual harassment/assault was a reason (compared to 1% of males). This trend persists among veteran respondents. While there are a myriad of reasons people choose to leave military service, experiencing discrimination may weigh into their decision. Excluding those who left due to retirement, 20% of female veteran respondents from communities of color and 15% of white, non-Hispanic female veteran respondents reported sexual harassment or assault as one of the reasons they left the service. One in 10 (10%) female veteran respondents reported gender-based discrimination as one of the reasons they left military service. Similarly, 8% of veteran respondents from communities of color cited racial discrimination as one of the reasons they left the service. Although Black veterans are just one racial group among the larger communities of color, nearly one in five (18%) Black veteran respondents reported racial discrimination as one of the reasons they left military service. These findings illustrate the importance of listening to voices from underrepresented communities to recognize these concerns and work collaboratively to address them head-on.

RECOMMENDATIONS



CONGRESS

- Extend Title VII Civil Rights Act protections to service members.⁹
- Create a culture conducive to unit cohesion by codifying white supremacist activity as a violation of the UCMJ.¹⁰
- Order a third-party evaluation of diversity, equity, and inclusion (DEI) training in the military, and take the necessary steps to improve the efficacy of said training.



MILITARY

- Conduct routine exit interviews to understand service members' motivations for leaving the military; assess this data to determine reasons for leaving among underrepresented communities.*
- Solicit survey samples that are representative by race/ethnicity; routinely report on differential effects by race/ethnicity, gender, and sexual orientation.
- Ensure adequate representation of under-represented groups on DoD Board on Diversity.

LIMITATIONS

The 2020 Military Family Lifestyle Survey was fielded from September to October 2020, after several months of civil unrest focusing on systemic racism following the death of George Floyd at the hands of police officers. This may have influenced how respondents viewed discrimination within the military. Furthermore, “discrimination” was intentionally left undefined, allowing respondents to interpret the questions through their own definitions and experiences. Notably, perceptions of discrimination were not limited to active-duty service member respondents in minority groups. Experiences of discrimination were reported within all groups, including those who are white, non-Hispanic, male, and non-LGBTQ+. This is consistent with research that indicates individuals more frequently recognize discrimination against their own group.¹¹

Small sample sizes of specific racial/ethnic groups prevented direct cross-group comparisons. Instead, the term “service members of color” is used to describe active-duty service member respondents who identified themselves as Hispanic/Latino/a (n=109), Black/African American (n=87), biracial/multi-racial (n=48), Asian (n=34), Native Hawaiian/Pacific Islander (n=13), or American Indian/Alaska Native (n=5). It is important to note that the experiences of respondents in these ethno-racial groups may vary widely. Furthermore, sample sizes are vastly different between some groups, such as LGBTQ+ and non-LGBTQ+ active-duty service member respondents, making direct comparison difficult. Although the overall respondent sample was largely proportionate to the military as a whole in terms of race and ethnicity, female service member respondents were oversampled and represent 50% of the service member respondents, although women make up 17% of the military.¹²

A positive command climate, including good communication, leadership, and flexibility, contributes to service members' sense of belonging to their unit, impacting readiness and retention.

The impact of command climate on overall unit cohesion and individual service member well-being has been thrust into the spotlight after highly publicized events, such as the outbreak of COVID-19 aboard the USS Theodore Roosevelt¹ and the release of the Report of the Fort Hood Independent Review Committee.² Command climate comprises many factors, including shared values, morale and motivation, confidence in leadership, job satisfaction, and unit cohesion (belonging).³ Despite being essential to the achievement of mission success,⁴ fewer than half (46%) of active-duty service member respondents agreed they felt a sense of belonging to their unit/command. In contrast, 92% of civilian adults felt like they belong within their current workplace.⁵ A sense of belonging is not only a fundamental human need,⁶ but it is also an important factor in building resilience, lowering stress,⁷ and reducing suicidal ideation.⁸ In line with this research, on average, active-duty service member respondents who agreed they felt a “sense of belonging to their unit/command” reported less stress than those who did not. Consistent with literature suggesting that lacking a sense of belonging to or acceptance by the unit is a risk factor for suicide,⁹ of those active-duty respondents who reported suicidal ideation in the past twelve months, 67% disagreed they felt a sense of belonging to their unit/command, although the sample size was small (n=21). Comparatively, only 28% of their counterparts who did not report suicidal ideation responded similarly.

Only **46%** of active-duty service member respondents agreed that they **felt a sense of belonging** to their unit/command

Demonstrating effective communication and leadership and offering flexibility are areas where employers can bolster belonging in the workforce.¹⁰ Of these three characteristics, most active-duty service member respondents (60%) agreed their unit/command offered “reasonable accommodations

to manage home or family obligations,” indicating some level of flexibility. Fewer than half, however, agreed their “leadership makes good decisions” (49%) or “communicates well” (45%). However, a greater percentage agreed their command communicated well about COVID-19-related issues (53%), indicating there may be lessons learned during that time, which can be incorporated into day-to-day and deployment communications.

“...The communication needs to be put out in a timely manner... There needs to be short and long range calendars that need to be adhered to. **Everything seems reactive and off the cuff.**” — Army Service Member

While a sense of belonging may look different for each individual,¹¹ there were similarities noted amongst active-duty service member respondents.

Sense of Belonging to the Unit/Command

Similarities Between Active-duty Service Member Respondents on Unit Communications and Reasonable Accommodations

Active-duty Service Member Respondents Who **Reported** a “Sense of Belonging” to Their Unit/Command



75% agreed that their unit/command communicates well



88% agreed that reasonable accommodations were made when needed

Active-duty Service Member Respondents Who **Did Not Report** a “Sense of Belonging” to Their Unit/Command



69% disagreed that their unit/command communicates well



58% disagreed that reasonable accommodations were made when needed

Notable differences by gender were seen on every aspect related to overall command climate, with male active-duty service member respondents reporting higher levels of positive command climate attributes than their female colleagues. This disparity is in line with previous research where female service members indicated that having leaders who were not supportive or understanding of family needs was a contributing factor in the creation of a negative work environment.¹²

Although there was no difference in the level of stress generated by the operational tempo (OPTEMPO) between active-duty service member respondents serving in conventional units and those assigned to the United States Special Operations Command (SOCOM), SOCOM-affiliated respondents reported significantly stronger indicators of a positive command climate and expressed greater levels of belonging to their unit/command. A greater percentage (65%) of those active-duty service member respondents assigned to SOCOM agreed they felt a sense of belonging to their unit/command, compared to 46% of their non-SOCOM peers. This higher level of agreement was found in each area of

Positive Command Climate Attributes

Active-duty Service Member Responses By Gender

I feel a sense of belonging to my unit/command:



52%



41%

Overall my unit/command communicates well:



51%



41%

My unit/command leadership makes good decisions:



55%



47%

My leadership makes reasonable accommodations for needed home/family obligations:



65%



56%

command climate: “leadership makes good decisions” (62% SOCOM vs. 50% non-SOCOM), “good communication from unit/command” (60% of SOCOM vs. 45% of non-SOCOM), and “reasonable accommodations from unit/command” (79% SOCOM vs. 59% non-SOCOM). While there are many variables unaccounted for in this analysis (e.g., longer time in SOCOM units, self-selection, mission type, etc.), these vast differences suggest there are lessons conventional forces can learn from SOCOM. For example, to what extent does additional funding, such as that provided through the Preservation of the Force and Family (POTFF) program, support these outcomes?¹³ Given the small sample size of active-duty SOCOM-assigned service members (n=77), these findings are exploratory, and additional research is warranted.

The effects of a unit’s overall command climate extend well beyond the unit, impacting individual well-being and military readiness. Poor communication, in particular, can also impact military retention. While the data collected does not allow for causal analysis, more than one in 10 (12%) of active-duty service member respondents who disagreed that their command communicated well also reported a “loss of

14% of veteran respondents, *excluding those who left due to retirement*, reported **“loss of faith/trust in unit leadership”** as a reason they chose to leave military service

faith/trust in unit/command leadership” as one of the top three reasons, other than retirement, they would leave military service, compared to just 4% of their peers who agreed. This was echoed by veteran respondents: 14% of veterans, excluding veterans who left military service due to retirement, also cited “loss of faith or trust in

unit/command leadership” as a reason they left military service. Because communication is a prominent factor in a positive command climate, and there is potential for leaders to be overconfident in their communication abilities,¹⁴ it is imperative that military leaders at all levels understand this relationship and seek external advice regarding the efficacy of their communication patterns.

RECOMMENDATIONS



CONGRESS

- Instruct the Services to review training requirements and consider options for reducing activities that are not critical to maintaining essential operational readiness to allow for greater flexibility at the unit level.¹⁵
- Instruct the Services to conduct routine exit interviews and/or surveys when a service member voluntarily separates from service for reasons other than retirement, medical, or administrative discharge.



MILITARY

- Include training on communication best practices in curricula across the professional military education system.
- Expand broadening assignments to include civilian leadership training for mid-career service members.*

*More information in Recommendations Chapter of Comprehensive Report

LIMITATIONS

The term “command climate” does not have a standard definition, though it generally refers to unit morale — a shared sense of the culture of the unit;¹⁶ the definition provided here includes communication, leadership, and flexibility. “Stress” was measured using the Perceived Stress Scale.¹⁷

Additional analysis with statistical tests was provided when possible and appropriate. For example, while the association between perceived stress and belonging to the unit/command was statistically significant, the directionality and causality of this association could not be tested. Gender differences on responses related to unit/command climate were also not tested for statistical significance or strength of association.

Responses from several small sample groups are reported in this finding. For example, the sample size for active-duty service members who reported suicidal ideation is 21; the SOCOM-affiliated service member sample is 77. While these sample sizes are not robust enough for additional statistical analysis, the responses themselves provide important context and a preliminary understanding of the challenges, trends, and implications of how active-duty service members perceive their unit/command.

Although the overall respondent sample was largely proportionate to the military as a whole in terms of race and ethnicity, female service member respondents are oversampled and represent 50% of the service member respondents while they make up 17% of the military.¹⁸ Additionally, the active-duty sample is not reflective of the military as a whole in terms of rank; senior enlisted and officer ranks are oversampled, which may influence the aggregated findings on command climate presented in our findings report.

Maintaining connection and access to self-care are critical needs to support families of deployed or activated service members.

Deployments and activations are common for military families, but the COVID-19 global pandemic added a new layer of complexity to this familiar military family experience. More than half (55%) of National Guard family respondents and a quarter of active-duty (24%) and Reserve (27%) family respondents reported a deployment or activation from March through October 2020. Of those families who experienced a deployment or activation, more than half of active-duty (66%), National Guard (52%), and Reserve family (55%) respondents reported unexpected extensions due to COVID-19 or were required to spend extra time away from family due to quarantine restrictions. The importance of supporting military families experiencing deployment has been well-documented over the years (Conforte, et al, 2017); however, to date, there has been little published regarding what specific, practical, day-to-day needs are for military families during a deployment, aside from inter-family communication and access to mental health resources (Clark, O’Neal, Conley, & Mancini, 2018). Even less has been published regarding whether or not military family members on the homefront know how to access resources to meet the daily needs they identify.

CRITICAL NEEDS AND UNMET NEEDS ACROSS ALL MILITARY-CONNECTED FAMILIES

Active-duty spouse respondents who experienced a deployment since March 2020 reported **significantly higher levels of stress** than those who did not.

Among military-connected family respondents who experienced deployment or activation from March to October 2020, or anticipated an upcoming deployment within nine months, communication (with the deployed service member and with the unit) and self-care were

the most important needs reported by all respondent groups: active-duty members and their spouses, National Guard family respondents, and Reserve family respondents.

What would help support your family through a current or upcoming deployment or activation?

“To be honest, just an **open communication from the unit to the deployed spouse**. Time to check in and say hi will mean more than anything. The entire year my husband was deployed last (went from 6 months to a year) **not one person contacted me for anything.**” — Air Force Spouse

TOP 5 NEEDS DURING DEPLOYMENT OR ACTIVATION

Active-duty, National Guard, and Reserve Family Respondents Who Recently Experienced or Anticipated an Upcoming Deployment or Activation

	Active-duty Spouse Respondents	Active-duty Service Member Respondents	National Guard Family Respondents	Reserve Family Respondents
Ability to communicate with spouse	79%	83%	79%	84%
Emergency contact information for the unit/command	72%	68%	58%	67%
Access to medical care	71%	74%	50%	55%
Opportunity to exercise	57%	67%	54%	47%
Access to mental health	46%	58%	39%	34%

Although each of the service branches has created deployment readiness programs^{3,4,5,6} to support families during deployment and activation of service members, active-duty spouse respondents still reported they do not know how to access some of these services or information that may be especially critical during deployment. Despite “emergency contact information for the unit/command” that is often included in pre-deployment and activation briefings, this was an unmet need for many active-duty spouse respondents. Seventy-two percent of active-duty spouse respondents who have experienced a deployment since March 2020, or will in the near future, indicated this information was or would be a need during their deployment; however, 38% of those respondents were unaware of how to access it. While more than a third (37%) of active-duty spouse respondents indicated their service member’s unit or command “communicates well,” this number drops to 33% who agreed the command “communicates well during deployment.”

Other needs were less commonly reported, but harder for families to find. Only 18% of active-duty spouse respondents with a current or upcoming deployment reported needing caregiver respite or support, but 74% of those respondents did not know where to find such resources. In line with previous research,⁷ 46% of active-duty spouse respondents with recently deployed or deploying service members reported “access to mental health care” as a critical need. Of these, 40% were currently receiving care, 16% did not know how to access it, and 35% reported they do not receive care but would like to. Bureaucratic and logistical barriers to receiving mental health care are well-documented⁸ and align with our research: for example, “difficulty scheduling an appointment” (45%) and “finding child care” (40%) were top reasons for not receiving care among active-duty spouse respondents who desired it. Other unmet needs center on self-care and engagement opportunities for family members, such as social activities that include child care, support for children’s activities, and special needs family members.

ACTIVE-DUTY SPOUSE RESPONDENTS' NEEDS DURING CURRENT OR UPCOMING DEPLOYMENT OR ACTIVATION

Needs During Deployment/Activation Ranked from highest to lowest reported critical deployment need	Critical Deployment Needs % of respondents who reported this need during deployment	Unmet Deployment Needs % of those who reported this need but do not know how to access it
Ability to communicate with spouse	79%	7%
Emergency contact information for the unit/command	72%	38%
Access to medical care	71%	7%
Opportunity to exercise	57%	24%
Access to mental health	46%	16%
Resources for child(ren)'s activities	44%	48%
Social/recreational activities that include child care options	38%	65%
Resources for social support	34%	50%
Communication from unit/command	33%	33%
Child care	32%	49%
Assistance with child(ren)'s education	29%	40%
Resources for sports/recreation	24%	49%
After-school care	24%	54%
Employment/job opportunities	22%	39%
Help with yard/house maintenance	21%	58%
Caregiver respite or support	18%	74%
Resources for my education	15%	53%
Financial support	14%	51%
Assistance with special needs child(ren)	14%	53%
Assistance with shopping (curbside pickup, someone to shop for me)	10%	35%
Resources for job preparedness	10%	59%
Food support	9%	49%
Transportation assistance	4%	64%

MOST (>50%) do not know how to access **SOME** (25%-50%) do not know how to access **FEW** (<25%) do not know how to access

The majority of respondents reporting the most common needs (communication, self-care, etc.) also reported they knew how to access resources to meet them; however, respondents with less common needs reported higher levels of uncertainty regarding how to access these resources or supports. These everyday needs – things like “social/recreational activities with child care” and “help with yard/house maintenance” – are necessary to help families on the homefront thrive, not just survive, while their service member is deployed. High levels of unmet need in these areas offer a helpful blueprint for supplemental nonprofit and community-based programs to provide meaningful support to military families during their service member’s deployment or activation.

IMPLICATIONS

Time away from family remains the top issue for National Guard and Reserve family respondents, and is second only to “military spouse employment” for active-duty family respondents. Deployments were the top stressor for National Guard family (45%) and Reserve family (43%) respondents, and one of the top for active-duty family respondents (38%). Further, about two out of every 10 active-duty (18%), National Guard (22%), and Reserve (17%) family respondents would choose to leave military service because of too many deployments/activations. It is important to note that while “time away from family” encompasses more than deployments – including long work hours, training or field problems, TDYs, unaccompanied tours, geo-batching (voluntarily living separately), and more – deployments are stressors unique to military life. Supporting families and easing some of the unmet needs could support retention and recruitment, as well as provide needed resources to keep families healthy and thriving.

LIMITATIONS

Although the sample includes respondents from all currently-serving military families, the subsamples of National Guard (n=106) and Reserve (n=61) family respondents who had experienced or anticipated deployment or activation were small. Also due to sample size constraints, we do not separate out National Guard or Reserve spouses as a separate subsample group for discussion as we sometimes do for active-duty spouse respondents.

COVID-19-related school and child care closures, as well as limitations to medical and wellness services that were commonly utilized by military families, may also have influenced spouses’ reported needs and wants during a current or upcoming deployment.

RECOMMENDATIONS



CONGRESS

- Commission a report regarding child care needs (including respite care) during deployment, and assess the extent to which these needs are being met. The assessment should include the availability of programs serving families who have special needs children, and the extent to which access to child care supports the mental health of the parental figure on the homefront and that of the deployed service member.



MILITARY

- Simplify communications to family members leading up to and during deployment to ensure they are digestible and user-friendly.
- Diversify the methods of communication that commands use when connecting with the families in their unit. Eighty-one percent of active-duty spouse respondents prefer receiving information via email, 45% prefer social media, and 41% prefer a phone call or text message.*
- Provide routine, inclusive, bi-directional communication (unit to family member and family member to unit) leading up to, during, and following a deployment. Examples include: routine check-ins, virtual office hours, virtual town halls, etc.

*More information in Recommendations Chapter of Comprehensive Report

The overwhelming majority of military family respondents are registered to vote. Their decisions about where they registered were influenced by rules/regulations and their desire to maintain connection to specific communities.

Military families are highly civically engaged. In fact, 89% of active-duty family respondents reported they were registered to vote, and of those registered, 95% reported an intent to vote in the next national and/or local elections (as of September-October 2020). This engagement is also evident in veterans,¹ who are more likely to vote than their civilian peers, and persists across demographics, such as race and citizenship; voter registration rates were similar among active-duty family respondents of color and

89% of active-duty family respondents reported that they are registered to vote

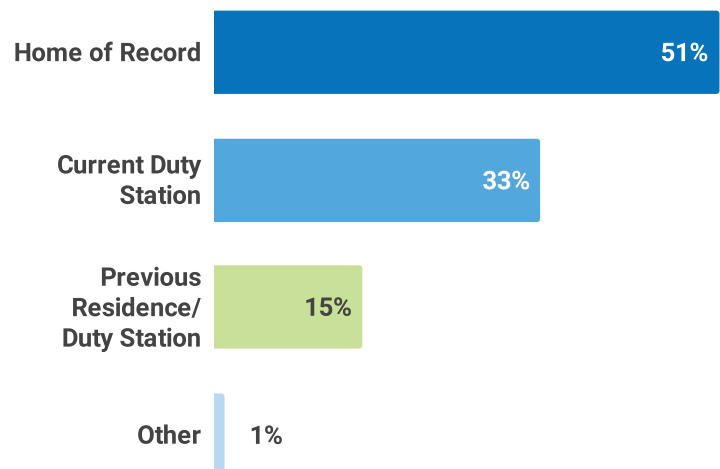
white, non-Hispanic active-duty family respondents. While only 7% of active-duty service member respondents and 4% of active-duty spouse respondents are U.S. citizens by naturalization, more than 80% of active-duty family member respondents who are naturalized U.S. citizens are registered to vote, and more than 90% of those registered

intended to vote in the next national election. On the other hand, fewer than one in 10 active-duty family member respondents (9%) reported not being registered to vote. Of those who were not registered at the time of the survey, the most common reasons were lack of interest in voting (30%), lack of external efficacy about electoral politics – e.g., do not think my vote will make a difference (14%) – ineligibility (13%), and lack of knowledge about the voter registration process – e.g., do not know where (12%) or how (12%) to complete voter registration.

Service responsibilities are worldwide and can take military families away from the United States, making absentee voting a necessity for civically-engaged military families. Prior to the November 2020 elections, roughly 12% of the active-duty force was stationed overseas.² While only 7% of active-duty family respondents were living overseas at the time of the survey, 94% of those individuals reported they were registered to vote.

Location of Voter Registration

Active-duty Family Respondents



Military families, protected under legislation such as the Servicemembers Civil Relief Act (SCRA) and the Military Spouse Residency Relief Act (MSRRA) are unique in their ability to select where they are registered to vote, often choosing between their or their service member's state of residency, home of record, a previous duty station, or current duty station. Active-duty family respondents' voter registration decisions were influenced by a number of factors. The most common are bureaucratic in nature, such as state residency rules and requirements (42%) and the ease or convenience of registering (23%). Respondents reported feeling their vote will matter more in the state where they are registered (24%), they want to stay connected to a community at home (22%), or they would like to have a voice in their current community (20%). Having a voice in the community is an important component of having a sense of belonging to that community, which, in turn, is associated with many other health and mental health benefits.³ Furthermore, there is evidence of a relationship between voter registration decisions and respondents' belonging to their local communities: active-duty family respondents who were registered to vote at their current duty station also reported significantly higher levels of belonging to the local community than those who were not registered locally.

While the current level of voter registration amongst military families is high, efforts to provide clear and easy access to registration materials and timely voting information must be maintained to ensure there are no voting barriers for any service members or their eligible family members.

RECOMMENDATIONS



CONGRESS

- Support policies that allow for the continued use and tracking of absentee ballots for service members and military spouses voting locally and absentee.



MILITARY

- Empower active-duty families to make informed decisions about their voter registration by providing clear and consistent information about voter registration requirements.*

*More information in Recommendations Chapter of Comprehensive Report

LIMITATIONS

While there is a very high degree of voter registration among active-duty family respondents, it is possible that social desirability bias may have influenced respondents to report higher voter registration and intent to vote than actually voted.⁴ Military family members may be registered to vote in their home of record, their state of residence, or their current or previous duty station.

Additionally, about 3% of active-duty spouse respondents were non-citizens at the time of the survey. Voter registration is only one indicator of civic engagement and does not capture the full extent of civic engagement among active-duty family respondents in their communities. Mean belonging score, measured by the Blue Star Families Belonging Scale, for those active-duty family member respondents registered to vote at their current duty station was 3.05, in comparison to a mean score of 2.84 for active-duty family respondents registered to vote in another location.



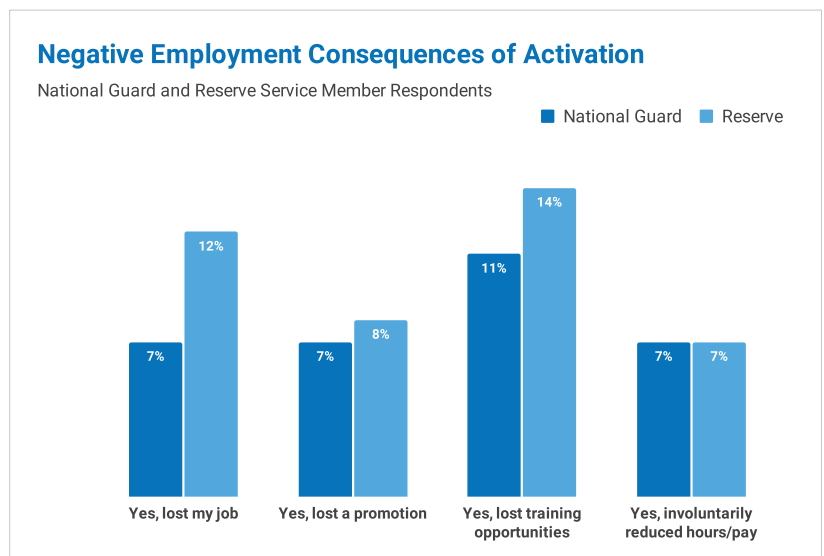
STATES

- Simplify the voter registration process for active-duty families.
- Provide clear guidance and answers to frequently asked questions for active-duty families on state and local board of elections websites.
- Educate civilian personnel and volunteers supporting local voter registration about requirements and procedures unique to active-duty families.

During COVID-19, National Guard families reported higher rates of activation and less time to prepare than their active-duty and Reserve peers. Despite protection by federal labor laws, both National Guard and Reserve service members reported negative employment consequences after an activation or mobilization.

The events of 2020 – from the global COVID-19 pandemic to the destructive wildfires in the western states to civil disturbances across the nation – resulted in the activation of National Guard service members at historic levels.^{1,2} As of September-October 2020, when the 2020 MFLS was fielded, over half of National Guard family respondents (55%) reported they or their service member were deployed or activated since March 2020, compared to about a quarter of their active-duty family (24%) and Reserve family respondent peers (27%). National Guard service members are called upon to respond to national disasters and other crises; however, they often do so on shorter notice than their counterparts in other components.³ In line with this research, a greater percentage (40%) of National Guard family respondents reported they received less than a month’s notice for their most recent activation, compared to 27% of Reserve family respondents. Further, a third (30%) of activated National Guard family respondents reported their activation was extended. Activation is often stressful for a family under normal conditions; however, extended activations during COVID-19, coupled with virus exposure concerns, school and child care closures, civil unrest, and other events of 2020, may have intensified the stress of mobilizations in 2020. In fact, the average stress levels for National Guard service members who were activated during COVID-19 were higher than those who were not.

The overwhelming majority of National Guard (85%) and Reserve (89%) service member respondents reported they are employed either full- or part-time. Although the Uniformed Services Employment and Reemployment Rights Act (USERRA)⁴ protects uniformed service members from retaliation or discrimination in their employment and their right to re-employment after their service, many of these respondents reported negative employment impacts. While most (68% of National Guard and 58% of Reserve service member respondents) reported no negative employment consequences of activation, nearly a quarter (23%) of National Guard and a third (34%) of Reserve service



*Have you ever experienced negative employment consequences after returning from activation/mobilization?

“I got laid off from my job because I had three consecutive deployments with about 4-6 months interval between them and had exhausted my five year military leave allowance.” — Army Reserve Service Member

member respondents reported they had faced some sort of negative consequences with their civilian employer after returning from an activation. Examples of negative consequences included the loss of a job, promotion, or training opportunities, as well as involuntarily reduced hours and/or pay. Perhaps consequently, one in five (21%) National Guard and one in four (27%) Reserve service member respondents reported their military affiliation has prevented them from receiving a promotion in their civilian job.

Increased activations, deployment and training extensions, and potential consequences to civilian employment as a result of activations has the potential to impact recruitment and retention. Like their active-duty counterparts, among the top five reasons for leaving military service as cited by National Guard family respondents were “concerns about the impact of military service on family” (26%), “insufficient time with family” (22%), and “too many deployments/operational tempo too high” (22%). While most National Guard and Reserve family respondents reported they would recommend service to a young person, the percentage who would recommend service has decreased for both groups since 2019 (71% to 63% among National Guard family respondents, and 75% to 71% among Reserve family respondents). These responses could indicate a future challenge to recruitment and retention for National Guard and Reserves.

RECOMMENDATIONS



EMPLOYERS

- Learn about employer rights and responsibilities under the Uniformed Services Employment and Reemployment Rights Act (USERRA).
- Signal support of National Guard and Reserve service member employees by signing the “Statement of Support”⁵ hosted by the DoD’s Employer Support of the Guard and Reserve (ESGR) program.



CONGRESS

- Commission a report on the civilian employment ramifications of activation for National Guard and Reserve members. The report should include an assessment of the extent to which arbitration clauses in employee contracts undercut USERRA protections.*



MILITARY

- Provide continuous information to National Guard and Reserve members regarding their employment-related rights, and how to seek redress if they feel those rights have been violated.

LIMITATIONS

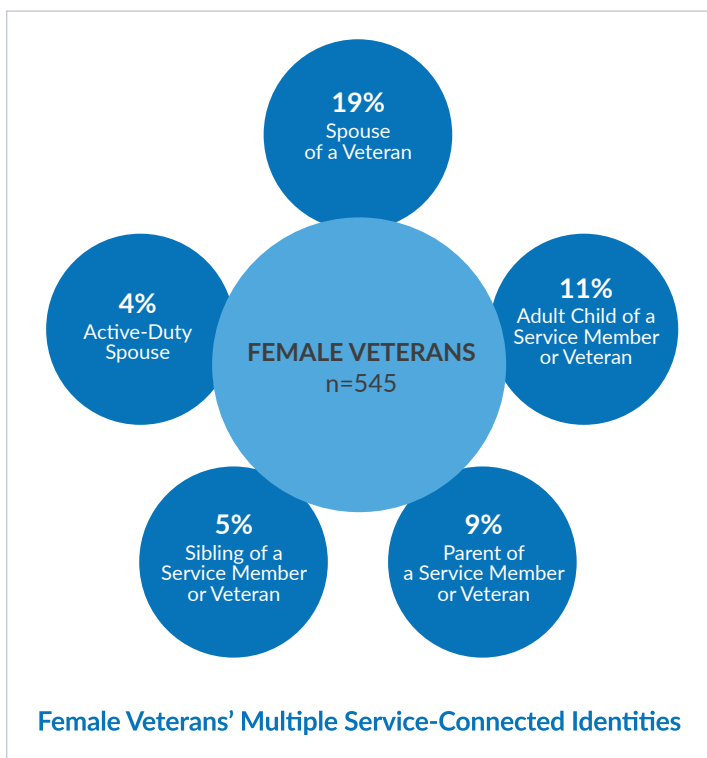
Grouped family respondents (spouses plus service members) are not evenly split for either the National Guard family or the Reserve family group; spouses comprise over half of the National Guard family respondent group, and service members make up over half of the Reserve family respondent group. Changes in the likelihood to recommend military service to a young person from 2019 to 2020 were not tested for statistical significance, and may be influenced by differences in the samples from year to year.

*More information in Recommendations Chapter of Comprehensive Report

Throughout the military life cycle, female service member respondents face greater challenges with balancing military and family life and report more negative experiences associated with service than their male counterparts.

Female service members experience active-duty service differently than their male counterparts. To start, active-duty military family members are less likely to recommend service to their female relatives in the first place,¹ and females who join do so for different reasons than their male colleagues.² Moreover, their experiences, both in uniform and their transition back into civilian life, all follow a somewhat different trajectory than those of their male colleagues. These differences can be a reinforcing cycle and a barrier to increasing gender diversity in the armed forces. Overall, the Military Family Lifestyle Survey (MFLS) has found that female service members and female veteran respondents perceive a poorer command climate, face greater challenges balancing military and family life, and report more negative service-related experiences than their male peers.

“There is never adequate coverage of female service members. We need uniforms, child care, and medical care designed for us ... Also, the height and weight standards for female service members is the largest contributor to eating disorders and one of the highest to stress and separation.” — Female Marine Service Member



MULTIPLE SERVICE-CONNECTED IDENTITIES

Results from the 2020 MFLS showed that a good proportion of respondents whose primary identity is a female veteran (n=545) are also connected to the military in multiple ways; 19% are also the spouse of another veteran, 11% are the adult child of another service member or veteran, and 4% are active-duty spouses. Aside from those identities, 9% are the parents of a service member or veteran, and 5% are siblings of a service member or veteran. For female veterans, the military is a family tradition. For male respondents whose primary identity in the survey is a veteran (n=1367), 6% are the adult child of a service member or veteran, 5% are parents of a service member or veteran, 4% are a sibling of a service member, 3% are spouses of another veteran, and fewer than 1% are active-duty spouses.

“Senior chief made a comment to other males about me. I tried to report it and the chief that was responsible for that **told me that the senior chief didn’t mean anything by it and refused to continue with it.**” — Female Navy Spouse and Veteran

Despite preliminary evidence of a multi-layered service-related identity, females are in fact less likely to have military service recommended to them by active-duty family members. Blue Star Families’ 2018 MFLS found that active-duty service member respondents were more likely to recommend service to their sons versus their daughters (51% versus 39%). Moreover, previous Blue Star Families research suggests that female active-duty service members have different motivations for joining and may not see the military as a viable long-term career, with female active-duty service member respondents indicating their top reason for joining the military was educational benefits (60%), rather than retirement benefits (32%).³ Given the underlying incentives, it may be unsurprising that only 17% of active-duty service members are female.⁴

“I’ve been denied promotion because I had children. I can’t go to military schools while pregnant or postpartum. Therefore, I’m put **at least 18 months behind my male peers** for EACH CHILD.” — Female Army Service Member

FEMALE SERVICE MEMBERS AT WORK

Once female service member respondents start their military careers, their experiences differ from those of their male peers. Female active-duty service member respondents’ perceptions of their unit leadership are less positive than their male peers. For example, fewer female active-duty service member respondents agreed they feel a sense of belonging to their unit/command, compared to their male peers (41% vs. 52%).

While both male and female service member respondents agreed there is gender discrimination in the military, a greater proportion of female service members agreed (68% of female vs. 34% of male) that this is the case. A greater proportion of female active-duty service member respondents than male also reported they experienced gender-based discrimination in their unit or command (48% vs. 4%), in military-connected training opportunities (26% vs. 4%), and in promotion or advancement opportunities (37% vs. 10%). This is consistent with previous reports that female service members often experience gender-based discrimination and are not promoted

“I didn’t expect to separate, but my unit was unwilling to work with me or my spouse to accommodate our schedules for the baby we were expecting. I ended up separating due to pregnancy as a result. **I was a high-achieving and high-performing airman, and my unit did nothing to try to retain me in the service, so separation was a bit unexpected.**” — Female Air Force Veteran, Active-duty Spouse

FEMALE SERVICE MEMBER MILITARY LIFE CYCLE

Service member respondents are less likely to recommend service to daughters than sons (39% vs. 51%; 2018 MFLS).

Female service member respondents are more likely to join for education benefits than retirement benefits (60% vs. 32%), indicating they may not see the military as a long-term career (2018 MFLS).

48% of female service member respondents have experienced gender discrimination in their unit/command.

Female service member respondents reported less belonging to the unit and were less likely to report their unit has good communication and leadership.

13% of female service member respondents experienced sexual harassment in the past year.

37% have experienced gender discrimination in promotion or advancement opportunities;
26% have experienced it in military-connected training.

at the same rates as male service members.⁵ Furthermore, most female active-duty service member respondents (74%) reported they have experienced gender discrimination. Fifty-two percent of female active-duty service members stated they did not report the most recent incident of gender discrimination from a military-connected setting. Only 47% of female service members who experienced military-connected gender discrimination recommend service to a young person.

Experiences often extend past discrimination to acts of hostility, such as sexual harassment and assault, long noted as an issue for female service members.⁶ The DoD has noted that respectful and healthy workplace climates reduce the risk of sexual assault and recognizes the need for command leadership in emphasizing the importance of sexual assault prevention.⁷ Despite efforts to address sexual harassment and assault,⁸ more than one in 10 (13%) female service member respondents indicated experiencing sexual harassment within the past year, and yet very few of female active-duty service member respondents (n=5) reported the most recent incident of sexual harassment.

FEMALE SERVICE MEMBERS AT HOME

Female service members who choose to partner and build families face increasing challenges to their military career, as obligations for family and household compete and are sometimes incompatible with active-duty service. A 2019 DoD report noted more female service members are in dual-military marriages compared to their male peers (20% vs. 4%).⁹ In our survey, 29% of female active-duty service member respondents are in a dual-military marriage, compared to 4% of male active-duty respondents who reported the same. Dual-military marriages can be a challenge to maintain. In fact, two in 10 (19%) female active-duty service member respondents reported one of the reasons they would leave the military, other than medical or administrative discharge, would be because “being in a dual-military family is too difficult,” compared to only 3% of male active-duty service member respondents who reported the same. While the lack of high-quality child care is a widespread issue that challenges military and civilian families alike,¹⁰ female active-duty service member respondents are particularly affected by these difficulties with a third (33%) reporting it is a top concern in military life, compared to only 15% of male service members. Aside from child care issues, female service member respondents also reported spending more hours per day on household and child care responsibilities than their male service member peers (5.5 hours vs. 4.3 hours per day, on average). This is a weekly difference of 8.4 hours.

Female service member respondents reported significantly more hours per day (5.5 vs. 4.3) spent on household responsibilities than their male service member peers.

Nearly 2 in 10 (19%) female service member respondents would leave the military (other than for retirement or medical/administrative discharge) because “being in a dual-military family is too difficult,” compared to 3% of their male peers.

Child care is a top issue for 33% of female service member respondents, compared to only 15% of their male peers.

Female service member respondents are more likely to leave the military before retirement eligibility than their male peers. They are also more likely to cite family-related reasons (vs. career opportunities) when deciding to leave the service.

Transitioning male service member respondents intend to do similar work after the military at twice the rate of their female service member peers (41% vs. 27%).

RETENTION OF FEMALE ACTIVE-DUTY SERVICE MEMBERS

This imbalance of home-life responsibilities, combined with gender discrimination and possible concerns and experiences of sexual harassment and assault in their workplace, are reasons female service members are leaving service before retirement eligibility is reached.¹¹ In the MFLS, there is a greater proportion of female veteran respondents who left service due to medical or administrative discharge (22%) compared to their male peers (15%), and a smaller proportion of retired female veterans (44%), compared to male retired veterans (56%). Additionally, excluding those who left service due to retirement or medical or administrative discharge, more male veteran respondents reported leaving service because of work or education opportunities, such as feeling “more valued and/or able to earn more money in the private sector” (24%), compared to 12% of female veteran respondents who said the same. In contrast, female veteran respondents registered a higher proportion in a cluster of reasons related to challenges in balancing family life with a military career, such as “concerns about the impact of military service on my family” (27%), compared to 16% of male veteran respondents. Finally, excluding those who retired from military service, 4% of veteran respondents said one of the reasons they left was because of gender-based discriminations, and 7% reported sexual harassment or assault as a reason. This percentage jumped to one in 10 (10%) for gender discrimination and 16% for sexual harassment or assault when exclusively looking at the experiences of female veteran respondents.

IMPLICATIONS

Service experiences are complex, and experiences of gender-based discrimination, harassment, assault, and general life challenges often occur alongside positive experiences of meaningful work and camaraderie with peers. Nonetheless, data from the 2020 MFLS showed that challenges such as gender discrimination and sexual harassment and assault affect female active-duty service members disproportionately compared to their male peers. These negative experiences related to military service can have long-term implications on both retention and recruitment of females to active-duty service and run counter to DoD efforts at increasing diversity.¹² In contrast, research shows that a positive experience from reporting an incident leads to decreased emotional distress and a stronger intention of retention.¹³ Additionally, service members take all of these factors into consideration when recommending service to a younger generation, so reducing challenges and eliminating discrimination and harassment may be necessary for a sustainable pipeline of recruiting and retaining a gender diverse military.

Transitioning female service member respondents reported less time to prepare for transition; 46% reported they had less than a year or no preparation at all, compared to 31% of transitioning male service member respondents.

16% of female veteran respondents reported one of the reasons they left military service were sexual harassment or assault, and 10% indicated gender-based discrimination as one of the reasons. 24% of female veteran respondents highlighted military sexual trauma as a key challenge in their transition.

Many female veterans remain closely tied to the military as active-duty spouses; 5% of active-duty spouse respondents were also veterans, and 4% of female veteran respondents were also active-duty spouses.

Female veteran respondents' top transitioning challenges are loss of connection to military community (59%) and loss of a sense of purpose (59%), followed by navigating the VA healthcare system (54%) and finding employment (52%).

Yet, 69% of female veteran respondents would recommend service to a young person.

RECOMMENDATIONS



MILITARY

- Standardize, expedite, simplify, and expand the Career Intermision Program (CIP) application process for service members who are unable to implement their Family Care Plan due to an unexpected extended emergency (such as virtual schooling during a pandemic).*
- Revamp military manpower assumptions to allow for flexible career timelines and adaptable personnel policies, including replacing “up-or-out” requirements to allow families (especially dual military) to balance career aspirations with whole-family success.¹⁴
- Work to improve access to affordable, high-quality child care [see Child Care Recommendations].

*More information in Recommendations Chapter of Comprehensive Report



CONGRESS

- Implement Fort Hood Independent Review Committee recommendations across the Services to alleviate instances of sexual harrasement, assault, and gender discrimination.
- Require military schools and training programs to waive their physical fitness requirements for pregnant and recently pregnant service members looking to enroll.
- Commission a report on the benefits of expanding CIP to account for general family emergencies beyond the failure to implement a Family Care Plan. (This report should assess the impact of such an expansion on individual/family resilience and Total Family Force readiness.)

LIMITATIONS

The 2020 MFLS oversampled both female active-duty service members and female veterans. Females make up 50% of active-duty service member respondents but only 17% of the military.¹⁵ Similarly, 29% of veteran respondents identify as female while only 10% of the overall veteran population is female.¹⁶ While not reflective of the general active-duty and veteran populations, the robust number of female respondents in those categories allows us to analyze and report their responses with greater confidence. Nonetheless, topics such as discrimination are highly sensitive, and these findings are limited to survey respondents’ self-reporting of experiences, which inevitably introduces biases.



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SURVEY**

Healthcare Access

Despite the increased use of telehealth services, active-duty families continue to report barriers to obtaining mental health care.

The COVID-19 pandemic has changed the way the military health system provides health care to its more than three million active-duty service members and family recipients.¹ TRICARE revised its policy on telehealth services, allowing greater access to care during the pandemic,² and the Defense Health Agency (DHA) pivoted to offer telehealth appointments to active-duty service members at military treatment facilities.³ Despite these changes, one-fifth (21%) of active-duty family respondents reported they would like to receive mental health care but do not, indicating that despite this move to increase telehealth accessibility, there are still obstacles to receiving mental health care. The reasons for not receiving care differed between active-duty service member respondents and active-duty spouse respondents, with service member respondents indicating more difficulty getting time off work, concerns about confidentiality, and the potential to harm their career, while spouse respondents expressed difficulty scheduling appointments, finding child care, and difficulty knowing where to get help — help that is sensitive to their needs.

Fewer than one in 10 active-duty family respondents (9%) who receive mental health care have done so through telehealth before COVID-19, though nearly one quarter (23%) indicated receiving services through telehealth since the pandemic began. Additionally, one in four of all active-duty family respondents (26%) indicated a preference for receiving mental health care via telehealth over

Active-Duty Service Member Respondents' Reasons For Not Receiving Care

16% of active-duty service member respondents (n=80) would like to receive care but do not

It is difficult to get time off work for treatment (42%)

I have concerns about confidentiality of treatment (39%)

It is difficult to schedule an appointment (39%)

It would harm my career (35%)

Active-Duty Spouse Respondents Reasons For Not Receiving Care

21% of active-duty spouse respondents (n=556) would like to receive care but do not

It is difficult to schedule an appointment (45%)

It is difficult to find child care (40%)

I do not know where to get help (26%)

Treatment is not sensitive to my needs (24%)

“I’m a flyer. I’d love to start medication, but I can’t afford the DNIF [Duty Not Involving Flying]. Also, it’s impossible to make time for appointments; they increased my clinic’s workload 5x and simultaneously cut our manning.” — Active-Duty Service Member

an in-person visit. For many, access to telehealth has been positive, though for others, telehealth is not a preferable substitute for in-person mental health care. Nearly one-fifth (18%) of active-duty family respondents who prefer in-person services would like to receive mental health care but do not.

28% of active-duty family respondents **have used telehealth** for mental health services during/since COVID-19 (up from 9% prior to COVID-19)

While the majority of active-duty family respondents (61%) do not need/want mental health care and do not have a current mental health diagnosis (64%), nearly one-fourth of active-duty spouse respondents and 16% of active-duty service member respondents indicated having a current diagnosis for generalized anxiety disorder, a rate that is higher than the overall civilian pre-pandemic rate of 3%,⁴ though there are important differences between the groups. The higher levels of anxiety are consistent with civilian reports of increasing anxiety diagnoses amid the COVID-19 pandemic.⁵

Respondents Who Report a Current Diagnosis		
	Active-duty Service Member Respondents	Active-duty Spouse Respondents
Generalized anxiety disorder	16%	23%
Major depressive disorder	7%	9%
PTSD	11%	7%
Sleep disorder	15%	6%

THE IMPORTANCE OF SLEEP

Lack of quality sleep has been shown to have both short-term and lasting effects on mental and physical health.⁶ Despite guidance supporting

the need for sleep among service members⁷ and common knowledge that fatigue can result in deadly accidents,⁸ 43% of active-duty service member respondents indicated they did not get enough sleep to function effectively. Active-duty spouse respondents (37%), veteran respondents (40%), and respondents who are spouses of veterans (39%) reported the same. Disturbances in sleep may be an early symptom of an underlying health concern or can co-occur with a mental health disorder.⁹ For active-duty families, it may also be the result of stressors such as OPTEMPO.¹⁰ Seven in ten (71%) active-duty family respondents indicated their/their spouse’s OPTEMPO was stressful or very stressful for healthy work/family life. Only one-third (33%) of those who reported OPTEMPO was stressful or very stressful for healthy work/family life agreed they got enough sleep to function effectively, compared to 51% of those who said OPTEMPO was an acceptable level of stress or no stress at all for healthy work/family life.

43% of active-duty service member respondents report they **do not get enough sleep to function effectively**



SUICIDAL THOUGHTS AMONG MILITARY FAMILIES

Suicide is the tenth leading cause of death in the United States, and the overall suicide rate has been trending upwards for several decades.¹¹ Despite universal health care providing greater access to diagnosis and treatment of mental health disorders, the military has also noted increased suicides, with just under 500 troops dying by suicide in 2019¹² and a reported 20% increase in suicides during the first three quarters of 2020.¹³ COVID-19 is thought to be adding increased stress to an already strained force,¹⁴ and rates of suicidal ideation during COVID-19 are higher among youth¹⁵ than other civilian populations. To meet both existing need and increasing stress levels from the pandemic, timely access to quality mental health care has been identified as an area of need across the DoD,¹⁶ yet just over half (51%) of active-duty family respondents with one or more children under the age of 18 indicated that they were able to access high-quality mental health care for their child.

Respondents Reporting Suicidal Thoughts During Past 12 Months			
Active-Duty Service Members	Active-Duty Spouses	Active-Duty Children*	Recently Transitioned Veterans**
4%	4%	6%	11%

*6% of active-duty family member respondents with children reported that their child had expressed suicidal thoughts
 ** Separated from service less than 3 years prior to survey fielding

RECOMMENDATIONS



MILITARY/DHA/VA

- Establish a grace period policy, allowing for the short-term continuation of therapy service done via telehealth until new care can be established following a PCS.
- Coordinate with states to ensure all Americans can receive mental health care through telehealth by addressing broadband inequity and, where possible, extending provider licensure across state lines.
- Provide co-located hourly child care at mental health locations and military treatment facilities.



CONGRESS

- Ensure that military dependents are not being unfairly penalized (relative to their civilian peers) for utilizing mental health care, if and when they choose to join the military.*
- Commission a report on the number of military dependents who have been denied entry to the military because of information placed in their medical records when they were minors.

*More information in Recommendations Chapter of Comprehensive Report

LIMITATIONS

The COVID-19 pandemic has resulted in increased need for mental health services throughout the world.¹⁷ Government lockdowns, travel restrictions, extended deployments, and the Stop Movement Order may all have been related to the higher levels of anxiety and suicidal ideation levels reported by respondents. The rate of active-duty family respondents reporting a current diagnosis of generalized anxiety disorder exceeds the rate for the overall civilian population, but several factors can influence diagnosis in these two groups. The active-duty population has access to universal health care, potentially increasing the number of mental health diagnoses, while disorders may go undiagnosed in the civilian population without accessible, affordable health care. Conversely, the active-duty military population differs demographically from their civilian peers and may be less at risk of mental health disorders due to socioeconomic status.¹⁸ Additionally, the sample size for respondents reporting suicidal ideation is very small. Of those surveyed, 130 active-duty family member respondents and 33 recently transitioned veterans (veterans who separated from service in the three years prior to survey fielding) reported suicidal thoughts in the past year. Finally, because respondents must be 18 years of age or older to participate in the survey, data on children's suicidal ideation is reported by a parent or guardian, which is subject to bias.¹⁹

Additionally, it was not possible to determine the age or number of children being referred to by active-duty family respondents when reporting on children's suicidal thoughts.



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Education Access and Quality

Active-duty families with children with special needs experience difficulty accessing educational and health care support services, particularly during relocation; these issues were exacerbated by COVID-19.

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.

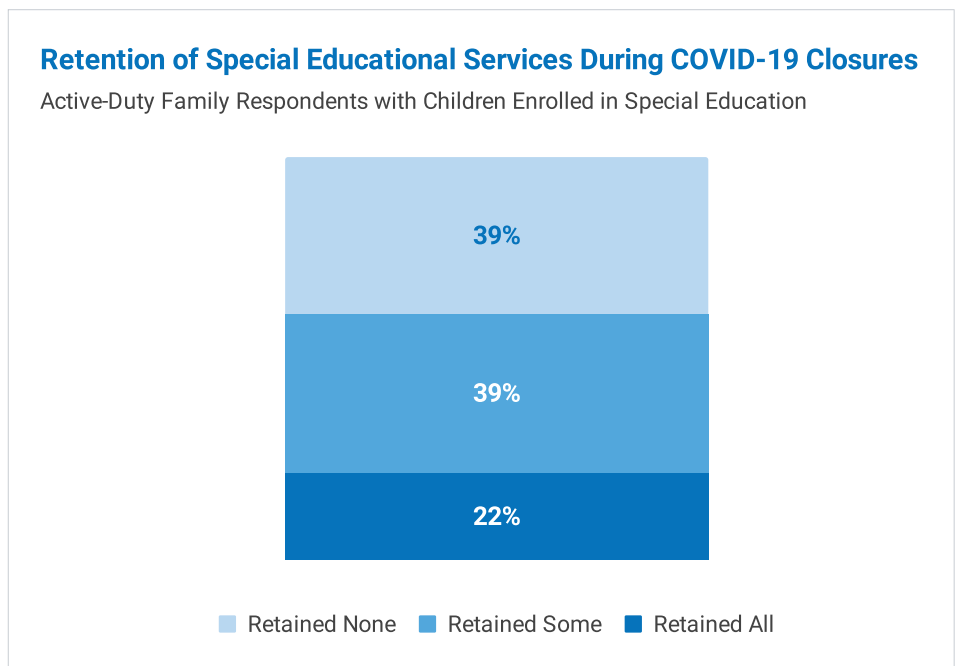
When asked to provide preferences on your next duty station, which of the following factors are/were most important to you and your family?	
Active-Duty Service Member Respondents With Children With Special Needs	Active-Duty Service Member Respondents With Children Without Special Needs
Education options for your child(ren) (64%)	Education options for your child(ren) (63%)
Support for a family member with special needs (59%)	Move to an area where you would like to retire/separate (47%)
Promotion opportunities for service member (43%)	Promotion opportunities for service member (43%)

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),”³ 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.”⁴ 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.⁵ 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.⁶

“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

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,⁷ 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%

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,⁸ 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.

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.⁹



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.

*More information in Recommendations Chapter of Comprehensive Report



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.¹⁰
- 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.

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.

Mirroring the civilian community, nationwide shifts to virtual, hybrid, and homeschool education have had secondary effects on military spouse employment; however, more than half of active-duty family respondents agreed their oldest child is thriving in school.

Dependent children's education continues to be a top issue for active-duty military families, but this year, COVID-19 brought many changes to education across the globe. Active-duty family respondents were asked to identify the modality and curriculum used by their oldest child for both the 2019/2020 and the 2020/2021 school years. Like their civilian counterparts, active-duty military families saw a shift in school modality from in-person to virtual education for their children since March 2020. Virtual education delivery more than tripled from the 2019/2020 school year to the current school year; from just 15% to more than half (51%) of active-duty military respondents with at least one school-aged child.

Education Delivery Modality for Oldest Child
Active-Duty Family Respondents with at least One Child in K-12 Education

	2019/2020	2020/2021
Online/virtual	15%	51%
In-person	63%	28%

While most military children continue to attend public schools in their local communities (71%), there was also an increase in the percentage of active-duty family respondents

choosing to homeschool their children, either through a self-selected or a purchased school curriculum. Only 8% of active-duty family respondents with children eligible for K-12 education reported they homeschooled their oldest child during the 2019-2020 school year, but this number jumped to 13% who homeschooled their oldest child in the 2020-2021 school year. These rates are higher than the general U.S. population before COVID-19, in which only 3% of children were homeschooled.¹ Although homeschooling also increased among civilian families as a direct response to COVID-19,² homeschooling has become a growing practice among military families to offset some of the challenges of military life, such as relocation and gaps in child(ren)'s education.^{3,4,5} Moreover, the COVID-19 pandemic seems to have sparked more families to shift to this education style; 7% of active-duty family respondents whose oldest child was in public or private school moved their child to homeschooling for the 2020-2021 school year. A quarter of currently homeschooling active-duty family respondents (26%) indicated they will homeschool their children until they graduate, but most (63%) intend to transition to traditional school at some point. While the Interstate Compact provides guidance for military families transitioning from state to state, it does not include guidance for schools supporting families transitioning from homeschooling. School administration, educators, and School Liaison Officers (SLOs) should be prepared to support military families who may be moving from homeschooling to a public school setting.

“We chose to homeschool our children because the quality of education was inconsistent from state to state. We will continue to homeschool our children until there is quality education available to them.”

— Air Force Spouse

Despite challenges of the COVID-19 pandemic, active-duty family respondents have a generally favorable impression of their oldest child's private, public, or DoDEA school, rating the school as above average (32%) or excellent (22%), and over half (56%) feel their oldest child is thriving. Since COVID-19, some military family respondents reported they chose to move their oldest child to a homeschool curriculum; however, most (85%) active-duty family respondents' oldest child is enrolled in a public or private school curriculum in the current school year.

The majority of active-duty family respondents with children attending public or private school (68%) were offered a choice of delivery method (e.g., virtual, in-person, or hybrid education) for their children's 2020/2021 school year. While most active-duty family respondents (65%) did not change the education delivery method for their oldest child from public or private schools, among those who did, over half (54%) of the respondents did so because they wanted in-person instruction for their children; one-fifth (21%) reported it was due to a conflict with parent(s)' work schedule, and one-fifth (21%) of respondents were concerned schools were unsafe because of COVID-19.

IMPACTS BEYOND THE CLASSROOM

In addition to changes in education options for their oldest child, COVID-19 school closures have added another obstacle for active-duty spouses seeking employment. Of those active-duty spouse respondents (does not include active-duty spouses who are also active-duty service members) who were working before the COVID-19 pandemic, one-third (30%) said they stopped working at some point during COVID-19, and half (49%) reduced hours during COVID-19 because of an inability to juggle work and child(ren)'s educational support. Further, of those who stopped working during COVID-19 because of a mixture of competing priorities among child care, children's education and health, and work responsibilities, nearly three-fourths (72%) are still unemployed. At the time of our survey, over a third of active-duty spouse respondents (36%) who are not working stated they were not working so they could homeschool their child(ren) or supervise virtual schooling.

RECOMMENDATIONS



STATES

- Identify and share best practices (including applicable provisions) from the Interstate Compact to support families moving from homeschool to public school.
- Collect and share data on prevalence of homeschooling military families attempting to transition into the public school system.
- Identify best practices from a virtual schooling environment and explore feasibility of maintaining some remote learning capabilities to better support military families transitioning out of a school district in the midst of an academic term.



CONGRESS

- Commission a longitudinal study on the effects of the COVID-19 pandemic and virtual schooling on military children's education and military spouse employment – comparing long-term outcomes of military-connected family members to those of their civilian peers.*
- Fully fund the Department of Education's Impact Aid grant program and increase funding provided via DoD Impact Aid to ensure public schools serving military children have adequate resources (i.e., adequate SLOs, military cultural competency, etc.).

LIMITATIONS

This large (n=2,385) sample, while not representative of the active-duty population as a whole, provides compelling insight into the impacts of COVID-19 school closures on military children's education. Families with multiple children enrolled in K-12 education may have different experiences and situations for each child. To simplify analysis, this sample only includes information about the family's oldest K-12 enrolled child. For that reason, it will not be representative of all military children of respondents in K-12 education.

The sudden increase in virtual, online, or distance education, in which the child is learning from home, guided by a teacher and supervised by an adult, may have blurred the definition of homeschool for many families.⁶ Active-duty family respondents whose oldest child is receiving virtual education via a public or private school may consider themselves "homeschooling" even if the child's curriculum is provided by a public, private, or DoDEA entity because they are often responsible for the child's day-to-day educational tasks, particularly with younger children. The unintended interchangeability in the terms "homeschooling" and "online/virtual schooling" may have impacted how respondents answered related child's education questions in this year's MFLS.

*More information in Recommendations Chapter of Comprehensive Report



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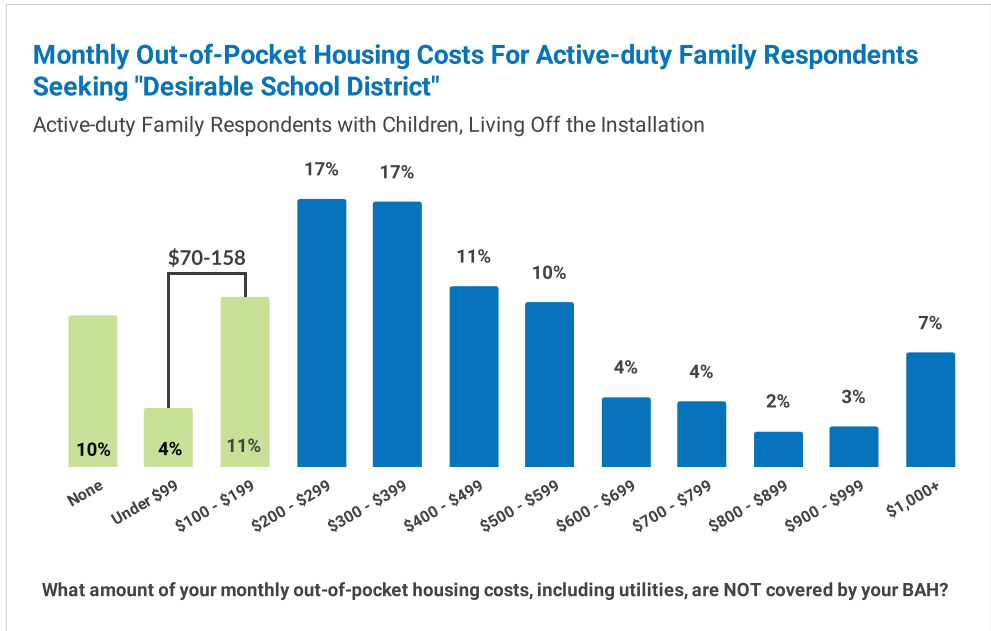
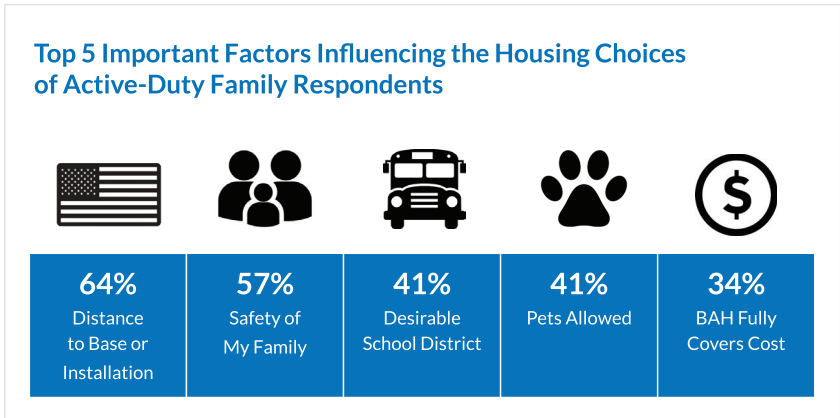
Neighborhood and Built Environment

For military families, finding housing that fulfills both location and family needs can be a costly balancing act.

Military families may not always have a choice over their duty station assignment, but often they are able to choose whether to live on installation or to use their Basic Allowance for Housing (BAH) to live in the local community. Most active-duty family respondents (64%) live off installation and use their BAH to rent (27%) or purchase (37%)

housing. BAH is set at 95% of local market value,¹ leaving military families with 5% of their housing to cover out-of-pocket, which should range from \$70 to \$158 per month in 2021.² Eighty-three percent of active-duty family respondents who live off-installation, however, reported varying levels of out-of-pocket monthly housing costs and only 17% reported all of their monthly housing costs are covered by their BAH. Of those who reported out-of-pocket costs, more than three quarters (77%) reported the costs exceeded the anticipated range (\geq \$200).

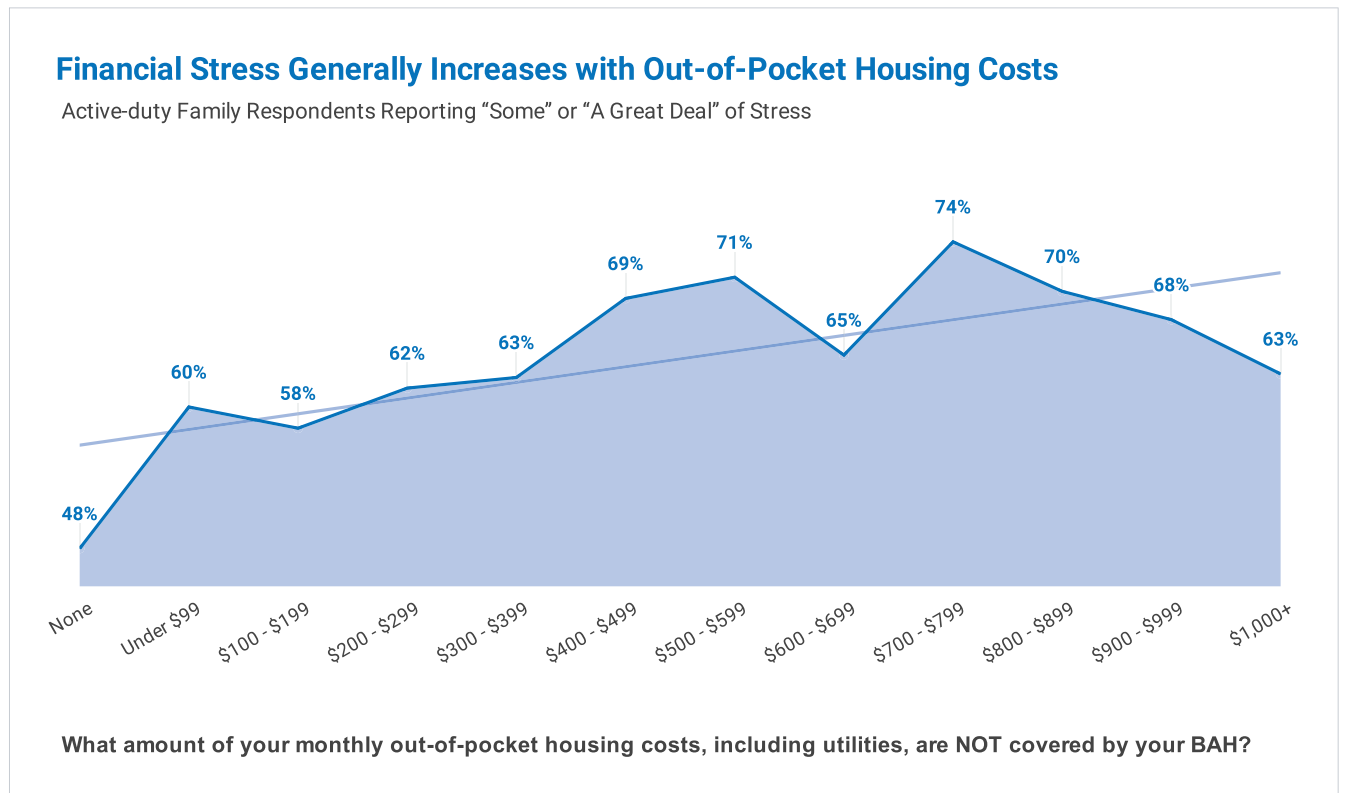
Active-duty families who live in civilian housing balance different factors when choosing housing and often must make trade-offs. For example, families with children, who make up the majority (85%) of active-duty family respondents, often choose between housing that is affordable within their BAH or housing that is in a desirable school district for their children. Of those families who listed “desirable school for children”



as one of the important factors in their housing choice, 76% pay more than \$200 per month. Desirable school districts often come with higher housing costs³ due to zoning restrictions that ban rentals, multifamily housing, and smaller homes like those that are used to determine BAH rates.⁴

Pets are also influential in housing decisions. More than one-third (41%) of active-duty family respondents indicated the ability to have a pet as a deciding factor in their housing choice. While half of civilian rental housing allows pets, only 9% allows pets without any restrictions on size or type.⁵ Pet-friendly housing can also be significantly more expensive,⁶ making it challenging for military families to find affordable, pet-friendly rental housing.

While housing decisions are unique to individual families as a whole, active-duty family respondents reported financial stress more often as their out-of-pocket housing costs increased. Families whose housing expenses are a cost burden may have secondary effects on their ability to maintain other household financial obligations, further adding to financial stress.⁷



RECOMMENDATIONS



CONGRESS

- Restore BAH to 100% of local area rent.*
- Implement and enforce all 18 provisions of the Tenant Bill of Rights.
- Commission a report on the costs associated with, and barriers to, military pet ownership – including implications for PCS moves and leasing housing on or off installation.

*More information in Recommendations Chapter of Comprehensive Report

LIMITATIONS

Our survey was fielded during September-October 2020, and impacts from the COVID-19 pandemic may have created additional constraints on the housing market. Families may have experienced increased out-of-pocket housing costs due to the Stop Movement Order restricting PCS moves (e.g., some families were caught with two housing payments).⁸

“Distance to the installation” may have different interpretations, with some families desiring to live farther from the installation, and others preferring to live closer.

Due to small samples in subgroups, especially junior enlisted family members, several respondent categories were grouped together in housing costs analysis. Warrant officer family respondents were not included in the comparison due to small sample size. Out-of-pocket housing costs differ for junior, mid-grade, and senior enlisted service members, but groups were combined due to small sample sizes in junior enlisted ranks. Similar differences were seen across the officer ranks as well.

The maximum expected out-of-pocket housing costs for 2021 is \$158, which falls in the middle of the \$100-\$199 interval. Therefore, respondents who indicated their out-of-pocket housing costs were \$200 or greater were considered to have excessive out-of-pocket housing costs.



**BLUE STAR
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**MILITARY
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SURVEY**

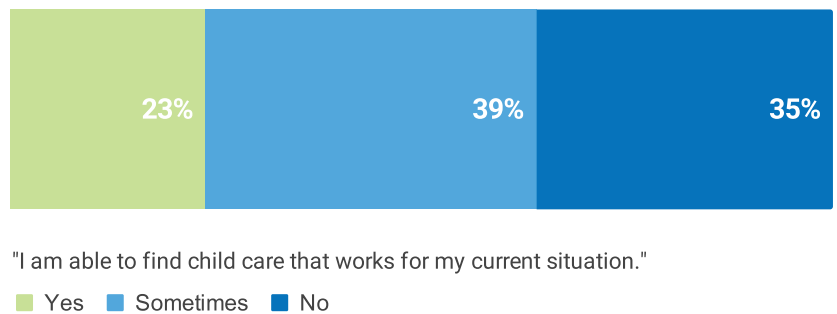
Economic Stability

Work flexibility, alternative care options, and increasing child care affordability are active-duty families' preferred solutions for addressing child care and schooling concerns.

Child care has been, and continues to be, a top issue for a quarter (24%) of military family respondents. Further, it is recognized as a critical issue by the Department of Defense for all military families.^{1,2} The inability to access affordable, quality child care is a barrier to military spouse employment, which also impacts the financial well-being of military families,^{3,4} particularly during this past year with the impact of COVID-19 on schools and child care centers. Active-duty family respondents, however, have noted some possible solutions that can help ease some of the barriers to accessing child care.

Ability to Find Child Care

Active-duty Family Respondents with a Child Care Need

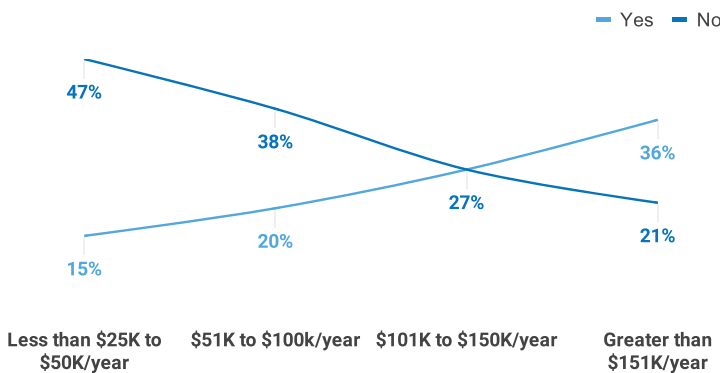


Most active-duty family respondents have children under the age of 18 (80%) at home, and among those, 65% need child care at least some of the time. Of those with a need, 23% reported always being able

to find child care that works for their situation; however, that number falls to 19% for respondents with a special needs child.

Ability to Find Child Care by Household Income

Active-duty Family Respondents with a Child Care Need



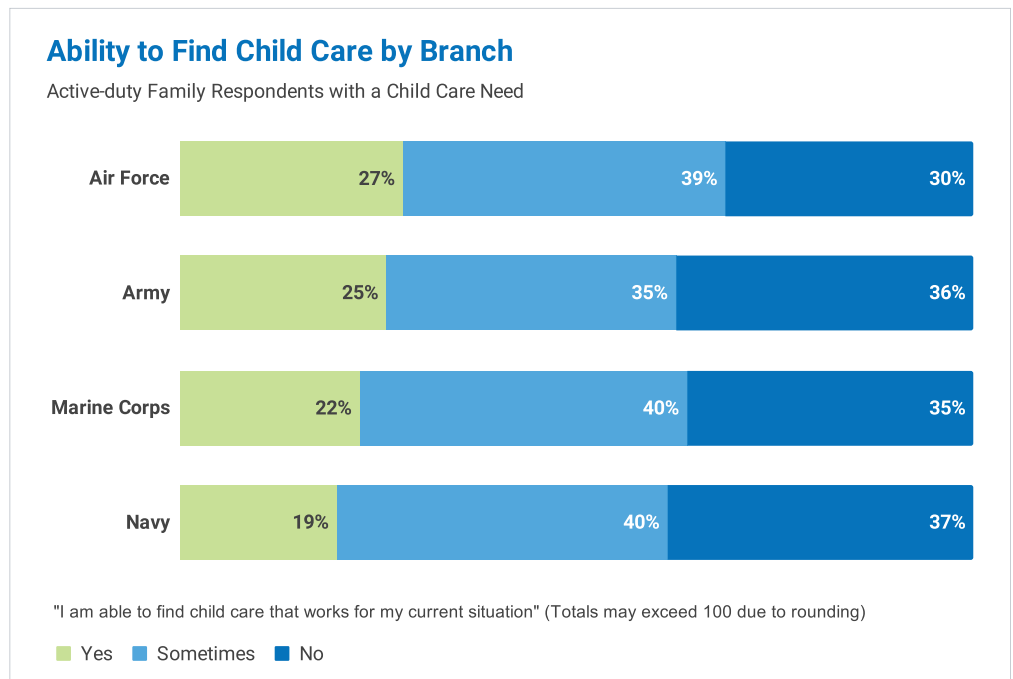
In line with 2019 MFLS findings, child care costs continue to be a concern. Of those active-duty family respondents who reported being financially stressed and have a need for child care, out-of-pocket child care costs are the most commonly reported contributor to financial stress (31%). Unfortunately, having a higher level of income does not solve the whole problem. Although

active-duty military family respondents in lower income brackets had greater difficulty accessing child care, respondents across all income levels reported child care was a need that was often out of their

“[The Child Development Center] (CDC) closed during [the] base lockdown due to COVID, so my husband and I were attempting to both work from home with two young children at home. I moved/started geo-batching, and [the] CDC in [the] new location is not accepting any children, **local child care is not up to the same standard and not open long enough hours.**” — Air Force Spouse

grasp. Child care expenses remain a top barrier to spouse employment, with 34% of active-duty spouse respondents who are not working but need to work stating “child care is too expensive.” Furthermore, child care accessibility and affordability impacts female active-duty service members to a greater degree than their male peers. One-third (33%) of female active-duty service members ranked “lack of child care” among their top five military life issues, compared to only 15% of male active-duty peers. There were also differences by branch, with a greater proportion of respondents associated with the Navy and Marine Corps reporting more difficulty accessing child care, in line with previous reports.^{5,6}

Barriers to child care were further exacerbated during COVID-19 with the closure of child care facilities and schools, which meant families with school-aged children were unable to utilize after school care. Furthermore, a child care system that prioritizes



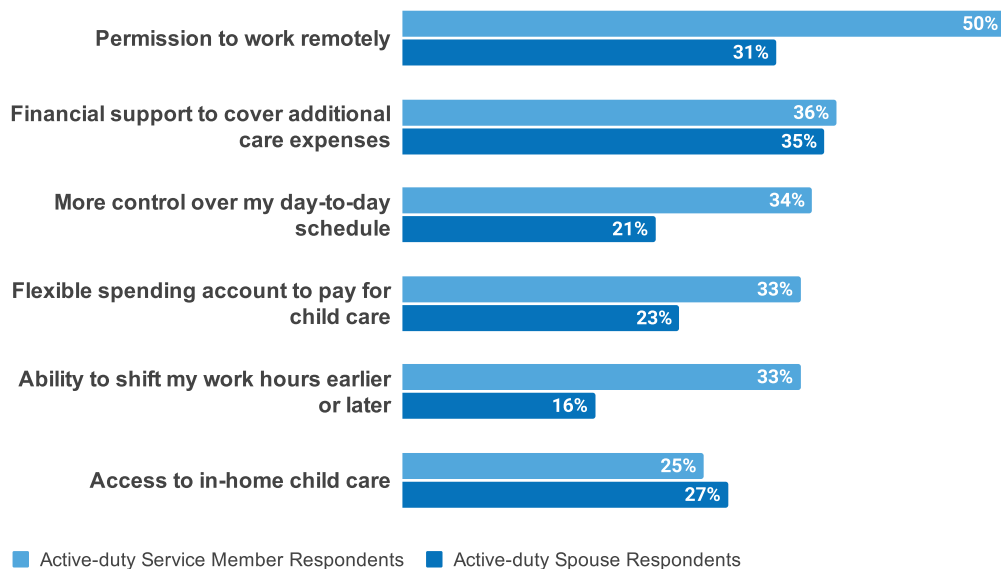
essential workers prevented many, if not most, active-duty families from accessing child care.⁷ Forty-two percent of active-duty spouse respondents who were working prior to the pandemic reported they had stopped working at some point during COVID-19, and 49% reported they had reduced their work hours. Over a quarter (29%) of active-duty spouse respondents who had stopped working since COVID-19 began cited they “did not have child care” as one of the reasons. Lack of child care was also a reason for 37% of spouses who reduced their work hours during COVID-19.

Limited child care access also impacted families with school-aged children. Inability to juggle work and children’s educational support was a primary reason cited by 30% of those who stopped working and half (49%) of those who reduced their work hours. Of active-duty family respondents who experienced challenges with child care during COVID-19 and have children eligible for K-12 education, 16% reported the inability of the child care facility to support their child(ren)’s virtual school learning as a challenge. Like their civilian peers,⁸ the COVID-19 pandemic challenged many active-duty spouses’ ability to balance employment and children.

“Ability for my active-duty member to reliably be home to assist. This is something technically supported by the command but is **difficult to count on in practice.**” — Air Force Spouse

Preferred Solutions to Alleviate Schooling and Child Care Difficulties

Active-duty Service Member and Spouse Respondents



Active-duty family respondents, however, noted potential solutions for alleviating current schooling and child care issues, although solutions from active-duty spouse respondents differed from service members' solutions. Amongst the top proposed solutions were work flexibility, child care flexibility, and increasing affordability. Predictable service member schedules also

made it easier to find child care that would work for the family's situation. Active-duty family respondents who agreed their service member's schedule was predictable had fewer challenges accessing child care during COVID-19 than those who disagreed (53% versus 36%). Work predictability, flexibility, and child care affordability would alleviate both service members' and active-duty spouses' challenges in balancing work and family responsibilities.

RECOMMENDATIONS



CONGRESS

- Commission a report on the demand for various child care options among military families and assess the pros/cons of requiring families to first seek care at their local CDC before being authorized to use Military Child Care in Your Neighborhood (MCCYN) fee assistance.*
- Enhance and expand access to fee assistance programs (e.g., to military families who wish to enroll their child in a child care facility that is state licensed, even if it is not nationally accredited).



CONGRESS AND MILITARY

- Enable innovative public-private partnerships (e.g., commercial leasing and/or purchasing child care slots at local civilian child care providers) as recommended by Weber and Grobe.⁹
- Allow service members flexible work options such as telework, control over day-to-day schedules, and the ability to shift work hours as able.



MILITARY

- Implement Dependent Care Flexible Spending Accounts (DCFSA) to allow service members to use pre-tax dollars to pay for child care, as recommended by the Military Officers Association of America and the National Military Family Association.

LIMITATIONS

While not representative of the active-duty population as a whole, this large sample of active-duty family respondents who have children under 18 living at home and indicated they need child care (n=1,950) provides compelling insight into the impacts of COVID-19 on child care and, in particular, impacts of child care challenges for families with children who have special needs as well as possible solutions to help alleviate those challenges. In answer to the prompt “I am able to find childcare for my current situation” respondents were able to select “Yes,” “Sometimes,” “No,” or “Other.” “Other” responses were excluded from graphs. As a result, the sum of the individual response categories does not equal 100%.

*More information in Recommendations Chapter of Comprehensive Report

Some degree of food insecurity was found in all enlisted ranks, beyond junior enlisted families, and is intensified in families with a spouse who needs or wants to work but is not employed.

Food security – the ready availability of nutritionally adequate and safe foods¹ – is essential for good health. However, 11% of Americans were food insecure at some point during 2019,² and as many as one in five reported food insecurity six months into the COVID-19 pandemic.³ Despite the generally steady income of military service, 14% of enlisted active-duty family respondents reported food insecurity (low or very low food security) in the 12 months preceding the September-October 2020 MFLS fielding.

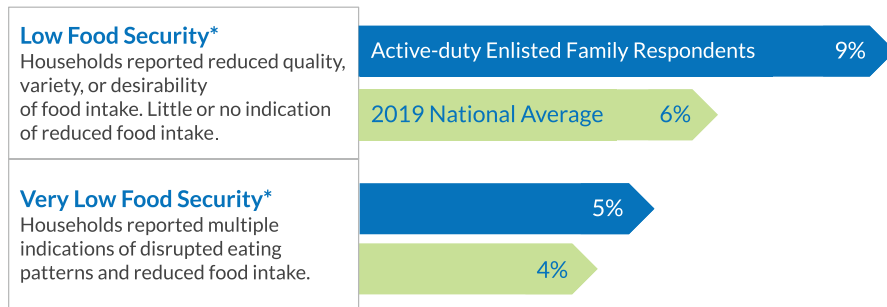
14% of enlisted active-duty family respondents reported low or very low food security in the previous year.

Food insecurity is a complex issue, and low income levels are not the sole risk factor.⁴ While a greater proportion of junior enlisted (E1-E4) family respondents reported food insecurity (29%), this issue was not limited to junior enlisted ranks. Lower education level, lack of homeownership, lack of savings/emergency funds,

income changes, poor health status, and social isolation are all factors that can influence food security.⁵ While military spouses are generally more highly educated than their civilian counterparts,^{6,7,8} high unemployment rates among military spouses,⁹ child care costs, student loans, and high out-of-pocket housing and relocation costs can contribute to military families' financial instability.¹⁰ This issue is particularly apparent among

Active-duty Enlisted Family Respondents' Food Insecurity Rates

Active-duty enlisted family respondents who reported low or very low food insecurity during the twelve months preceding survey fielding



*Adapted from USDA Economic Research Service

active-duty enlisted spouse respondents who are unemployed but need or want to work; 20% reported low or very low food security, compared to the 10% among active-duty enlisted spouses who are working (both full time and part time).

To meet their needs, military families have made use of charitable food assistance; 5% of active-duty spouses reported using a food pantry in the previous 12 months.¹¹ In line with existing data that show the use of charitable food assistance is higher for active-duty families with a spouse who is unemployed (7%) or not in the labor force (6%), compared to families with employed spouses (4%),¹² the 2020 MFLS also

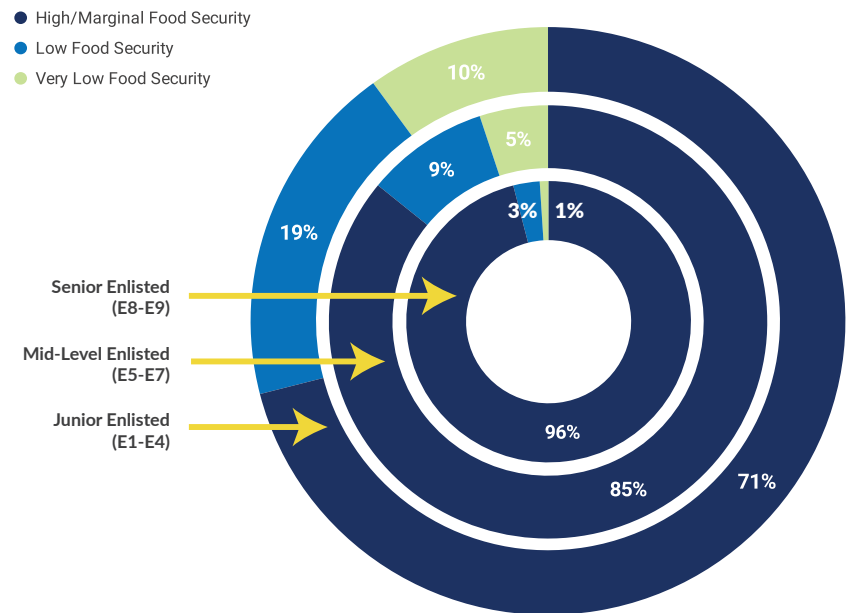
shows higher frequencies of food insecurity in active-duty spouse respondents who were not employed but need or want to work. Military families may turn to charitable food assistance due to concern about the potential impact to their careers if they seek assistance through their chain of command¹³ or are unaware of existing military resources,¹⁴ whereas food pantries may be more visible as they operate on or near every military base in the U.S.¹⁵

Those who seek assistance, however, often do not qualify for federal programs such as the Supplemental Nutrition Assistance Program (SNAP) due to their Basic Allowance for Housing (BAH) being included as part of their income calculation.¹⁶

While 14% of active-duty enlisted family respondents reported some level of food insecurity in the past year, only 2% of active-duty enlisted family respondents reported utilizing SNAP benefits within the 12

Level of Food Security By Enlisted Rank

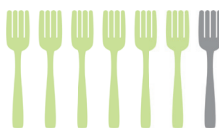
Active-duty Enlisted Family Respondents' Food Security Levels by Rank Grouping



months preceding the 2020 MFLS fielding. BAH allotment is included as income in SNAP eligibility determination, even if the service member's housing allotment is diverted to military housing and is not included in their paycheck to spend as their family needs.

Food insecurity in active-duty families has short-and long-term implications on overall mission readiness. Service members who are not able to maintain appropriate nutrition levels have an increased risk for stress, fatigue, and impaired ability to perform their duties in the short term, with more serious health complications possible in the long term.¹⁷ Financial readiness, including food security, is a critical component of mission readiness. Service members preoccupied with financial and food security concerns are less able to focus on mission readiness. Children from food-insecure households have higher risks of health and development problems,¹⁸ impacting both the currently-serving family as well as the

14%



or 1 in 7 Active-Duty Enlisted Family Respondents Reported Low or Very Low Food Security in the Past 12 Months

10% of enlisted active-duty spouse respondents who are employed are food insecure (with low or very low food security), compared to 20% who are not working but need or want to work.

“My wife can barely work, due to people not traveling [due to COVID-19]. Because of that, our finances have been so much tighter, including food budgets. **We don’t qualify for food assistance by the state because they count the BAH into our income.**” – E4 Active-duty Service Member

children who may be potential future service candidates, as new service members are increasingly drawn from military and veteran families.¹⁹

RECOMMENDATIONS

Address child care, housing, and spouse employment as upstream prevention.



CONGRESS

- Support the inclusion of the Military Family Basic Needs Allowance provision in the FY22 NDAA to provide assistance to meet basic needs for military families living at or below 130% of the federal poverty line.
- Support legislation to exclude Basic Allowance for Housing (BAH) as counted income for the determination of eligibility and benefits for all federal nutrition assistance programs.*



MILITARY

- Create a Military Family Food Insecurity Task Force that includes stakeholders from military service and anti-hunger organizations to make recommendations for steps to address this issue.

*More information in Recommendations Chapter of Comprehensive Report

LIMITATIONS

Junior enlisted family respondents to the 2020 MFLS included active-duty service members and active-duty spouses in ranks E1-E4 (n=279), while mid-grade enlisted included ranks E5-E7 (n=1,945), and senior enlisted included E8-E9 (n=361). The sample of enlisted active-duty family respondents we are able to include in our food security calculations is 1,757 respondents. Forty-two percent of married women in the U.S. have a four-year degree or higher,²⁰ while 50% of active-duty spouses have a four-year degree or higher.²¹ Forty-six percent of this sample of enlisted active-duty service member spouses and 88% of officer active-duty service member spouses have a four-year degree or higher.

The long-term impacts of COVID-19 on military family food insecurity are unknown. While some active-duty military families may have been shielded from some pandemic financial impacts due to maintaining at least one stable income, the number of spouses who became unemployed or walked away from the workforce to manage family obligations may lead to long-term impacts on family financial security.

The survey was fielded very shortly after the termination of pandemic unemployment benefits, which may have resulted in lower levels of reported food insecurity than if the survey had been fielded even a few weeks later. The social security tax deferral was enacted at the beginning of survey fielding and may have impacted respondents’ reporting of food insecurity as well. The extension of summer food programs²² to allow for all children to receive meals, regardless of qualification requirements, has likely assisted many families with food needs that otherwise may not have been met. Additionally, respondents may have equated receipt of these meals as having received assistance from a food pantry.

Despite military spouse hiring initiatives, military spouses still perceive employers as reluctant to hire and promote them; they identify work schedule flexibility, hiring through corporate employers with multiple locations, and reasonable accommodations from commands for service members to maintain work-life balance as potential solutions.

Spouse employment has been identified as one of the top concerns for active-duty families since the inception of the Blue Star Families annual Military Family Lifestyle Survey (aMFLS) in 2009. Challenges to military spouse employment remain the top contributor to financial stress for military families, and COVID-19 impacts, including limited child care availability, school closures, and the shift to hybrid/online learning, have further exacerbated existing employment barriers. This year, more than half (52%) of active-duty spouse respondents and a third (31%) of active-duty service member respondents listed military spouse employment as a top issue they are concerned about.

While nearly half of active-duty military spouse respondents are employed either full-time (30%) or part-time (17%), 35% reported they are not employed but need or want employment. Despite multiple efforts over the past decade, the current unemployment rate of our military spouse respondents is nearly seven times the rate of similar civilian peers (20% vs. 3%)¹ and has not appreciably improved since 2012.^{2,3} While active-duty spouse respondents of color are employed (both full-time and part-time) at similar rates as their white, non-Hispanic peers (46% vs. 47%, respectively), a higher proportion of respondents of color who are not employed reported they need or want paid employment. Forty-three percent of spouses of color reported they are not working but need or want paid employment, compared to 32% of white, non-Hispanic spouses. Further, the unemployment rate for spouse respondents of color (27%) is much higher than that of white, non-Hispanic respondents (17%). These

trends align with the DoD research finding that military spouses of color are unemployed at significantly higher rates than their white peers.⁴

Active-duty spouse respondents who are not in the labor force most often reported they are not working because of the difficulty of balancing household and work obligations, such as

Top 5 Reasons for Not Working Active-duty Spouse Respondents Who Need or Want to Work	
I homeschool/supervise virtual education for my child(ren)	35%
Child care is too expensive	34%
My service member's daily work schedule is too unpredictable	33%
My service member's daily work schedule is too long, making it too difficult for me to balance work and home demands	30%
I am recovering from a PCS move	22%

homeschooling or supervising children's education (35%), or that their service member's day-to-day work schedule is too unpredictable (33%) or too long to balance work and home demands (30%). An additional but related barrier is the cost of child care (34%), which may quickly overwhelm a spouse's take-home

pay, particularly if they are underemployed, resulting in a situation in which active-duty spouses can't afford to work. The lack of affordable, available child care is not new nor unique to active-duty families,⁵ but it is exacerbated by families' frequent relocation, which may disrupt both the spouse's employment and existing child care arrangements. Active-duty families' relocation and separation from extended family and friends may also remove the option for active-duty families to depend on relatives for care, as 26% of civilian families with children ages 3-5 in non-parental care do.⁶ Child care costs have been consistently cited as a barrier to spouse employment since the initial Military Family Lifestyle Survey.⁷

Spouses who seek work often perceive reluctance from employers. More than half of active-duty spouse respondents (51%) agreed their military affiliation prevented them from receiving a promotion at some point in their career, compared to only 16% of veterans (excluding veterans who were also active-duty-spouses). Active-duty spouse respondents were the least likely to disclose their military affiliation in an interview compared to other respondent groups; 23% of spouse respondents were "not at all likely" to disclose their affiliation, compared to 3% of veteran respondents. In an open-ended question, half of spouse respondents who had disclosed their military affiliation in an interview reported the employer expressed concerns about their ability to stay at the position long-term.

"I was explicitly told (when I was told that I had been passed over) that 'we see a future for you here, but not until you know for sure if you will stay in the area for more than a year. **Come back when your husband leaves the service.**'" — Army Spouse

While most employed spouse respondents reported being satisfied with their work, fewer than half (42%) are satisfied with their ability to advance their vocational goals in their current role. Employed military spouses may be gaining financially from their employment, but they may be missing other benefits often associated with employment, such as a sense of purpose and well-being.⁸ Furthermore, two-thirds of employed active-duty spouse respondents (67%) reported they are underemployed in some way, indicating their current employment does not match their desires, education, or experience.

EMPLOYMENT AND PERMANENT CHANGE OF STATION (PCS)

High mobility due to frequent moves has been a well-documented barrier to employment for active-duty spouses.^{9,10} The unemployment rate rises for respondents who recently experienced a PCS, compared to those who have not (31% vs. 16%), and only 18% of active-duty spouse respondents reported they were able to retain their employment through a PCS move. Relocation is such a barrier to employment that many families choose to live apart rather than follow their service member to a new duty station. Nearly a quarter (23%) of active-duty family respondents had chosen to geo-bach (or live separately voluntarily) in the last five years, and among those who did, the most common reason given was for the civilian spouse's career (41%). Overall, spouse employment opportunities weigh heavily in families' decision-making regarding duty station preferences and considering whether to leave military service. Nearly half (42%)

of all active-duty service member respondents reported spouse career opportunities are an important factor in their preferences for a new duty station, and nearly one in five (18%) active-duty service member respondents reported civilian spouse employment concerns as one of the prime reasons for potentially choosing to leave military service.

42% of all active-duty service members reported “spouse career opportunities” are a factor in their preferences for a new duty station; 18% reported “spouse employment concerns” **as a reason they would leave military service**

IMPACTS OF COVID-19

COVID-19 severely impacted active-duty spouse respondents’ ability to work and retain employment. Since March 2020, 42% of military spouse respondents who had been working prior to the pandemic reported they had stopped working at some point during it, with layoffs and furloughs as the top reported cause. Most (68%) of those who stopped work remained unemployed as of survey fielding (September–October 2020). The primary reasons cited for loss of jobs and reduction of work hours among active-duty spouse respondents after March 2020 included fear of COVID-19 exposure for themselves or their children, layoffs or furloughs, difficulty juggling work and children’s educational supports, lack of child care options, and employers who were unwilling or unable to support flexible work options or remote work.

Furthermore, the impact of COVID-19 on employment may be disproportionately experienced by those in a lower income bracket. Our preliminary finding showed that, like their civilian peers, a higher proportion of active-duty military spouse respondents with an income of \$29,000 or less in 2019 had to reduce their work hours (51%) or stop working altogether (42%) during COVID-19, compared to those who earned more than \$29,000 in 2019. Moreover, 71% of those respondents earning less than \$29,000 who had stopped working after March 2020 continued to be unemployed during the time of our survey fielding.

These exploratory results on the pandemic’s impact on the employment status of active-duty spouse respondents are troubling as current civilian research shows that low employment wages, paired with expensive or unavailable child care, keep female spouses out of the labor force, as the costs of child care or supervising virtual schooling for children exceed their wages.¹¹

SOLUTIONS

While COVID-19 brought challenges, it has shown many employers the possibility of allowing employees to telework, work remotely, or use flexible work hours to help care for their families.¹² When asked about what best helped active-duty spouses manage child care and virtual education issues during COVID-19, the top two responses were remote work and altering their work hours. These shifts have provided a silver lining for military spouses who would like to retain employment through a PCS. Spouse respondents who were able to retain employment with the same employer through a PCS most commonly cited the ability to work remotely/telework and/or transfer within the same company to another location as key.

Commands also have an opportunity to alleviate another barrier to spouse employment, which was first identified in the 2019 MFLS: service member’s day-to-day job demands.¹³ Sixty-eight percent of employed

active-duty spouse respondents with children at home who felt capable of managing competing home and work demands over the next six months also agreed their service member’s command makes “reasonable accommodations” for the service member to manage household obligations. While these solutions will not eliminate all of the barriers to spouse employment or address underemployment, they may help move the needle.

RECOMMENDATIONS



MILITARY

- Encourage commands to support reasonable accommodations for service members who need to manage home or family obligations.
- Explore opportunities for reducing the number of PCS relocations, especially for short duration assignments (e.g., satellite locations at high density installations¹⁴ and/or remote learning options for certain Professional Military Education courses).
- Continue and expand efforts, such as the Army Marketplace, to provide families more control over when and where they relocate.
- Explore innovative ways to expand military child care capacity (e.g., increase and expand the Military Child Care in Your Neighborhood (MCCYN) fee assistance program, invest in public-private partnerships such as commercial leasing and purchasing “slots” at local providers, and increase on-installation capacity).



EMPLOYERS

- Take steps to ensure military spouses are not inadvertently screened out during the hiring process due to a lack of understanding of military life issues (e.g., educate hiring managers on how to read a military spouse resume, ensure screening algorithms do not penalize military spouses for frequent job moves, etc.).
- Expand opportunities for flexible work, allowing for shifting hours or remote work when possible.



CONGRESS

- Commission a report on employment discrimination against military spouses as a result of their military affiliation.*
- Support a fixed period of federal student loan deferment for military spouses who leave a job to relocate due to military orders.
- Support incentives for employers to make retirement savings plans accessible and portable for military spouses.

*More information in Recommendations Chapter of Comprehensive Report

LIMITATIONS

The unemployment rate is the percentage of active-duty spouses who reported they want or need paid employment and have actively sought employment in the last four weeks at the time of our survey fielding (September-October 2020). The unemployment rate of active-duty spouse respondents (20%) is based on data from the 2020 MFLS, and the comparison unemployment rate (3%) of similar civilian peers in the same time frame (September 2020) included a population of married women between 18 and 45 years of age with children and a four-year degree or higher.¹⁵ Other organizations with an employment focus, such as Hiring Our Heroes, have found unemployment rates as high as 30% among active-duty military spouses.¹⁶

For our analysis, being “underemployed” is operationalized as a respondent reporting at least one type of underemployment situation, such as working fewer hours than desired, overqualification for current position, lower pay level than a previous position, or lower pay level than work experience or education would indicate. Underemployment statistics, therefore, are subject to self-reporting bias. Nonetheless, this concept helps illustrate the mismatch between military spouses’ desire for challenging, meaningful employment that reflects their education and experiences, and many of their employment realities.



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LIFESTYLE
SURVEY**

Recommendations



MILITARY LEADERS

Conduct routine exit interviews to understand service members' motivations for leaving the military; assess this data to determine reasons for leaving among underrepresented communities. [Finding 1]

Discrimination at the unit and installation level negatively impacts the military's readiness, recruitment, and retention. As reported in Finding 1, experiences of discrimination and harassment weigh more heavily on active-duty service member respondents from underrepresented groups, as they consider leaving active-duty service due to:

Gender-based discrimination:

- Female active-duty service member respondents reported they experienced gender-based discrimination in their unit or command (48%), in military-connected training opportunities (26%), and in promotion or advancement opportunities (37%).*
- Other than military retirement or medical/administrative discharge, 12% of female active-duty service member respondents indicated gender discrimination was one of the primary reasons why they would leave the military (compared to 1% of their male peers), and 8% indicated sexual harassment/assault was a reason (compared to 1% of their male peers).
- Excluding those who left due to retirement, 1 in 10 female veteran respondents (10%) reported leaving military service due to gender-based discrimination (compared to fewer than 1% of their male peers).

Racial discrimination:

- Active-duty service member respondents of color reported they have experienced racial discrimination in their unit/command (26%), on the base/installation (19%), and in promotion/career advancement opportunities (21%).
- Other than military retirement or medical/administrative discharge, 10% of all active-duty service member respondents of color would consider "racial discrimination" as one of the primary reasons for choosing to leave military service.*



*Statistic not reported in Finding 1 documentation

- Excluding those who left due to retirement, 8% of veteran respondents from communities of color cited racial discrimination as a reason they left the service; the number rises to nearly one in five (18%) for Black veteran respondents.

Sexual orientation-based discrimination:

- While only 4% of active-duty service member respondents in this sample identified as LGBTQ+, more than one-third (37%) of all active-duty service member respondents agreed there is sexual orientation-based discrimination against LGBTQ+ people in the military.

The DoD Board on Diversity and Inclusion “believe[s] [that] diversity is the key to innovation,” and that “inclusion is imperative for cohesive teamwork.”¹ Moreover, its report argues it is critical “that the military across all grades reflects and is inclusive of the American people it has sworn to protect and defend.”² For these reasons, the departure of service members from underrepresented communities due to discrimination/harassment undermines DoD’s strategic efforts to increase diversity and inclusion within the ranks. By conducting routine exit interviews, the services can gain a better understanding of the extent to which racism, sexism, and discrimination influence service members’ decision to leave service and take Department-wide action to prevent it.

Expand broadening assignment opportunities to include increased civilian leadership training for a larger percentage of mid-career service members. [Finding 2]

The DoD defines career broadening as “the purposeful expansion of an individual’s capabilities and understanding provided through planned opportunities internal and external to the Department of Defense throughout their career.”³ According to the U.S. Army:

Broadening is accomplished across an officer’s full career through experiences and/or education in different organizational cultures and environments. The intent for broadening is to develop an officer’s capability to see, work, learn and contribute outside each one’s own perspective or individual level of understanding for the betterment of both the individual officer and the institution.⁴

Data from this year’s survey indicates that service members who reported good communication, leadership, and flexibility in their unit also reported a greater sense of belonging to their unit or command, which, in turn, could impact military recruitment, readiness, and retention. Yet, as reported in Finding 2, fewer than half (46%) of active-duty service member respondents agreed that they felt a

sense of belonging to their unit/command. In contrast, 92% of civilian adults felt they belong within their current workplace.⁵ Providing mid-career service members with broadening assignments targeted towards civilian leadership training might prove to be an effective strategy for improving command communication, leadership, and flexibility.



The military has experimented with broadening assignments in the civilian workforce as part of its Training with Industry (TWI) program (DOD Instruction 1322.06). TWI is a one-year work experience training program designed to take mid-level officers and non-commissioned officers from specific military occupational specialties (predominantly acquisition and logistics fields) out of the military environment and expose them to the latest commercial business practices, organizational structures and cultures, technology development processes, and corporate management techniques.⁶ Dozens of companies partner with the services as part of the TWI program, including Amazon, Raytheon, FedEx, Honeywell, Microsoft, Deloitte, IBM, and Samsung.⁷ Each branch of the military, with the exception of the United States Marine Corps (USMC), participates in the TWI program; however, the number of annual participants, types of assignments, and training requirements vary by service.⁸

An evaluation of the Navy's TWI program in 2017 by Melissa Flynn and Amphay Souksavatdy at the Naval Postgraduate School found the return on investment (ROI) of the Navy's program (net benefit of the program divided by the program costs) was 88%. According to the authors: "Additional intangible benefits obtained include meeting capability gaps, meeting Naval Supply Systems Command's objectives, and increasing the professional value of the Supply Corps officers."⁹ Given the apparent success of the TWI program across the services, Blue Star Families recommends that similar broadening assignments be made available to mid-level officers and non-commissioned officers in all services and military occupational specialties.

Diversify the methods of communication that commands use when connecting with the families in their unit. [Finding 3]

Communication from the military unit was also an important issue for military-connected family respondents who experienced deployment or activation from March to October 2020, or who anticipated an upcoming deployment within nine months. Indeed, communication was one of the top reported needs among active-duty spouse respondents – with 79% saying the ability to communicate with a spouse is a top need, and 72% saying emergency contact information for their command/unit is a top need. Moreover, while more than a third (37%) of active-duty spouse respondents indicated their service member’s unit or command “communicates well,” only 33% agreed their command “communicates well during deployment.”

Effective communication requires not only the ability to routinely, succinctly, and clearly convey information, but also an understanding of the most effective vehicle for sharing that information. In this year’s survey, 81% of active-duty spouse respondents shared they prefer receiving information via email, 45% prefer social media, and 41% prefer a phone call or text message.

Unit/command leadership should be cognizant of these media preferences and diversify how they communicate with family members, particularly during deployment.

Empower active-duty families to make informed decisions about their voter registration by providing clear and consistent information about voter registration requirements. [Finding 4]

In 49 states, an eligible citizen must be registered to vote.¹⁰ However, voter registration requirements and deadlines vary by state. In some states, you can register to vote online; in others, you must do so via mail or at an authorized voter registration center. A few states provide automatic voter registration – wherein individuals are automatically registered to vote at their state DMV unless they “opt-out.”¹¹ Some states permit voters to register up to and on Election Day, while others have voter registration deadlines weeks ahead of an election. Finally, some states prohibit individuals with a felony conviction from voting, while others do not.

As reported in Finding 4, active-duty family respondents' voter registration decisions were influenced by a number of factors – the most common being state residency rules and requirements (42%), and the ease or convenience of registering (23%). While the current level of voter registration among military families is high, approximately one in 10 (9%) active-duty family member respondents reported not being registered to vote at the time of the survey. Of those who were not registered, one of the most common reasons involved a lack of knowledge regarding the voter registration process: 12% of active-duty family respondents who were not registered to vote at the time of the survey reported not knowing where to register, and 12% reported not knowing how to complete the voter registration process. Therefore, Blue Star Families recommend that military leaders provide clear and easy access to registration materials and timely voting information for all service members and their families. Examples might include adding voter registration materials to welcome packets, incorporating links to local registration instructions on websites and social media platforms, and sending out reminders regarding upcoming deadlines.



Standardize and expand the Career Intermission Program (CIP), while simplifying and expediting the CIP application process, for service members who are unable to implement their family care plans due to an unexpected extended emergency (such as virtual schooling during a pandemic). [Finding 6]

The Career Intermission Program (CIP) allows service members the ability to transfer out of the active component and into the Individual Ready Reserve for up to three years while retaining full health care coverage and base privileges. Currently, the services require members to apply for CIP six to 12 months in advance of their projected rotation date (PRD) or “soft” end of active obligated service.¹² This lengthy application timeline makes CIP an unworkable option for service members who might otherwise wish to use the program to take a temporary sabbatical in order to tend to their dependents' care during the pandemic or in response to a family emergency. Furthermore, CIP application timelines and accessibility vary by service. The Army, for example, limits the program to 20 officers and 20 enlisted members per calendar year.¹³ No such CIP quotas exist in other services.

Pandemic-related social distancing requirements, travel restrictions, and exposure concerns for extended family members rendered many service members' family care plans inoperable.¹⁴ According to a COVID-19 Military Support Initiative (CMSI) Pain Points Poll, 6% of active-duty family respondents with child care needs reported they were unable to implement their command-approved family care plan.¹⁵ This figure is



worrisome, because, according to Section 4(c) of Department of Defense Instruction Number 1342.19, “service members who fail to produce a family care plan may be subject to disciplinary or administrative action that may result in separation from the Service.”¹⁶

The lack of available dependent care seems to be disproportionately impacting female service members, 20% of whom are in a dual military marriage.¹⁷ According to a CMSI Pain Points Poll, while a small proportion of female service member respondents reported their work had not been impacted by the pandemic, a greater proportion reported the following: They had reduced work hours because of school closures or a lack of child care; their work quality had declined because they were caring for children while working; and they had shifted work hours later or earlier in the day due to a lack of child care.¹⁸ Moreover, in this year's MFLS a higher proportion of female veteran respondents (27%) compared to male veteran respondents (16%) selected a cluster of reasons for leaving the military related to challenges in balancing family life with a military career, such as “concerns about the impact of military service on my family.” Similarly, a third (33%) of female service member respondents in this year's survey reported lack of child care is a top concern in military life – compared to only 15% of their male colleagues.

The lack of dependent care might influence female service members' decision to leave the service. Prior to the pandemic, the Government Accountability Office (GAO) reported women were 28% more likely to separate from service than men – often for issues related to dependent care.¹⁹ This year's survey found that two in 10 (19%) female active-duty service member respondents said that one of the reasons they would leave the military, other than medical or administrative discharge, would be because “being in a dual-military family is too difficult,” compared to only 3% of male active-duty service member respondents who reported the same. Therefore, Blue Star Families recommend that the CIP application process be standardized, expedited, simplified, and expanded for service members who are unable to implement their family care plans due to an unexpected extended emergency. Service members might then choose to enroll in CIP rather than leave the service all together. Such action might thereby reinforce service member retention, especially among female service members. Participation in CIP, however, must not negatively impact a service member's opportunity for promotion, and any additional certifications or work conducted while on intermission should be considered professional development.



CONGRESS

Commission a report on the civilian employment ramifications of activation for National Guard and Reserve members. The report should include an assessment of the extent to which arbitration clauses in employee contracts undercut USERRA protections. [Finding 5]

Under section 4311(a) of the Uniformed Services Employment and Reemployment Rights Act (USERRA) of 1984, it is unlawful for an employer to deny a person initial employment, reemployment, retention in employment, promotion, or any benefit of employment on the basis of that person's membership in a uniformed service or performance of their obligated service.²⁰ Yet, as reported in Finding 5, nearly a quarter (23%) of National Guard and one-third (34%) of Reserve service member respondents to this year's survey reported they had faced negative consequences with their civilian employer after returning from an activation. Examples of negative consequences included the loss of a job, promotion, or training opportunities, as well as involuntary reduced hours and/or pay. Therefore, Blue Star Families recommends that Congress commissions a report on civilian employment retaliation/discrimination against National Guard and Reserve members as a consequence of their activation.

It is possible that employers are not being held accountable for USERRA violations because National Guard and Reserve members are failing to report such violations; failure to report might indicate a lack of knowledge on the part of the National Guard and Reserve members regarding their rights under USERRA, and future research should explore this possibility. Alternatively, it is possible that mandatory arbitration clauses in employee contracts are undercutting USERRA protections. An arbitration clause in an employment contract can force National Guard and Reserve members to forgo their right to prosecute a USERRA violation in court in favor of an arbitration. While arbitrators are supposed to adjudicate cases impartially, there is no remedy if an arbitrator misapplies USERRA, because their decisions can only be appealed in a very narrow set of circumstances.²¹ Unfortunately, mandatory arbitration clauses have become all too common in modern-day employment contracts.²² As such, these binding arbitration agreements might be undercutting USERRA protections.



Ensure that military dependents are not unfairly penalized (relative to their civilian peers) for utilizing mental health care, if and when they choose to join the military. [Finding 7]

A primary barrier to seeking mental health care for military families is concern over the confidentiality of treatment.²³ It was the second most commonly-cited barrier by active-duty service member respondents who would like mental health care but don't currently receive it, as reported in Finding 7. Yet, military children's mental health records, for those who sought mental health care in military treatment facilities, are available to the Army, Navy, and Air Force if those individuals choose to join the service as adults.²⁴

In 2018, *Military Times* reported that a number of military dependents were being dismissed from basic training because of various notations in their minor dependent records.²⁵ Under existing service policies, military children's pre-existing "military dependent" medical records are merged with their nascent "military service" medical records.²⁶ Therefore, it is possible the merging of dependent and military service medical records could deter military families from seeking mental health care for their dependents if the dependent has expressed interest in future military service.

As a result, Blue Star Families recommends that Congress takes proactive steps to prevent military dependents who seek to join the service from being penalized for utilizing mental health care (e.g., by instructing commanders to give liberal consideration to children raised in military families when deciding whether or not to grant waivers allowing them to join the military despite prior mental health conditions).²⁷

Commission a longitudinal study on the effects of the COVID-19 pandemic and virtual schooling military children's education and military spouse employment – comparing long-term outcomes of military-connected family members to those of their civilian peers. [Finding 9]

COVID-19 has had a ubiquitous effect on children's education and employment outcomes throughout the United States. However, it is likely to have longer-lasting effects on military families, who were already experiencing routine disruptions to their children's education and their civilian spouse's employment pre-pandemic.

The average military child moves three times as often as their civilian peers,²⁸ and dependent children's education was one of the top five issues for active-duty military families pre-pandemic.²⁹ Multiple

moves have been associated with educational consequences, such as gaps in learning and difficulty transferring credits and meeting graduation requirements – which might entail repeating classes. The COVID-19 pandemic has exacerbated these transition-related challenges by forcing schools to switch to virtual learning. As reported in Finding 9, virtual education delivery among active-duty families more

than tripled from the 2019/2020 school year to the 2020/2021 school year—from just 15% to more than half (51%) of active-duty family respondents with at least one school-aged child. Some are concerned that the rapid shift to virtual learning has produced emergent learning gaps.³⁰

Homeschooling was a popular practice among active-duty families pre-pandemic, as it enabled them to offset some of the challenges endemic to the military lifestyle, e.g., relocation and gaps in child(ren)'s education. As reported in Finding 9, the COVID-19 pandemic seems to have sparked new families to shift to this education style; 7%



of active-duty family respondents whose oldest child was in public or private school moved their child to homeschooling for the 2020-2021 school year. While a quarter of currently homeschooling active-duty family respondents (26%) indicated they intended to homeschool their children until they graduate, most (63%) intended to transition to traditional school at some point. The Interstate Compact on Educational Opportunity for Military Children, which aims to support military families as they negotiate school transition challenges, does not include guidance for schools supporting military families transitioning from homeschooling to public school. As such, it is possible that military children who are currently being homeschooled, but who plan to return to traditional schooling, might suffer from adverse educational impacts. Therefore, Blue Star Families recommends that Congress commissions a longitudinal study to evaluate the effects of the pandemic on the long-term educational outcomes of military children, relative to their civilian peers.

COVID-19 has also severely impacted active-duty spouse respondents' ability to work and retain employment. Since March 2020, 42% of military spouse respondents who had been working prior to the pandemic reported they had stopped working at some point during it, with layoffs and furloughs as the top reported cause. Most (68%) of those who stopped working remained unemployed as of survey fielding (September–October 2020). As stated in Finding 13, the unemployment rate of military spouse respondents is nearly seven times the rate of similar civilian peers (20% vs. 3%).³¹ For that reason, it is critical that any longitudinal study of the impacts of the COVID-19 pandemic on military families includes an evaluation of military spouse employment outcomes, relative to the civilian workforce.

Restore BAH to 100% of local area rent. [Finding 10]

Starting in 2015, the Basic Allowance for Housing (BAH) was incrementally reduced to 95% of local area rent,³² making it a matter of policy for military families to pay out-of-pocket for quality housing, though they rarely have full control over where they are stationed or when they move. As reported in Finding 10, 83% of active-duty family respondents who live off-installation reported varying levels of out-of-pocket monthly housing costs. Of those who reported out-of-pocket costs, more than three-fourths (77%) reported the costs exceeded the DoD's anticipated range for out-of-pocket costs (\$70 to \$158 per month).³³ By contrast, only 17% of respondents reported all of their monthly housing costs are covered by their BAH. It is worth noting that of those families who listed "desirable school for children" as one of the important factors in their housing choice, 76% reported paying more than \$200 per month in out-of-pocket housing expenses. This figure is in line with research findings that desirable school districts often come with higher housing costs³⁴ due to zoning restrictions that ban rentals, multifamily housing, and smaller homes like those used to determine BAH rates.³⁵

In Blue Star Families' 2019 Military Family Lifestyle Survey, 63% of active-duty family respondents reported they had "some stress" or "a great deal of stress" about their financial situation, and of those financially stressed families, the second most commonly reported contributor to financial stress was out-of-pocket housing costs. In this year's survey, active-duty family respondents reported financial stress more often as their out-of-pocket housing costs increased. As Rep. Susan Davis (D-CA-53) once said: "The military pay system is not designed for junior enlisted members with families in high-cost areas."³⁶ Therefore, Blue Star Families recommends that Congress restores BAH to 100% of local area rent.



Commission a report on the demand for various child care options among military families and assess the pros/cons of requiring families to first seek care at their local child development center (CDC) before being authorized to use Military Child Care in Your Neighborhood (MCCYN) fee assistance. [Finding 11]

According to the DoD, 37.8% of military children are five years old or younger.³⁷ The DoD recognizes that child care is a “workforce issue that directly impacts the efficiency, readiness, retention, and lethality of the Total Force,” which is one of the reasons it is the largest employer-sponsored child care provider in the United States.³⁸ Despite that, challenges obtaining affordable child care in a timely manner continue to have cascading impacts on the readiness, retention, and well-being of military families.



For example, the lack of affordable child care serves as a major barrier to military spouse employment. In this year’s survey, 34% of active-duty spouse respondents who are not working but need to work reported “child care is too expensive.” This finding concurs with the 2019 Survey of Active Duty Spouses, which found that the second most commonly cited reason among active-duty spouses for not seeking employment was “child care is too costly.”³⁹ While Blue Star Families’ data shows that child care affordability was a larger barrier to employment than availability before the pandemic,⁴⁰ COVID-19 exacerbated both. Reports by Child Care Aware of America,⁴¹ the National Association for the Education of Young Children (NAEYC),⁴² and the Center for American Progress (CAP)⁴³ all indicate that the national child care capacity has drastically declined; as of July 2020, 35% of child care centers remained closed.⁴⁴

DoD policies might likewise be hampering military families’ access to affordable child care. Under existing regulations, military families must first seek child care at their local on-post child development center (CDC) before being authorized to use Military Child Care in Your Neighborhood (MCCYN) fee assistance.^{45,46,47,48} However, 64% of active-duty family respondents live off-installation. Thus, this policy creates undue hardship for military families who live off-installation. Blue Star Families recommends that Congress commissions a report on the demand for various child care options among military families and assesses the pros/cons of requiring families to first seek care at their local CDC before being authorized to use MCCYN fee assistance.

Support legislation to exclude BAH as counted income for the determination of eligibility and benefits for all federal nutrition assistance programs. [Finding 12]

Our nation is facing a public health crisis with devastating financial consequences. Thousands of low-income military families are currently struggling to put food on the table. Unfortunately, this is neither an isolated problem nor a novel one. Military families are being served by food pantries and distribution programs on or near every military installation in the United States.⁴⁹

Prior to the pandemic, 7% of military family respondents to the 2018 Military Family Lifestyle Survey reported experiencing food insecurity; 9% sought emergency food assistance through a food bank, food pantry, and/or other charitable organization.⁵⁰ The actual percentage of military families experiencing food insecurity pre-pandemic was likely higher than these numbers suggest. Moreover, the COVID-19 pandemic has aggravated many of the underlying factors of military family food insecurity – including high rates of military spouse un/underemployment, out-of-pocket housing expenses, the limited availability and high costs of child care, etc. As reported in Finding 12, 14% of all enlisted and 29% of junior enlisted (E1-E4) active-duty family respondents reported low or very low food security in the 12 months preceding the 2020 MFLS fielding.

Unfortunately, many of these families are barred from qualifying for the Supplemental Nutrition Assistance Program (SNAP), despite being food insecure. Under current policy, a service member's BAH is treated as income when determining eligibility for SNAP. Meanwhile, housing vouchers for low-income civilians are not treated as income for the purposes of determining SNAP eligibility.⁵¹ Current SNAP eligibility policy (as authorized in the 2018 Farm Bill) thus establishes an unnecessary and harmful barrier to nutrition assistance for struggling military families. Blue Star Families joins other organizations recommending Congress excludes BAH as counted income for the determination of eligibility and benefits for all federal nutrition assistance programs.



Commission a report on employment discrimination against military spouses as a result of their military affiliation. [Finding 13]

Spouse employment has been identified as one of the top concerns for active-duty families since the inception of Blue Star Families' annual Military Family Lifestyle Survey (aMFLS) in 2009. In this year's survey, more than half (52%) of active-duty spouse respondents and a third (31%) of active-duty service member respondents listed military spouse employment as a top issue of concern. While nearly half of active-duty military spouse respondents are employed, either full-time (30%) or part-time (17%), two-thirds of employed active-duty spouse respondents (67%) reported they are underemployed in some way (indicating their current employment does not match their desires, education, or experience). Furthermore, 35% of active-duty spouse respondents reported they are not employed but need or want employment. Despite multiple efforts over the past decade, the unemployment rate of military spouse respondents is nearly seven times the rate of similar civilian peers (20% vs. 3%).⁵²

While the causes of military spouse employment are myriad and complex (including a lack of affordable child care and the unpredictability of service member day-to-day job demands), hiring and promotion discrimination is also a barrier to gainful spouse employment. As reported in Finding 13, more than half of active-duty spouse respondents (51%) agreed their military affiliation prevented them from receiving a promotion at some point in their career, compared to only 16% of veterans. Active-duty spouse respondents were the least likely of all surveyed groups to disclose their military affiliation in an interview: 23% of spouse respondents were "not at all likely" to disclose their affiliation, compared to only 3% of veteran respondents. In an open-ended question, half of spouse respondents who had disclosed their military affiliation in an interview reported the employer expressed concerns about their ability to stay at the position long-term.

In light of these findings, Blue Star Families recommends that Congress commissions a report on employment discrimination against military spouses in the civilian job market. The report should include an assessment of the viability of policy solutions to prevent such discrimination (e.g., expanding USERRA to cover military spouses, identifying military spouses as a protected class, etc.). Moreover, the report should explore potential differential effects across race and gender. This year's survey shows the unemployment rate for military spouse respondents of color (27%) is significantly higher than that of white, non-Hispanic respondents (17%). These trends align with DoD research, which finds that military spouses of color are unemployed at significantly higher rates than their white peers.⁵³ While Blue Star Families is unable to draw causal conclusions from this data, it is possible that military spouses of color (as well as those from other underrepresented groups) might be facing intersectional discrimination (i.e., discrimination as a result of their race, gender, *and* military affiliation).



STATE LEGISLATURES

Enable online school enrollment to enhance the “warm hand-off” between the sending and receiving districts, and to minimize disruptions in special education services.

[Finding 8]

Frequent moves can be jarring for all military children, but the effects are intensified for children with special needs. When military families move, children with special needs may experience disruptions in the special education and support services they receive at their current duty station. Under federal law, schools must provide free appropriate public education (FAPE) through an individualized education plan (IEP) to children with special needs.⁵⁴ Many states, however, have additional special education laws that establish variant criteria around eligibility for special education services.⁵⁵ As such, when a military family moves across state lines their child’s new school must decide if they qualify for special education services under state law. If the child is found eligible, the school will develop a new IEP. Unfortunately, this process is often time-consuming and can cause lengthy disruptions in the child’s special education services.

Despite the Interstate Compact on Educational Opportunity for Military Children having been signed by all 50 states and the District of Columbia, which states “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. To minimize these disruptions, Blue Star Families echoes Partners in PROMISE and the Military Children’s Education Coalition (MCEC) in recommending that school districts enable military families to enroll their special needs child(ren) online (without requiring a physical presence).⁵⁶ Enrolling military students online could start the transfer process before the family arrives, allowing the family and the school to begin the special education needs assessment process earlier and potentially reducing the wait time to re-establish services.⁵⁷ According to Michelle Norman, Executive Director and Co-Founder of Partners in PROMISE, “the idea of allowing the military family to advance enroll with a set of military orders would ensure that the receiving school district would have those supports in place on Day 1. [...] With advance notice of a student’s arrival with their current Individualized Education Program (IEP), the new school district can reach out to the family and the previous school district’s teachers and ensure that they are ready to implement the IEP. It is a win-win for both military families and school districts.”



**BLUE STAR
FAMILIES**

**MILITARY
FAMILY
LIFESTYLE
SURVEY**

Respondents and Methodology

The widespread distribution of the 2020 survey through Blue Star Families’ networks and partners in the military community has allowed it to remain the largest and most comprehensive survey of active-duty service members, veterans, and their families since its inception in 2009.

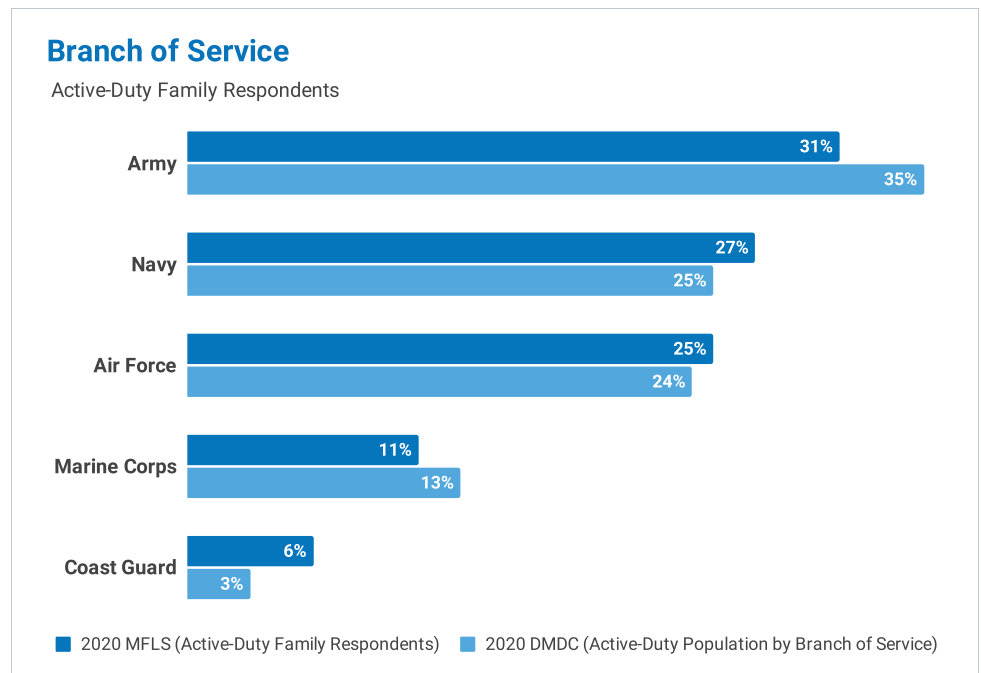
This year’s survey generated 10,926 individual responses, including 6,767 completed responses, yielding a 62%

completion rate. The respondents represent a cross-section of active-duty service members, National Guard and Reserve service members, veterans, and their immediate family members from all branches of service, ranks, and regions – both within the United States and on overseas military installations. While recruitment efforts focused on obtaining a diverse and representative sample, the survey sample differs from the active-duty population in several important ways.

DEFINING MILITARY IDENTITY

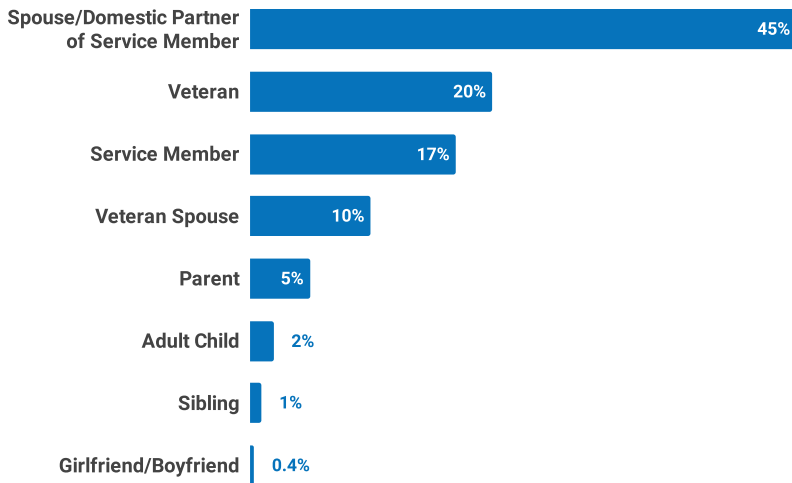
This year’s survey strives to recognize and take into account that many members of the military community have multiple military affiliations, such as a veteran service member who is a current spouse of an active-duty service member. Survey respondents were asked first to identify all their current affiliations with the military. For example, respondents could identify themselves as a “spouse/domestic partner of an active-duty service member,” “National Guard service member,” and/or “veteran/retired service member.” A second question then asked participants to select the primary role that best identifies their current relationship to the military. One of the largest combinations of identities were those respondents who identified both as a veteran/retired service member and as the spouse of a current active-duty service member (2% of all respondents). This primary identity is the perspective each respondent was asked to maintain for the purpose of the survey.

For the purpose of this report, however, “military identity” is defined as the affiliation a respondent chose as one of their (potentially multiple) military affiliations and as their primary identity. As an example, respondents identified in this report as “active-duty spouse respondents” were those participants who



Primary Relationship to Service

All Respondents



selected both “spouse/partner of active-duty service member” in the initial question of all their affiliations and as their primary current identity.

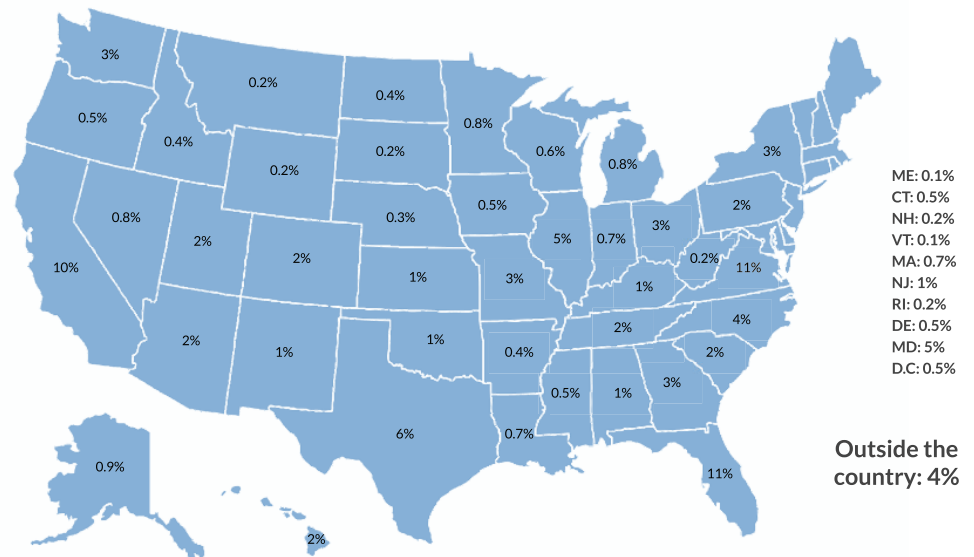
DEMOGRAPHICS OF RESPONDENTS

In this survey, the largest group of respondents primarily identified as a spouse/domestic partner of a service member (including National Guard and Reserve) (45%), followed by a veteran/retired service member (20%), a service member (including National Guard and Reserve, 17%), a spouse/domestic partner

of veteran/retired service member (10%), a parent of a service member/veteran (5%), an adult child of a service member/veteran (2%), a sibling of a service member/veteran (1%), or a girlfriend/boyfriend of a service member/veteran (0.4%). Of all respondents, the single largest age group was aged 35-44 (36%), followed by those who are 25-34 (24%), 45-54 (19%), 55-64 (10%), 65 and older (7%), and 18-24 (3%).

Approximately 96% of all respondents lived within the U.S., and 4% lived outside the country. Within the U.S., the largest groups of respondents lived in Florida (11%), Virginia (11%), California (10%), Texas (6%), and Illinois (5%).

Geographic Location of Respondents



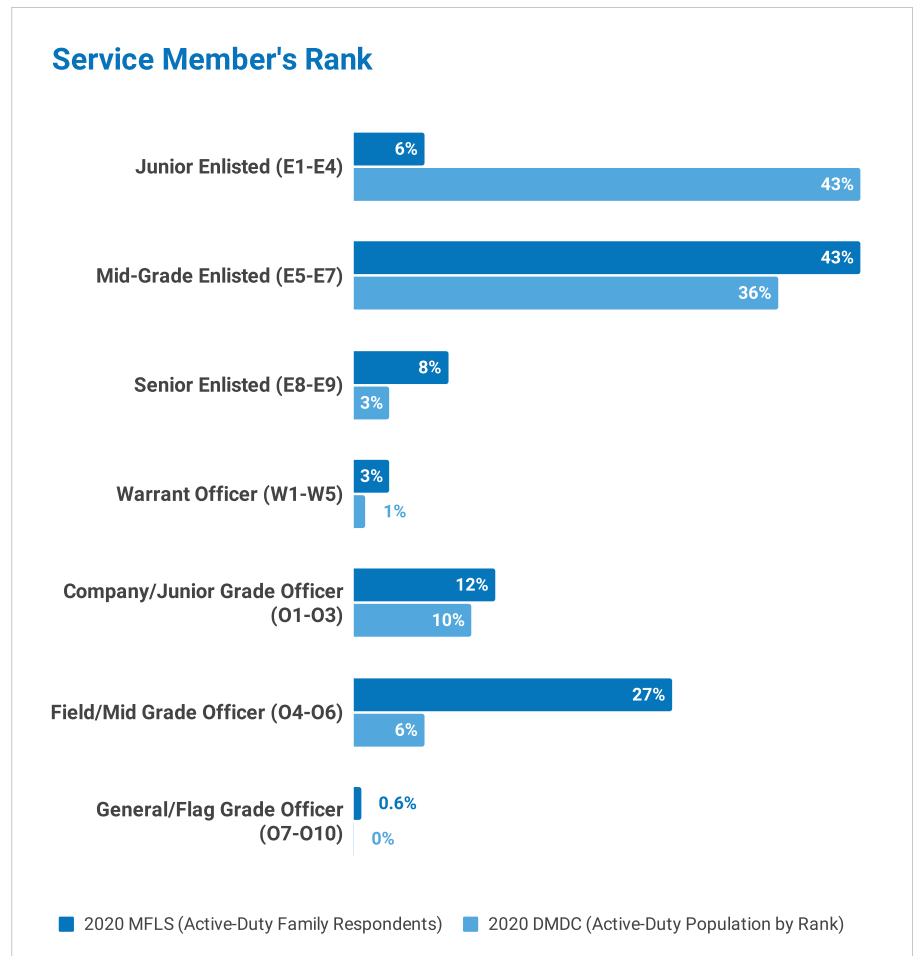
ACTIVE-DUTY FAMILY RESPONDENTS

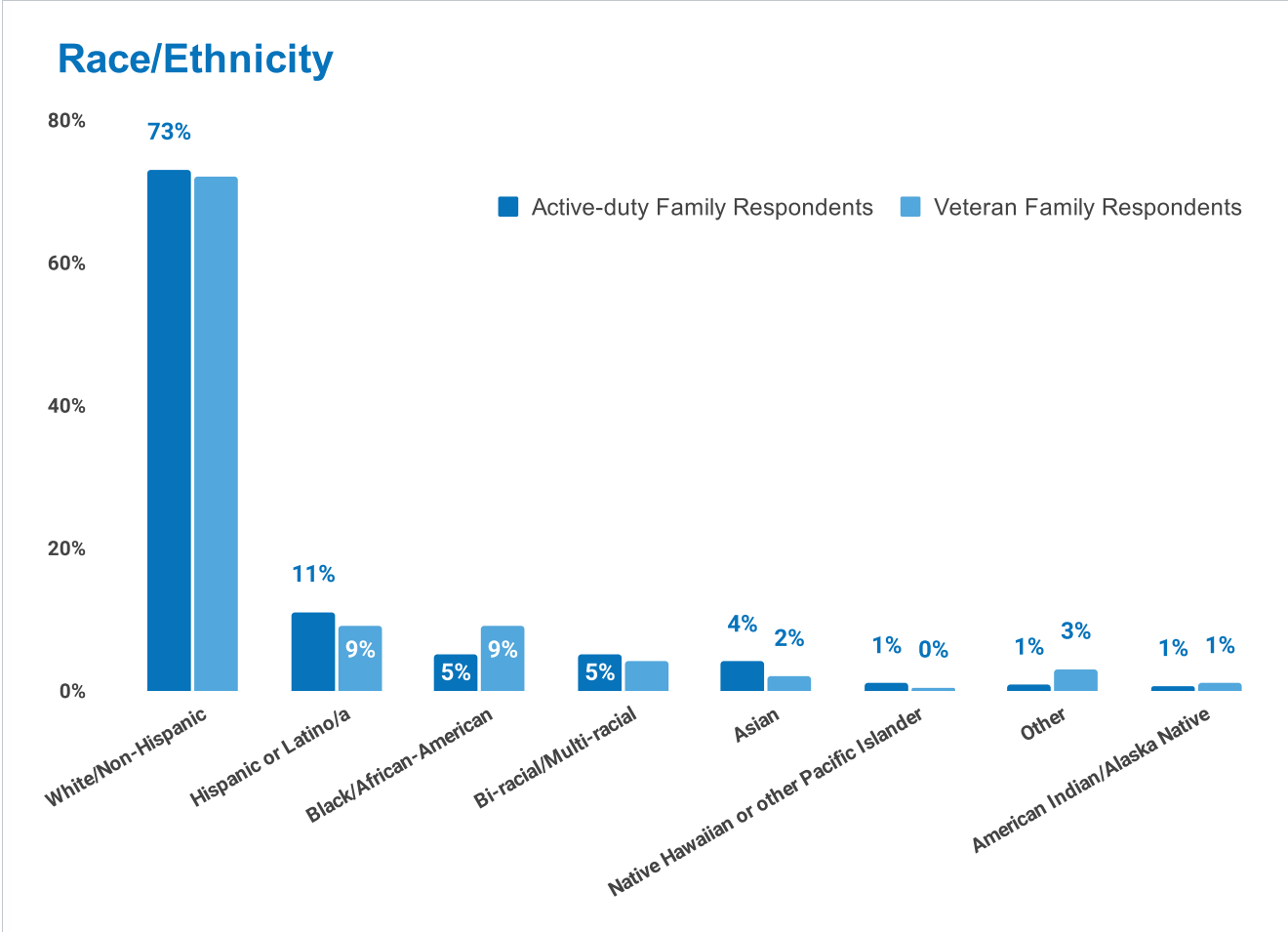
This sample of active-duty family respondents represents a greater percentage of married, older, and senior-ranking respondents than in the active-duty population as a whole. “Active-duty family respondents” in this report include active-duty service member and active-duty spouse respondents.

The sample also obtained a larger proportion of female service members (50%) than is present in the active-duty population (17%).¹ The largest proportion of active-duty family respondents identified themselves as Non-Hispanic whites (73%), followed by Hispanic or Latino/a (11%), Black or African American (5%), biracial or multi-racial (5%), Asian (4%), other (0.8%), and American Indian or Alaska Native (0.6%). Most services were represented at rates within a few percentage points of the active-duty force,² except for the Coast Guard, which was oversampled, and the Army, which was undersampled. Army respondents were sampled at 31% compared to 35% of the total

active-duty force; Air Force respondents were sampled at 25% compared to 24% of the total active-duty force; Marine Corps respondents were sampled at 11% compared to 13% of the total active-duty force; Coast Guard respondents were sampled at 6% compared to 3% of the total active-duty force; and Navy respondents were sampled at 27% compared to 25% of the total active-duty force.

Additionally, the active-duty family respondent sample included a greater proportion of mid-grade enlisted (E5-E7) and field/mid-grade officer (O4-O6) family respondents than is reflected in the military population. The largest group of active-duty family respondents represented were mid-grade enlisted (E5-E7, 43%) followed by field/mid-grade officer ranks (O4-O6, 27%). Company/junior grade officers (O1-O3) represented 12%, senior enlisted (E8-E9) represented 8%, junior enlisted (E1-E4) represented 6%, warrant officers (W1-W5) represented 3%, and general/flag grade officers (O7-O10) were the smallest group at 0.6% of the overall active-duty respondents. Additionally, women were oversampled in both the active-duty service member and veteran/retired service member respondents. Women made up 50% of the active-duty service member respondents and 29% of the veteran/retired service member respondents, significantly higher than the proportion of women in the active-duty service member and veteran population.





MILITARY SERVICE

Among current service member respondents, 73% were serving on active duty, 15% were serving with the Reserve, and 13% were serving with the National Guard. The majority of veteran respondents (56%) reported that they served September 2001 or later.

Since its inception in 2009, this is the eleventh iteration of the Blue Star Families (BSF) annual Military Family Lifestyle Survey. The 2020 survey was designed by BSF in collaboration with Syracuse University's Institute for Veterans and Military Families (IVMF) with extensive input from military family members and advocates, subject matter experts, and policymakers who work with military families. The survey was conducted online with approval from Syracuse University's Institutional Review Board (IRB) and administered using Qualtrics' survey system (Qualtrics, Inc., Provo, UT) from Sep. 8 to Oct. 16, 2020. Survey participation was voluntary, and the information provided was confidential. The survey uses a convenience sampling method.

Respondent recruitment and outreach channels included:

- awareness-building with focus on military families via email distribution from the BSF mailing lists and social media dissemination (e.g., Facebook, Twitter, blog posts, and partner websites); and
- outreach from a myriad of military family, military, and veteran service nonprofits, supportive service and professional organizations.

BSF and partners first provided an explanation of the study's objective (provided to each possible participant in a consent form whether they subsequently completed the survey or not) to minimize potential self-selection bias toward any single focal issue and, thus, mitigating any respondent propensity to participate based upon any specific, issue-based self-interest (e.g., benefits, employment, wellness, etc.). All responses allowed respondents to select "prefer not to answer" on questions with which they felt uncomfortable, and many questions allowed respondents to select all applicable responses.

Second, recruitment and outreach were designed to enhance representation from historically under-represented groups, such as Black and Hispanic/Latino/a respondents, junior enlisted families, and National Guard and Reserve families. During survey fielding, recruitment messaging in media and social media outreach was adjusted to enhance recruitment in subgroups, such as calling for specific service branches' response, to obtain a sample that was largely representative of the active-duty military.

Sampling, however, was not stratified, nor were results weighted to be precisely representative. Possible biases were introduced through the use of a non-probability sampling method, particularly dealing with gender, marital status, age, rank, and/or race/ethnicity representation among service member and family member respondents. For example, female service members make up 17% of active-duty personnel³ compared to the 50% of service members respondents they represented in this year's survey. Similarly, approximately 10% of veterans are female⁴ compared to the 28% of veteran respondents they represented in this survey. Without reweighting, this over- or underrepresentation means this sample cannot be generalized to the entire military and veteran-affiliated community. Nevertheless, this sample

provides both directions for research and exploration and perspectives of subpopulations such as female service members that would be marginalized in more representative samples.

Of the 10,926 respondents who started the survey, 62% (6,767) completed the entire questionnaire. Many sections of this survey were only available for completion by specific subgroups: military spouses, spouses of veterans, veterans, or service member respondents. As such, for the purposes of this report, “respondents” with no otherwise indicated precursor refers to active-duty military family respondents. “Active-duty military family” responses were calculated by adding “active-duty service member” and “active-duty spouse” responses. Due to the nature of the survey and our recruitment methods, there is a robust sample from active-duty spouse respondents, which may drive the overall active-duty family responses. Survey branching and skip logic techniques were also used to allow the survey to target certain respondent groups with questions that may be pertinent to them. For example, sections related to the needs of military children were only shown to those who reported they had children. Therefore, including missing data considerations, the actual number of respondents per question varied throughout the survey.

The survey questions were a combination of multiple-choice and open-ended questions to allow for diverse responses from participants. Responses of “Does not apply” and “Prefer not to answer” were usually excluded from analyses. In addition to original questions, this survey also includes measures aimed at providing standardized and scientifically validated instruments, such as the Perceived Stress Scale (PSS).⁵

For this report, 14 open-ended questions were chosen for qualitative analysis. These questions are related to key focus areas of the survey (employment, health care and wellness, children, unit communication, time away, military lifestyle, diversity, parents, and transition). The analysts used a content analysis methodology to identify key themes from the data. The content analysis process is as follows: first, the data was reviewed for emergent themes; second, each response was categorized by relevant theme(s); third, a final tabulation of responses by theme was created. After each question was analyzed, quotes were identified to illustrate each theme for the purposes of this report. The survey team used these themes and quotations to complement and illustrate the findings. Quotations are used throughout this report to bring depth and context to understanding the numbers behind this survey.

Any comparisons made between this year’s data and previous years’ data are intended only as comparisons of absolute percentages, and changes were not tested for statistical significance. It is important to note that question and answer option wording may shift from year to year to better reflect changing military family experiences, and this, in addition to the shifting sample each year, limits the comparability of the survey results from year to year.

EXECUTIVE SUMMARY

1. U.S. Department of Health and Human Services, Office of Disease Prevention and Health Promotion. (n.d.) *Healthy People 2030*. <https://health.gov/healthypeople/objectives-and-data/socialdeterminants-health>
2. Military Family Advisory Network (MFAN). (May 2019). *Final Research Report: Living Conditions of Families in Privatized Military Housing*. https://militaryfamilyadvisorynetwork.org/wp-content/uploads/FINAL-report-5.20-_FOR-RELEASE_5_22.pdf

FINDING 1

Active-duty service members in underrepresented groups — service members of color, female service members, and LGBTQ+ (lesbian, gay, bisexual, transgender, queer) service members — not only recognize discrimination in the military that their peers do not, but they also consider it in their decision to leave the service.

1. Department of Defense Board on Diversity and Inclusion Report. (2020, December 18). *Recommendations to Improve Racial and Ethnic Diversity and Inclusion in the U.S. Military*. <https://media.defense.gov/2020/Dec/18/2002554852/-1/-1/0/DOD-DIVERSITY-AND-INCLUSION-FINAL-BOARD-REPORT.PDF>
2. Department of Defense, Office of People Analytics. (2019). *2017 Workplace and Equal Opportunity Survey of Active Duty Members*. https://www.dmdc.osd.mil/appj/dwp/dwp_surveys.jsp
3. Department of Defense. (2020). *Department of Defense Fiscal Year 2019 Annual Report on Sexual Assault in the Military*. https://media.defense.gov/2020/Apr/30/2002291660/-1/-1/1/1_DEPARTMENT_OF_DEFENSE_FISCAL_YEAR_2019_ANNUAL_REPORT_ON_SEXUAL_ASSAULT_IN_THE_MILITARY.PDF
4. Myers, M. (2020, June 15). LGBT service members are allowed to be out and proud, but a fear of repercussions persists. *Military Times*. <https://www.militarytimes.com/news/your-military/2020/06/15/lgbt-service-members-are-allowed-to-be-out-and-proud-but-a-fear-of-repercussions-persists/>
5. Stewart, P., Pell, M.B., and Schneyer, J. (September 15, 2020). Special Report: U.S. Troops Battling racism report high barrier to justice. *Reuters*.
6. Ibid
7. Gibson, J., Griepentrog, B., & Marsh, S. (2007). Parental influence on youth propensity to join the military. *Journal of Vocational Behavior*, 70, 525-541. 10.1016/j.jvb.2007.03.002
8. Bipartisan Policy Center. (2017, March 17). Building a F.A.S.T. Force: A Flexible Personnel System for a Modern Military Recommendations from the Task Force on Defense Personnel. Bipartisan Policy Center. <https://bipartisanpolicy.org/report/building-a-fast-force/>
9. Steward, P. (2021, January 18). Exclusive: Senator Gillibrand eyes extending Civil Rights Act protections to U.S. troops. *Reuters*. <https://www.reuters.com/article/us-usa-military-civil-rights-exclusive/exclusive-senator-gillibrand-eyes-extending-civil-rights-act-protections-to-u-s-troops-idUSKBN29N1W8>.

10. Ibid
11. Neel, J. (2017, October 24). *Poll: Most Americans Think Their Own Group Faces Discrimination*. NPR. <https://www.npr.org/sections/health-shots/2017/10/24/559116373/poll-most-americans-think-their-own-group-faces-discrimination>
12. Department of Defense, Defense Manpower Data Center. (2020). DoD Personnel, Workforce Reports & Publications, Active Duty Military Personnel by Service by Rank/Grade: September 2020. U.S. Department of Defense. https://www.dmdc.osd.mil/appj/dwp/dwp_reports.jsp

FINDING 2

A positive command climate, including good communication, leadership, and flexibility, contributes to service members' sense of belonging to their unit, impacting readiness and retention.

1. Zlezulewicz, G. (2020, September 21). Fresh insights into Theodore Roosevelt's COVID-19 outbreak provided in newly released records. *Navy Times*. <https://www.navytimes.com/news/your-navy/2020/09/21/fresh-insights-into-theodore-roosevelts-covid-19-outbreak-provided-in-newly-released-records>
2. United States Army. (2020). Report of the Fort Hood Independent Review Committee. <https://www.army.mil/forthoodreview>
3. Ananthan, S., & Singh, I. (2014). Evaluating the command climate in military units. *European Journal of Educational Sciences*, 1(3), 165-173. <https://doi.org/10.19044/ejes.v1no3a11>
4. United States Army. (2015, October). *Army Team Building*. https://armypubs.army.mil/epubs/DR_pubs/DR_a/pdf/web/atp6_22x6%20FINAL.pdf
5. Twarontie, K. (2019, May 11). *Five findings on the importance of belonging*. EY. https://www.ey.com/en_us/diversity-inclusiveness/ey-belonging-barometer-workplace-study
6. Baumeister, R. F., & Leary, M. R. (1995). The Need to Belong: Desire for Interpersonal Attachments as a Fundamental Human Motivation. *Psychological Bulletin*, 117(3), 497-529. <https://doi.org/10.1037/0033-2909.117.3.497>
7. Blue Star Families. (2020). *Resilience Under Stress Study Comprehensive Report*. <https://bluestarfam.org/research/russ>
8. Stone, D. M., Holland, K. M., Bartholow, B., Crosby, A. E., Davis, S., & Wilkins, N. (2017). *Preventing Suicide: A Technical Package of Policies, Programs, and Practices*. National Center for Injury Prevention and Control, Centers for Disease Control and Prevention. <https://www.cdc.gov/violenceprevention/pdf/suicidetechnicalpackage.pdf>
9. Brown, N. (2017). Burden, belonging and capability: An interpersonal view of military suicides. *Psychiatric Times*, 34(3). <https://www.psychiatrictimes.com/view/burden-belonging-and-capability-interpersonal-view-military-suicides>

10. Volini, E., Schwartz, J., & Denny, B. (2020, May 15). *Belonging: From comfort to connection to contribution*. Deloitte Insights. <https://www2.deloitte.com/us/en/insights/focus/human-capital-trends/2020/creating-a-culture-of-belonging.html>
11. Malone, G. P., Pillow, D. R., & Osman, A. (2012). The General Belongingness Scale (GBS): Assessing achieved belongingness. *Personality and Individual Differences*, 52(3), 311-316. <https://doi.org/10.1016/j.paid.2011.10.027>
12. Government Accountability Office. (2020). FEMALE ACTIVE DUTY PERSONNEL Guidance and Plans Needed for Recruitment and Retention Efforts. <https://www.gao.gov/assets/710/707037.pdf>
13. United States Special Operations Command. (2019). *Preservation of the Force and Family*. <https://www.socom.mil/POTFF/Pages/About-POTFF.aspx>
14. Savitsky, K., Keysar, B., Epley, N., Carter, T., & Swanson, A. (2011). The closeness-communication bias: Increased egocentrism among friends versus strangers. *Journal of Experimental Social Psychology*, 47, 269-273. <https://doi.org/10.1016/j.jesp.2010.09.005>
15. COVID-19 Military Support Initiative. (2020). *Pain Points Poll Deep Dive: THE IMPACT OF CHILD CARE AND SCHOOL CLOSURE CHALLENGES ON MILITARY PERSONNEL AND READINESS*. <https://bluestarfam.org/wp-content/uploads/2020/10/BSF-COVID-PPPDeepDive-ChildCare.pdf>
16. Doty, L. C. J., & Gelineau, M. J. (2008). Command Climate. *Army*. https://www.ausa.org/sites/default/files/FC_Doty_0708.pdf
17. Cohen, S., Kamarch, T., & Mermelstein, R. (1983). A global measure of perceived stress. *Journal of Health and Social Behavior*, 24, 385e396
18. Department of Defense, Defense Manpower Data Center. (2020). DoD Personnel, Workforce Reports & Publications, Active Duty Military Personnel by Service by Rank/Grade: September 2020. U.S. Department of Defense. https://www.dmdc.osd.mil/appj/dwp/dwp_reports.jsp

FINDING 3

Maintaining connection and access to self-care are critical needs to support families of deployed or activated service members.

1. Air Force Personnel Center. (n.d.). *Airman and Family Deployment Support*. <https://www.afpc.af.mil/Airman-and-Family/Deployment-Support>
2. Blue Star Families. (n.d.). *Blue Star Museums*. <https://bluestarfam.org/family-life/blue-star-museums>
3. Blue Star Families. (n.d.). *Blue Star Summer Camp – The Home Edition*. <https://bluestarfam.org/for-mil-families/summer-camp>

4. Clark, M. A., O'Neal, C. W., Conley, K. M., & Mancini, J. A. (2018). Resilient family processes, personal reintegration, and subjective well-being outcomes for military personnel and their family members. *American Journal of Orthopsychiatry*, 88(1), 99–111. <https://doi.org/10.1037/ort0000278>
5. Command Accountability for Military Family Readiness Act. S.3800. 116th Congress (2019-2020). <https://www.congress.gov/bill/116th-congress/senate-bill/3800>
6. Conforte, A. M., DeLeon, P. H., Engel, C. C., Ling, C., Bakalar, J. L., & Tanofsky-Kraff, M. (2017). Identifying policy implications and future research directions regarding Military Community Support and Child Psychosocial Adjustment, *Military Medicine*, 182(5-6), 1572-1580. <https://doi.org/10.7205/MILMED-D-17-00002>
7. Giudice, G, Gehrke, A. & Clusen, N. (2020). *Health-Related Quality of Life and Stress Among Active Duty Spouses*. Defense Health Agency. <https://www.bing.com/search?q=citation+for+DHA+Health-Related+Quality+of+Life+and+Stress+Among+Active+Duty+Spouses&cvid=f2e9822cc5da4760b6372b3295ac0bf6&pglt=43&FORM=ANNTA1&PC=DCTS>
8. Leroux, T. C., Hye-Chung K., Dabney, A. & Wells, R. (2016). Military Deployments and Mental Health Utilization Among Spouses of Active Duty Service Members, *Military Medicine*, 181(10), 1269–1274. <https://doi.org/10.7205/MILMED-D-15-00583>
9. Navy Fleet and Family Support Centers. (n.d.). *Deployment Readiness Support*. https://www.cnic.navy.mil/ffr/family_readiness/fleet_and_family_support_program/work-and-family-life/deployment_readiness_support.html
10. Marine Corps Unit, Personal, and Family Readiness Program (n.d.). *Marine Corps Community Services*. <https://usmc-mccs.org/index.cfm/services/family/unit-personal-and-family-readiness>
11. United States Army. (n.d.). *Soldier and Family Services*. <https://www.goarmy.com/benefits/soldier-and-family-services.html>
12. United States Special Operations Command, Preservation of the Force and Family. (2019, February 13). *About POTFF*. <https://www.socom.mil/POTFF/Pages/About-POTFF.aspx>

FINDING 4

The overwhelming majority of military family respondents are registered to vote. Their decisions about where they registered were influenced by rules/regulations and their desire to maintain connection to specific communities.

1. Teigen, J.M. (2006). Enduring effects of the uniform: Previous military experience and voting turnout. *Political Research Quarterly*, 59(4), 601-607. <https://www.jstor.org/stable/4148062>
2. Defense Manpower Data Center. (2020). *Military and Civilian Personnel by Service/Agency by State/Country*. https://www.dmdc.osd.mil/appj/dwp/dwp_reports.jsp

3. Michalski, C. A., Diemert, L. M., Helliwell, J. F., Goel, V., & Rosella, L. C. (2020). Relationship between sense of community belonging and self-rated health across life stages. *SSM – Population Health*, 12(6). <https://doi.org/10.1016/j.ssmph.2020.100676>
4. Klar, S., Weber, C. R., & Krupnikov, Y. (2016). Social Desirability Bias in the 2016 Presidential Election. *The Forum*, 14(4), 433-443. <https://doi.org/10.1515/for-2016-0037>

FINDING 5

During COVID-19, National Guard families reported higher rates of activation and less time to prepare than their active-duty and Reserve peers. Despite protection by federal labor laws, both National Guard and Reserve service members reported negative employment consequences after an activation or mobilization.

1. National Guard Bureau. (2021, January 12). *National Guard response to civil unrest*. [Press Release]. <https://www.nationalguard.mil/Resources/Press-Releases/Article/2469784/national-guard-response-to-civil-unrest>
2. Winkie, D. (2020, December 13). 2020 saw the Guard used the most since World War II. Is a retention crisis looming? *Army Times*. <https://www.armytimes.com/home/left-column/2020/12/13/2020-saw-the-guard-used-the-most-since-world-war-ii-is-a-retention-crisis-looming>
3. Ross, A. M., DeVoe, E. R., Steketee, G., Spencer, R. & Richter, M. (2020). “This is not your Life...and it becomes your Life”: A Qualitative Exploration of Deployment-related Stress and Support needs in National Guard and Reserve spouses who are Mothers of Young Children. *Family Process*. <https://doi.org/10.1111/famp.12622>
4. United States Department of Labor. (2019). USERRA - Uniformed Services Employment and Reemployment Rights Act. <https://www.dol.gov/agencies/vets/programs/userra>
5. Employer Support of the Guard and Reserve Program. (n.d.). Statement of Support Program. <https://esgr.mil/Employers/Statement-of-Support>

FINDING 6

Throughout the military life cycle, female service member respondents face greater challenges with balancing military and family life and report more negative experiences associated with service than their male counterparts.

1. Blue Star Families MFLS. (2019). *2018 Military Family Lifestyle Comprehensive Report*. Blue Star Families. <https://bluestarfam.org/survey>
2. Blue Star Families MFLS. (2020). *2019 Military Family Lifestyle Comprehensive Report*. Blue Star Families. <https://bluestarfam.org/survey>
3. Ibid

4. U.S. Department of Defense. Office of the Deputy Assistant Secretary of Defense. (2020). *2019 Demographic Profile of the Military Community*. MilitaryOneSource. <https://download.militaryonesource.mil/12038/MOS/Reports/2019-demographics-report.pdf>
5. Breslin, R., Davis, L., Hylton, K., Hill, A., Klauberg, W., Petusky, M., & Klahr, A. (2019). *2018 Workplace and Gender Relations Survey of Active Duty Members: Overview Report*. https://www.researchgate.net/publication/334431664_2018_Workplace_and_Gender_Relations_Survey_of_Active_Duty_Members_Overview_Report
6. Ibid
7. U.S. Department of Defense. (2020). *Department of Defense Annual Report on Sexual Assault in the Military: Fiscal Year 2019*. https://media.defense.gov/2020/Apr/30/2002291660/-1/-1/1/1_DEPARTMENT_OF_DEFENSE_FISCAL_YEAR_2019_ANNUAL_REPORT_ON_SEXUAL_ASSAULT_IN_THE_MILITARY.PDF
8. Sexual Assault Prevention and Response Office. (n.d.) *DoD Sexual Assault Prevention and Response Office*. <https://www.sapr.mil>
9. Ibid
10. Child Care Aware of America. (2019). *The U.S. and the High Price of Childcare: An Examination of a Broken System*. <https://www.childcareaware.org/our-issues/research/the-us-and-the-high-price-of-child-care-2019/#:~:text=The%20US%20and%20the%20High%20Price%20of%20Child%20Care%3A%20An,of%20child%20care%20across%20states.>
11. United States Government Accountability Office (May 2020). *Female Active-Duty Personnel: Guidance and Plans Needed for Recruitment and Retention Efforts*. <https://www.gao.gov/assets/710/707037.pdf>
12. U.S. Department of Defense. (2020). *Department of Defense Board on Diversity and Inclusion Report Recommendations to Improve Racial and Ethnic Diversity and Inclusion in the U.S. Military*. <https://media.defense.gov/2020/Dec/18/2002554852/-1/-1/0/DOD-DIVERSITY-AND-INCLUSION-FINAL-BOARD-REPORT.PDF>
13. Daniel, S., Neria, A., Moore, A., & Davis, E. (2019). The Impact of Leadership Responses to Sexual Harassment and Gender Discrimination Reports on Emotional Distress and Retention Intentions in Military Members, *Journal of Trauma & Dissociation*, 20(3), 357-372, DOI: 10.1080/15299732.2019.1571887
14. Bipartisan Policy Center. (2017). *Building a F.A.S.T. Force: A Flexible Personnel System for a Modern Military Recommendations from the Task Force on Defense Personnel*. <https://bluestarfam.org/wp-content/uploads/2017/04/BPC-Defense-Building-A-FAST-Force.pdf>
15. Ibid
16. U.S. Department of Veterans Affairs. (n.d.). *Women Veterans Health Care*. <https://www.womenshealth.va.gov/womenshealth/latestinformation/facts.asp>

FINDING 7

Despite the increased use of telehealth services, active-duty families continue to report barriers to obtaining mental health care.

1. Congressional Research Service. (2020). *Defense Primer: Military Health System*. <https://fas.org/sgp/crs/natsec/IF10530.pdf>
2. TRICARE. (2020, May 19). *TRICARE Revises Telehealth Policy to Respond to COVID-19*. <https://tricare.mil>
3. Department of Defense. (2020, March 18). *Declaring a National Emergency Concerning the Novel Coronavirus Disease (COVID-19) Outbreak*. Federal Register. <https://www.federalregister.gov/documents/2020/03/18/2020-05794/declaring-a-national-emergency-concerning-the-novel-coronavirus-disease-covid-19-outbreak>
4. National Comorbidity Survey Replication. (2007). National Comorbidity Survey Replication. <https://www.hcp.med.harvard.edu/ncs/index.php>
5. Mental Health America. (2020, October 20). *Number Of People Reporting Anxiety And Depression Nationwide Since Start Of Pandemic Hits All-Time High In September, Hitting Young People Hardest*. <https://www.mhanational.org/number-people-reporting-anxiety-and-depression-nationwide-start-pandemic-hits-all-time-high>
6. RAND Corporation, Troxel, W. M., Shih, R. A., Pederson, E., Fisher, M. P., Griffin, B. A., Haas, A. C., Kurz, J. R., & Steinberg, P. S. (2015). *Sleep In The Military: Promoting Healthy Sleep Among U.S. Servicemembers*. https://www.rand.org/content/dam/rand/pubs/research_reports/RR700/RR739/RAND_RR739.pdf
7. Lentino, C.V., Purvis, D.L., Murphy, K.J., Deuster, P.A. (2013). Sleep as a component of the performance triad: the importance of sleep in a military population. *U.S. Army Medical Department Journal*, 98–108.
8. Osborn, K. (2018, March 23). *Ship Collisions Prompt Navy Research into Sleep Deprivation*. Retrieved November 19, 2020, from <https://www.military.com/dodbuzz/2018/03/23/ship-collisions-prompt-navy-research-sleep-deprivation.html>
9. American Academy of Sleep Medicine. (2013). *Active duty military personnel prone to sleep disorders and short sleep duration*. <https://aasm.org/active-duty-military-personnel-prone-to-sleep-disorders-and-short-sleep-duration>
10. Miller, N. L., Shattuck, L. G., & Matsangas, P. (2011). Sleep and fatigue issues in continuous operations: a survey of U.S. Army officers. *Behavioral sleep medicine*, 9(1), 53–65. <https://doi.org/10.1080/15402002.2011.533994>
11. National Institute of Mental Health. (2021). *Suicide*. <https://www.nimh.nih.gov/health/statistics/suicide.shtml>

12. Vanden Brook, T. (2020, October 1). *Suicide rate among active-duty troops jumps to six-year high, COVID-19 stress could make it even worse*. USA Today. <https://www.usatoday.com/story/news/politics/2020/10/01/suicide-rate-among-active-duty-troops-jumps-six-year-high/5879477002>
13. Baldor, L., & Burns, R. (2020, September 27). *Military suicides up as much as 20% in COVID era*. AP News. <https://apnews.com/article/virus-outbreak-air-force-stress-archive-army-2be5e2d741c1798fad3f79ca2f2c14dd>
14. Ibid
15. Mental Health America. (2020, October 20). *Number Of People Reporting Anxiety And Depression Nationwide Since Start Of Pandemic Hits All-Time High In September, Hitting Young People Hardest*. <https://www.mhanational.org/number-people-reporting-anxiety-and-depression-nationwide-start-pandemic-hits-all-time-high>
16. Department of Defense Office of Inspector General. (2020, August 12). *Evaluation of Access to Mental Health Care in the Department of Defense (DODIG-2020-112)*. <https://www.dodig.mil/reports.html/Article/2309785/evaluation-of-access-to-mental-health-care-in-the-department-of-defense-dodig-2>
17. Xiong, J., Lipsitz, O., Nasri, F., Lui, L. M.W., Gill, H., Phan, L., Chen-Li, D., Iacobucci, M., Ho, R., Majeed, A., & McIntyre, R. S. (2020, December 1). Impact of COVID-19 pandemic on mental health in the general population: A systematic review. *Journal of Affective Disorders*, 277, 55-64. <https://doi.org/10.1016/j.jad.2020.08.001>
18. 18.Pierre-Louis, B.J., Moore, A.D. & Hamilton, J.B. The Military Health Care System May Have the Potential to Prevent Health Care Disparities. *J. Racial and Ethnic Health Disparities* 2, 280–289 (2015). <https://doi.org/10.1007/s40615-014-0067-6>
19. Oltean, I. I., & Ferro, M. A. (2019). Agreement of child and parent-proxy reported health-related quality of life in children with mental disorder. *Quality of Life Research*, 28(3), 703–712. <https://doi.org/10.1007/s11136-018-2026-x>

FINDING 8

Active-duty families with children with special needs experience difficulty accessing educational and health care support services, particularly during relocation; these issues were exacerbated by COVID-19.

1. U.S. Department of Education. (2020). *Protecting Students With Disabilities*. <https://www2.ed.gov/about/offices/list/ocr/504faq.html>
2. Barnhill, J. (2021). *2021 Military Special Education Survey*. Partners in Promise. <https://thepromiseact.org/2021-survey>

3. Military Interstate Children's Compact Commission (MIC3). (2018). *Interstate Compact on Educational Opportunity for Military Children: Compact Rules*. Second Edition.
<https://mic3.net/wp-content/uploads/2020/11/Rules-Book-Edits-20190905-1.pdf>
4. National Defense Authorization Act for Fiscal Year 2021, 116th Congress (2019-2020).
<https://www.congress.gov/bill/116th-congress/house-bill/6395>
5. Ibid
6. Stifel, S. W. F., Feinberg, D. K., Zhang, Y., Chan, M. & Wagle, R. (2020). Assessment During the COVID-19 Pandemic: Ethical, Legal, and Safety Considerations Moving Forward, *School Psychology Review*, 49(4), 438-452, DOI: 10.1080/2372966X.2020.1844549
7. Wosik, J., Fudim, M., Cameron, B., Gellad, Z. F., Cho, A., Phinney, D., Curtis, S., Roman, M., Poon, E. G., Ferranti, J., Katz, J. N., & Tcheng, J. (2020). Telehealth transformation: COVID-19 and the rise of virtual care. *Journal of the American Medical Informatics Association*, 27(6), 957-962.
<https://doi.org/10.1093/jamia/ocaa067>
8. U.S. Army Medical Department. (2021). *Exceptional Family Member Program*. <https://efmp.amedd.army.mil>
9. Partners in Promise. (2021). *Issue Paper Special Education and Military Families*.
<https://thepromiseact.org/2021/01/partners-in-promise-mcec-special-education-issue-paper>
10. Ibid

FINDING 9

Mirroring the civilian community, nationwide shifts to virtual, hybrid, and homeschool education have had secondary effects on military spouse employment; however, more than half of active-duty family respondents agreed their oldest child is thriving in school.

1. National Center for Education Statistics. (2016). *Table 206.10. Number and percentage of homeschooled students ages 5 through 17 with a grade equivalent of kindergarten through 12th grade, by selected child, parent, and household characteristics: Selected years, 1999 through 2016*.
https://nces.ed.gov/programs/digest/d18/tables/dt18_206.10.asp
2. Prothero, A. & Samuels, C. A. (2020, November 11). *Home Schooling is Way up with COVID-19. Will it Last?* Education Week. <https://www.edweek.org/policy-politics/home-schooling-is-way-up-with-covid-19-will-it-last/2020/11>
3. Blue Star Families. (2020). *2019 Military Family Lifestyle Survey Comprehensive Report*.
<https://bluestarfam.org/survey>
4. Gubnitskaia, V., & Smallwood, V. (Eds.). (2020). *Homeschooling and Libraries: New Solutions and Opportunities*. McFarland.

5. Military Child Education Coalition. (2020). Military kids now: 2020 survey summary report. https://www.militarychild.org/upload/files/MCEC_2020EdSurvey_digital.pdf
6. Grose, J. (2020, August 18). What it means to homeschool. *NY Times*. <https://www.nytimes.com/2020/08/18/parenting/homeschool-coronavirus.html>

FINDING 10

For military families, finding housing that fulfills both location and family needs can be a costly balancing act.

1. National Defense Authorization Act for Fiscal Year 2016, Pub. L. No. 114-92, §603, 129 Stat. 731 (2015)
2. Department of Defense. (2020, December 15). *DOD Releases 2021 Basic Allowance for Housing Rates*. <https://www.defense.gov/Newsroom/Releases/Release/Article/2447343/dod-releases-2021-basic-allowance-for-housing-rates>
3. Rodrigue, P. (2016). *How exclusionary zoning limits poor families' access to good schools*. Greater Greater Washington. <https://ggwash.org/view/61635/the-price-of-admission-how-exclusionary-zoning-limits-poor-families-access>
4. Government Accountability Office. (2021, January 25). *Actions Needed to Improve the Process for Setting Allowances for Servicemembers and Calculating Payments for Privatized Housing Projects*. <https://www.gao.gov/products/GAO-21-137>
5. Carlisle-Frank, P., Frank, J. M., & Nielsen, L. (2005). Companion animal renters and pet-friendly housing in the U.S. *Anthrozoös*, 18(1), 59–77.
6. Lin, Z., Allen, M. T., & Carter, C. C. (2013). Pet policy and housing prices: Evidence from the condominium market. *Journal of Real Estate Finance and Economics*, 47(1), 109-122. doi:<http://dx.doi.org.liblink.uncw.edu/10.1007/s11146-011-9351-y>
7. *Rental Burdens: Rethinking Affordability Measures*. (n.d.). PD&R Edge: An online magazine. https://www.huduser.gov/portal/pdredge/pdr_edge_featd_article_092214.html#:~:text=HUD%20defines%20cost%2Dburdened%20families,of%20one's%20income%20on%20rent.
8. Blue Star Families. (2020). *Pain Points Poll*. https://bluestarfam.org/wp-content/uploads/2020/06/PPP-Wks1-10_Wrap-up_Part-1.pdf

FINDING 11

Work flexibility, alternative care options, and increasing child care affordability are active-duty families' preferred solutions for addressing child care and schooling concerns.

1. Government Accountability Office. (2012). *DOD Is Taking Actions to Address Awareness and Availability Barriers* (GAO-12-21). Washington, D.C.: U.S. Government Printing Office.

2. Government Accountability Office. (2020). *Off-Base Financial Assistance and Wait Lists for On-Base Care* (GAO-21-127R). Washington, D.C.: U.S. Government Printing Office.
<https://www.gao.gov/assets/720/710951.pdf>
3. Blue Star Families. (2020). *2019 Military Family Lifestyle Comprehensive Report*. <https://bluestarfam.org/survey>
4. United States Chamber of Commerce Foundation. (2017). *Military Spouses in the Workplace: Understanding the Impacts of Spouse Unemployment on Military Recruitment, Retention, and Readiness*. <https://www.uschamberfoundation.org/sites/default/files/Military%20Spouses%20in%20the%20Workplace.pdf>
5. Congressional Research Service. (2020). *Military Child Development Program: Background and Issues*. <https://fas.org/sgp/crs/natsec/R45288.pdf>
6. Government Accountability Office. (2020). *Off-Base Financial Assistance and Wait Lists for On-Base Care* (GAO-21-127R). Washington, D.C.: U.S. Government Printing Office.
<https://www.gao.gov/assets/720/710951.pdf>
7. Bitler, M., Hoynes, H. W., & Whitmore-Schanzenbach, D. (2020). *The Social Safety net in the Wake of COVID-19*. National Bureau of Economic Research.
https://www.nber.org/system/files/working_papers/w27796/w27796.pdf
8. Bateman, N., & Ross, M. (2020). *Why has COVID-19 been especially harmful for working women?* The Brookings Institution.
<https://www.brookings.edu/essay/why-has-covid-19-been-especially-harmful-for-working-women>
9. Weber, R.B., & Grobe, D. (2015). *Contracted Slots Pilot Program Evaluation*. Oregon State University, Family Policy Program. <https://health.oregonstate.edu/sites/health.oregonstate.edu/files/occrp/pdf/cs-final-report-11-30-2015.pdf>

FINDING 12

Some degree of food insecurity was found in all enlisted ranks, beyond junior enlisted families, and is intensified in families with a spouse who needs or wants to work but is not employed.

1. Economic Research Service. U.S. Department of Agriculture. (n.d.) *Food Security in the U.S. Measurement*. <https://www.ers.usda.gov/topics/food-nutrition-assistance/food-security-in-the-us/measurement#security>
2. U.S. Department of Agriculture. (September 9, 2020). *Food Security in the U.S.* <https://www.ers.usda.gov/topics/food-nutrition-assistance/food-security-in-the-us/key-statistics-graphics/#foodsecure>
3. Giannarelli, L., Wheaton, L., & Acs, G. (2020). *2020 Poverty Projections Initial U.S. Policy Response to the COVID-19 Pandemic's Economic Effects Is Projected to Blunt the Rise in Annual Poverty*. Urban Institute.
<https://www.urban.org/sites/default/files/publication/102521/2020-poverty-projections.pdf>

4. Office of Disease Prevention and Health Promotion. (n.d.). *Food Insecurity*. HealthyPeople.gov. <https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-health/interventions-resources/food-insecurity#:~:text=It%20may%20be%20influenced%20by,is%20limited%20or%20not%20available.&text=In%202016%2C%2031.6%25%20of%20low,the%20national>
5. Feeding America. (n.d.). *Understand Food Insecurity*. Hunger and Health. <https://hungerandhealth.feedingamerica.org/understand-food-insecurity>
6. U.S. Chamber of Commerce. (2017). *Military spouses in the workplace*. <https://www.uschamberfoundation.org/sites/default/files/Military%20Spouses%20in%20the%20Workplace.pdf>
7. Office of People Analytics. (2020). *2019 Survey of Active Duty Spouses*. https://download.militaryonesource.mil/12038/MOS/Surveys/ADSS1901_MOS-Briefing-508-Revised.pdf
8. U.S. Census Bureau. (March 30, 2020). *Educational Attainment in the United States: 2019. Table 2. Educational Attainment of the Population 25 Years and Over, by Selected Characteristics: 2019*. <https://www.census.gov/content/census/en/data/tables/2019/demo/educational-attainment/cps-detailed-tables.html>
9. Ibid
10. Blue Star Families. (2020). *Military and Veteran Families' Pre-Holiday Financial Needs*. https://bluestarfam.org/wp-content/uploads/2021/01/BSF_PulseCheck_Report_Nov2020_v5.pdf
11. Office of People Analytics. (2020). *2019 Survey of Active Duty Spouses*. https://download.militaryonesource.mil/12038/MOS/Surveys/ADSS1901_MOS-Briefing-508-Revised.pdf
12. Office of People Analytics. (2020). *2019 Survey of Active Duty Spouses*. Unpublished raw data.
13. Military One Source. (2020). *Security Clearances and COVID-19 – Adjustments, Cautions and Advice*. <https://www.militaryonesource.mil/family-relationships/family-life/covid-19-resources/security-clearances-and-covid-19>
14. Ibid
15. MAZON: A Jewish Response to Hunger. (2021). *Leading the Charge to Remove Barriers for Military Families*. <https://mazon.org/priorities/military-families>
16. Government Accountability Office. (2016). *DOD Needs More Complete Data on Active-Duty Servicemembers' Use of Food Assistance Programs*. <https://www.gao.gov/assets/680/678474.pdf>
17. Food Research & Action Center. (2017). *The Impact of Poverty, Food Insecurity, and Poor Nutrition on Health and Well-Being*. <https://frac.org/wp-content/uploads/hunger-health-impact-poverty-food-insecurity-health-well-being.pdf>

18. Council on Community Pediatrics. (2016). *Poverty and Child Health in the United States*. Pediatrics, 137(4). <https://doi.org/10.1542/peds.2016-0339>
19. Garamone, J. (2019). *DOD Official Cites Widening Military-Civilian Gap*. U.S. Department of Defense. <https://www.defense.gov/Explore/News/Article/Article/1850344/dod-official-cites-widening-military-civilian-gap>
20. Ibid
21. Ibid
22. U.S. Department of Agriculture. (2020). *USDA Extends Free Meals for Kids Through December 31, 2020*. <https://www.fns.usda.gov/news-item/usda-035520>

FINDING 13

Despite military spouse hiring initiatives, military spouses still perceive employers as reluctant to hire and promote them; they identify work schedule flexibility, hiring through corporate employers with multiple locations, and reasonable accommodations from commands for service members to maintain work-life balance as potential solutions.

1. Flood, S., King, M., Rodgers, R., Ruggles, S., and Warren, R. J. (Sept. 2020). Integrated Public Use Microdata Series, Current Population Survey: Version 8.0. Minneapolis, MN: IPUMS, 2020. <https://doi.org/10.18128/D030.V8.0>
2. United States Government Accountability Office. (Jan. 2021). *Military Spouse Employment: DOD Should Continue Assessing State Licensing Practices and Increase Awareness of Resources*. <https://www.gao.gov/products/gao-21-193>
3. Williams, R., Mariani, J., and Routh, A. (22 July 2020). *Military spouse unemployment: Exploring solutions to a local problem of national importance*. Deloitte Insights. <https://www2.deloitte.com/us/en/insights/industry/public-sector/military-spouse-unemployment.html>
4. Office of People Analytics (2019). *2019 Survey of Active Duty Spouses*. <https://www.militaryonesource.mil/data-research-and-statistics/survey-findings/2019-spouses-survey>
5. Childcare Aware of America. (2019). *The U.S. and the High Price of Childcare: An Examination of a Broken System*. <https://www.childcareaware.org/our-issues/research/the-us-and-the-high-price-of-child-care-2019/#:~:text=The%20US%20and%20the%20High%20Price%20of%20Child%20Care%3A%20An,of%20child%20care%20across%20states>
6. National Center for Education Statistics. (2016). *Child care arrangements of 3- to 5-year-old children who are not yet in kindergarten, by age and race/ethnicity: Selected years, 1991 through 2016*. National Center for Education Statistics. https://nces.ed.gov/programs/digest/d18/tables/dt18_202.40.asp

7. Blue Star Families. (2020). *2019 Military Family Lifestyle Comprehensive Report*. Blue Star Families. <https://bluestarfam.org/survey>
8. Hiring Our Heroes. (2021). *Military Spouses in the Workplace*. <https://fliphtml5.com/ugwgi/koji>
9. United States Government Accountability Office. (Jan. 2021). *Military Spouse Employment: DOD Should Continue Assessing State Licensing Practices and Increase Awareness of Resources*. <https://www.gao.gov/products/gao-21-193>
10. Tong, P. K., Payne, L. A., Bond, C. A., Meadows, S. O., Lewis, J. L., Friedman, E. M., and Hernandez, E. J. M.. (2018). *Enhancing family stability during a permanent change of station: A review of disruptions and policies*. Santa Monica, CA: RAND Corporation. https://www.rand.org/pubs/research_reports/RR2304.html
11. Despard, M., Grinstein-Weiss, M., Chun, Y., and Roll, S. (2020, July 13.) *COVID-19 job and income loss leading to more hunger and financial hardship*. <https://www.brookings.edu/blog/up-front/2020/07/13/covid-19-job-and-income-loss-leading-to-more-hunger-and-financial-hardship>
12. Kniffin, K. M., Narayanan, J., Anseel, F., Antonakis, J., Ashford, S. P., Bakker, A. B., Vugt, M. v. (2021). COVID-19 and the workplace: Implications, issues, and insights for future research and action. *American Psychologist*, 76(1), 63-77. <http://dx.doi.org/10.1037/amp0000716>
13. Blue Star Families. (2020). *2019 Military Family Lifestyle Comprehensive Report*. Blue Star Families. <https://bluestarfam.org/survey>
14. Kearney, P.M. (2021). *The PCS Penalty and the Army Family*. War Room. https://warroom.armywarcollege.edu/articles/pcs-penalty/?fbclid=IwAR061_thxetV9KderCCCX6Xiky3u-fyedrzvyf2SakHHJF8wN_h63s_Sj6k
15. Flood, S., King, M., Rodgers, R., Ruggles, S., and Warren, R. J. (Sept. 2020). *Integrated Public Use Microdata Series, Current Population Survey: Version 8.0*. Minneapolis, MN: IPUMS, 2020. <https://doi.org/10.18128/D030.V8.0>
16. Hiring Our Heroes. (2021). *Military Spouses in the Workplace*. <https://fliphtml5.com/ugwgi/koji>

RECOMMENDATIONS

1. U.S. Department of Defense, Board on Diversity and Inclusion Report. (2021). *Recommendations to Improve Racial and Ethnic Diversity and Inclusion in the U.S. Military*. <https://media.defense.gov/2020/Dec/18/2002554852/-1/-1/0/DOD-DIVERSITY-AND-INCLUSION-FINAL-BOARD-REPORT.PDF>
2. Ibid
3. Defense Civilian Personnel Advisory Service. (n.d.). *TalentDevelopment – Broadening*. <https://www.dcpas.osd.mil/CTD/Broadening>

4. U.S. Army Human Resources Command. (2020). *Broadening Opportunities Definition* (IAW DA PAM 600-3). <https://www.hrc.army.mil/content/Broadening%20Opportunity%20Programs%20Building%20a%20cohort%20of%20leaders%20that%20allow%20the%20Army%20to%20succeed%20at%20all%20levels%20in%20all%20environments>
5. U.S. Army Acquisition Support Center. (n.d.). *Training with Industry*. <https://asc.army.mil/web/career-development/programs/aac-training-with-industry>
6. Ibid
7. Flynn, M. S., & Souksavatdy, A. (2017). *Return on Investment for the United States Navy's Training with Industry Program*. [MBA Professional Report, Naval Postgraduate School]. <https://apps.dtic.mil/dtic/tr/fulltext/u2/1046366.pdf>
8. Ibid
9. National Conference of State Legislatures. (2020). *Voter Registration*. <https://www.ncsl.org/research/elections-and-campaigns/voter-registration.aspx>
10. Ibid
11. Ibid
12. Department of the Navy. (2018, March 12). *OPNAV Instruction 1330.2C, N13*. <https://www.secnav.navy.mil/doni/Directives/01000%20Military%20Personnel%20Support/01-300%20Assignment%20and%20Distribution%20Services/1330.2C.pdf>
13. U.S. Army Human Resources Command. (2021). *Enlisted Career Intermission Program (CIP)*. [https://www.hrc.army.mil/content/Enlisted%20Career%20Intermission%20Program%20\(CIP\)](https://www.hrc.army.mil/content/Enlisted%20Career%20Intermission%20Program%20(CIP))
14. Albrycht, S., & Grogan, N. (2020, April 23). Into the unknown: Military families struggle with Family Care Plans. *Military Times*. <https://www.militarytimes.com/opinion/commentary/2020/04/23/into-the-unknown-military-families-struggle-with-family-care-plans>
15. COVID-19 Military Support Initiative. (2020). *Pain Points Poll Deep Dive: The Impact of Child Care and School Closure Challenges on Military Personnel and Readiness*. <https://bluestarfam.org/wp-content/uploads/2020/10/BSF-COVID-PPPDeepDive-ChildCare.pdf>
16. Department of Defense (May 7, 2010). Instruction Number 1342.19
17. U.S. Department of Defense, Office of the Deputy Assistant Secretary of Defense for Military Community and Family Policy. (2020). *2019 Demographic Profile of the Military Community*. <https://download.militaryonesource.mil/12038/MOS/Reports/2019-demographics-report.pdf>

18. COVID-19 Military Support Initiative. (2020). *Pain Points Poll Deep Dive: The Impact of Child Care and School Closure Challenges on Military Personnel and Readiness*.
<https://bluestarfam.org/wp-content/uploads/2020/10/BSF-COVID-PPPDeepDive-ChildCare.pdf>
19. United States Government Accountability Office. (2020). *Female Active-Duty Personnel: Guidance and Plans Needed for Recruitment and Retention Efforts*. <https://www.gao.gov/assets/710/707037.pdf>
20. 38 U.S.C. § 4311(a) (1994).
21. American Bar Association. (n.d.). Arbitration. https://www.americanbar.org/groups/dispute_resolution/resources/DisputeResolutionProcesses/arbitration/#:~:text=When%20arbitration%20is%20binding%2C%20the,if%20accepted%20by%20the%20parties
22. Colvin, A. J. S. (2018). The growing use of mandatory arbitration. *Economic Policy Institute*.
<https://www.epi.org/publication/the-growing-use-of-mandatory-arbitration-access-to-the-courts-is-now-barred-for-more-than-60-million-american-workers>
23. Blue Star Families. (2020). *2019 Military Family Lifestyle Survey Comprehensive Report*.
<https://bluestarfam.org/wp-content/uploads/2020/03/BSF-2019-Survey-Comprehensive-Report-Digital-rev200305.pdf>
24. Cozza, S. J., Ritchie, E. C., Koffman, R. L., & the Committee on Military and Veterans, Group for the Advancement of Psychiatry. (2018, April 25). Commentary: Protecting the privacy of military children's medical records. *Military Times*. <https://www.militarytimes.com/opinion/2018/04/25/commentary-protecting-the-privacy-of-military-childrens-medical-records>
25. Jowers, K. (2018, March 29). They sought help when their Army dad deployed. Now they're barred from joining the military. *Military Times*.
<https://www.militarytimes.com/pay-benefits/military-benefits/health-care-benefits/2018/03/29/they-sought-help-when-their-army-dad-deployed-now-theyre-barred-from-joining-the-military>
26. Ibid
27. Office of U.S. Senator Richard Blumenthal. (2020). *Supporting Military Families: Blumenthal & Baldwin Introduce Legislation to Protect Military Family Members from Mental Health Discrimination When Seeking to Serve*.
<https://www.blumenthal.senate.gov/newsroom/press/release/supporting-military-families-blumenthal-and-baldwin-introduce-legislation-to-protect-military-family-members-from-mental-health-discrimination-when-seeking-to-serve>
28. Hips, T. (2011, June). *Removing educational obstacles for military kids*. *Soldiers*, 66(6), 16–19.
29. Blue Star Families. *2019 Military Family Lifestyle Survey*.
<https://bluestarfam.org/wp-content/uploads/2020/03/BSF-2019-Survey-Comprehensive-Report-Digital-rev200305.pdf>.

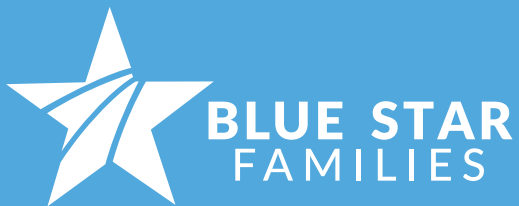
30. Garcia, E., and Weiss, E. (2020). COVID-19 and student performance, equity, and U.S. education policy. Economic Policy Institute. <https://www.epi.org/publication/the-consequences-of-the-covid-19-pandemic-for-education-performance-and-equity-in-the-united-states-what-can-we-learn-from-pre-pandemic-research-to-inform-relief-recovery-and-rebuilding>
31. Flood, S., King, M., Rodgers, R., Ruggles, S., and Warren, R. J. (Sept. 2020). *Integrated Public Use Microdata Series, Current Population Survey: Version 8.0*. Minneapolis, MN: IPUMS, 2020. <https://doi.org/10.18128/D030.V8.0>
32. Guina, R. (2019, April 21). BAH Rate Cuts: 95% BAH – The New Reality & The Future of BAH. *The Military Wallet*. <https://themilitarywallet.com/bah-rate-cuts>
33. Department of Defense. (2020). DOD Releases 2021 Basic Allowance for Housing Rates. <https://www.defense.gov/Newsroom/Releases/Release/Article/2447343/dod-releases-2021-basic-allowance-for-housing-rates>
34. Rodrigue, P. (2016). How exclusionary zoning limits poor families' access to good schools. *Greater Greater Washington*. <https://ggwash.org/view/61635/the-price-of-admission-how-exclusionary-zoning-limits-poor-families-access>
35. Government Accountability Office. (2021). Actions Needed to Improve the Process for Setting Allowances for Servicemembers and Calculating Payments for Privatized Housing Projects. <https://www.gao.gov/products/GAO-21-137>
36. Dyer, A. (2019, July 17). San Diego congresswoman's effort to address military family food insecurity faces hurdles. *The San Diego Union-Tribune*. <https://www.sandiegouniontribune.com/news/military/story/2019-07-17/san-diego-congresswomans-effort-to-address-military-family-food-insecurity-faces-senate-white-house-hurdles>
37. U.S. Department of Defense, Office of the Deputy Assistant Secretary of Defense for Military Community and Family Policy. (2019). *2018 Demographic Report: Profile of the Military Community*. <https://download.militaryonesource.mil/12038/MOS/Reports/2018-demographics-report.pdf>
38. Congressional Research Service. (2020). *Military Child Development Program: Background and Issues*. <https://fas.org/sgp/crs/natsec/R45288.pdf>
39. Office of People Analytics. (2020). *2019 Survey of Active Duty Spouses*. https://download.militaryonesource.mil/12038/MOS/Surveys/ADSS1901_MOS-Briefing-508-Revised.pdf
40. Blue Star Families. (2020). *2019 Military Family Lifestyle Survey Comprehensive Report*. <https://bluestarfam.org/wp-content/uploads/2020/03/BSF-2019-Survey-Comprehensive-Report-Digital-rev200305.pdf>

41. Child Care Aware of America. (2020). *Picking Up the Pieces: Building a Better Child Care System Post COVID-19*. https://info.childcareaware.org/hubfs/Picking%20Up%20The%20Pieces%20%E2%80%94%20Building%20A%20Better%20Child%20Care%20System%20Post%20COVID%2019.pdf?utm_campaign=Picking%20Up%20The%20Pieces&utm_source=Full%20Report%20PDF
42. National Association for the Education of Young Children. (2020). *Child Care in Crisis: Understanding the Effects of the Coronavirus Pandemic*. https://www.naeyc.org/sites/default/files/globally-shared/downloads/PDFs/our-work/public-policy-advocacy/effects_of_coronavirus_on_child_care.final.pdf
43. Malik, R., Hamm, K., Lee, W. F., Davis, E. E., & Sojourner, A. (2020, June 22). The Coronavirus Will Make Child Care Deserts Worse and Exacerbate Inequality. *Center for American Progress*. <https://www.americanprogress.org/issues/early-childhood/reports/2020/06/22/486433/coronavirus-will-make-child-care-deserts-worse-exacerbate-inequality>
44. Child Care Aware of America. (2020). *Picking Up the Pieces: Building a Better Child Care System Post COVID-19*. https://info.childcareaware.org/hubfs/Picking%20Up%20The%20Pieces%20%E2%80%94%20Building%20A%20Better%20Child%20Care%20System%20Post%20COVID%2019.pdf?utm_campaign=Picking%20Up%20The%20Pieces&utm_source=Full%20Report%20PDF
45. Child Care Aware of America (n.d.). *Marine Corps Child Care Fee Assistance Program*. <https://www.childcareaware.org/fee-assistancerespice/military-families/marines>
46. Child Care Aware of America (n.d.). *Army Fee Assistance Program*. <https://www.childcareaware.org/fee-assistancerespice/military-families/army>
47. Child Care Aware of America (n.d.). *Department of the Air Force Child Care Fee Assistance Program*. <https://www.childcareaware.org/fee-assistancerespice/military-families/air-force/fee-assistance>
48. Child Care Aware of America (n.d.). *Navy Fee Assistance Program*. <https://www.childcareaware.org/fee-assistancerespice/military-families/air-force/fee-assistance>
49. Supplemental Nutrition Assistance Program: Hearings before the Subcommittee on Nutrition and the Committee on Agriculture, House of Representatives. 114 Cong. (2016) (testimony of Abby J. Leibman)
50. Blue Star Families. (2019). *2018 Military Family Lifestyle Survey Comprehensive Report*. <https://bluestarfam.org/wp-content/uploads/2019/03/2018MFLS-ComprehensiveReport-DIGITAL-FINAL.pdf>
51. Food Stamp and Food Distribution Program, Income and Deductions, 7 CFR § 273.9
52. Flood, S., King, M., Rodgers, R., Ruggles, S., and Warren, R. J. (Sept. 2020). Integrated Public Use Microdata Series, Current Population Survey: Version 8.0. Minneapolis, MN: IPUMS, 2020. <https://doi.org/10.18128/D030.V8.0>

53. Office of People Analytics (2019). *2019 Survey of Active Duty Spouses*.
<https://www.militaryonesource.mil/data-research-and-statistics/survey-findings/2019-spouses-survey>
54. Individuals with Disabilities Education Act (IDEA), Sec. 300.101, Free appropriate public education (FAPE).
55. Jones, L. (n.d.). *Special Education: Federal Law vs. State Law*. <https://www.understood.org/en/school-learning/your-childs-rights/basics-about-childs-rights/special-education-federal-law-vs-state-law>
56. Partners in Promise and MCEC. (January 11, 2021). *Partners in PROMISE – MCEC Special Education Issue Paper*. <https://thepromiseact.org/2021/01/partners-in-promise-mcec-special-education-issue-paper>
57. Barnhill, J. (2021, February 1). *Partners in PROMISE 2021 Survey Findings*. Partners in PROMISE.
<https://thepromiseact.org/2021/02/partners-in-promise-2021-survey-findings>

RESPONDENTS AND METHODOLOGY

58. U.S. Department of Defense, Defense Manpower Data Center. (2020). *DoD Personnel, Workforce Reports & Publications, Table of Active Duty Females by Rank/Grade and Service: October 2020*. U.S. Department of Defense. https://www.dmdc.osd.mil/appj/dwp/dwp_reports.jsp
59. U.S. Department of Defense, Defense Manpower Data Center. (2020). *DoD Personnel, Workforce Reports & Publications, Military and Civilian Personnel by Service/Agency by State/Country: September 2020*. U.S. Department of Defense. https://www.dmdc.osd.mil/appj/dwp/dwp_reports.jsp
60. U.S. Department of Defense, Defense Manpower Data Center. (2020). *DoD Personnel, Workforce Reports & Publications, Table of Active Duty Females by Rank/Grade and Service: October 2020*. U.S. Department of Defense. https://www.dmdc.osd.mil/appj/dwp/dwp_reports.jsp
61. U.S. Department of Veterans Affairs, National Center for Veterans Analysis and Statistics. (2020). *Department of Veterans Affairs Statistics at a Glance: February 2020*. U. S. Department of Veterans Affairs. https://www.va.gov/vetdata/docs/Quickfacts/Homepage_slideshow_4_6_20.PDF
62. Cohen, S., Kamarck, T., & Mermelstein, R. (1983). A global measure of perceived stress. *Journal of Health and Social Behavior*, 24(4), 386-396. <https://doi.org/10.2307/2136404>



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