

2021 Military Family Lifestyle Survey Comprehensive Report

In collaboration with





Blue Star Families

Blue Star Families was founded with the mission to strengthen military families by building robust communities of support. Through our research and data, we identify the greatest needs within the military family community and create programs and solutions that will empower military families to thrive, such as career development tools, local community events, 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.

D'Aniello Institute for Veterans and Military Families

Syracuse University's D'Aniello 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.



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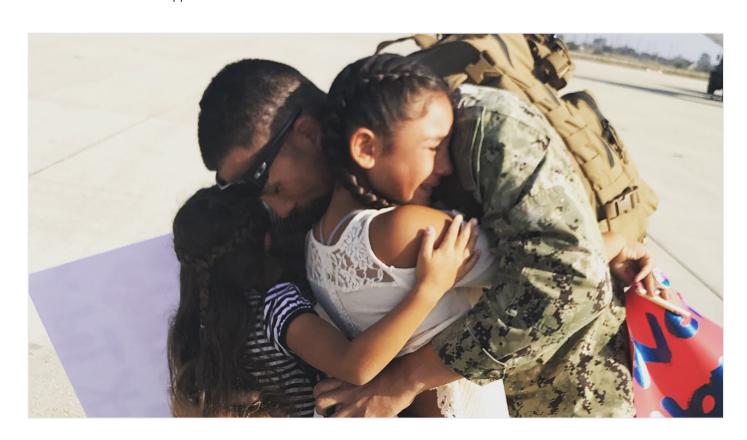
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The advent of the All-Volunteer Force ushered in a new era of American defense. The end of the draft resulted in a stronger, more professional U.S. military; however, it has also decreased understanding of military service and sacrifice within the 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 2021 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 D'Aniello 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.

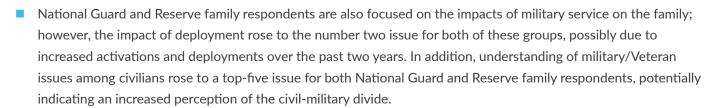


Blue Star Families' annual Military Family Lifestyle Survey (aMFLS) has been providing a comprehensive understanding of the experiences and challenges encountered by military families since 2009. It offers crucial insight and data to help inform national leaders, local communities, and philanthropic actors—functions that are even more important as decision makers assess how to support military and Veteran families while the nation continues to recover 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 12th annual Military Family Lifestyle Survey from April to June 2021. Capturing the experiences of **over 8,000 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

- Amount of time away from family due to military service is the top issue for active-duty service members, National Guard families, and Reserve families; it is the second top issue for active-duty spouses, behind military spouse employment.
- Active-duty family respondents remain focused on the impacts of military service on the family, especially regarding spouse employment, dependent children's education, and time spent away from family. This year, relocation/permanent change of station (PCS) also rose to a top-five issue for active-duty families, possibly due to COVID-19-related issues.
- Military spouse under- and unemployment remains a top issue for active-duty spouse respondents; COVID-19 impacts may also contribute to reduced labor force participation among military spouses. It also continues to be a top issue for active-duty service member and
 - Veteran spouse respondents, which may signal persistent employment challenges beyond active-duty years.



Veterans and Veteran spouses report access to military/VA health care system(s) as a top issue among other pay and benefits related to military service.





	Active-Duty Spouses (n=3,151)	Active-Duty Service Members (n=615)	Veteran Spouses (n=895)	Veterans (n=1,502)	National Guard Families (n=259)	Reserve Families (n=228)
Spouse employment	47%	25%	29%	9%	13%	27%
Time away from family	38%	36%	25%	21%	42%	41%
Child(ren)'s education	32%	23%	15%	9%	11%	14%
Relocation	26%	22%	10%	8%	2%	8%
Military pay	24%	23%	17%	23%	26%	15%
Childcare	20%	25%	7%	7%	14%	20%
Access to military/VA health care system(s)	13%	16%	29%	35%	20%	20%
Understanding of military/Veteran issues among civilians	7%	7%	25%	31%	23%	22%
Military and Veteran family mental health	20%	17%	29%	21%	22%	19%
Military and Veteran family physical health	13%	14%	27%	19%	20%	16%
Deployment impact on family	24%	17%	25%	16%	34%	34%
Veteran employment	7%	11%	18%	31%	10%	13%
Military benefits	11%	12%	22%	25%	25%	22%
Access to VA system	9%	14%	20%	24%	17%	14%

Top 5 issues for each subgroup in RED

Supporting Military-Connected Families Strengthens National Security & Local Communities

The challenges that surfaced throughout the unprecedented events of 2020 intensified the issues that military families face. Although 2021 began with hope of a new vaccine to protect our families and communities, the ups and downs of the COVID-19 pandemic continued. Military families encountered rising costs associated with relocation, changes to and from virtual education for children, and spouse unemployment rates at four to six times the national average. Despite these turbulent times, most military families report that their oldest child is thriving in school and is in good mental health; but for those who are not, the challenges of military life, including relocation, time away from the service member, and unpredictable school modality, intensify their experiences. With foreign-born spouses and service members, and duty stations worldwide, military families are global citizens, and the impacts of the continued global pandemic are felt all over the world.

While COVID-19-related shifts to remote work allowed many spouses to work from home, labor participation among military spouses dropped in 2021 as they continued to adapt to the responsibilities of managing their childrens' ever-



changing school modality and the persistent obstacles to employment due to the military lifestyle, such as relocation and service members' unpredictable schedules. These challenges necessitate military spouses' adoption of multiple roles and responsibilities, which can affect sleep, stress, mental health, and even family building.

In addition to the need to take on COVID-19 testing and vaccination missions in 2021, the unrest at the Capitol and continued conversations of racial inequality highlight the important role members of our National Guard and Reserve components serve as they continue to experience increased time away from families. While respondents note there is less discrimination in the military than in the general U.S. society, there are still challenges that result in service members of color and female service members reporting they are less satisfied with employment and less likely to recommend service to a young male or female. Therefore, the experiences of the past two years reflect the importance of building resilience among our military families.

The 2021 Military Family Lifestyle Survey (MFLS) Comprehensive Report examines these challenges 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. 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, is 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 has received increasing attention in recent years² and is 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.



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Top Findings for 2021



Community and Social Context

Four in 10 active-duty family respondents believe there is less racial discrimination in the military than there is in the general U.S. society. This year's survey indicates that service members and their families continue to perceive and experience racial discrimination, although less so in their military community than in the general U.S. society. Among active-duty family respondents who report experiencing racial discrimination in the civilian community, 45% disagree that they feel a sense of belonging to their local civilian community versus 40% of those who had not experienced racial discrimination in their civilian community.

Nearly a quarter (24%) of active-duty family respondents cite "military family quality of life" as a top concern. Families point to instability and inconsistency of daily life as the reason. While "military family quality of life" can be defined differently by respondents, the top-five themes that emerged from open-ended responses include: time with children and family (24%), frequency and difficulties of relocating (17%), OPTEMPO (16%), time away (14%), and feeling that the military does not prioritize families with unpredictable and time-intensive schedules of service members (10%). Communication from the unit/command is a top need of all currently-serving respondents in 2021. For active-duty family respondents, this is true, regardless of service branch, where they live (on or off installation), or whether they are currently separated from their service member. Additionally, nearly one-third of active-duty family respondents note child care (32%) and mental health resources (32%) are regularly needed.

National Guard and Reserve service members and their families report high levels of deployment activities in the last year, and many report they would recommend military service to young men and women. Most (63% of National Guard family respondents, 54% of Reserve family respondents) had experienced at least one military-connected separation lasting a month or longer in the past 18 months, and characterize the OPTEMPO (daily workload, deployment load, and training load) as "stressful" or "very stressful" for a healthy work/family life (59% of National Guard family respondents, 56% of Reserve family respondents). The majority of National Guard and Reserve service members also report satisfaction with their civilian job (74% of National Guard family respondents, 82% of Reserve family respondents) and civilian employer (70% of National Guard family respondents, 82% of Reserve family respondents), yet proportionally fewer report satisfaction with the career advancement opportunities their civilian employer offers (46% of National Guard family respondents, 50% of Reserve family respondents).

Health Care Access and Quality

The majority of military-connected family respondents (67%) have experienced at least one family building challenge in their lifetime. Over four in 10 active-duty family respondents (42%) report that military service created challenges to having children, specifically the desired number and/or spacing of their children. Family building challenges due to military service are much higher for female active-duty service members than their male peers (57% vs. 28%). More than half (54%) of LGBTQ+ active-duty family respondents also report family building challenges due to military service.

Spouses are the backbone of military families. For many, the nature of military service can mean the service member is unavailable to support household labor or family obligations, often leaving the military spouse solely responsible for maintaining day-to-day household obligations and family needs, which can impact their physical and mental well-being. Fewer than half of active-duty spouse respondents (42%) agree that their health is excellent, and those who were



separated from their service members report higher mean stress scores than those who were not. While two-thirds of active-duty spouse respondents (67%) report they do not have a current mental health diagnosis, 25% report a current diagnosis of generalized anxiety disorder (GAD), which is higher than the estimated levels for the U.S. population.

Most active-duty family respondents to the 2021 MFLS report their children's mental health is "good" or "excellent," but a notable proportion (43%) rate at least one child's mental health as "fair," "poor," or "very poor." Older children may be experiencing greater challenges than their younger peers; 41% of active-duty family respondents rate their adolescent oldest child's mental health as "fair," "poor," or "very poor." In addition to the challenges presented to their civilian peers across the world as a result of the COVID-19 pandemic, including shifts to and from virtual or hybrid education modality, military children also experience multiple challenging factors due to the military lifestyle, such as separations from the service member. Seventeen percent of active-duty family respondents report they would like their child to receive mental health care, but they currently do not. Roughly one in five (21%) report their child does not receive mental health care due to concerns about a mental health diagnosis preventing future military service.

@ Education Access and Quality

Military children's education remains a top-five issue of concern for active-duty family respondents (31%), as it has since 2018. Overall, active-duty family respondents report a positive experience for their oldest child enrolled in K-12. They report their oldest child is thriving in his/her school (61%) and feels a sense of belonging to their school (54%), and almost half rate their oldest child's school as above average or excellent (49%). These positive experiences, however, can be offset by relocation and school modality. A larger proportion of active-duty family respondents who report their oldest child is an adolescent and had attended four schools or fewer also believe their child feels a sense of belonging to their current school, compared to those whose oldest child is an adolescent and had attended five or more schools. A greater proportion of active-duty family respondents with children enrolled in in-person K-12 report their oldest child is thriving than those whose oldest child receives virtual or hybrid education delivery, regardless of whether the child is of grade school age (6-12 years old) or an adolescent (13+).

Neighborhood and the Built Environment

The military community is rich in culture, ethnicity, and language. Military-connected respondents represent 95 countries of origin and 15% use a language other than English in their home. Foreign-born active-duty spouse respondents represent 75 countries of origin, most commonly Canada, Germany, the Philippines, Mexico, and the United Kingdom. Eight percent of active-duty family respondents were living outside the country at the time of survey fielding; these families report lower overall financial stress than their U.S. peers. Among those who are financially stressed, 61% report "out-of-pocket relocation costs" as a top contributor to that financial stress, compared to just 27% of their U.S. peers.

Economic Stability

The majority of active-duty service member respondents (67%) are satisfied with their jobs and 70% feel the work they do is meaningful. However, nearly seven in 10 active-duty service member respondents who are "somewhat dissatisfied" or "very dissatisfied" with their job are also "somewhat likely" or "very likely" to look for another job in the next 12 months. Dissatisfied service members are also more stressed than their satisfied counterparts. Active-duty service members of color are also less satisfied with their job (62% vs. 70%) and their employer (57% vs. 68%) than their



white peers. Female active-duty service member respondents report slightly lower levels of satisfaction with their job (66% vs. 69%) and employer (62% vs. 65%) than their male counterparts.

Already stressed by spouse un- and underemployment, student loans, and out-of-pocket relocation costs, military families making PCS (permanent change of station) moves face long military housing waitlists, unaffordable civilian housing markets, and expensive rental costs, which can further add to their financial burden. Of those who report out-of-pocket housing costs, more than three-quarters (76%) pay \$200 or more out-of-pocket each month. Two-thirds (66%) of active-duty family respondents report having unreimbursed out-of-pocket expenses related to their last PCS move, and among those with unreimbursed moving costs, more than half (55%) report those expenses to be over \$1,000. Of active-duty family respondents who report financial stress, 41% cite spouse unemployment or underemployment as a top contributor to their stress; student loans (30%) is second.

Military spouse employment is again a top-five military life issue for nearly half (47%) of active-duty spouse respondents and a quarter of active-duty service member respondents (25%). Service member's unpredictable (40%) and lengthy (27%) daily work schedules, expensive child care (34%), and the length of time they have been out of the workforce (25%) remain top barriers to employment for those active-duty spouse respondents who are not working but need or want to work. Relocation also remains a top barrier; a third (33%) of employed active-duty spouse respondents who report that they will be looking for a new job in the next 12 months will be doing so due to a relocation/permanent change of station (PCS). Spouse employment relieves financial pressure for military families; 68% of spouse respondents who are not currently working but are seeking employment also report their financial situation causes them "some stress" or a "great deal of stress," compared to only 44% of their employed counterparts.

At the 20-year mark of the War on Terror, post-9/11 Veteran respondents, on average, show strong employment and financial positions. However, a greater proportion of those with a service-connected disability experience transition difficulties and a lack of preparedness for themselves and their families. Two-thirds of employed post-9/11 Veteran respondents (68%) are "somewhat" or "very satisfied" with their current/most recent job. Eight in 10 (80%) of post-9/11 Veteran respondents report a service-connected disability and over half (65%) rate their transition experience as "difficult" or "very difficult."



Community and Social Context



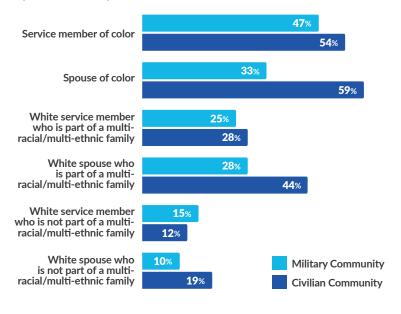


Four in 10 active-duty family respondents believe there is less racial/ethnic discrimination in the military than there is in the general U.S. society. Despite the benefits of diversity to the military community, experiences of discrimination impact military family belonging.

The military, in large part, reflects the diversity of the country they serve. While the racial/ethnic composition of the United States military as a whole is more diverse than the population of the country, differences exist by race/ethnicity, service branch, and rank. Among this survey's sample, 42% of active-duty service member and 25% of active-duty spouse respondents identify as having at least one racial/ethnic identity other than white, and 1 in 4 (24%) active-duty

Figure 1: Experienced Racial Discrimination in the Military Community and Civilian Community

Active-duty service member and active-duty spouse respondents by race/ethnicity



family respondents report they are members of a multiracial/ethnic family.^a Consistent with Blue Star Families' report, The Diverse Experiences of Military and Veteran Families of Color,² active-duty family respondents of color report experiencing instances of racial discrimination in both their military and civilian communities, with a greater proportion experiencing it in their civilian community than in their military community: more than half of service members (54%, n=149) and spouses of color (59%, n=482) have experienced racial discrimination in the civilian community, while fewer than half (47%, n=157) of service members and a third (33%, n=490) of spouses report the same for their military community.

Similar to the overall United States population, 6% (n=644) of active-duty service member respondents and 4% (n=3276) of active-duty spouse respondents identify as LGBTQ+. More

than half of those active-duty family respondents who identify as LGBTQ+ (61%, n=124) report having experienced sexual orientation-based discrimination in the civilian community (49%, n=125) and in the military. This is inconsistent with previous research from 2017, which found only a quarter of LGBTQ+ individuals had experienced discrimination because of their sexual orientation or gender identity in 2016 in the U.S. Factors unique to the military lifestyle —

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^aRespondents were asked: "Are you a member of a multi-racial/multi-ethnic family (e.g., do you have a spouse or child of a different race/ethnicity)?"
Respondents may have identified as any race/ethnicity, and it is important to note that families who identify as multi-ethnic may have different experiences than families who identify as multi-racial.

^b"In the military" encompasses experiences related to promotion/career advancement and interactions within unit/command, spouse groups, on installation, in military housing, on deployment, during military-connected training, accessing military health services, and other aspects of the military experience — broadly defined.



such as having limited say in where families live or being able to choose areas perceived to be LGBTQ+ friendly — or lagging effects of previous military policies that actively discriminated against LGBTQ+ service members⁴ may influence perceptions of sexual orientation-based discrimination and warrant continued research and monitoring.

Table 1: Religious Affiliations of Active-Duty Family Respondents			
Protestant	25%		
Catholic	21%		
Do not identify with any religious affiliation	18%		
Evangelical Christian	11%		
Agnostic	5%		
Atheist	4%		
Latter-day Saints	3%		
Spiritual/Spiritualist	3%		
Jewish	1%		
Wiccan/Pagan	1%		
Buddhist	<1%		
Unitarian	<1%		
Hindu	<1%		
Islamic	<1%		

The U.S. military is also religiously diverse, with active-duty family respondents identifying with a myriad of religious beliefs⁵ or as unaffiliated, mirroring that of the greater U.S. population.⁶ Most active-duty family respondents report having never experienced religious discrimination in their military community (88%) or their civilian community (85%). Nevertheless, the proportion of non-Christian-affiliated respondents who report experiencing religious discrimination (29%) is more than twice that of Christian-affiliated respondents (14%), and more than three times that of non-religiously-affiliated respondents (8%).

The military is taking action to address discrimination of all forms in the military community,^{7,8,9} but it does not necessarily influence what families experience in the civilian community. Military families often lack a sense of belonging to their civilian communities,¹⁰ and experiences of discrimination can be further detrimental to these feelings of belonging. Among active-duty family respondents who report experiencing racial discrimination in the civilian community,^c 45% disagree that they feel a sense of belonging to their local civilian community (vs. 40% of those who have not experienced racial

discrimination in the civilian community). Of active-duty family respondents who have experienced religious discrimination in their civilian community, 48% disagree with the statement: "I feel a sense of belonging to my local civilian community" (vs. 40% of those who have not experienced religious discrimination in the civilian community).

The military may have much to share with civilian communities about combatting discrimination, and there remains considerable work to be done to ensure parity of experiences across different racial/ethnic groups, genders, sexual orientations, and religious beliefs. Moreover, reinforcing and advancing the gains made in reaching parity is and should be a priority for the military as it has the potential for long-term implications to the sustainability of the force.¹¹



Experience of discrimination in the community can refer to a previous community, not respondents' current local civilian community.

The impact of gender-based discrimination on belonging in the civilian community was not analyzed due to a disproportionate number of female respondents in both the active-duty spouse and active-duty service member sample. Sexual orientation-based discrimination was not analyzed due to the small sample size of respondents who identify as LGBTQ+.





Limitations

There are multiple ways to define what constitutes "multi-racial" and "multi-ethnic." The Military Family Lifestyle Survey utilized a combination of respondent self-reporting to the questions: "How do you describe yourself?" and "Are you a member of a multi-racial/ethnic family (e.g., do you have a spouse or child of a different race/ethnicity)?" Responses were collapsed into three groups: respondents who did not select a racial/ethnic identity other than white and selected "No" to a multi-racial/multi-ethnic family, respondents who did not select a racial/ethnic identity other than white and selected "Yes" to a multi-racial/multi-ethnic family, and respondents of color. Respondents of color may also have identified themselves as being part of a multi-racial/ethnic family. Sample sizes are low in certain subgroups (racial/ethnic groups, LGBTQ+, and religious groups) and may be uneven among groups. Respondents' religious affiliations were collapsed into Christian, non-Christian, and not religiously affiliated for comparative purposes following delineation set forth in numerous writings. 13.14.15

Recommendations

*More information in Recommendations Chapter of Comprehensive Report

For more in-depth recommendations on diversity, equity, and inclusion, refer to Blue Star Families' Social Impact Research 2021: The Diverse Experiences of Military & Veteran Families of Color. ¹⁶



Military

- Service branches should explore the viability of establishing a diversity, equity, and inclusion (DEI) or racial
 equity and inclusion (REI) skill identifier or occupational specialty to seed this expertise throughout the force.
- Existing programs designed to support diverse families can be assessed to determine their effectiveness and expanded to other installations and service branches.
- Establish and/or support affinity groups at installations, especially in less diverse areas and/or areas in which there are documented incidents of discriminatory and/or racist behaviors.*





Nearly a quarter (24%) of active-duty family respondents cite 'military family quality of life' as a top-five concern. Families point to instability and inconsistency of daily life as the reason.

Nearly a quarter (24%) of active-duty family respondents chose "military family quality of life" as a top-five issue of concern. Quality of life has been among the top-five issues since its introduction to the Military Family Lifestyle Survey (MFLS) in 2016. Respondents who chose "military family quality of life" as a top-five issue of concern were then prompted to respond to the open-ended question, "Please describe your concerns related to military family quality of life."

While "military family quality of life" can be defined differently by respondents, themes that emerged from open-ended responses include:

- Time with Children and Family (24%): "My active-duty spouses job is important but leaves little time for us as a family or support for me as a working spouse and our children." Active-Duty Army Spouse
- Frequency and difficulties of relocating (17%): "I am a nurse practitioner. Changing my license for each state is expensive and time consuming. I am unable to work in a job I enjoy because of constant moving. Childcare is tough as a military spouse with no support from the military. No regard for constantly moving families and causing stress and instability "It's difficult to get into a positive rhythm without

for my career and kids." - Active-Duty Navy Spouse

being able to plan more than a few days in advance."

Active-Duty Space Force Service Member

- OPTEMPO (16%): "The high tempo of training, deployments, schools, etc. takes a toll on the family bonds and connections. Consistent disruptions cause distress among family members, especially children." Active-Duty Marine Corps Spouse
- Time Away (14%): "Quality of life is diminished for many military families. The service member is gone for long periods of time, sometimes with little to no notice. Family is far away and the military does not make it easy to plan trips or visits. The 'tough' mindset that the AD [active-duty] personnel are expected to have at work bleeds into family life and hinders communication and relationship building." Active-Duty Army Spouse
- Unpredictable Schedules (10%): "Shipboard Navy life is difficult on families. Not only with deployment time, but even time not on deployment is spent at sea away from families. The unpredictable schedules are also challenging."
 Navy Veteran
- Spouse Employment (9%): "I am a nurse practitioner. Changing my license for each state is expensive and time consuming. I am unable to work in a job I enjoy because of constant moving. Child care is tough as a military spouse with no support from the military. No regard for constantly moving families and causing stress and instability for my career and kids." Active-Duty Army Spouse
- Housing (9%): "Quality of housing and the continued fluctuations in BAH are very difficult for families. Choosing communities outside of installations that have good school districts for our kids is becoming more and more difficult. Those living on base are dealing with subpar housing and often the worst school choices in the area for their kids." Active-Duty Army Spouse

Communication from the unit/command is a top need of all currently-serving family respondents in 2021. For activeduty family respondents, this was true regardless of service branch, where they live (on or off installation), or whether they

^a"Currently"-serving family respondents includes active-duty, National Guard, and Reserve service member or spouse respondents.





Figure 1: Top 5 Resources Regularly Needed

Considering resources available to support military	=	222	+	11—11	an Tur
families, which of these do you feel you regularly need?	Communication from unit/command	Spouse group for unit/command	Access to medical care	Opportunity to exercise	Resources for children's activities
Active-Duty Families (n=3098)	52%	44%	42%	40%	40%
National Guard Families (n=208)	57 %	34%	36%	34%	31%
Reserve Families (n=188)	51 %	41%	36%	35%	35%

were currently separated from their service member. In the 2020 MFLS, currently-serving family respondents in all groups, including active-duty, National Guard, and Reserve spouses and service members, reported their top needs during a deployment were communication, access to medical care, and the opportunity to exercise, often followed by access to mental health care. The 2021 MFLS expanded on this inquiry by asking about the top resources they regularly need, and the responses were similar. Currently-serving family respondents in all groups report their top needs are the same, regardless of deployment or activation status. Figure 1 shows the top resources identified by each currently-serving family respondent group.

Currently-serving family respondents have consistently reported these needs, and there have been many efforts to address them. Still, a surprising proportion of responses^a (7%) to the open-ended question "Please describe your concerns related to military family

"There is a **lack of military resource support** as a [National] Guard family not living near a post."

Army National Guard Spouse

"Access to facilities when in a remote location."

Army Reserve Domestic Partner

"Difficulty finding access to the correct mental health provider. Lack of family resources/support during deployments."

Active-Duty Air Force Spouse

"Coast Guard does not receive the same resources as the other branches."

Active-Duty Coast Guard Spouse

quality of life" note "access to/lack of resources/support." Access to/lack of resources/support is noted most often by respondents who report they are stationed in "remote" locations and by Coast Guard, National Guard, and Reserve families who may live far from the service member's installation/command, or have less access to DOD programs that support military families. Additionally, while most currently-serving respondent groups cite a need for resources for children's

activities, there are differences among them. For example, nearly one-half of active-duty spouses (49%) also identify a need for resources for spouse groups.

Further, many responses to the open-ended qualitative question specifically note a lack of resources to support families with children. Nearly one-third of active-duty family respondents also note child care (32%) and mental health resources (32%) are regularly needed. In addition, over half of respondents who have

"Some bases that we have been to **do not offer** services or programs for children."

Active-Duty Navy Spouse

"Most military locations do not have enough activities for children."

Active-Duty Marine Corps Spouse

at least one child between the ages of 0 and 12 years cite "resources for children's activities" as a regular need, and 45% of respondents who have at least one child between the ages of 3-5 report the "opportunity to exercise." However, the majority of resources offered for exercise to working mothers are often not conducive to hours of need.¹





There are many different resources available to military families on base, such as Airman and Family Support Programs,² Marine Corps Community Services (MCCS),³ Navy Fleet and Family Support Programs,⁴ and Soldier and Family Services,⁵ along with military and Veterans service organizations that directly support military-connected families in their communities. However, many

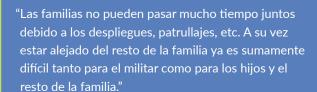
"The top five issues are the same and have been for many years. There does not appear to be a concerted effort to collectively tackle these five with clarity of purpose, using both on and off base resources."

Active-duty Air Force Spouse

active-duty military family respondents rate the resources for community support (30%), behavioral health (29%), and housing (5%) as inadequate (needs improvement to meet a basic or minimal level of service).

While the sample of Spanish-language respondents is small, their needs differ from their English-language peers. The top need for Spanish-language active-duty spouse respondents is "employment/job opportunities."

Reported Need	Spanish-Language Active-Duty Spouse Respondents (n=28)	English-Language Active-Duty Spouse Respondents (n=2622)
Employment/job opportunities	57%	30%
After-school care	39%	18%
Communication from the unit/command	36%	52%
Resources for children's activities	36%	43%



Active-Duty Navy Spouse

("The families can't spend too much time together due to deployments, TDYs, etc. To be far from the rest of the family is already incredibly difficult, as much for the military service member as for the children and the rest of the family.")



"La calidad de vida se ve afectada por el estrés laboral de mi esposo así como la discriminación racial que siente. También me preocupa personalmente la adquisición de empleo fijo para mi."

Active-Duty Army Spouse

("Quality of life is affected due to my spouse/husband's work stress like the racial discrimination he is experiencing. Also, I'm personally worried about finding stable work for myself."

Further, Spanish-language active-duty spouse respondents to the MFLS report spouse employment as a top issue of concern (48%), similar to their English-language active-duty spouse respondent peers (47%).

Similar to their English-language peers, Spanish-language respondents^e report "military family quality of life" is most affected by the frequency of moves, time away from family, and work schedule. However, some respondents to the openended question note racism and racial discrimination in the workplace and community, similar to English-language military families of color respondents.

The 2020 MFLS offered a Spanish-language survey option. Please refer to the methodology section in the full report for a detailed description of the Spanish-language survey.

^dNote the total number of respondents differs greatly between Spanish language and English language respondents.

^eQualitative responses include all respondents.





Limitations

While the survey has a robust sample of currently-serving military family respondents, the subsamples of National Guard (n=208) and Reserve (n=188) respondents who answered the resources question are small, compared to their active-duty peers (n=3098). COVID-19 may still be influencing the resources needed by respondents. Additionally, the total sample size of Spanish-language respondents is small (n=75) and even smaller when limited to active-duty spouses who answered the questions about needed resources. While these participants responded to the Spanish-language version of the MFLS, we currently do not have additional analysis on why they chose to take the survey in Spanish, or how this group may differ from their Spanish-language peers who chose to respond in English.

Recommendations

*More information in Recommendations Chapter of Comprehensive Report



Military

- Continue to expand efforts to provide service members more control over their careers (including when and where they relocate) and day-to-day schedules.
- Diversify bi-directional communication methods that commands use when connecting with the families in their unit, especially with National Guard and Reserve families regarding information about eligibility and how to access available resources and services.
- In support of overall family mental health and wellness, increase support of in-home child care and increase child care capacity at both on-installation child care facilities and fitness centers.*
- Increase offerings of resources, especially those targeting employment and child care in high-demand languages (e.g., Spanish).



Congress

Commission a report on the effects of nationwide housing shortages and rising costs on military families.



Communities

 Actively recruit military families to participate in existing social and community programs to increase their connectedness and sense of belonging to the community.



National Guard and Reserve family respondents report high levels of deployment activities in the last year; many report they would recommend military service to young men and women.

National Guard and Reserve service members and their families note experiences and challenges that differ both from each other and from those of their active-duty peers in many ways. For example, these families usually do not experience frequent relocations, and therefore may have access to a more stable social network than active-duty families. However, they do not typically live near a military installation, and therefore may not have the same access to military resources. The disparate sample sizes of active-duty, National Guard, and Reserve respondents to the survey limit the ability to compare them directly, but this spotlight profiles these two important groups.

National Guard Family Respondents Reserve Family Respondents Total number of respondents = 287 **Total number of respondents = 252** Service member (n=93) Service member (n=92) Spouse of service member (n=194) Spouse of service member (n=160) 80% Male Male **Female Female** Mean age = 39Mean age = 40Race/Ethnicity^a Race/Ethnicity^a 75% White Other 75% White Other 13% Hispanic/Latino/a/x American Indian/Alaska Hispanic/Latino/a/x American Indian/Alaska Native Native Black/African American Native Hawaiian Native Hawaiian Black/African American Asian or other Pacific Islander or other Pacific Islander identify as LGBTQ+ identify as LGBTQ+ member of a multi-racial/multi-ethnic family^b member of a multi-racial/multi-ethnic family^b use a language other than English in their home use a language other than English in their home U.S. citizen by naturalization U.S. citizen by naturalization from a recently-immigrated family^c from a recently-immigrated family

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^aRespondents were able to select all the race/ethnic groups they identify with; percentages will not total 100%.

Those who responded "yes" to the question "Are you a member of a multi-racial/multi-ethnic family (e.g., do you have a spouse or child of a different race/ethnicity)?" Families who identify as multi-ethnic may have different experiences than families who identify as multi-racial.

Those who responded "yes, one or both of my parents was born in another country and immigrated, but I am U.S.-born" or "yes, I was born in another country and immigrated to the U.S." to the question "Are you from a recently immigrated family?"



Top Issues

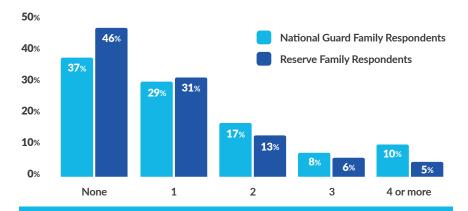
More than half of National Guard family respondents (55%) and 40% of Reserve family respondents report they or their service member were activated during survey fielding, from April to June 2021. The unprecedented activation and deployment of our Reserve Component^{1,2} in 2020 and continuing into 2021 is reflected in the top two issues of concern for both National Guard and Reserve family respondents — "amount of time away from family as a result of military service" and "impact of deployment on family," consistent with last year's top issues for both groups.³

National Guard and Reserve Family Respondents "Please select up to 5 military life issues that most concern you."					
	National Guard Family Respondents (n=259)	Reserve Family Respondents (n=228)			
Amount of time away from family	42%	41%			
Impact of deployment on family	34%	34%			
Military pay	25%	15%			
Military benefits	25%	22%			
Understanding of military/Veteran issues among civilians	23%	22%			
Military spouse employment	13%	27%			

Most (63% of National Guard family respondents and 54% of Reserve family respondents) had experienced at least one military-connected separation lasting a month or longer in the past 18 months. One-third of National Guard family respondents (34%) and nearly a quarter of Reserve family respondents (23%) had experienced two or more separations. While the number of separations in the past 18 months is often greater for National Guard and Reserve

Number of Separations from Service Member in the last 18 Months

National Guard and Reserve Family Respondents



"In the past 18 months, how many military-related separations longer than 1 month (deployment, TDY, training, work-ups, etc.) has your family experienced?"

families, they spent nearly as much total time separated as their active-duty family counterparts. Nearly a third of both National Guard (30%) and Reserve (28%) family respondents had been separated from their service member for six or more total months in the past 18 months, similar to their active-duty family peers (31%). These activations may be ongoing or continue into the future; given the fact that since survey fielding took place from April-June 2021, the COVID-19 pandemic persists with new health care challenges and other national crises continue to emerge.

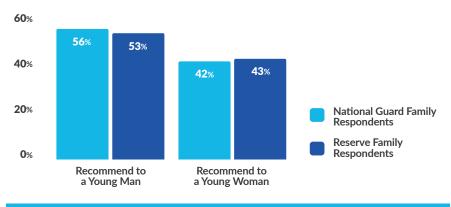
The majority of both National Guard

(59%) and Reserve family respondents (56%) characterize the OPTEMPO (daily workload, deployment load, and training load) the service member has experienced since January 1st, 2020, as "stressful" or "very stressful" for a healthy work/family life. However, many National Guard and Reserve family respondents report they are likely to recommend service to a young man or a young woman, indicating they are probably satisfied with the Reserve Component lifestyle. That said, there are National Guard and Reserve family respondents who are discontented with military or command leadership. 4.5 Following "military retirement" (59%), the most common reason National Guard family respondents would



Likely to Recommend a Young Man or Young Woman Join the Military

National Guard and Reserve Family Respondents



"How likely are you to recommend a [young woman] or [young man] close to you to join the military?"

choose to leave the military is "loss of faith or trust in unit/command leadership" (26%), compared to 19% of Reserve family respondents.

Civilian Employment

Most National Guard (89%, n=56) and Reserve (75%, n=64) service member respondents are employed full- or part-time in addition to their military service. Although this survey was fielded during "the Great Resignation," the majority of National Guard and Reserve service member respondents are satisfied with both their civilian employer (74% of National Guard

service members, 82% of Reserve service members) and their civilian job (70% of National Guard service members, 82% of Reserve service members). Despite their overall satisfaction, one area that lags behind in satisfaction is career advancement opportunities, aligning with the 2020 Military Family Lifestyle Survey in which many Reserve and National Guard respondents reported they had experienced negative employment repercussions (including missing training or promotion opportunities)^d after a deployment or activation.⁷ A much lower proportion — only 50% of Reserve service members and 46% of National Guard service members — are satisfied with the career advancement opportunities that their civilian employer offers. Four in 10 Reserve service members (39%) and National Guard service members (42%) are likely or very likely to look for a job outside their current organization within the next 12 months, most commonly for higher pay, better fit for skills and abilities, better benefits, and job satisfaction.

Resources and Military Family Quality of Life



A common concern for National Guard and Reserve family respondents is the limited support and resources available to them due to their distance from military installations. While the top "I am an out of towner reservist. My family stays behind when I go to work in uniform and have zero support from any military resources. **We rely on family and friends to help when I'm away.** We try to keep the kids' schedules stable regardless of who is caring for them."

Air Force Reserve Service Member

resources needed for National Guard and Reserve family respondents are the same as active-duty family respondents (See Resources Finding), National Guard and Reserve families often have the additional challenge of not being co-located with military-focused resources. The shift to virtual service provision as a result of the COVID-19 pandemic may have alleviated some of these access issues, but many services may remain unavailable for those not in close proximity to a military installation.

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^dNegative repercussions after a deployment or activation could have occurred at any point in their military service, so they may not have occurred with their current or most recent employer.



Caregiving Among National Guard and Reserve Families

One in 5 National Guard and 1 in 4 Reserve family respondents identify as an unpaid caregiver. Of those, a greater proportion, more than 4 in 10 are caring for a parent or grandparent (40% of Reserve and 44% of National Guard family



respondents). Managing care provision for a loved one may be complicated during deployment or activation, requiring greater support for these caregiving families.

20% of National Guard family respondents and 25% of Reserve family respondents identify as an unpaid caregiver.

Limitations

Disparate sample sizes and demographic differences between active-duty and National Guard or Reserve family respondents limit comparisons that can be made between the two groups. Furthermore, "family respondents" refers to a combined sample of service member and spouse respondents, and service member respondents and spouse respondents may have differing perspectives. Sample sizes of exclusively National Guard and Reserve service members are small, and while their responses provide some insight into their civilian employment concerns, samples cannot be considered representative of all National Guard and Reserve service members. Finally, the 2021 Military Family Lifestyle Survey was fielded between April and June 2021, during a timeframe when many respondents (and the general American public) may have had a hopeful perspective on the trajectory of COVID-19 as vaccines were becoming widely available and new infection caseloads fell. These perspectives may have shifted since survey fielding, as the COVID-19 pandemic is evolving and ongoing.

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Recommendations

*More information in Recommendations Chapter of Comprehensive Report



Military (DoD)

- Ensure provision of universally accessible military-sponsored support (i.e., Soldier and Family Readiness Group, Family Readiness Program, Key Spouse Program, Ombudsman Program) for National Guard and Reserve families.
- Diversify bi-directional communication methods that National Guard and Reserve commands use when connecting with the families in their unit, especially regarding information about eligibility for, and access to, available resources and services.*
- Identify what caregiving, childcare, and other resources and support exist for National Guard and Reserve families in communities where they are drilling or performing military duties.
- Educate National Guard and Reserve families on available resources, their eligibility, and how to access them.
- Address concerns identified in command climate surveys. Focus on clear, consistent, and constant communication with National Guard and Reserve families.



Community

 Ensure local Veteran- and military-serving organizations are aware of and can connect National Guard and Reserve families to local, available resources.



Congress

 Commission a report on the impact of activation and deployment on civilian career progression of National Guard and Reserve members.

Acknowledgments

Blue Star Families' Applied Research team would like to thank the National Guard Bureau for their insight and review of this finding.



Health Care Access and Quality





Two-thirds of military-connected family respondents (67%) report challenges with family building, including a lack of medical coverage for fertility-related treatments, which may contribute to financial difficulties and stress for some families.

Family building challenges are a common experience among military families. However, it has yet to be well researched, especially in nontraditional or modern active-duty military families such as LGBTQ+. Existing research with civilian families often relies on clinical definitions of fertility (e.g., The Centers for Disease Control estimates that about 12% of women in their childbearing years have difficulty getting pregnant or carrying a pregnancy to term¹). The 2021 Military Family Lifestyle Survey (MFLS) sought to understand family building challenges more broadly, particularly as they relate to military service. The 2021 MFLS asked respondents about specific family building challenges, such as miscarriage or hormonal imbalances, and the impact of military service on respondents' family building efforts.

"I suffered a miscarriage and required surgery while my husband was deployed. It was extremely hard on both of us because he couldn't be there."

Active-Duty Army Spouse

"I experienced an ectopic pregnancy in a remote location that was not well equipped to diagnose or treat it, resulting in a ruptured tube and invasive surgery, which basically **ended the possibility for further unassisted pregnancies** because of cysts on the opposite ovary."

Active-Duty Space Force Service Member

The majority of military-connected family^a (67%), including active-duty family (64%), respondents have experienced at least one of the listed family building challenges in their lifetime. Of the listed challenges, the most commonly selected are fertility challenges, miscarriage, and hormonal imbalance (see Table 1).

Table 1. Family Building	Challenges Experienced
% of military-connected family	respondents who indicate they or their spouse or partner have ever experienced any of the following family building challenges

% of military-connected fa	mily respondents with	o indicate they of th	eir spouse or partifie	r nave ever expenen	ced ally of the follow	wing raining building	chanenges
	Active-Duty Service Members (n=344)	Active-Duty Spouses (n=1,826)	Veterans (n=665)	Veteran Spouses (n=399)	National Guard Families (n=143)	Reserve Families (n= 124)	Spanish-language Respondents ^b (n=45)
Fertility challenges	23%	27%	18%	23%	24%	27%	15%
Miscarriage ^c	25%	34%	21%	33%	27%	31%	13%
Still birth	2%	2%	3%	3%	3%	2%	9%
Low testosterone	10%	8%	25%	25%	12%	9%	9%
Hormonal imbalance	20%	27%	22%	32%	26%	25%	22%
Erectile dysfunction	11%	7%	38%	33%	12%	7%	11%
Sexual dysfunction	13%	11%	33%	30%	12%	5%	13%

^aMilitary-connected family respondents include active-duty, Veteran, National Guard, and Reserve family respondents.

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^bIncludes all Spanish-language respondents; however, the majority (59%, n=27) are active-duty spouses.

The proportion of active-duty spouse respondents reporting a lifetime experience of miscarriage (34%) is notably higher than the lifetime prevalence of miscarriage among civilian populations (26%). While miscarriage is only one of many family building challenges, the higher lifetime prevalence among comparatively young active-duty spouse respondents may indicate a need for further exploration of all family building challenges military families face.





The military lifestyle introduces unique challenges to family building, including unpredictable separations between partners, disruptions to treatment due to relocation and/or deployment, and challenges accessing care due to the location of duty stations and lack of coverage for potential treatments. Over 4 in 10 active-duty family respondents (42%) report the military created challenges to having children, specifically the desired number and/or spacing of their children (referred to as fecundity). Infertility is defined as a lack of pregnancy in the 12 months prior (or six months for those over 35), despite having had unprotected sexual intercourse in each of those months with the same husband or partner. Meeting criteria is difficult for many military families, who do not experience 12 or even six consecutive months without a

separation from their service member. One-third (31%) of active-duty family respondents report they have been separated for a total of six months or more within the past 18 months. Half (49%, n=245) of active-duty family respondents who report they or their service member was assigned to or supporting the United States Special Operations Command (SOCOM) indicate the military created challenges in family building, compared to 42% of their non-SOCOM peers. Additionally, family building challenges due to military lifestyle are much higher for female active-duty service members than their male peers (57%, n=263 vs. 28%, n=209).

Similarly, a higher percentage of female Veteran respondents report the military created challenges in family building than their male peers (30% vs. 19%). More than half (54%, n=142) of LGBTQ+ active-duty family respondents, also reported family-building challenges due to military service. While family building

"Pregnancy and postpartum recovery time affects a woman's chances of promotion. **Obligations of motherhood and military service commitment limit how many children I felt like I could have.**"

Active-Duty Air Force Service Member

"We were beginning our third attempt at IVF when I was notified that I was deploying (in 30 days) for OIF [Operation Iraqi Freedom] in 2004. We were at the far end of the age range in which IVF is a viable option. By the time I returned from deployment, I was 46 and my wife was 43, and we determined that we had lost our last opportunity."

Army Veteran

challenges are common among military and civilian families, the added obstacles introduced by military life may cause families to leave service. One in 10 active-duty service member respondents (11%) indicate family building challenges as one of the reasons they would leave the military, and 5% of Veteran respondents say one reason they left the military was family building challenges.

One in four (44%, n=57) Spanish-language respondents also note challenges to family building due to military service. Responses to the open-ended question that asked respondents to "share your story about your family building experience" in the Spanish-language survey indicate that language is a barrier to accessing family building resources and support services for some of these respondents.

"La barrera ha sido el idioma, para acceder a más servicios que el Army ofrece."

Spanish-Language Active-Duty Army Spouse

("The barrier to gaining access to more services that the Army offer has been language.")

Among those military families who seek or use resources related to family building challenges, access to and affordability of care create added hardship. Of those active-duty family respondents who report they or their spouse or partner have experienced at least one of the listed family building challenges (e.g., fertility challenges, hormonal imbalance, etc.) and they have used resources (e.g., assisted reproduction, gestational carrier, etc.) to build their family, 73% sought care from a civilian medical provider and 60% sought care from a military treatment center. Of those who sought care from a civilian medical provider (n=298), 12% report they did not receive the reproductive support they were looking for, compared to 36% of

^dQuestion: Did military service create challenges to having children, the desired number of children, and/or the desired spacing of children?

^eQualitative responses include all Spanish-language respondents.





those who sought care from a military treatment facility (n=239).^f This discrepancy is intensified for families who do not qualify for certain types of family building care under DOD restrictions, such as same-sex couples and single service members. In the MFLS, a higher percentage of LGBTQ+ active-duty family respondents report they did not receive the reproductive support they were looking for from a military treatment facility (45%, n=11), compared to 5% (n=20) of those who sought care from a civilian provider.

Family building challenges often lead to major costs and financial stressors. Some active-duty military family respondents note they incurred out-of-pocket costs when attempting to receive care due "Lesbian couple trying to get pregnant [...] very few providers accepted TRICARE — we only lived there for 11 months & could not continue with fertility treatment with the team we had established. We currently live overseas [...] and the Navy Hospital provides ZERO help with same-sex couples' fertility. We have traveled to [another country] for fertility treatment since [the one we are currently at] doesn't have the best stance on LGBTQ+ matters."

Active-Duty Navy Spouse

to lack of coverage for assisted reproduction under TRICARE. Of those active-duty family respondents who state they have tried to build their families through adoption, medical treatments, surrogacy, and/or fostering to adopt, over three-quarters (77%) of active-duty military family respondents report out-of-pocket expenses associated with family building issues. Of those with out-of-pocket expenses, nearly 7 in 10 respondents (67%) report they spent at least \$501, 4 in 10 (42%) spent over \$5,001, and 1 in 10 (11%) spent over \$35,000.

Active-Duty Families' Out-of-Pocket Expenses Associated with Family Building







LGBTQ+ family members face additional barriers associated with family building, such as extra costs to prove infertility/fertility and barriers to adoption in some states. Further, 88% (n=24) of LGBTQ+ active-duty military family respondents who state they have tried to build their families through adoption, medical treatments, surrogacy, and/or fostering to adopt report out-of-pocket expenses, compared to 77% of all active-duty family respondents. This financial burden can also be a constant reminder of the pain and mental stress placed on families who are struggling to build their family. Infertility and family-building challenges can negatively affect overall health and well-being. Active-duty family respondents who have experienced family building challenges are more stressed than their peers who have not, as is also reflected in the civilian population that shows significantly higher levels of anxiety and depression.

"I am in a same-sex marriage. At a previous duty station, we were wanting to try to have a child. I didn't know where to begin, so I asked my PCM for a referral to women's health. I was denied the referral because, according to my PCM, 'You have to be trying to have children with a man before you can be referred.'

He would not refer me bc [because] I wasn't having sex with a man! It was very upsetting, and I felt like I couldn't get the medical resources (even just information!) that I felt other women were able to receive."

Active-Duty Air Force Spouse

"For medical treatments, it cost me \$800 for sperm, \$200 for shipment, and \$300 for the IUI procedure EVERY TIME WE TRIED. It took 5 tries before we got pregnant."

Active-Duty Air Force Spouse

flt is important to note that of the six military treatment facilities that offer care, there is

a lack of consistent patient care standards and criteria for care, making it difficult to transfer from one to another.

^gElements of this quote have been redacted to protect the respondent's privacy.

^hUp to 60% of infertile individuals reported psychiatric symptoms with significantly higher levels of anxiety and depression than fertile individuals.





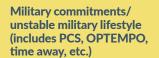
When asked to share family building stories in an open-ended question, currently-serving families report the top challenges to family building are military commitments (52%), excessive out-of-pocket costs (21%), and the stress of fertility treatment (20%).

Military families sacrifice to serve their country in multiple ways. Still, the unique characteristics of the military lifestyle, such as long "We did IVF out of pocket and lost twins. We had to pay a loan (reminder) for three years after. If we were able to afford the unlimited tries, we would have a baby together. Him being gone a lot is also a factor."

Active-Duty Army Spouse

separations and interrupted treatment due to deployments and relocations, add an additional obstacle to those struggling to build their families. Across all branches, military family respondents note the toll these struggles take on mental health and personal finances. Furthermore, the combination of military-related obstacles and broader family building challenges may be intensified for LGBTQ+ couples, military members who choose to parent without a partner, or individuals who require alternative ways to support fertility due to disease, genetic variance, or anatomical dysfunction. Many open-ended question responses illustrate that financial struggles are in large part due to the lack of insurance coverage from TRICARE and the lack of military treatment facilities that could provide service, which disproportionately impacts single service members and LGBTQ+ families. Supporting these families, particularly as military service generally encompasses the ideal reproductive age range of 18-35, is vital to helping them thrive throughout their military service and beyond.

Top Challenges to Family Building





"Due to both being active duty, we delayed having children for 10 years. We decided to have children very close together to be able to have them while we were stationed together. Had to transition to the reserve to be able to stay together." — Female Reserve Service Member

Expensive out-of-pocket costs/financial concerns/TRICARE/CHAMPUS would not cover



"There are no MTFs [military treatment facilities] near where we are stationed, so we have to use a civilian doctor. The financial costs are enormous. It's very stressful. We now have PCS orders and it might interrupt our treatment that we have been working months to complete. The thought of having to start from scratch in a new city or incur the extra travel costs of traveling back and forth to the old IVF clinic is a nightmare." — Female Active-Duty Coast Guard Spouse

Fertility treatments/infertility/IVF



"We tried to conceive for 3 years before finally becoming pregnant on our 4th round of IVF and are due in 6 weeks. The military and TRICARE paid for none of it. We spent most of the money we had saved for a house down payment, around \$40K in total. If TRICARE covered infertility, we would have experienced much less stress and be in a better financial position." — Female Active-Duty Air Force Spouse

Limitations

While we had a robust response to our family building section (over 5,000 respondents, including over 3,000 active-duty family respondents, answered the initial items, and over 1,600 respondents answered the qualitative question), the sample size drops due to the nature of the survey logic. For example, only those who experienced family building challenges were asked if they sought treatment and only those who sought treatment were asked if they incurred out-of-pocket expenses (n=412 active-duty family respondents). Additionally, the list of family building challenges is not limited to respondents' time in service or direct result of service, so we cannot determine if respondents experienced difficulties before, after, or during service. We are also unable to make direct comparisons to the civilian population due to differences in definitions, sample characteristics, etc. While much of the research in civilian populations includes medical diagnoses, it was important to expand the definitions within the 2021 MFLS to capture the wide variety of experiences and challenges related to family building in military families.





Recommendations

*More information in Recommendations Chapter of Comprehensive Report



Military

- Provide instruction (Department of Defense Instruction (DODI) or other policy change) and encourage military treatment facility providers to loosen "time trying" requirements when working with military families due to frequent time apart.
- Provide education and guidance to human resources commands to expand compassionate reassignment eligibility to include family building challenges.
- Provide Spanish translation/Spanish-language resources to close the gap for Spanish speakers who experience language barriers.



Defense Health Agency

- Expand family building support to ensure equitable treatment and treatment options for special populations.*
- Increase the number of military treatment facilities offering full fertility services.



Veterans Health Administration

Expand access to intrauterine insemination (IUI), in vitro fertilization (IVF), and assisted reproductive technology (ART) for female Veterans who are single, in same-sex relationships, and meet the service-connected infertility requirement to ensure they have equal access to use the benefits they deserve.



Congress

- Require a comptroller report to explore fertility and family building challenges for military and Veteran families, to include exploration of inequitable impacts of existing policies on specific subgroups.
- Consult with advocacy groups and government stakeholders to identify and remove barriers to implement the
 aforementioned recommendations.
- In the absence of movement towards the aforementioned recommendations, pass legislation requiring them.

Acknowledgments

Blue Star Families' Applied Research team would like to thank the Military Family Building Coalition and Modern Military Association of America for their insight and support for this finding.





Spouses are the backbone of military families. The necessity to take on multiple roles and responsibilities can affect their sleep, stress, mental health, and ability to find employment.

The disparity in spouse perception on the division of household labor, parenting, and overall time spent with children is well documented.¹ However, for military families, the nature of military service can mean the service member is unavailable to support household labor or family obligations, often leaving the military spouse solely responsible for maintaining day-to-day household obligations and family needs. Execution of these responsibilities can bring with it unique health and well-being impacts as making time for self-care comes second to caring for everyone else.² As for the military spouse population as a whole,³ the majority of military spouses in this sample are female (98%) and have children (86%).

Table 1: % with Children in Age Group in the Home Active-duty spouse respondents with at least one child in each age group				
Infant (ages 0-2 years)	29%			
Preschooler (ages 3-5 years)	38%			
Grade-school-age (ages 6-12 years)	60%			
Adolescent (ages 13+)	37%			

"Spouses often carry the mental and physical load of the family, all while also working."

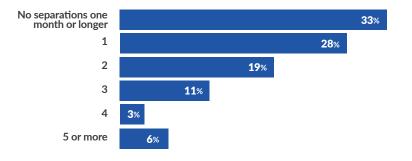
Active-Duty Army Spouse

The Impact of Separation

Being separated from loved ones, sometimes for long periods, is part of military life. The majority of spouse respondents (81%) indicate that they have experienced at least one separation from their service member due to military obligations in the past 18 months, although the length of these separations may vary. Of those who note being separated from their service member at some point in the past 18 months, one-third (33%) have not experienced any separations longer than one month, 28% report one separation longer than one month, and 39% have experienced multiple separations longer than one month. Roughly three-quarters (77%) of active-duty spouse respondents report they were not currently separated from their service member at the time of survey fielding; however, one in 10 (9%) active-duty spouse respondents were separated from their service member due to deployment, 10% due to TDY/

Figure 1: Number of Military Separations That Were a Month or Longer

Active-duty spouses who had been separated from their spouse during the past 18 months



Training/Unaccompanied tours, and 4% due to geobaching.

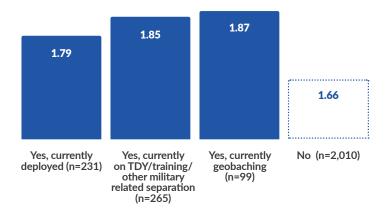
While the military lifestyle requires frequent adjustments to changing environments, and military spouses have long been familiar with these shifting demands, these changes and separations still come with a cost to overall stress levels. Active-duty spouse respondents who were separated from their service member report higher mean stress scores than those who were not currently separated from their service member at the time of survey fielding.





Figure 2: Perceived Stress Among Active-Duty Spouse Respondents Experiencing Military Separation

Are you and your family's service member currently separated ...due to military service?



"My spouse is deployed and has been gone for 10 months. I have two young children and we are currently in a pandemic. I have **no time alone and no time to really recharge...**"

Active-Duty Navy Spouse

Chronically high stress levels have been associated with higher rates of physical and psychological issues, and repeated separations and associated stress may impact spouses physical and mental health. Fewer than half (42%) of active-duty spouse respondents agree that their health is excellent. While two-thirds of active-duty spouse respondents (67%) report they do not have a current mental health diagnosis, 25% report a current diagnosis

of generalized anxiety disorder (GAD), which is much higher than the estimated levels of GAD in the overall population.⁵ Higher than estimated civilian levels⁶ of post-traumatic stress disorder (PTSD) (8%) are also self-reported.

5% of active-duty spouse respondents said that they **considered suicide** within the past year.

Child Care

Less than a quarter (22%) of spouses with a need for child care report they are always able to find care that works for their current situation. The process of finding child care can be challenging for many, but spouses with children who have special needs face additional difficulties finding care⁷ (see Spouse Employment and Child Care Finding for more details). With half (51%) of spouses with children at home reporting they have a child (or multiple children) with one or more of the listed impairments, disorders,

"Finding child care for special needs children was extremely difficult. The CDCs did not have the resources nor knowledge to provide care for our child and the special needs preschool was only half day. When I tried to talk with the CDC about our son's needs, they were all very caring **but it was apparent there were not enough resources or procedures in place** to address his unique needs."

Active-Duty Army Spouse

Parent Support

8% of military-connected parent respondents (n=237) who indicated that they provide support to their active duty service member or spouse children **provide childcare on a regular basis.**





Table 2: Children's Impairments, Disorders, and DisabilitiesActive-duty spouse respondents with children who live at home (part-time or full-time; n=2,462)

Do you have a child with any of the following conditions? Please select all the	at apply.
None,* my child(ren) does/do not have any of the following conditions	49%
ADHD	21%
Anxiety disorders	21%
Long-term physical conditions (medical condition, illness, or disability lasting longer than one year)	15%
Learning disability (dyslexia, auditory processing disorder, etc.)	13%
Communication disorders (including speech or language impairment)	13%
Autism Spectrum disorder	9%
Depressive disorders	8%
Other	6%
Diagnosed behavior problem	3%
Short-term physical conditions (medical illness or injury lasting less than one year)	3%
Visual impairment, including blindness	3%
Motor disorders	3%
Intellectual disability	2%
Other mental health disorder	2%
Eating or feeding disorder	2%
Trauma-related disorders	2%
Hearing impairment, including deafness	1%

^{*}None was an exclusive answer choice

or disabilities (see Table 2), the experiences of this population necessitate further exploration. Active-duty spouse respondents provide insight into their experiences trying to find child care for their child(ren) with an impairment, disorder, or disability in openended responses to the question: "What, if any, challenges did you have in finding care?" The most common themes of challenges are availability of care (25%), Child Development Center (CDC) requirements (22%), and lack of qualified/trained providers (15%).

The Importance of Sleep

Echoing trends in the civilian population, only 41% of active-duty spouse respondents report they get enough good quality sleep to function effectively. Sleep quality for spouses is influenced by a variety of factors, including military separation and parenting responsibilities. Smaller proportions of active-duty spouse respondents who report they were separated from their service member due to deployment (38%), TDY or training (36%), or geobaching (33%) at the time of survey fielding agree they get enough sleep to function effectively than

those not separated from their service member (42%). The presence of children also impacts the ability of spouses to get good quality sleep. A third of active-duty spouse respondents with children at home (39%) agree that they get enough good quality sleep to function, while 49% of their counterparts who do not have children at home feel the same. Of those who responded to the open-ended question, "What is preventing you from getting enough sleep to

function effectively?" the most commonly cited reasons are stress and anxiety (26%), physical health-related reasons such as chronic pain (25%), and parenting responsibilities (21%).

6% of active-duty spouse respondents **report** having a diagnosed sleep disorder.

What is preventing you from getting enough sleep to function effectively?

"I have a 1-year-old and a spouse who is on an extended training exercise. We are OCONUS and family is unable to visit. We moved during the pandemic and have no friends. I don't even know anyone in my spouse's unit."

Active-Duty Army Spouse





Sense of Belonging

A sense of belonging to a community is a critical component of resilience. Spouses have reported in previous surveys that they often lack this sense of belonging to the local civilian community; less than a third of active-duty spouse respondents (29%) to this year's survey report feeling a sense of belonging to their local civilian community. Because many military spouses are new to their communities — a third of active-duty spouse respondents (37%) report they had lived in their local community for less than 12 months — the military community often offers an opportunity for belonging. A family readiness group can serve as a potential bridge between civilian and military communities for spouses. Although what denotes a family readiness group differs between service branches, they can include command spouse groups, family readiness groups, Ombudsman/Key Spouse groups, and work-life groups. These spouse groups are stood up to counteract feelings of isolation or exclusion, provide command and community information, and create a shared sense of belonging. However, fewer than 1 in 5 active-duty spouse respondents (19%) report that they feel a sense of belonging to the unit/command spouse group, or to their spouse's unit or command (20%), indicating that these groups should not be the only avenue for connection for active-duty spouses.

Intimate Partner Violence

In addition to other stressors brought on by military life, one out of ten active-duty spouse respondents (10%) report experiencing unhealthy relationship behaviors during the past year. These unhealthy relationship behaviors could include jealousy, controlling behavior, financial or economic control, isolation, insults, or threats, and are included in many definitions of intimate partner violence. Economic abuse, in particular, is correlated with psychological, sexual, and physical violence. Aspects of the military spouse lifestyle, like isolation from family and friends, as well as child care and employment challenges that may make them more financially vulnerable and dependent on the service member, may put spouses at greater risk of experiencing intimate partner violence. Indeed, according to the Department of Justice's Bureau of Justice Statistics, the incidence of domestic violence in the U.S. was approximately 4.2 victimizations per 1,000 persons age 12 or older in 2019 (or 0.42%). When compared to the proportion of spouse abuse reports that met

DOD criteria in FY2019 (10.9 per 1,000 military service members, or approximately 1.1%),¹⁸ the frequency of domestic violence/abuse in the military was potentially greater than two times that of the national population prepandemic.^{b,c}

Table 3: % of active-duty spouse respondents who report experiencing each of the following within the last year (n=2,560)	
Has your partner or spouse	
Sometimes said insulting things or threatened you?	8%
Limited your access to financial accounts or made you ask him/her for money, withheld money, demanded to know how money was spent, or concealed financial information from you?	4%
Been very jealous or tried to control your life?	3%
Tried to keep you away from your family or friends?	2%

Respondents were able to select all that applied.

Of course, there are compounding risk factors for unhealthy relationship behaviors and intimate partner violence.¹⁹ For example, 16% of active-duty spouse respondents who identify as an unpaid caregiver report at least one type of concerning behavior, compared with 9% of spouses who do not identify as a caregiver. Additionally, 12% (n=196) of spouses who are connected to the Special Operations Command (SOCOM) report one or more unhealthy relationship behaviors in the past year, compared with 10% (n=2005) of spouses who are not affiliated with SOCOM.

^a"Domestic violence" as defined in this report was limited to "rape or sexual assault, robbery, aggravated assault, and simple assault" or "threatened, attempted, and completed occurrences of those crimes." (Morgan and Truman, 2019)

^bThe 2021 MFLS was fielded during the COVID-19 pandemic. Differences between pre-pandemic data and the 2021 MFLS could be related to factors that were not examined in the MFLS.

While the Bureau of Justice Statistics report included violent incidents involving any family member over the age of 12, the DOD report was limited to abuse of spouses, indicating that the disproportionate rate of domestic violence within military families may be even greater.

Spouse Health and Well-Being





Of those who have experienced any concerning behaviors, the majority (90%, n=257) did not report concerns about their spouse's behavior. Most (49%) did not report the behavior because they felt it was not a big deal. However, a notable proportion (17%) indicate they were afraid to hurt their spouse's/partner's career, 5% indicate they were embarrassed, and 5% cite a lack of confidentiality as reasons they did not report, demonstrating that concerns for repercussions continue to prevent spouses from seeking support (n=225). The majority (59%, n=253) of spouses who have experienced unhealthy relationship behaviors say they are aware of resources that could help, and that they are able to access resources (56%, n=251), but only a third report actually accessing resources (37%, n=250). Of those who have utilized resources, 58% (n=91) agree the resources were helpful to them. It is important to note, however, a quarter (25%, n=253) of active-duty spouse respondents who have experienced these concerning behaviors do not agree with the statement: "I am aware of resources where I can turn for help."

Implications

Spouse well-being and family experiences can impact the decision to remain in or leave the military. Almost four out of ten (38%) active-duty spouse respondents say their family expects to exit military service within the next five years. Among those respondents planning to exit service within the next five years, the most commonly cited reason for leaving the military, outside of military retirement, is "the military lifestyle did not allow me sufficient time with my family"(24%). Given the impact of female spouses on family decision making²⁰ and the potential impact on service branch end strength if and when families choose to exit military service, it is imperative that military spouses' overall well-being factor into personnel policy priorities.

Recommendations

*More information in Recommendations Chapter of Comprehensive Report



Military

- Conduct a communications campaign to educate military families on the services available to support healthy relationship behaviors, options for reporting unhealthy behaviors, and dispel myths about the impact of reporting on the service member's career.
- Educate professionals working with military families to recognize and intervene when they observe unhealthy patterns of behavior in relationships and expand pathways to help families through multiple touchpoints, regardless of the presence of physical violence.
- Expand drop-in or hourly child care availability, to include availability at installation fitness centers.
- Expand and provide consistent respite child care support.
- Commission a report on families with children with special needs and their barriers to accessing child care. Include plans for hiring and training qualified providers and making CDCs accessible for children with special needs.*



Non-Profits or Communities

• Invite uniformed family readiness officers/assistants across the DOD to informal military spouse groups to ensure accurate dissemination of information and resources.



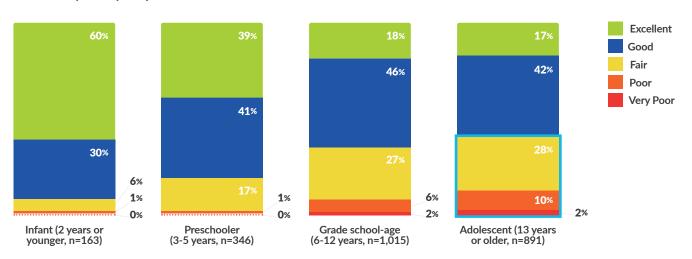


While active-duty family respondents report the average mental health of children in their family is good, they report poorer mental health for adolescents; families experiencing a separation or those reporting concerning relationship behaviors also report lower average mental health of their children.

There are several complex contributing factors at play when examining the overall state of military children's mental health. After over a year of the COVID-19 pandemic, children's mental health is at a crisis level^{1,2} nationwide. The same is true for many military children.³ Despite this, most active-duty family respondents to the 2021 Military Family Lifestyle Survey (MFLS) report their children's mental health is "good" or "excellent," averaging 3.93 on a scale of 1 (Poor) to 5 (Excellent).³ A notable proportion (43%), however, rate at least one child's mental health as "fair," "poor," or "very poor," and a small proportion (5%) of active-duty family respondents report their child has expressed suicidal thoughts in the past year. Among active-duty family respondents with children, a pattern of decreasing "good" and "excellent" mental health ratings by the age grouping of the oldest child indicates that older children may be experiencing greater challenges than their younger peers (see Figure 1). The impacts of physical distancing and increased virtual presence might have a disproportionate effect on adolescents, an age group for whom peer interaction is a vital aspect of emotional and mental health.^{4,5}

Figure 1: Mental Health of Oldest Child, by Age Grouping

Active-Duty Family Respondents with Children



In addition to the challenges experienced by their civilian peers across the world as a result of the COVID-19 pandemic, military children also experience multiple challenging factors due to the lifestyle of frequent moves, deployments, and socioeconomic impacts, which can be a source of psychological stress.^{6,7} Despite the challenges of military life, most military

^aRespondents were asked to rate each child's mental health individually, from oldest child to youngest child. Respondents could select "not applicable" or "I don't know," with guidance that "if your child is not old enough for you to evaluate their mental health, please select 'not applicable." Family mean of child mental health is calculated by summing the mental health rating for all children reported by a respondent (on a scale of 1 to 5, with "1" indicating "very poor" mental health and "5" indicating "excellent" mental health), and dividing by the number of children for which the respondent selected a valid option (e.g., 1 to 5, excluding those who selected "I don't know" or "Not applicable").





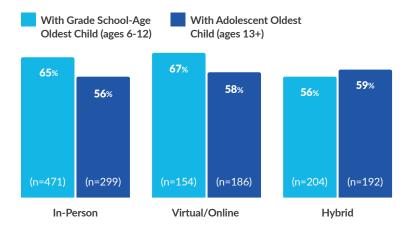
children are resilient⁸ and may be better prepared than their civilian counterparts to manage the stressors of the pandemic.⁹ However, some conditions may impact military children's mental health.

Virtual Education Delivery

Despite considerable concern that the method of education delivery (online/virtual, in-person, or hybrid) is impacting children's mental health, ¹⁰ there are few notable differences in active-duty family respondents' perceptions of their oldest child's mental health between those who report their oldest child was in virtual education, in-person education, or hybrid education at the time of survey fielding; although active-duty family respondents with an adolescent oldest child generally report lower mental health than those with a grade-school-age oldest child. For grade-school-age children, a smaller proportion of those in hybrid education report "good" or "excellent" mental health than those in other educational delivery modalities.

Figure 2: Percent Who Report Their Oldest Child's Mental Health is "Good" or "Excellent," by Education Modality

Active-Duty Family Respondents with School-Age Oldest Child



"First 6 weeks of Kindergarten were all remote/virtually taught and wreaked havoc on what my daughter expected for school. She absolutely hated it and it was tough to watch a 6 year old on a computer for 7 hours per day. It improved remarkably, but a surprise PCS made us move to an area where schools remain primarily virtual. As a result, we are geobaching until the end of the school year, so my daughter can live in a place that schools are open 4 days per week and 1 day virtual."

Active-Duty Navy Service Member

"This year I have seen growth in my daughter and she has been absolutely thriving in her new learning environment. She has come out of her shell, makes sure to answer the teachers when they ask questions (virtually), turns her camera on when it's not required and has had a wonderful experience with online only."

Air National Guard Spouse

"My daughter has suffered tremendously from not being in school. She has struggled with social interaction, self-worth, and belonging. **Virtual school was not good for her mentally.** My son needed to be in school because he does better at school with listening and engaging."

Active-Duty Coast Guard Spouse

Separation from Service Member

Military families and military children endure frequent and sometimes lengthy separations from their service member. There has been considerable concern that separations from the service member, particularly during deployment, can be detrimental

to a child's mental health.¹¹ However, military families experience separations from their service member for a number of reasons beyond deployment — including temporary duty travel (TDY), training, workups, and geobaching. Among military families who were not separated or who were experiencing a deployment at the time of survey fielding, the family mean for children's mental health is higher (average of 3.96 on a scale of 1-5 for both types of separation, see Figure 3), than among families experiencing TDY/training/other military-related separations and geobaching.^{b,c}

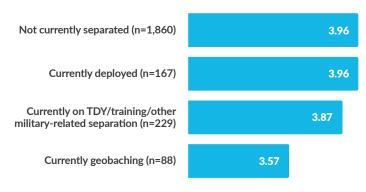
41

^bMany families who geobach do so for their children's education, and therefore may have older children, who may have poorer mental health than their younger peers. ^cFamily means of child mental health (referenced in footnote "a" above) were compared across groups, among active-duty family respondents who report they were currently experiencing a deployment, a TDY/training or other military separation, geobaching, or they were not currently separated from their service member at the time of survey fielding.



Figure 3: Family Mean for Child Mental Health by Type of Separation

Active-duty family members with children



Family Mean for Child Mental Health on a Scale of 1 (Very Poor) to 5 (Excellent)

Furthermore, as the military continues to deploy to combat zones around the world, 12,13 there is interest in the impact of a combat deployment compared to a non-combat deployment on children's mental health. In this sample, there is not a statistically significant difference in the family means for child mental health for active-duty family respondents who report one or more separations due to combat deployment in the last 18 months and those who report one or more separations not due to combat deployments. This may indicate that for families and children, whether the deployment is considered a "combat deployment" is not the most salient factor.

Family Stress

Military families are inevitably exposed to stressors, and stress is dispersed within the family; parents' stress impacts children, and children's stress impacts parents. While it is not possible to determine the direction of the relationship, a weak to moderate negative correlation exists between children's mental health (rated by the parent or guardian) and the active-duty service member's or active-duty spouse's perceived stress. The parent's stress may be impacting either the parent's perception of their child(ren)'s mental health or the child(ren)'s mental health. Conversely, having a child with poor mental health may increase the parent or guardian's stress.

Unhealthy Relationship Behaviors

Active-duty family respondents who have experienced unhealthy relationship behaviors, including threats or verbal abuse, economic control, isolation from family or friends, and/or controlling behavior from their partner over the past year also report lower average mental health for their children. While concerning relationship behaviors do not necessarily rise to the level of physical violence, it is important to note that they still may be associated with greater perceived stress among active-duty spouses and poorer mental health among children. There may be an opportunity to intervene and support parents' and children's mental health before a crisis occurs.

Barriers to Care

Access to care has been a consistent challenge for military families seeking mental health treatment for themselves or their children, especially for those whose assigned installation is in a rural community with minimal medical/mental health services. While increased telehealth services as a result of the COVID-19 pandemic may have increased access to mental health care for some, many active-duty family respondents report they do not believe telehealth mental health care would be effective for their child (see Figure 4). Behavioral health services in the local community are

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^dFamily means of child mental health (referenced in footnote "a" above) were compared across groups, among active-duty family respondents who report they had experienced one or more combat deployments in the last 18 months and families who report one or more separations that were not combat deployments. ^eSee Finding on Spouse Health and Well-being.

Family means of child mental health (referenced in footnote "a" above) were compared across groups, among active-duty family respondents who responded "No" to all four items measuring threats or verbal abuse, economic control, controlling behavior, and/or isolation in the past year (n=1996) and active-duty family respondents who responded "Yes" to at least one of these items (n=242).





among the lowest ranked community services for active-duty family respondents; nearly a third of active-duty family respondents (29%) rate behavioral health in their community as inadequate. While access to children's mental health

17% of active-duty family respondents report their child(ren) is currently receiving mental health care.

17% report that they would like their child to receive mental health care, but they currently do not.

care is a challenge for all communities, recent research indicates almost half (44%) of TRICARE members report difficulty getting mental health care treatment for their children. Furthermore, caregivers of TRICARE-covered children who have ever had a mental or behavioral health care need report substantially more difficulty accessing specialty care than families with children who do not have mental/behavioral health needs, including difficulty getting referrals (38%) and specialist care (39%). 17

Figure 4. Top Reasons for Not Receiving Mental Health Care

I don't believe telehealth mental health care would be effective for my child (38%)

Can not find an available provider who will treat my child (30%)

It is difficult to find time for an appointment (28%)

It is difficult to find child care for my other child(ren) (23%)

Concern about a mental health diagnosis preventing future military service for my child (21%)



©Compared to caregivers of children covered by commercial (48%) and public (42%) insurance. https://www.rand.org/pubs/research_reports/RRA472-1.html





Limitations

Respondents were asked to rate each of their child(ren)'s mental health separately, in order from oldest to youngest. Respondents were also instructed to select "Not applicable" if they felt their child was too young to evaluate their mental health, or they could select "I don't know." Average child mental health is calculated by summing the mental health rating for all children reported by a respondent (on a scale of 1 to 5, with "1" indicating "very poor" mental health and "5" indicating "excellent" mental health), and dividing by the number of children for which the respondent selected a valid option (e.g., 1 to 5, excluding those who selected "I don't know" or "Not applicable").

Though the findings from this survey echo and extend findings from previous research on military children's mental health, there are important differences and limitations to note. Data in this survey are from parent-report, rather than self-report from military youth, and address children in multiple age groups and in family units. There may also be differences in samples of the children and families studied, such as branch, rank, race/ethnicity, or socioeconomic status, that can influence children's mental health.

When analyses are limited to the oldest child, it is important to consider there may be sample differences between active-duty family respondents whose oldest child is an adolescent (13 or older), or grade-school-age (ages 6-12), or younger child.

Definitions of "deployment" may differ by branch.

While active-duty family respondents who report experiencing at least one type of unhealthy relationship behavior in the past year note lower family means of child mental health than their counterparts who did not report experiencing unhealthy relationship behaviors, the direction of this relationship is not clear.

Recommendations

*More information in Recommendations Chapter of Comprehensive Report



Military

- Establish a grace period policy, allowing for the short-term continuation of therapy services via telehealth until new care can be established following a PCS move.
- Provide co-located hourly or drop-in child care at mental health care and military treatment facilities.
- Commission a report on mental health in military children, paying particular attention to children who are separated from a military parent, whether by deployment, training, or geobaching.
- Remove children's mental health records from consideration for recruitment.



States/Defense State Liaison Office

■ Increase access to crucial mental health care by facilitating the enactment of interstate compacts that allow for practice via telehealth and for provider license acceptance across state lines.*



Education Access and Quality





Nearly two-thirds (61%) of active-duty family respondents report their oldest child is thriving in school, and 54% feel a sense of belonging to their school, but these educational experiences may be offset due to factors related to military life (such as relocation) and the current delivery method of education (such as virtual or hybrid schooling).

Military children's education remains a top issue of concern for active-duty family respondents (31%), as it has been since 2018. The majority of active-duty family respondents are parents (85%), and of those, three-quarters (74%) have one or more children currently enrolled in K-12 school (including homeschool). The majority (69%) report their oldest child is enrolled in public school (see Figure 1).

Figure 1: Type of School of Oldest Child in K-12^b

Public school

Homeschool

DoDEA

Private school

Notably, 26% of active-duty family respondents with children enrolled in K-12 report having a child or children with an Individual Education Plan (IEP) and 16% with a 504 plan, compared to 14% of all public school students ages 3-21 who receive special education services under the Individuals with Disabilities Education Act (IDEA) in the US.¹

Sense of Belonging

A sense of belonging to the local civilian community is a critical component of military family resilience. In the 2019 Military Family Lifestyle Survey (MFLS), active-duty family respondents with children in K-12 education reported higher scores on a measure of belonging to their local civilian community^d than those who have children not eligible for K-12 education.^{2,c} A deeper exploration in the 2021 survey looks at respondents' sense of belonging to their local civilian community by their oldest child's school, finding little difference: roughly one-third of all active-duty family respondents with at least one child enrolled in K-12 indicate they feel a sense of belonging to their local civilian community, regardless of the type of school; 33% of those respondents note their oldest child attends private school, 31% public school, 29% homeschool, and 26% DoDEA^e school.^{f,g}

^aThis was a "Select all" question asking respondents to report if any of their children are enrolled in special education. Answer choices include an IEP, a 504 plan, gifted and talented, and/or a write-in option. It is important to note that respondents may have selected both an IEP and a 504 plan, and may have been referring to one child or multiple children. The special education question was only asked of families who reported their oldest child was currently enrolled in public, private, or DoDEA schools.

^bActive-duty family respondents only.

In the 2019 MFLS, belonging to the civilian community was measured differently than in subsequent surveys. In this instance, it was reported as respondents' mean score on 10 items pertaining to their local civilian community.

In the 2021 MFLS, belonging to the local civilian community was assessed using a single item.

Dode schools are often situated OCONUS, and sense of belonging to the local civilian community may be affected by cultural differences or language barriers. Families who homeschool may benefit from additional opportunities to engage with their local communities, such as organized homeschooling groups, to build their sense of belonging to the local civilian community.

Most DoDEA schools are located in overseas assignments, and the majority of families live on the installation with other military families — not in the civilian community.

FThe questions about the type of school were asked for the oldest child who is eligible for K-12 enrollment.





Impacts of Military Life on Belonging and Thriving in School

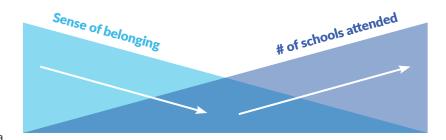
For children, their community is most often their school; it is where they work, play, and form social relationships.

Therefore, a sense of belonging to their school is integral to positive child outcomes. However, military life and frequent

relocations that necessitate moving to a new school may impede a child's sense of belonging to their school: 52% of active-duty family respondents who report their oldest child is an adolescent and has attended four schools or fewer also believe their child feels a sense of belonging to their current school, compared to just 36% of those whose oldest child is an adolescent and has attended five or more schools (see Figure 2).

Figure 2: Sense of Belonging to School and Relocation

As the number of schools attended **increases**, sense of belonging to school **decreases**



Overall, active-duty family respondents report a

positive experience for their oldest child enrolled in K-12. Most report their oldest child is thriving in his/her school (61%) and feels a sense of belonging to their school (54%), and almost half rate their oldest child's school as above average or excellent (49%).

However, military life and family experiences can impact children's education and in turn, children's experiences and well-being can influence family functioning. It can be argued that children's education is a readiness issue; active-duty family respondents who report their oldest child is thriving in school are significantly less stressed than their peers who do not believe their child is thriving.

Active-duty family respondents who report their oldest child is thriving in school **are significantly less stressed** than their peers who do not believe their child is thriving.

"My daughter has done very well with virtual learning. She actually chose to stay virtual when she had the chance to attend in person. She has all A grades and has enjoyed not having to get up extra early for transportation to school."

Active-Duty Army Spouse

Education Modality and Thriving in School

In addition to the impacts of the military lifestyle, the delivery method of education during COVID-19 lockdowns and beyond has played a role in families' experiences of military child education. At the time of survey fielding (April-June 2021), 21% of active-duty families report their oldest child is currently enrolled in online/virtual school, 52% in-person, and 26% in a hybrid modality (a combination of online/virtual school and in-person). A greater proportion of those active-duty family respondents whose oldest child received in-person instruction report their child is thriving at school than those whose oldest child is receiving virtual or hybrid education delivery (see Figure 3). This trend persists for both oldest children categorized as grade-school-aged (6-12 years old) and those categorized as adolescents (13 years and older). Regardless of delivery modality, fewer active-duty family respondents with an adolescent oldest child report their child is thriving than those with an elementary school-aged oldest child.

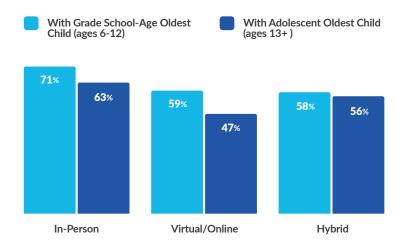
^hThe question about method of delivery was only asked of families who report their oldest child is currently enrolled in public, private, or DoDEA schools.





Figure 3: Percent Who Agree That Their Oldest Child is Thriving in School

Active-duty family respondents (n=1,790)



"The public school changed their schooling from hybrid to full in-person back to online back to in-person about five times this year."

Active-Duty Marine Corps Spouse

"For my teenager, his school was closed from March through September and was online. **He became very depressed and was failing.** They went back to school in September and went back online for 7 weeks over the winter holidays. He still was quite depressed. After being back in school since January, I have seen — just in the past 2 months — him become engaged and productive."

Active-Duty Army Spouse

Homeschool

Continuing a trend seen in Blue Star Families' 2018 MFLS,³ there are elevated numbers of active-duty family respondents (13%) who choose to homeschool their children; nearly 2-4 times⁴ the proportion of children ages 5-17 homeschooled in the general U.S. population.¹ Despite work to emphasize the importance of local school quality in basing decisions for the Air Force,⁵ a slightly greater proportion of Air Force active-duty family respondents (16%) report their oldest child is homeschooled, compared to Army (13%), Marine Corps (13%), and Navy (11%) active-

duty family respondents.¹ Furthermore, of all active-duty family respondents who report their oldest child is homeschooled, nearly 4 in 10 (38%) plan to homeschool their child until they graduate and nearly a quarter (22%) until they would do better in a traditional school setting, indicating that homeschooling trends may not be limited to COVID-19 pandemic school challenges. Just 18% of those whose oldest child is homeschooled report they intend to do so until in-person education is available or until it is safe to return to traditional schooling, seeming to indicate that homeschooling is a long-term choice for many active-duty military family respondents.

The top three reasons active-duty family respondents give for homeschooling are the same as when asked in 2019⁶: "to stabilize their children's academic experience" (52%), "give flexibility to spend time together as a family" (36%), and "to avoid poor quality school options" (35%). In addition, active-duty family respondents

"Our family has homeschooled for the past 4 years.

The past year has not had a significant impact on our child's education."

Active-Duty Air Force Spouse

"Moving during COVID was hard. Our kids did ok.

We had 2 military families on our street and we know them well but that's it. We chose to live off post because the schools near the post did not have a great reputation. The 2nd order impact was we didn't have a community or attend a school that was military heavy or aware. If we could fix the schools that feed posts around the country AND fix military housing, we could transform the experience for so many."

Active-Duty Army Spouse

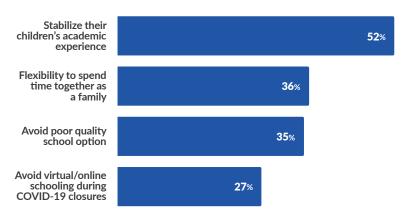
Homeschooling rates may have increased during the COVID-19 pandemic for all U.S. children, though the proportion of active-duty family respondents to this survey who report homeschooling their oldest child remains higher than the adjusted post-COVID estimates.

Response rate is too low to report for Coast Guard, National Guard, and Reserve families.



note they homeschool "to avoid online/virtual schooling due to COVID-19 closures" (27%). A slightly greater proportion of those active-duty family respondents who relocated during the COVID-19 pandemic^k report homeschooling their oldest child (15% versus 12%). Recently relocated families may have felt homeschooling is less disruptive to their child(ren)'s education than trying to navigate a move and the COVID-19 pandemic and the back and forth between virtual, hybrid, and in-person schooling. Many families mention these issues in response to the qualitative question: "This past year has

Figure 4: What Were the Top 3 Reasons Your Family Chose to Homeschool Your Child(ren)? (n=280)



seen many changes to children's education. Please share with us how these changes have impacted your child(ren)'s education and mental health? What were some challenges you experienced? What worked well?"

Lingering Effects of COVID-19

Similar to their civilian peers, active-duty military families continue to be impacted by disruptions from COVID-19 school modality changes. However, for military families, frequent relocation, particularly during COVID-19, has exacerbated pre-existing challenges in transferring schools and maintaining a semblance of continuity. Further, challenges related to COVID-19 are likely related to the choice of some active-duty military family respondents to homeschool.







Limitations

Most questions in the education finding were asked about the oldest child enrolled in K-12 education, not all the children in a family. However, respondents were asked if any children in the family have an IEP, 504 plan, and/or are enrolled in the Gifted and Talented Program. While it was intended to reduce survey fatigue for respondents, asking about only the oldest child enrolled in K-12 education does not fully capture the experiences of military families with multiple children enrolled in K-12 education. Additionally, some sample sizes were small, such as the questions related to homeschooled children. Lastly, all data is self-reported, and it is possible respondents did not answer questions based on their oldest child enrolled in K-12, but the oldest child within their family.

Recommendations

*More information in Recommendations Chapter of Comprehensive Report



Military

- Educate families to enhance awareness of education support programs and resources, such as the School Liaison Officer (SLO) program and the Interstate Compact on Educational Opportunity for Military Children to improve school transition experiences.
- Provide training for sponsors on how to support families with K-12 children in transitioning to a new school, and/or provide resources such as the Military Child Education Coalition's Military Student Transition Consultant Program, especially for families moving to an area without a SLO.



States

■ Allow homeschooling military families to utilize their "home state of record," instead of their current residence for homeschooling education requirements, to maintain continuity across relocations.*



Schools/Local Communities

- Enhance professional development for school faculty and staff on military children's educational challenges and needs.
- Encourage and support schools and homeschool groups to create opportunities for engagement between their military families and the civilian communities they live and serve in to enhance children's sense of belonging, such as Blue Star Welcome Week.



Congress

- Commission a report on the social, emotional, and academic outcomes for military children/teens who have experienced multiple military-related relocations or school transitions, particularly for children with special needs.
- Commission a report on the impact of virtual/hybrid learning during COVID-19 and its effects on military children's academic progress and emotional health.

Acknowledgments

Blue Star Families' Applied Research team would like to thank the Military Child Education Coalition for its review and feedback on this finding.



Neighborhood and the Built Environment



American military families are global citizens; respondents hail from or are currently living in countries all over the world and use a diverse array of languages.

The military community is rich in culture, ethnicity, and language.¹ Military-connected respondents³ to the 2021 Military Family Lifestyle Survey (MFLS) represent 95 countries of origin, most commonly the Philippines, Germany, Mexico, Canada, and the United Kingdom. Many are also multilingual; 15% of military-connected family respondents use a language other than English in their home, and many (n=81) speak more than two



languages in their household. Among those who indicate that they use a different language in their military-connected home (n=1008), 84 different languages or dialects are listed. The most common languages other than English are Spanish, German, Tagalog, French, and American Sign Language.

Nearly 1 in 10 active-duty family respondents identify as a member of a recently-immigrated family,^b which is lower than the U.S. population's proportion of first- or second-second generation Americans.² One in 20 (5%) are the child

Citizenship Status of Active-Duty Family Respondents			
	Active-Duty Family Respondents (n=3,930)	Active-Duty Service Member Respondents (n=645)	Active-Duty Spouse Respondents (n=3,285)
Yes, born in the United States	89%	85%	90%
Yes, born in Puerto Rico, Guam, the U.S. Virgin Islands, or Northern Marianas	1%	2%	1%
Yes, born abroad of U.S. citizen parent or parents	3%	5%	2%
Yes, U.S. citizen by naturalization	4%	8%	3%
Yes, I'm a U.S. citizen but also a citizen of another country	1%	0%	1%
No, I'm a U.S. permanent resident	2%	1%	2%
No, I'm not a U.S. citizen	0%	0%	0%
Columns will not sum to 100% due to rounding.			

of an immigrant, and 4% are an immigrant themselves. While the majority of active-duty family respondents (93%) are birthright U.S. citizens, 4% are citizens by naturalization, fewer than 1% hold dual citizenship, and 2% are U.S. permanent residents.

Foreign-Born Active-Duty Spouse Respondents

As mentioned above, among all militaryconnected respondents, 95 countries of origin are represented, but active-duty spouse respondents alone are also a diverse group; the foreign-born active-duty spouse

respondent sample (n=203) reflects the rich diversity with a representation of 75 countries, most commonly Canada, Germany, the Philippines, Mexico, and the United Kingdom.

Furthermore, 54% are U.S. citizens by naturalization, 6% hold dual citizenship in the U.S. and another country, 36% are non-citizen permanent residents, and 4% report they are not U.S. citizens. More than half (58%) use a language other than English in their home.

52

^aMilitary-connected family respondents include active-duty, Veteran, National Guard, and Reserve family respondents.

^bRecently immigrated is defined either as 1) respondent is born in another country and immigrated to the U.S., or 2) respondent is U.S.-born but has parents who were born in another country.





Branch Affiliation		
	Foreign-Born Active-Duty Spouse Respondents (n=203)	
Air Force	18%	
Army ^b	41%	
Navy	27%	
Marine Corps	10%	
Coast Guard	2%	
Space Force	1%	
Columns will not sum to 100% due to rounding.		

Service Member Rank		
	Foreign-Born Active-Duty Spouse Respondents (n=198)	
Junior Enlisted (E1-E4)	4%	
Mid-Grade Enlisted (E5-E7)	50%	
Senior Enlisted (E8-E9)	9%	
Warrant Officer (W1-W5)	7%	
Company Grade Officer (O1-O3)	13%	
Field Grade Officer (O4-O6)	18%	
General Grade Officer (O7-O10)	There were no foreign-born active-duty spouse respondents reporting service member ranks of O7 or higher.	
Columns will not sum to 100% due to rounding.		

While the labor force participation rate of foreign-born active-duty spouse respondents is 62%, 22% were unemployed and actively seeking work at the time of survey fielding. Nearly half (46%) report that "employment/job opportunities" are a resource they regularly need, compared to 29% of the native-born active-duty spouse population. Additionally, 21% of foreign-born active-duty spouse respondents say they need resources for job preparedness, compared to 10% of native-born active-duty spouses who indicate the same.

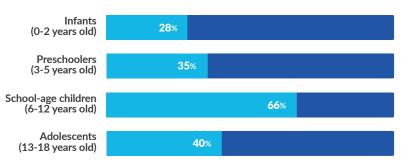
When considering issues related to isolation and belonging in the military and/or civilian communities, only 16% of foreign-born active-duty spouse respondents agree they feel a sense of belonging to their spouse's unit/command; 30% agree they feel a sense of belonging to their local civilian community. Additionally, 39% report they have zero friends in their local civilian community with whom they feel at ease.

Military Families Living Outside the United States

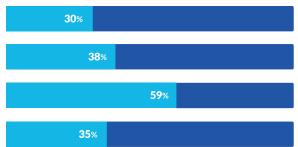
Military families can be stationed and live outside the country, and during survey fielding (April-June 2021), 8% of active-duty family respondents reported they were living outside the country. While many see this as a uniquely desirable part of the military family lifestyle,³ being stationed overseas carries some challenges as well.

% with Children in Age Group in the Home





Active-Duty Family Respondents Living in the U.S.





Branch Affiliation		
	Active-Duty Family Respondents Living Outside the U.S. (n=287)	
Air Force	37%	
Army ^c	25%	
Navy	28%	
Marine Corps	8%	
Coast Guard	1%	
Space Force	<1%	
Columns will not sum to 100% due to rounding.		

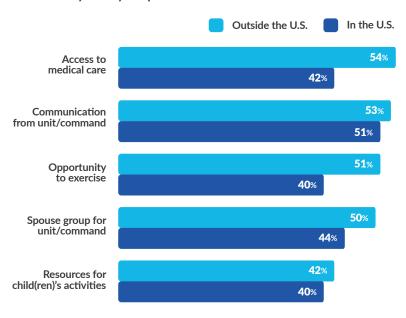
Service Member Rank		
	Active-Duty Family Respondents Living Outside the U.S. (n=287)	
Junior Enlisted (E1-E4)	3%	
Mid-Grade Enlisted (E5-E7)	32%	
Senior Enlisted (E8-E9)	9%	
Warrant Officer (W1-W5)	3%	
Company Grade Officer (O1-O3)	15%	
Field Grade Officer (O4-O6)	38%	
General Grade Officer (O7-O10)	<1%	
Columns will not sum to 100% due to rounding.		

A notably greater proportion of active-duty family respondents who have child(ren) at home and who live outside the United States report having children enrolled in K-12 education (84%), compared to 74% for their U.S. family counterparts. For these families, transitioning children to a new school after a permanent change of station (PCS) may come with additional challenges.

Living outside the country may create closer communities of support for the military families at a duty station. However, it may be more difficult to feel a sense of belonging to the local civilian community. Nearly a third (30%) (compared to 23% of U.S. peers) of active-duty family respondents living outside the country report feeling a sense of belonging to their unit or command, but only 22% (compared to 31% of U.S. peers) report they feel a sense of belonging to the local civilian

Resources Regularly Needed, by Current Residence

Active-Duty Family Respondents



community. The resources these families need may also differ. While the majority of both groups of active-duty family respondents list "communication from unit/command" as one of their top needs, families living outside the country also list "access to medical care" (54% vs. 42%) and "opportunities to exercise" (51% vs. 40%) at greater proportions than their U.S. peers.

Active-duty family respondents residing overseas also report less financial stress; just 34% report their families' financial situation causes them "some stress" or "a great deal of stress" in comparison to 49% of their stateside peers. However, among those who are financially stressed, the reasons for that stress differ between active-duty

Active-duty Army spouse respondents include four respondents who identify as an active-duty spouse and an Army Reserve or Army National Guard spouse.





family respondents living in and outside of the United States. For financially stressed active-duty family respondents living outside of the U.S., "out-of-pocket relocation costs" rises to the top contributor to financial stress (61%), well above "spouse unemployment and underemployment" (43%) and student loans (25%).

Top Contributors to Financial Stress, by Current Residence Active-Duty Family Respondents		
	Outside the U.S.	In the U.S.
Out-of-pocket relocation costs	61%	27%
Spouse underemployment or unemployment	43%	41%
Student loans	25%	30%

Limitations and Definitions

"Foreign-born" refers to those respondents who indicate either that they are a citizen by naturalization, a permanent U.S. resident, or are not a citizen. Also included in this category are respondents who indicate they are a citizen of the U.S. and another country and indicate they were born in another country and immigrated to the U.S. The sample size of foreign-born active-duty spouse respondents in the 2021 MFLS is 203. Foreign-born spouses' personal experiences before and after marriage to a current service member can differ vastly. Some foreign-born active-duty spouses become affiliated with the U.S. military by marrying a military service member stationed overseas and immigrating to the U.S. Others may have immigrated to the U.S. before meeting and marrying a service member.

"Native-born" respondents are defined as those born in the U.S., a U.S. territory, born abroad to U.S. citizen parents, have dual citizenship but are <u>not</u> from a recently-immigrated family, or are from a recently-immigrated family but they are U.S.-born. The sample size of native-born active-duty spouse respondents in the 2021 MFLS is 3,075.

This analysis is limited to military families living "outside the country," defined as those living in a foreign country or in U.S. territories. It is important to note sample differences when comparing families living outside the country with their stateside peers. Active-duty families living outside the country in this sample may be more senior in rank and older than their stateside peers; therefore, they may be more likely to have school-aged children and be more financially secure than their younger and more junior peers. Further, while the contributors to financial stress for families living outside the U.S. differ from their stateside peers, military families assigned overseas often have additional benefits available to them, such as a guarantee of privatized/government-run military housing or an overseas housing allowance (OHA) and a cost-of-living-allowance.

Recommendations



Military

- Commission a report to identify out-of-pocket relocation expenses for families, including families moving to or from OCONUS locations.
- Increase offerings of resources, especially those targeting employment and child care in high-demand languages (e.g. Spanish, German, etc.).
- Review SOFA agreements to maximize spouses' ability to work when stationed with their service member overseas.



Economic Stability





Though the majority of active-duty service member respondents are satisfied with their job, and 70% feel the work they do is meaningful, satisfaction is lower for female service members and service members of color. Most service member respondents who are dissatisfied are likely to look for another job in the next 12 months, and a smaller proportion recommend military service to others.

The majority of active-duty service members are satisfied with their job (67%) and their employer (64%); however, a smaller proportion report they are satisfied, compared to their civilian counterparts. Most Americans (87%) are at least somewhat satisfied with their job, as reported in 2021. While many service members are under contract and unlikely to exit active-duty service immediately because of job dissatisfaction, those who are unsatisfied with their job pose a risk to both recruitment and retention of the All-Volunteer Force. Nearly seven in 10 active-duty service member respondents who are "somewhat dissatisfied" or "very dissatisfied" with their job are also "somewhat likely" or "very likely" to look for another job in the next 12 months. Dissatisfied service members are also more stressed than their satisfied counterparts.

Job satisfaction is linked to "perception of equal opportunities in the workplace, feeling of personal accomplishment, perception of teamwork and cooperation within one's work team, level of training received, communication from management on key issues, recognition for good performance, and work-life balance." These aspects of job satisfaction may contribute to differences in satisfaction among branch, gender, and race/ethnicity. For example, active-duty Army service member respondents are less satisfied with their employer (59%) than their active-duty peers in the Air Force

(66%) and Navy (63%).^b There are also notable differences in job satisfaction among female active-duty service members and active-duty service members of color. Female active-duty service member respondents report slightly lower levels of satisfaction with their job (66% vs. 69%) and employer (62% vs. 65%) than their male counterparts, which is consistent with other reports that military women rate unit climate lower and workplace hostility higher than their male peers.³ Further, job satisfaction

When asked what would increase the likelihood of staying with their current employer: "Increase pay, remove arbitrary requirements that don't make me better at my job, improve work environment, remove toxic leaders, and give me some control over my life."

Male Active-Duty Army Service Member

affects the propensity of female active-duty service members to recommend service to a young person. While female service members are more likely at all levels of job satisfaction to recommend service to a young man than they are to a young woman, which is consistent with findings from the 2018 Military Family Lifestyle Survey (MFLS),⁴ among female active-duty service members who are dissatisfied with their jobs, just 21% would recommend military service

^aNote: Question wording and response options are not an identical match to MFLS. ^bSamples of active-duty Marine Corps, Coast Guard, and Space Force service members were too small to re-

^bSamples of active-duty Marine Corps, Coast Guard, and Space Force service members were too small to report individually. Army (n=106), Navy (n=79), and Air Force (n=184).



to a young woman, while 38% would recommend military service to a young man. Active-duty service members of color are also less satisfied with their job (62% vs. 70%) and their employer (57% vs. 68%) than their white peers.

The top issues of concern are similar for active-duty service member respondents who are satisfied with their job, compared to those who are dissatisfied. Active-duty service members who are dissatisfied with their job note the amount of time away from family (35%) as the top military life issue, followed by child care challenges (31%) and lack of control over military career (31%). The responses are similar to the top issues for their counterparts who are satisfied with their jobs. Like their civilian counterparts, pay is not the only driver of job attrition; elements such as work



The appearance of U.S. Department of Defense (DoD) visual information does not imply or constitute DoD endorsement.

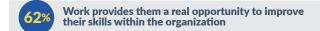
(32%), and a better work environment (29%).

environment and a sense of purpose are driving the current exodus from the workforce.⁵ The top reasons noted by active-duty service members for why one may look for a new job in the next 12 months are job satisfaction (43%), higher pay

Active-Duty Service Members

70% Feel the work they do is meaningful





45% Are satisfied with career advancement opportunities

45% Feel their training needs are assessed

45% Feel senior leaders generate high levels of commitment in the workforce

Feel they have an opportunity to get a better job in the organization

In contrast to their civilian peers who are leaving the workforce because they crave a sense of purpose in their work, a majority of active-duty service members feel the work they do is meaningful (70%), gives them a feeling of personal accomplishment (62%), and provides them a real opportunity to improve their skills within the organization (62%). However, fewer than half (45%) feel senior leaders generate high levels of commitment in the workforce, are satisfied with career advancement opportunities (45%), and feel their training needs are assessed (45%). Further, less than half of active-duty service members feel they have an opportunity to get a better job in the organization (42%).

In addition to overall satisfaction with their job and employer, there are notable differences for female activeduty service member respondents and active-duty service

member respondents of color in the level of agreement about aspects of their jobs, compared to their male and/or white counterparts. This finding runs counter to previous research suggesting that Black males and females, Hispanic/Latino males and females, and white females all experience greater perceived benefits to military service than white males along several dimensions of self-assessed job satisfaction and quality of life. In this year's MFLS, a smaller proportion of female service member respondents are satisfied with advancement opportunities and increasing their skills or training and report that their work contributions are valued.

^cSample size is low for this calculation. Respondent total is 99.





Table 1: Aspects of Job Satisfaction by Gender % of active-duty service members who agree or strongly agree that			
	Male Active-Duty Service Members	Female Active-Duty Service Members	
I am satisfied with the opportunity to get a better job in my organization.	47% (n=188)	39% (n=231)	
I am satisfied with how much my work contributions are valued.	59% (n=191)	51% (n=240)	
My training needs are assessed.	48% (n=191)	43 % (n=235)	
I am given a real opportunity to improve my skills in my organization.	64% (n=193)	60 % (n=240)	

Compared to white active-duty service member respondents, active-duty service member respondents of color are less satisfied with their opportunities for advancement, promotion, and increasing their skills, and fewer agree that discussions about their performance with supervisors are worthwhile or that senior leaders generate motivation and commitment, which is consistent with previous Blue Star Families research.⁸

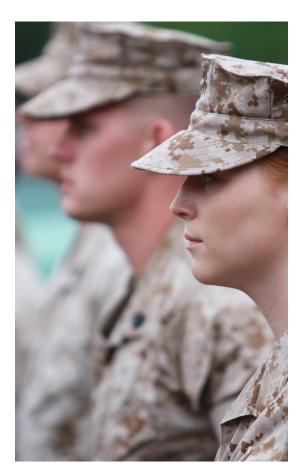
For active-duty respondents, employee satisfaction matters. Although service members who are

dissatisfied may not be able to leave right away due to the time remaining in their current contract or orders, it appears likely they will leave if conditions do not improve. In addition, a smaller proportion of female active-duty service member and service member of color respondents agree they have a chance for advancement or an opportunity to improve their skills,^d compared to their peers, suggesting avenues for further exploration to determine what other factors may influence promotion trajectories.⁹

Aspects of Job Satisfaction by Race/Ethnicity

% of active-duty service members who agree or strongly agree that...

Active-D Service N	uty ⁄lembers of Color°		White Active-Duty Service Members	
46%	Discussions wit	h my supervisor abou are worthwhile.	ut my performance	59%
(n=167)				(n=207)
38%	In my organizat of motivatio	tion, senior leaders g n and commitment ir	enerate high levels n the workforce.	49%
(n=168)				(n=212)
45%	l feel satisfie	ed with my chances fo	or promotion.	57%
(n=161)				(n=207)
60%	l am sat	tisfied with the work	that I do.	70%
(n=167)				(n=213)
40%		th the career advance at my organization o		50%
(n=163)				(n=206)
55%	l am given a re	al opportunity to imp my organization.	prove my skills in	65%
(n=168)				(n=212)



^dSome of these differences could be influenced by the particular job speciality of active-duty service member survey respondents.

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^eRacial/ethnic identity was asked as a "Select all" question. Respondents were categorized as a "person of color" if they selected at least one racial/ethnic identity other than white.





Limitations

Adults employed full or part time were asked "How satisfied or dissatisfied are you with your job?", with answer options "Completely satisfied, Somewhat satisfied, Somewhat dissatisfied, or Completely dissatisfied", or "No opinion", with no "Neutral" option. The 2021 MFLS asked "Considering everything, how satisfied are you with the following? Your current/most recent job" with answer options, "Very satisfied", "Somewhat satisfied", "Neither", "Somewhat dissatisfied, or Very dissatisfied", or "Does Not Apply". 10% of active-duty service member respondents selected "Neither".

Samples of active-duty Marine Corps, Coast Guard, and Space Force service members are too small to report individually. In comparison, Army (n=106), Navy (n=79), and Air Force (n=184) have a larger respondent sample. In the 2021 MFLS, there is also a larger female service member sample than typical in an overall sample pool of service members. The current career field of the active-duty service member, not accounted for in this survey, can greatly impact their satisfaction and their ability to promote and should be taken into consideration. Furthermore, while samples are too small to analyze these differences here, recognizing how multiple historically-marginalized identities intersect may provide more context for understanding race/ethnicity and gender differences.¹⁰

Recommendations

*More information in Recommendations Chapter of Comprehensive Report



Military

- Expand the Workplace and Gender Relations Survey of Active Duty Members to include broader workplace climate concerns (e.g., perceptions of equal opportunities in day-to-day assignments, time away from family, etc.).
- Continue to expand efforts to provide service members more control over their careers (including when and where they relocate) and day-to-day schedules.
- Expand and formalize mentorship opportunities for service members of color and female service members.¹¹



Congress

- Commission a report to assess the viability of flexible work options for service members and making leave opportunities more flexible to address short-notice and short-duration personal and family concerns.*
- Require all Service branches to conduct exit surveys and interviews of all service members; survey instrument should include questions related to work climate. (e.g., Department of the Army Career Engagement Survey)¹²





A third of active-duty family respondents (33%) currently hold student loan debt and nearly all active-duty family respondents (94%) have at least one credit card. Already stressed by student loans, credit card debt, and out-of-pocket relocation costs, military families making PCS (permanent change of station) moves face long military housing waitlists, unaffordable civilian housing markets, and expensive rental costs, which can further add to their financial burden.

Military family respondents share common financial stressors with their civilian counterparts, including student loan debt, credit card debt, and child care costs. However, the COVID-19 pandemic revealed that military families have a unique combination of risk and protective factors that may make them both more financially resilient or more financially vulnerable than their civilian peers. The large majority of active-duty family respondents (84%) report household incomes that may have made them eligible to receive the highest amount of each of the three COVID-19 stimulus

What best describes where you currently live?

"Own civilian housing — note in order to live within BAH and have acceptable quality housing, the service member commutes over 3 hours each day. **The BAH is insufficient to afford decent housing closer without risking putting our family in debt.**"

Active-duty Air Force Spouse

payments,² providing some additional financial relief for families. Still, military families face spouse unemployment rates at 4-6 times the national average,^{3,4} and can rack up unreimbursed relocation costs with each new duty assignment. Additionally, despite the intent of the Basic Allowance for Housing (BAH) to provide for 95% of monthly housing costs⁵ for comparable civilian housing, of those who report out-of-pocket costs, more than three-quarters (76%) of active-duty family respondents say theirs exceeds \$200 per month. Taken together, these are possibly contributing factors to why 48% of active-duty family respondents report that their financial situation causes them "some stress" or a "great deal of stress." Most adults in the general U.S. population (75%) reported they were doing okay financially leading into

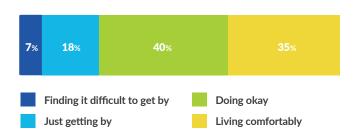
Amount of Stress Caused by Family's Current Financial Condition

Active-Duty Family Respondents



Financial Well-Being of U.S. Adults⁶

Current Financial Situation at the end of 2020



^aAdjusted gross income (AGI) less than or equal to \$75,000 (\$150,000 for married couples filing a joint return).





2021.⁶ Adults in the general U.S. population who were able to retain their employment, and especially those who were able to work from home, reported especially strong financial positions.⁷ In contrast, military spouses' inability to retain employment through a PCS has long been a financial stressor for military families, even prior to the pandemic.

Student Loans

Of active-duty family respondents who report financial stress, 41% cite spouse unemployment or underemployment as a top contributor to their stress, with "student loans" (30%) being the next most commonly cited contributor. Two-thirds of active-duty spouse respondents (65%) have a bachelor's degree or higher, illustrating this is a well-educated community. A third of active-duty spouse respondents (33%) currently hold student loan debt in their family, which is most commonly used to fund their own education (82%). However, because of the barriers to active-duty spouse employment, spouse respondents may be unemployed or underemployed despite having obtained a degree that may have been paid for with

Student Loan Debt

Active-duty Spouse Respondents with Current Family Student Loan Debt



student loans. This debt may therefore be disproportionate to the household income given that 41% of active-duty spouse respondents with low-to-moderate family income (\$50,000 per year or less)⁹ owe student loan debt.

Percentages will not sum to 100% due to rounding

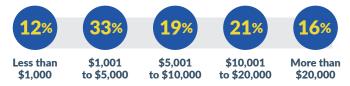
Credit Card Debt

Nearly all active-duty family respondents (94%) have at least one credit card, which is higher than the overall U.S. consumer average of 79%,¹⁰ indicating that military life may simultaneously allow for¹¹ and require access to financial resources that are not typical for the average U.S. consumer. At the time of survey fielding, half (51%) of active-duty family respondents

18% of active-duty family respondents with a household income of less than \$50,000 per year owe more than \$10,000 in credit card debt.

Credit Card Debt

Active-duty Family Respondents with Revolving Credit Card Balance



Percentages will not sum to 100% due to rounding

(that have at least one credit card) report that they carry over the balance owed on their card(s) from month to month. Among those respondents who carry over a balance, debts range from less than \$1,000 (12%) to over \$20,000 (16%). Similar to the burden of student loan debt on low-to-moderate income families, the credit card debt-to-income ratio is higher among families making less than \$50,000 per year. Further, a greater proportion of respondents with a household income of more than \$100,000 per year report their balance is paid off each month, in comparison to respondents with less household income (53% vs. 30%). This finding indicates that as household income increases, credit cards may be utilized for benefits like travel points and cash back bonuses,12 instead of necessities, such as emergency expenses, supplement household expense deficit, or to cover out-ofpocket relocation expenses during a PCS move.





The Cost of Relocation

Out-of-pocket relocation costs are a source of financial stress, according to 29% of active-duty family respondents who are experiencing financial stress. Two-thirds (66%) of active-duty family respondents report having unreimbursed out-of-pocket expenses related to their last PCS move, and among those with unreimbursed moving costs, more than half of those who have unreimbursed expenses (55%) report those expenses to be over \$1,000. Compounded across multiple moves during a military career, unreimbursed out-of-pocket relocation expenses can create financial hardship for families, especially when the activeduty spouse often loses employment and the family loses income with a relocation. Unlike their civilian counterparts, who moved less in the past year than in previous years, ¹³ nearly half of active-duty family respondents (45%) had completed a PCS within the past year or were currently PCSing at the time of survey fielding. In the last year, military families faced additional challenges related to moving during the COVID-19 pandemic and a skyrocketing housing market. Some families who PCSed during this year's housing crunch¹⁴ found themselves facing long military housing waitlists, scarce civilian rental housing availability, fast-rising home prices, 15 and a competitive "seller's market." While the proportion of families spending more than \$200 above BAH per month in housing is similar for those who PCSed recently and those who did not, the level of satisfaction with housing drops for those who relocated recently, indicating families may have limited housing choices and are possibly accepting lowerquality housing.

Unreimbursed Relocation Expenses
from Most Recent PCS

% of active-duty family respondents who report any out-of-pocket relocation costs

Between \$1 and \$500	19%
Between \$501 and \$1,000	26%
Between \$1,001 and \$2,000	22%
Between \$2,001 and \$5,000	24%
Over \$5,000	9%

Number of Moves as a Result of Service Member's Orders

% of active-duty family respondents who report any out-of-pocket relocation costs

None	3%
1-3 times	34%
4-6 times	36%
7-9 times	17%
10 or more times	10%

Out-of-Pocket Housing Costs and Satisfaction with Housing by Recent Relocation

Active-Duty Family Respondents

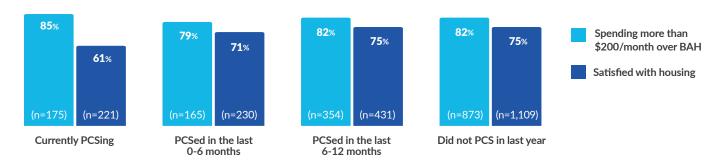


Figure 1 shows the top aspects of the current housing situation that are most concerning according to the recent relocation for active-duty family respondents. While the "local housing market is unaffordable" and the "cost of housing rental is too high" remain the top two concerns regardless of the most recent PCS, for active-duty family respondents who had recently completed a PCS or were currently in the process of PCSing at the time of survey fielding, the "waitlist





for on-installation housing is too long" and "poor quality schools" are top concerns. Particularly, 25% of active-duty military families who note that they are concerned with "poor quality of schools" also disagree that they are satisfied with the overall quality of their housing. This further illustrates that active-duty families, in their military lifestyle, are often forced to confront a nexus of challenges that have the potential to impact their financial security and the well-being of their families.

Figure 1: Top Aspects of Current Housing Situation that are Most Concerning by Recent Relocation Active-Duty Family Respondents			
Currently PCSing	Relocated in the last 0-6 months	Relocated in the last 6-12 months	No recent PCS
Local housing market is unaffordable (39%)	Local housing market is unaffordable (38%)	Local housing market is unaffordable (34%)	Local housing market is unaffordable (35%)
Cost of housing rental is too high (36%)	Cost of housing rental is too high (26%)	Cost of housing rental is too high (31%)	Cost of housing rental is too high (25%)
Waitlist for on-installation housing is too long (21%)	Waitlist for on-installation housing is too long (18%)	Housing repair/maintenance problems (15%)	Housing repair/maintenance problems (21%)
Poor quality schools (18%)	Poor quality schools (13%)	Out-of-pocket costs for housing maintenance (15%)	Out-of-pocket costs for housing maintenance (17%)

Parent Support Military-connected parent respondents who provided support to their active-duty service member child(ren) and/or their active-duty child(ren)'s spouse(s) in the last year: Provided financial support on a regular basis Provided financial support for emergencies Provided housing

Military families, while insulated from some of the disturbances of the COVID-19 pandemic, nonetheless continue to experience financial challenges that are unique or intensified by military service, including spouse unemployment and underemployment, student loan debt and credit card debt, unreimbursed out-of-pocket relocation expenses, and difficulty finding affordable housing that meets their families' needs with each PCS.





Recommendations

*More information in Recommendations Chapter of Comprehensive Report



Military

- Explore options for improving calculation of Basic Allowance for Housing (BAH), taking into consideration issues such as school district quality, housing availability, etc.*
- Commission a report to identify types of out-of-pocket relocation expenses and assess the efficacy of current expense reimbursement policy.
- Continue to expand efforts to provide service members more control over their careers (including when and where they relocate) and day-to-day schedules.



Congress

- Commission a report on the effects of nationwide housing shortages and rising costs on military families.
- Support a fixed period of federal student loan deferment for military spouses who leave a job to relocate due to military orders.





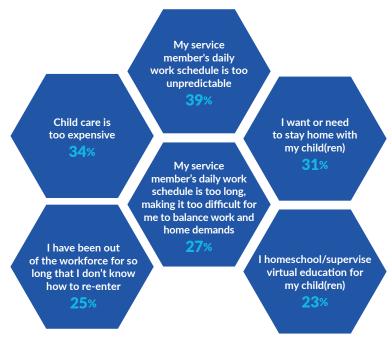
Spouses are dropping out of the labor force, despite expanded remote work opportunities — a preferred solution for military spouse employment. Service members' work schedules and child care remain the top barriers to spouse employment.

Military spouse employment is again a top-five military life issue for nearly half (47%) of all active-duty spouse respondents and a quarter of active-duty service member respondents (25%). The percentage of active-duty spouse respondents who are unemployed (20%) remains consistent with last year's findings,¹ though the number of spouses participating in the labor force dropped to 58%.^b The percentage of active-duty spouses participating in the labor force is also lower than the overall U.S. labor force participation rate of 72% for those who are female, ages 18-45, in the same time period as survey fielding.² Similarly, the proportion of part- or full-time employed active-duty spouse respondents who report some degree of underemployment is consistent with the 2020 Military Family Lifestyle Survey (MFLS), with two-thirds (63%) reporting at least one circumstance of underemployment.^c

The necessary role of schools and adequate child care for families to be able to continue working without disruption and for businesses to keep their workforce in place was highlighted by the COVID-19 pandemic.³ The move to

Figure 1: Top Reasons for Not Currently Working

Active-duty spouses who are not currently working but want or need paid employment



virtual education for children during the pandemic had tremendous impacts on military spouse employment in the 2020 MFLS, as "I homeschool/supervise virtual education for my child(ren)" was the top reason for not working among spouses who need or want to work. As children began to return to in-person education, fewer spouses reported virtual education as a reason for not working. However, several aspects related to military lifestyle — including service members' unpredictable daily work schedule and expensive child care — remain top barriers to employment.

When personal well-being, financial security, and managing family obligations are at odds, spouses may decide to leave the labor force altogether.⁴ This decision, however, can have lasting impacts on spouse wage growth, retirement savings, and the ability to reenter the workforce easily at a later time.⁵ While child care costs and availability

^aAll statistics referenced in this finding exclude active-duty spouse respondents who are also active-duty service members (dual military) (n=56).

^bThe Military Family Lifestyle Survey is not a representative sample of all active-duty spouses and is not a longitudinal research design. Differences from year to year may be due to sample differences.

^cUnderemployed is defined as selecting at least one circumstance of underemployment in the 2021 MFLS: "I work fewer hours than I would like to," "I am overqualified for my current position," "My pay level is lower in my current position than in my previous position," "My pay level is lower than it should be given my level of education," or "My pay level is lower than it should be given my work experience."

Spouse Employment and Child Care





and service member day-to-day job demands are a primary barrier to employment for active-duty spouses who are not working but want or need to work and have an infant (n=171), preschooler (n=235), or grade-school-aged (n=392) child in the home, the barriers may shift for those with older children. Among active-duty spouse respondents who are not

working but want or need to work and have an adolescent in the home, one-third (33%, n=234) cite the time they have been out of the workforce as a top barrier to employment.

A third (34%) of active-duty spouse respondents who are not employed but want or need to work say child care is too expensive; 1 in 5 (20%) cite the availability of child care as a limit to taking employment; and 1 in 10 (11%) report that the hours of available child care are not flexible enough to meet their employment needs.

"When my spouse is deploying, it is very difficult to find child care that is flexible with hours needed to work for my professional degree. Many daycares are only open daytime hours... It is difficult when deploying frequently. Many days, you need to get help from someone just to keep a job."

Active-duty Air Force Spouse

Additionally, child care capacity, already insufficient prior to the COVID-19 pandemic,⁶ has been further reduced, with as many as a third of child care centers remaining closed more than a year after the pandemic began.⁷ Those that have reopened often have reduced capacity due to increased safety protocols and staffing challenges,⁸ further lengthening sometimes years-long waitlists.⁹ For active-duty spouses who require child care in order to seek or maintain employment, the lack of child care availability can be an immovable barrier. Over 4 in 10 (44%, n=171) active-duty spouse respondents who are not employed but want or need to work and have an infant at home, and 35% (n=235) of those with a preschoolaged child, select "child care is unavailable or the waitlist is too long" as one of the reasons they are not working.

Employers have begun to respond to the child care crisis to attract and retain employee talent,10 and they benefit by

Table 1: Employer-Provided Child Care Benefits Employed active-duty spouses with a need for child care		
Flexible Spending Account (dependent care)	44%	
Reasonable accommodations for child care issues	33%	
Child care subsidies	7%	
Onsite child care	2%	

reducing costs associated with turnover while gaining a workforce that is educated, capable, driven, and satisfied. More than 8 in 10 (83%, n=225) employed active-duty spouse respondents who need child care and currently have employer-provided child care benefits report they are satisfied with their current company/ organization, compared to 69% (n=279) of their counterparts who need child care but do not have employer-provided child care benefits. On average, infant care costs nearly \$16,000 per year in the United States, 11 with costs slightly decreasing as the age of the

child increases. Nearly one-third (27%) of employed active-duty spouse respondents who are experiencing financial stress report that out-of-pocket child care costs contribute to their financial stress.

44% of active-duty spouses who identify military spouse employment as one of their top issues indicate that **"remote work opportunities" would best address their concerns.**

In addition to balancing service members' unpredictable daily work schedule and unaffordable or unaccessible child care, a third aspect of the military lifestyle — frequent relocation — continues to impact spouse employment, according to active-duty spouse respondents who are not working but want or need paid employment.

The openness for employers to shift to remote work prompted by the COVID-19 pandemic could benefit military spouses, ¹² providing flexibility and portable jobs that could withstand relocations. Nearly half (44%) of active-duty



Table 2: What would best address concerns about military spouse	e employm	ent?
Active-duty spouse respondents who cite military spouse employment as a top issue	of concern	

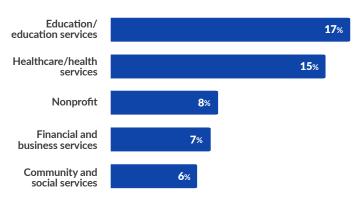
Solution	Proportion
Remote work opportunities for spouses	44%
Flexible work schedules for spouses	30%
Control over where we move	30%
License and/or certification transferability for spouses	28%
Protections against employer discrimination for military spouses	28%
Job transfer from one duty station to another with the same employer	24%

spouses who identify military spouse employment as one of their top issues indicate that "remote work opportunities" would best address their concerns. However, as employers also try to contend with the changing landscape of work,¹³ the benefits of greater opportunities for remote work prompted by the COVID-19 pandemic have not yet materialized for military spouses. This could be due in part to the

predominant fields where military spouses typically work, which do not transfer as easily to remote work as others may.¹⁴ Active-duty spouse respondents who are employed at least part-time continue to predominantly work in the private/public education sector (17%), healthcare/health sector (15%), and nonprofit sector (8%). Licensing and credentialing requirements

exist for each of these fields; as such, efforts to provide educational opportunities and license transferability continue to be important to help increase the proportion of spouses who can find and maintain employment. A third (33%) of employed active-duty spouse respondents who report that they are likely looking for a new job in the next 12 months will be doing so due to a relocation/permanent change of station (PCS). Of those active-duty spouse respondents who report PCS moves as a top issue in military life, 28% indicate finding employment as a concerning aspect of PCSing, and just over a third (38%) of active-duty spouses who have completed a PCS move

Figure 2: Top 5 Active-Duty Spouse Respondent Career Fields



in the three months preceding survey fielding report they are "currently employed" at least part-time. DOD data show many spouses need four months or more to find a new position following a PCS.¹⁵

For active-duty spouses, employment impacts both financial and overall well-being. It relieves financial pressure; 68% of spouse respondents who are not currently working but are seeking employment also report their financial situation causes them "some stress" or a "great deal of stress." In comparison, only 44% of their employed counterparts report the same level of financial stress.

Meaningful employment can also benefit the overall well-being of spouses. ¹⁶ According to the MFLS, employed active-duty spouse respondents who are employed and feel their work is meaningful have significantly lower levels of stress than their counterparts who are employed but do not find their work as meaningful. However, military spouses often find themselves taking any opportunity, regardless of meaningfulness, as it might not be long before it is time to move on again. ¹⁷ Therefore, programs designed to assist spouses looking for employment must consider the availability of positions to meet immediate needs and the need for meaningful, long-term, transferable employment. ¹⁸ Furthermore, quality, flexible child care is essential for military spouses' ability to secure and maintain employment — an essential component to military family financial security. However, financial security can not be undermined by the cost of the quality child care needed to achieve it. Discussions of spouse employment that do not include solutions to child care availability and affordability will simply leave a key challenge to spouse employment concerns unaddressed.





Limitations and Considerations

All of the data referenced in this finding are for active-duty spouse respondents, excluding those who selected both "active-duty spouse" and "active-duty service member," indicating they are in a dual military family (n=56). While an important subpopulation to understand, dual military families often have different employment experiences and child care needs, compared to active-duty spouses who are not also service members.

Prior to the 2020 MFLS, active-duty spouse employment data included respondents who could also have been an active-duty service member, potentially skewing the number of spouses in the labor force in previous reporting. The unemployment rate is the percentage of active-duty spouse respondents who report they want or need paid employment and have actively sought employment within the past four weeks at the time of survey fielding.

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, and lower pay level than work experience or education would indicate.

Recommendations

*More information in Recommendations Chapter of Comprehensive Report



Military

- Continue to expand efforts to provide service members more control over their careers (including when and where they relocate) and day-to-day schedules.
- Establish Dependent Care Flexible Spending Accounts (DCFSA) that military families could use to reserve pretax dollars from their paychecks to pay for out-of-pocket child care expenses.
- Standardize policies across service branches to clear barriers and support military spouse entrepreneurs who live in installation housing.*



States

- Ensure existing unemployment insurance (UI) eligibility requirements at the state level do not define permanent change of station (PCS) moves as "elective," which excludes military spouses from being eligible for UI benefits.
- Explore opportunities to expand protections to military dependents in hiring and housing, as the Commonwealth
 of Virginia did in 2021 for Military Spouse Support.¹⁹



Congress

- Support a fixed period of federal student loan deferment for military spouses who leave a job to relocate due to military orders.
- Help military spouses return to the labor force by funding pilot programs to explore innovative approaches that address root causes (e.g., offering child care at no cost to military spouses during their job search).



Employers

- Ensure computer algorithms do not exclude military spouse applicants with resume gaps, frequent job changes,
 lack of upward mobility, etc.
- Expand opportunities for flexible work, allowing for shifting hours or remote work when possible.



At the 20-year mark of the War on Terror, post-9/11 Veteran respondents, on average, show strong employment and financial positions. However, a greater proportion of those with a service-connected disability experience transition difficulties and a lack of preparedness for themselves and their families.

In 2021, the U.S. government and Veteran-serving/military-serving organizations commemorated the 20th anniversary of 9/11 and the War on Terror. Even as the U.S. military adjusts and/or ends its operations in Afghanistan and areas in the Middle East, 4.5 million Veterans have served in the post-9/11 era (as of 2020). The share of post-9/11 Veterans will continue to grow in the overall U.S. Veteran population in the years to come with implications for costs, funding, and resources needed by the VA to provide services for this latest generation of U.S. Veterans. ^{2,a}

In the 2021 Military Family Lifestyle Survey (MFLS), 39% of all Veteran respondents have served at some point since

September 11th, 2001, and 4 in 10 (41%) of these Veteran respondents have served only during the post-9/11 period. Twenty-two percent of post-9/11 Veteran respondents^b indicate they recently transitioned (separated in the last three years).

Employment Profile of Post-9/11 Veterans

Compared to non-Veterans in the same time period, post-9/11 Veterans have higher employment rates. Employment data from the American Community Survey (ACS) showed that, from 2014-2018, 80% of post-9/11 Veterans were employed, compared to 75% of non-Veterans (ages 18-54).³ More recently, the Current Population Survey (CPS) showed in 2020, approximately 73% of post-9/11 Veterans were employed, compared to 59% of non-Veterans (ages 18 and over).⁴ Consistent with the pre-pandemic ACS data, post-9/11 Veterans report stronger employment rates.^{5,c} While 80% of post-9/11 Veterans with no



service-connected disability are employed, employment appears to decrease as disability rating increases: 68% of post-9/11 Veterans with a service-connected disability were employed in 2020 and those rates dropped by 12 points to 56% for those with a 60% or higher service-connected disability rating.⁶

Despite overall robust civilian employment outcomes, a higher proportion of post-9/11 Veterans also experience adverse financial outcomes, compared to Veterans from other eras.⁷ In the 2021 MFLS, about half (53%) of post-9/11 Veteran respondents indicate that they are experiencing financial stress,^d which they attribute to excessive credit card debt (30%), spouse under/unemployment (24%), major home repairs (23%), and student loans (22%). Nearly 6 in 10 (59%) of the same respondent group report having some amount of credit card debt.

^aBased on statistics published by the VA in 2018, a higher proportion of post-9/11 Veterans (compared to Veterans from other service periods) have a service-connected disability and utilize the VA health system exclusively. See source: https://www.va.gov/vetdata/docs/SpecialReports/Post_911_Veterans_Profile_2016.pdf.

^bRespondents who are considered "post-9/11" Veterans are those who select at least one of their service periods to be "September 2001 or later" in the 2021 MFLS.

^cThe percentage data is rounded up for readability and consistency of this report. For original data, please see Table 1 from https://www.bls.gov/news.release/vet.nr0.htm.

^dWhen asked about their personal financial condition, respondents indicate that they are in "a great deal" or "some" stress.

70



Table 1. Top Contributors to Financial Stress Post-9/11 Veteran respondents who report "some" or a "great deal" of financial stress		
Excessive credit card debt	30%	
Spouse underemployment or unemployment	24%	
Major home repairs	23%	
Student loans	22%	
Out-of-pocket medical costs	21%	
Getting behind on bills	21%	

The topic of student loans and their resulting financial burden has garnered substantial attention, especially in the recent years and months (particularly due to the economic fallout of the COVID-19 pandemic).8 While nearly a quarter of financially stressed post-9/11 Veteran respondents (22%) report student loans contribute to their financial stress, most post-9/11 Veteran respondents (70%) do not report having current student loan debt: 4 in 10 (41%) post-9/11 Veteran respondents report they have never had any

student loan debt in their family, and 28% have fully paid off their family's student loans.

As the effects of the COVID-19 pandemic continue to disrupt and alter the civilian employment landscape, its impact on Veteran employment — specifically for the post-9/11 generation — is unknown and may become more apparent in the coming years. While post-9/11 Veterans enjoy strong participation in the labor force and employment rates, and most

Veteran respondents (68%) are "somewhat" or "very satisfied" with their current or most recent job, 1 in 5 (21%) of those respondents also indicate that they have changed jobs 5+ times since transitioning. As a comparison, baby boomers held an average of 12.4 jobs from the age of 18-54, according to the Bureau of Labor Statistics. For post-9/11 Veterans, transitioning out of military service may actually mean several transitions — to different jobs, careers, or professions.

Service-Connected Disability and the Transition Process

As a part of the All-Volunteer Force, service members enter and exit military service for a variety of reasons (see Figure 1

Figure 1: Top Reasons for Leaving Service

Post-9/11 Veteran Respondents



for post-9/11 Veteran respondents' reasons for leaving military service). Regardless of the reasons behind separation from military service, there will be a transition process for Veterans (and their families) during which employment, financial, and mental/physical well-being all undergo substantial changes.

Table 2. Transition Difficulty for Respondent by Service-Connected Disability Rating Post-9/11 Veteran respondents with a service-connected disability rating				
	10-40% Disability Rating (n=74)	50-90% Disability Rating (n=208)	100% Disability Rating (n=146)	Any Disability Rating (n=432)
Transition process was "difficult" or "very difficult"	58%	66%	75%	68%

Among post-9/11 Veteran respondents in the 2021 MFLS, 80% report a service-connected^{11,h} disability, and the majority of those (77%) have at

least a 50% disability rating. While the majority (65%) of post-9/11 Veteran respondents rate their own transition experience as "difficult," further differences exist based on respondents' disability status (see Tables 2 and 3).

In the 2021 MFLS, respondents were asked about their family's student loans, so the loan could be for themselves, their spouse, their children/dependents, or a combination of those listed.

On average, post-9/11 Veteran respondents in the 2021 MFLS have been separated from the military for nine years by the time of survey fielding [April-June 2021]. Baby boomers are individuals born between the years 1957-1964.

According to the official definition by the VA, "service-connected" means the disability is a result of disease or injury incurred or aggravated during active military service.



When asked about top challenges to their transition, post-9/11 Veteran respondents without a serviceconnected disability most commonly report issues

Table 3. Transition Preparedness for Respondent's Family by Service-Connected Disability Rating Post-9/11 Veteran respondents with a service-connected disability rating				
	10-40% Disability Rating (n=78)	50-90% Disability Rating (n=207)	100% Disability Rating (n=147)	Any Disability Rating (n=436)
Family was not well- prepared to successfully navigate the transition from military to civilian life	35%	52%	52%	49%

related to adjusting to civilian life and finding employment for themselves. Whereas, post-9/11 Veteran respondents with a service-connected disability also report physical injuries and financial struggles as a part of their top challenges, in addition to difficulties in experiencing a loss of connection to the military community and a sense of purpose/camaraderie.

Post-9/11 Veterans generally have strong financial and employment situations, compared to their non-Veteran peers or even to Veterans of other service periods. However, the transition process and outcomes are still uneven within this group as individual experiences are circumscribed by the intersectional effects of a Veteran's race, ethnicity, gender, disability status, and other variables. ^{12,13} Even with programs and resources in place to help with the process, the transition from military to civilian life can be challenging for many post-9/11 Veterans. ^{14,i}

Table 4: Top 5 Challenges to Transitioning Out of the Military Post-9/11 Veteran respondents by service-connected disability status	
Without Service-Connected Disability (n=111)	With Service-Connected Disability (n=464)
50% Loss of Connection with Military Community	58% Loss of Connection with Military Community
45% Finding Employment for Myself	53% Loss of Sense of Purpose/Camaraderie
41% Loss of Sense of Purpose/Camaraderie	47% Finding Employment for Myself
33% Getting Socialized to Civilian Culture	45% Physical Injuries
31% Civilian Day-to-Day Life	44% Financial Struggles



Limitations

The sample of post-9/11 Veterans may not be representative of the overall post-9/11 Veteran population. There are several characteristics in this sample that are likely different from those in the general U.S. population. For example, 80% of post-9/11 Veteran respondents in the 2021 MFLS report a service-connected disability. However, varying sources of government data show that approximately 40-43% of all post-9/11 Veterans have a service-connected disability. Moreover, 55% of the post-9/11 Veteran sample also indicate that they are military retired, which implies a long career in the military. The post-9/11 Veteran sample is also 60% male and 40% female, which has a much higher proportion of female Veterans, compared to those in the U.S. post-9/11 Veteran population. 17, j

Recommendations



VA

Expand and institutionalize existing pilot programs, such as the Expiration-Term of Service Sponsorship (ETS-SP) and VA Solid Start, beyond the transition period for Veterans with rated or pending service-connected disability status. These programs can leverage an individualized peer-to-peer model that lends itself to tailor services and care for Veterans with rated or pending service-connected disability status.



Military

 Further build up a network of robust transitioning resources to accommodate the varying needs of Veterans and transitioning populations by leveraging under-utilized existing private and social resources.



Recommendations



The 2021 Military Family Lifestyle Survey (MFLS) explores critical issues and concerns facing military service members, Veterans, and their families. Long-term solutions to these challenges will require action from various stakeholders, including the military, VA, Congress, and community supporters. The following recommendations identify specific actions stakeholders can take to support military and Veteran families and alleviate challenges identified in this report.



Military Leaders

In support of overall family mental health and wellness, increase support of in-home child care and increase child care capacity at both on-installation child care facilities and fitness centers.

Finding: Resources/Military Quality of Life

Military family respondents have consistently identified "military quality of life" as a top-five military family life issue since the answer choice was introduced to the MFLS instrument five years ago, and military resources are intended to mitigate these issues. Results from this report offer insight into how those resources can be better tailored to address multiple areas of concern. Increasing child care capacity at fitness facilities is one such solution and is a service offered by many commercial fitness centers. Four in 10 (40%) active-duty family respondents to the 2021 MFLS identify "the opportunity to exercise" as a resource they regularly need, and results from the 2020 MFLS suggest this need is even greater and goes routinely unmet during deployments: the opportunity to exercise was identified as a top-five resource need during deployments among active-duty spouse respondents, and 24% who needed it reported they did not have it.¹

Access to exercise is critical to supporting both mental and physical health^{2,3,4} and therefore overall well-being. The Spouse Health and Well-Being Finding discusses the importance of military spouses' overall health and well-being and highlights the lack of access to child care as one of the barriers to achieving it. These issues are inextricably linked for many military spouses: exercise and respite child care are both important elements of supporting mental and physical health, especially when the service member is deployed; however, the lack of child care options at fitness centers makes it difficult to achieve either. Expanding on-site child care at military fitness facilities (adding capacity where it does not exist and extending hours) offers an evidence-based approach to supporting military spouse well-being and directly addresses challenges active-duty spouse respondents have been raising for years in the MFLS. Furthermore, it is possible that by expanding on-site care at fitness facilities, on-installation Child Development Centers may also experience increased capacity (if spouses are currently using CDCs for fitness-related hourly care), thereby enabling increased usage for other respite or hourly care needs.

Commission a report on families with children with special needs and their barriers to accessing child care. Include plans for hiring and training qualified providers and making CDCs accessible for children with special needs.

Finding: Spouse Health and Well-Being

Eight in 10 (81%) military spouse respondents report they have experienced at least one separation from their service member due to military obligations in the 18 months preceding survey fielding. Myriad challenges accompany these separations, and military spouses often step up to support their families during these military life challenges.⁵ Frequent separations, deployments, and moves (often coinciding with stints of solo-parenting) can, and often do, take a toll on a military spouse's mental and physical health.^{6,7} As a result, military spouses are often at greater risk for poor mental and physical health outcomes.^{8,9} In line with this research, military spouse respondents to the 2021 MFLS report increased stress, difficulties with sleep, and issues with their physical and mental health. In fact, only 39% of active-duty spouse



respondents with children agree that they get enough good quality sleep to function. One in 5 active-duty spouse respondents (21%) cite "parenting responsibilities" when asked, "What is preventing you from getting enough sleep to function effectively?" Child care, including respite care, can therefore help improve well-being outcomes for military spouses; however, barriers exist in accessing child care and respite care for families, including some unique barriers for those with special needs children: half (51%) of active-duty spouse respondents with children in the home report having at least one child with special needs.

In open-ended responses, active-duty spouse respondents provide insight into challenges in trying to find child care for their child(ren) with special needs, most commonly identifying availability of care (25%), Child Development Center requirements (22%), and lack of qualified/trained providers (15%) as barriers. In addition to the well-documented benefits of child care in spouse employment outcomes, respite care can also support spouses in caring for their physical and mental health. ^{10,11,12} More research is needed to better support military spouses caring for children with special needs in finding and obtaining quality child care for their special needs children, and in identifying gaps in available care — especially within the military child care ecosystem. Closing such gaps would support military spouse well-being, resilience, and overall readiness. ¹³

Standardize policies across service branches to clear barriers and support military spouse entrepreneurs who live in installation housing.

Finding: Spouse Employment and Child Care

Although the COVID-19 pandemic has expanded remote work opportunities,¹⁴ its effect on military spouse employment remains to be seen, and spouse employment remains a top-five military family life issue for military spouse respondents. Blue Star Families' research has consistently found that the impact of service members' day-to-day job demands and the lack of affordable child care (See Finding: Spouse Employment and Child Care) are top barriers to military spouse employment, and military spouses seek flexible work options.

Therefore, flexibility, career portability, and the ability to minimize child care costs make entrepreneurship an appealing alternative career path for some spouses. However, the lack of consistency in rules and regulations from installation to installation, unit to unit, across service branches, and CONUS vs. OCONUS makes it difficult for spouse entrepreneurs to maintain their portable businesses in the wake of frequent military moves. For example, types of authorized businesses — those that authorize operating permissions, permitting,



registration, and tax policies — and compliance with Status of Forces Agreement (SOFA) requirements vary across service branches, installations, countries, and sometimes even unit/commands.

Standardizing rules, regulations, policies, procedures, permitting, regulations, and permissions for all military spouses living in installation housing would strongly benefit military spouse entrepreneurs and help address chronic military spouse unemployment and underemployment.



Explore options for improving calculation of Basic Allowance for Housing (BAH), taking into consideration issues such as school district quality, housing availability, market fluctuations, and more.

Finding: Financial Stability and Housing

BAH is intended to cover 95% of housing costs in 2022 and to support military families by ensuring that costs are within 10% of the median rate for civilian housing.¹⁵ However, more than three-quarters of active-duty family respondents (76%) report incurring monthly out-of-pocket expenses exceeding \$200.

Military families faced additional challenges in 2021 concomitant to moving during the COVID-19 pandemic amid a skyrocketing rental and housing market. Many families found themselves navigating long military housing waitlists, scarce civilian rental housing availability, fast-rising home prices, and a competitive "seller's market." This caused difficulties for military families in securing housing during the height of PCS season, and this report provides evidence that BAH did not adequately keep up with the market (this survey fielded prior to supplemental BAH authorized in some military housing areas^{19,20}). Active-duty family respondents who recently relocated report slightly lower levels of satisfaction with their housing, compared to those who did not recently relocate, despite similar levels of out-of-pocket housing expenses. This indicates that when faced with limited housing choices, families may have accepted lower-quality housing.

It is clear from the results of this report, the 2020 MFLS, and a 2020 Government Accountability Office report, ²¹ BAH calculations require modifications to more closely align with varied housing markets. Moreover, calculations currently fail to consider quality of life variables, such as school quality, and do not have a proven track record of anticipating or adjusting to future market fluctuations. Congress and/or the military services should order a report of available options to revise BAH calculations.

Expand family building support to ensure equitable treatment and treatment options for special populations.

Finding: Family Building

Military families commonly experience challenges in building their family, including fertility challenges, miscarriage, and hormonal imbalance, among others. While these challenges are not unique to military families, they are often exacerbated by the military lifestyle and may impact retention. About 4 in 10 active-duty family respondents (42%) report that the military lifestyle has created challenges to having children, specifically the desired number and/or spacing of their children. These challenges may be intensified for LGBTQ+ couples, military members who choose to parent without a partner, or individuals who require alternative ways to support fertility due to disease, genetic variance, or anatomical dysfunction. In open-ended responses, some respondents also discuss financial struggles they have encountered when attempting to build their families, citing the lack of TRICARE insurance coverage for certain treatments and the scarcity of military treatment facilities that could provide these services.

Among military family respondents who have sought or used resources related to family building challenges, 73% have sought care from a civilian medical provider and 60% from a military treatment center. Of those who have sought care from a civilian medical provider, 12% report that they did not receive the reproductive support they were looking for, compared to 36% of those who sought care from a military treatment facility. An even higher proportion of LGBTQ+ active-duty family respondents report they did not receive the reproductive support they were looking for from a military treatment facility (45%), compared to 5% of those who have sought care from a civilian provider. This discrepancy is reflective of gaps in family building care eligibility under DOD restrictions, such as same-sex couples and single service members. The findings from this report identify the need to expand family building support to ensure equitable treatment and treatment options for populations currently excluded.



Diversify bidirectional communication methods that National Guard and Reserve commands use when connecting with families in their unit, especially regarding information about eligibility for, and access to, available resources and services.

Spotlight: National Guard and Reserve Families

National Guard and Reserve service members and their families experience challenges that differ both from each other and from those of their active-duty counterparts. For example, National Guard and Reserve families usually do not experience the frequent relocations that are more common among active-duty families. As a result, National Guard and Reserve service members and spouses may have more stable employment, local and ongoing social support networks, and greater knowledge of local, non-military resources when compared to their active-duty peers.

However, fewer National Guard and Reserve families reside on or in close proximity to a military installation, which can hinder access to military-related resources for a variety of reasons.²² These barriers become more salient when National Guard and Reserve service members deploy, and the needs for military resources increase for families.²³ This has implications for communications between unit leadership, National Guard and Reserve service members, and their families — before, during, and after deployments, and beyond.

A system that diversifies bidirectional communication methods for commands to use when connecting with families in their unit could help mitigate some of the negative outcomes faced by some National Guard and Reserve families. This is particularly important during times of separation — not just through deployments and reintegration, but also during regular drill training and, in the case of the National Guard, during state activations. Communications could focus on urgent matters as well as resource availability and outreach to support unit and family cohesion. This could include family readiness leads and involve the use of multilingual communications via social media, email, postal mail, and when needed, phone calls. Regular and consistent outreach is important and could help ensure accurate and timely communications reach these often geographically dispersed families (See Finding: Resources/Military Quality of Life), therefore effectively increasing both service member and family engagement within the unit.



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Establish and/or support affinity groups at installations, especially in less diverse areas and/or areas in which there are documented incidents of discriminatory and/or racist behaviors.

Finding: Diversity

Consistent with Blue Star Families' 2021 Racial Equity and Inclusion (REI) report titled, Understanding the Diverse Experiences of Military Families of Color,²⁴ more than half of service members (54%) and nearly 6 in 10 spouses of color (59%) in the current survey report having experienced racial discrimination within their local civilian community; nearly half (47%) of active-duty service members and one-third (33%) of spouses of color report having experienced racial discrimination within their military community. It is well-established in research that discrimination can undermine a person's sense of belonging and increase feelings of isolation for those who experience it.^{25,26,27}

Belonging is defined as a psychological sense of connection or integration into a community.^{28,29} The benefits associated with belonging, whether it be to a group, school, or community, have been found to have lasting positive effects and are important to individual mental health.^{30,31} The 2021 REI report findings revealed that nearly half (46%) of active-duty family respondents of color have experienced difficulty developing a sense of belonging to their local civilian community due to their family's race/ethnicity.³² In the current survey, a similar finding emerged, with 45% of active-duty family respondents disagreeing with the statement: "I feel a sense of belonging to my local civilian community." There is evidence that availability and participation in affinity groups may help mitigate these detrimental effects.³³ Affinity groups can be a place for underrepresented people to come together to feel less isolated and more connected and to find a sense of community. Establishing and/or supporting affinity groups at installations, especially in less racially/ethnically diverse areas could make a difference, as these groups may provide a much-needed source of support for service members, spouses, and military youth of color in these communities.



Congress

Commission a report to assess the viability of flexible work options for service members and making leave opportunities more flexible to address short-notice and short-duration personal and family concerns.

Finding: Employment Satisfaction

Perceived family stress can impact job satisfaction and performance among service members. For example, in one study that examined perceived stress among active-duty sailors, 81% endorsed experiencing family stress, and 51% perceived that this impacted their job/military service. Similarly, among active-duty service member respondents who report being dissatisfied with their job, "amount of time away from family" is the top military life issue, followed by "child care challenges" and "lack of control over military career."

This dissatisfaction can have additional implications for current and future military readiness. About 7 in 10 active-duty service member respondents who report they are dissatisfied with their job also report they are likely to look for another job in the next 12 months. Dissatisfied active-duty service member respondents report being more stressed than their satisfied counterparts and are less likely to recommend service, which could undermine future recruitment.

Flexible work options and an increased opportunity to utilize leave could address some of these concerns and others. To this end, the military should commission a report to understand the relationship between the utilization of flexible work options (e.g., flexible scheduling, remote work, etc.) and overall work satisfaction and willingness to remain in



service. The same study should also explore service members' ability to use the leave allocated to them, and the possibility of expanding leave opportunities to address short-notice and short-duration personal and family concerns. These findings could potentially address service member and family concerns such as burnout, family support, and mental health and wellness outcomes.



Increase access to crucial mental health care by facilitating the enactment of interstate compacts that allow for practice via telehealth and for provider license acceptance across state lines.

Finding: Military Children's Mental Health

While many active-duty family respondents report that the average mental health of the children in their family is "good," there are some notable exceptions. For example, 41% of active-duty family respondents rate their adolescent oldest child's mental health as "fair," "poor," or "very poor." Those experiencing a separation from their service member from TDY/training/other military-related separations and geobaching and those who report concerning relationship behaviors in their family also report lower average child mental health, and 5% of active-duty family respondents report their child has expressed suicidal thoughts within the past year.

While military children as a whole can be resilient, they share similar mental health challenges as their civilian counterparts, particularly in light of the COVID-19 pandemic. The impacts of physical distancing and increased virtual presence during the pandemic may have had a disproportionate effect on adolescents, an age group for whom peer interaction is developmentally important.³⁵ Mental health provider shortages and access issues were also of increasing concern during the pandemic),^{36,37} and this holds true among respondents to the 2021 MFLS. Nearly one-third (29%) of active-duty respondents rate behavioral health in their local community as "inadequate," and 44% of TRICARE members report difficulties accessing mental health care for their children.³⁸ Furthermore, caregivers of TRICARE-covered children who had a mental or behavioral health care need report substantially more difficulty accessing specialty care than families with children who do not report having mental health needs. They identify challenges such as difficulty getting referrals (38%) and specialist care (39%).³⁹

One reason for this provider shortage, apart from increased need due to the pandemic, is the lack of licensure reciprocity among all 50 states for counselors and psychologists, and the need for flexibility to provide telehealth across state lines. Interstate compacts have been introduced to help with this shortage; however, only two states have enacted this legislation for counselors,⁴⁰ although 18 states are pending enactment, 28 have signed on to the psychologist interstate compact,⁴¹ and nine states are beginning to introduce legislation.

Access to crucial mental health care for children, adolescents, and families could be increased by facilitating enactment of these interstate compacts across all states to allow for practice via telehealth, and for provider license acceptance across state lines.⁴² This could help to address and ameliorate the provider shortages for all military families and mitigate the effects of poor mental health on military children and adolescents.



Allow homeschooling military families to utilize their "home state of record" instead of their current residence for homeschooling education requirements, to maintain continuity across relocations.

Finding: Military Children's Education

Thirteen percent of active-duty family respondents with children enrolled in K-12 education report that they homeschool their oldest child, a proportion that may be up to two times greater than the proportion in the general U.S. population;⁴³ nearly 4 in 10 (38%) of those report that they plan to homeschool their child until they graduate from high school. The top three reasons active-duty family respondents cite for this choice reflect actions families are taking to adjust to issues unique to military life: "to stabilize their children's academic experience" (52%), "greater flexibility to spend time together as a family" (36%), and "to avoid poor quality school options" (35%). This indicates that for many active-duty military family respondents, homeschooling is a viable long-term choice, even after COVID-19 pandemic school attendance protocols are lifted.

Unlike their homeschooling civilian counterparts, the frequency of military moves makes homeschooling more challenging for military families, because regulations can change from state to state and from CONUS to OCONUS duty stations. "Roadschooling" is one alternative model, which could be adapted to cover homeschooling military families. This type of homeschooling allows transient families to utilize a "home state of record" to stabilize the requirements instead of having to change as they move from state to state. Similarly, allowing homeschooling military families to also use their home of record — rather than their current residence — would help them maintain educational continuity across relocations and ease burdens associated with moves.



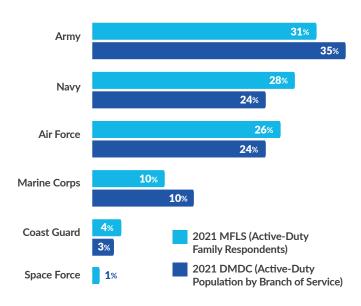
Respondents and Methodology



The widespread distribution of the 2021 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 8,004 responses. Respondents represent a cross-section of active-duty service members, National Guard and Reserve service members, Veterans, and their immediate

Figure 1: Branch of Service

Active-duty family respondents (n=3,786)



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 samples of active-duty, National Guard, Reserve, and Veteran families differ from those populations in several important ways and cannot be considered representative of the entire population.

Defining Military Identity

This year's survey continued the efforts that began in 2020 to recognize and take into account that many members of the military community have multiple military affiliations, such as a Veteran who is a current spouse of an active-duty service member. Survey respondents were **first** asked 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." Over one-quarter (27%) of all respondents selected more than one affiliation or relationship to the military (e.g., selected both Veteran/retired service member and spouse of an active-duty service member). A **second**, follow-up question carried forward their selected choices and asked participants to

select the *primary role* that best identifies their current relationship to the military.

For the purpose of this report, "military identity" is defined as the affiliation a respondent chose as one of their (potentially multiple) military affiliations **and** their primary identity. As an example, respondents identified in this report as "active-duty spouse respondents" are those participants who selected "spouse/domestic partner of active-duty service member" for their primary current identity.

Demographics of All Respondents

For all survey respondents (n=8,004), the most commonly selected primary identity is spouse/domestic partner of

Figure 2: Primary Relationship to Service
All respondents (n=8.004)

Spouse/Domestic Partner 46% of Service Member 22% Veteran 13% Veteran Spouse 11% Service Member Parent or Parent-in-Law of Service Member or Veteran **Gold Star Family Member** Adult Child of Service Member or Veteran Sibling of Service Member or Veteran Girlfriend/Boyfriend of 0.3% Service Member or Veteran

a service member (including National Guard and Reserve) (46%), followed by Veteran/retired service member (22%), spouse/domestic partner of a Veteran/retired service member (13%), service member (including National Guard and

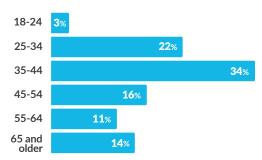


Reserve, (11%), parent/parent-in-law of a service member/Veteran (5%), Gold Star family member (2%), adult child of a service member/Veteran (1%), sibling of a service member/Veteran (0.4%), or girlfriend/boyfriend of a service member/

Veteran (0.3%).

Figure 3: Age

All respondents (n=8,004)



Of all respondents, the single largest age group is age 35-44 (34%), followed by those who are 25-34 (22%), 45-54 (16%), 65 and older (14%), 55-64 (11%), and 18-24 (3%).

Approximately 96% of all respondents live within the U.S., and 4% live outside the country. Within the U.S., the largest groups of respondents live in Virginia (10%), California (9%), Florida (8%), and Texas (8%).

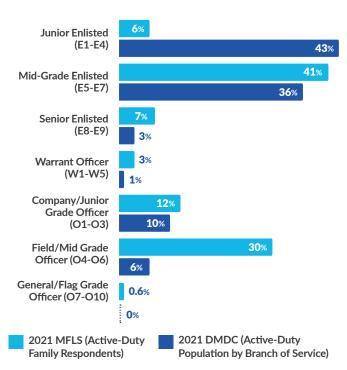
This sample of active-duty family respondents represents a greater

Active-Duty Family Respondents

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 (17%) and active-duty spouse respondents (83%). The largest proportion of active-duty family respondents identify as white (79%), followed by Hispanic or Latino/a (12%),

Figure 4: Service Member's Rank

Active-duty family respondents (n=3,874)



Black or African-American (7%), Asian (5%), American Indian or Alaska Native (3%), Native Hawaiian/Pacific Islander (2%), and 2% selected a write-in option.^a Additionally, 24% of active-duty family respondents report they are a part of a multi-racial/ethnic family, a proportion which is larger than 10%¹ of the married U.S. adult population who are in interracial or interethnic marriages.^b

Most services are represented at rates within a few percentage points of the active-duty force,² except for the Army, which is undersampled. Active-duty Army family respondents are sampled at 31%, compared to 35% of the total active-duty force; Navy respondents are sampled at 28%, compared to 24% of the total active-duty force; Air Force respondents are sampled at 26%, compared to 24% of the total active-duty force; Marine Corps respondents are sampled at 10%, compared to 14% of the total active-duty force; Coast Guard respondents are sampled at 4%, compared to 3% of the total active-duty force; and Space Force represents 1%.^c

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^aRacial/ethnic identity was asked as a select all question: "How do you describe yourself?" Responses were recoded as a "person of color" if they selected any of the following racial/ethnic options: American Indian/Alaska Native, Asian, Black/African-American, Hispanic or Latino/a/x or of Spanish origin, Native Hawaiian or other Pacific Islander, or a write-in option. Respondents may have selected multiple options, including white, along with another racial/ethnic identity.

^bRespondents were asked, "Are you a member of a multi-racial/multi-ethnic family (e.g., do you have a spouse or child of a different race/ethnicity)?" Respondents

^bRespondents were asked, "Are you a member of a multi-racial/multi-ethnic family (e.g., do you have a spouse or child of a different race/ethnicity)?" Respondents may have identified as any race/ethnicity, and it is important to note that families who identify as multi-ethnic may have different experiences than families who identify as multi-racial. Census data refers only to adults married to a spouse of a different race or ethnicity.

Percentages are calculated by dividing the number of active-duty family respondents who report their service branch by the total sample of active-duty family respondents (excluding National Guard and Reserve respondents). In DMDC data, Air Force and Space Force are combined.



The active-duty family respondent sample includes 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 is mid-grade enlisted (E5-E7, 41%), followed by field/mid-grade officer ranks (O4-O6, 30%). Company/junior grade officers (O1-O3) represent 12%, senior enlisted (E8-E9) represent 7%, junior enlisted (E1-E4) represent 6%, warrant officers (W1-W5) represent 3%, and general/

Figure 5: Geographic Location of Active-Duty Family Respondents

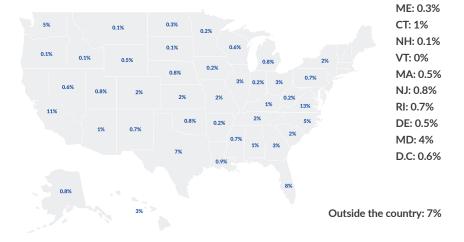
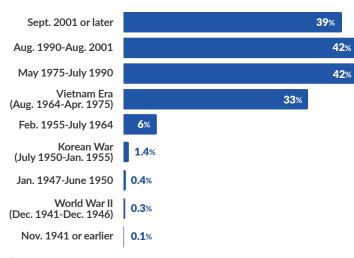


Figure 6: Time Period of Service for Veterans* (n=1,683)



^{*}Period of service is a select all question and veteran respondents can indicate the time periods during which they served.

flag officers (O7-O10) are the smallest group at 0.6% of the overall active-duty respondent sample. Additionally, women are oversampled in both the active-duty service member and Veteran/retired service member respondent samples. Women make up 54% of the active-duty service member respondent sample, which is significantly higher than the proportion of women in the active-duty service member population (17%).³

Military Service

Among current service member respondents, 78% are serving on active duty, 11% are serving with the Reserve, and 11% are serving with the National Guard. Thirty-nine percent of Veteran respondents report that they served September 2001 or later.



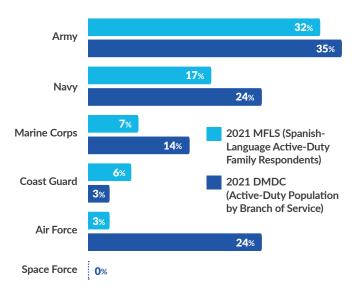


Demographics of Spanish-Language Respondents

In 2021, a portion of the full survey instrument was translated into Spanish, and for the first time, respondents were offered the choice of taking the survey in either English or Spanish. Seventy-five respondents elected to answer the Spanish-language survey, though they were not asked the reason for that selection, or whether they speak multiple languages, including

Figure 8: Branch of Service

Spanish-Language Active-Duty Family Respondents



Spanish.
Additionally,
respondents
who elected



12%



Figure 7: Age

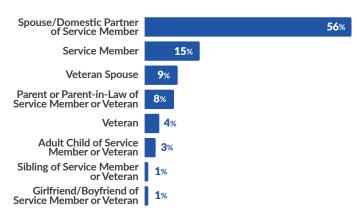
to participate in the English-language survey may identify with Hispanic/Latino/a/x culture, and/or use Spanish, as respondents to the Spanish-language survey may not identify as Hispanic/Latino/a/x and may also use English or other languages.

For Spanish-language respondents, the most commonly selected primary identity is spouse/domestic partner of a service member (including National Guard and Reserve, 56%), followed by service member (including National Guard and Reserve, 15%), spouse/domestic partner of a Veteran/retired service member (9%), parent/parent-in-law of a service member/Veteran (8%), Veteran/retired service member (4%),

adult child of a service member/Veteran (3%), sibling of a service member/Veteran (1%), or girlfriend/boyfriend of a service member/Veteran (1%). The mean age of Spanish-language survey respondents is 37.

Figure 9: Primary Relationship to Service

Spanish-Language Respondents (n=75)







Survey Procedure

The 2021 Military Family Lifestyle Survey (MFLS) instrument was designed by Blue Star Families in collaboration with Syracuse University's D'Aniello 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. In addition to the English-language version of the survey, a portion of the 2021 survey was translated into Spanish, and all respondents had an option to choose between the English or Spanish version. The survey received approval from Syracuse University's Institutional Review Board (IRB) and was fielded with Qualtrics, an online survey collection tool (Qualtrics, Inc., Provo, UT) from April 27th to June 6th, 2021.

To recruit respondents for the survey, Blue Star Families utilized convenience sampling methods. Respondent recruitment and outreach channels included:

- awareness-building with a focus on military families via email distribution from Blue Star Families' mailing lists and social media dissemination (e.g., Facebook, Twitter, blog posts, and partner websites) in both English and Spanish
- outreach from a myriad of military family, military, and Veteran service nonprofits; supportive service and professional organizations; as well as individual volunteers, for both the English and Spanish-language versions of the MFLS.

Additionally, recruitment and outreach were designed to enhance representation from historically underrepresented groups, such as Black and Hispanic/Latinx respondents, junior enlisted families, and National Guard and Reserve families. For the Spanish-language version of the MFLS, new recruitment and outreach efforts were explored. During survey fielding, recruitment messaging in media and social media outreach was adjusted to enhance recruitment in various subgroups, such as calling for specific service branches' response, to obtain a sample that is largely representative of the active-duty military. Furthermore, a snowball sampling strategy was used, recruiting some participants from historically underrepresented demographic groups and encouraging those participants to share the survey broadly.

Sampling, however, was not stratified, nor were results weighted to be representative. Possible biases were introduced through the utilization 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 personnel,² compared to the 54% of service member respondents they represent in this year's survey. Similarly, female Veterans make up approximately 9-10% of the overall Veteran population based on various government data,³,⁴ compared to the 29% of Veteran respondents in this survey. Without reweighting, this overor under-representation 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.

Potential respondents could access the survey link from a computer or mobile device via email, social media pages, or Blue Star Families' website. Survey participation was considered voluntary, and the information provided is confidential. Following the link, the survey began with a consent form, including the purpose, risks, and benefits of the research, and respondent consent was required to participate. Potential respondents under the age of 18 were not authorized to continue. All questions except for consent to participate, language choice, primary military affiliation, and age were voluntary, and respondents could skip any questions they did not wish to answer. Survey branching and skip logic techniques were utilized to ensure survey respondents would only be shown questions that applied to them.



Analysis

Upon closing the survey, an intensive data cleaning protocol was instituted to address missing data and invalid responses. This process included several sets and steps of criteria for removal, including, but not limited to, duplicate responses, survey completion in under five minutes, and nonsensical phrases to open-ended questions repeated across multiple respondents. A team of five researchers reviewed and reached an agreement on cases that met any of the criteria for invalid responses. For additional information, please contact survey@bluestarfam.org. Following data cleaning, the total sample is 8,004 respondents. Of those 8,004 respondents who started the survey, 68% (5,411) completed the entire questionnaire.

The survey questions were a combination of multiple-choice and open-ended questions to allow for diverse responses from participants. The majority of quantitative survey questions were multiple-choice. There were also several select-all questions, as well as Likert scale questions to indicate respondents' level of agreement. 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 Respondents could skip any questions they did not wish to answer, and "Does not apply," "Not applicable," and "I don't know" were listed as answer choices when appropriate. Responses of "Does not apply" or "Not applicable" were typically excluded from analyses. Therefore, in combination with survey branching and logic, sample sizes vary across survey questions.

For the 2021 MFLS report, 10 open-ended questions were chosen for qualitative analysis from the English-language version and four from the Spanish-language version. 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 Spanish-language qualitative data was translated by a consultant fluent in Spanish and familiar with research and military family life and was provided to Blue Star Families' analyst team for analysis. The content analysis process is as follows: first, the data were 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.

Spanish-language translation of the 2021 MFLS involved multiple steps. After the English-language survey was created, two focus groups were held with volunteers fluent in both English and Spanish. Efforts were made to recruit volunteers whose native language is Spanish and who represent different dialects of Spanish from a variety of countries and regions, including, but not limited to, Mexico, Spain, Columbia, Peru, and Puerto Rico. Focus group volunteers compared English and Spanish versions of the survey instrument for linguistic and cultural accuracy. Feedback was incorporated into both the English- and Spanish-language versions of the survey. The Spanish-language version of the survey was entered into Qualtrics and then tested by individuals who volunteered for the focus groups. Feedback from beta testing was incorporated into the final Spanish-language survey instrument.

Analyses primarily included descriptives and cross-tabulations. Additional tests were conducted and statistical significance was assessed for selected, specific analyses, and significance is indicated for these analyses in the report.



Additional Considerations

For the purposes of this report, the term "respondents" with no otherwise indicated precursor refers to active-duty family respondents. "Active-duty family" responses were calculated by adding "active-duty service member" and "active-duty spouse" responses and do not necessarily refer to a service member spouse dyad. 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.

Military-connected respondents refer to active-duty, National Guard, and Reserve service members; Veterans; and spouses of active-duty, National Guard, and Reserve service members or Veterans. Currently-serving respondents refer to active-duty, National Guard, and Reserve service members, and spouses of active-duty, National Guard, and Reserve service members. Additionally, analysis of a sample less than 250 is denoted throughout the report to highlight smaller sample sizes. 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 wording of question and answer options may shift from year to year to better reflect changing military family experiences, and as a result, in addition to the shifting sample each year, comparability of the survey results from year to year is limited. Lastly, further limitations are included for each finding throughout the report.

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Executive Summary

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Diversity: Four in 10 active-duty family respondents believe there is less racial/ethnic discrimination in the military than there is in the general U.S. society. Despite the benefits of diversity to the military community, experiences of discrimination impact military family belonging.

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Resources/Quality of Life: Nearly a quarter (24%) of active-duty family respondents cited 'military family quality of life' as a top issue of concern. Families point to instability and inconsistency of daily life as the reason.

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Employment Satisfaction: Though the majority of active-duty service member respondents are satisfied with their job, and 70% feel the work they do is meaningful, satisfaction is lower for female service members and service members of color. Most service member respondents who are dissatisfied are likely to look for another job in the next 12 months, and a smaller proportion recommend military service to others.

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Spouse Employment and Child Care: Spouses are dropping out of the labor force, despite expanded remote work opportunities — a preferred solution for military spouse employment. Service members' work schedules and child care remain the top barriers to spouse employment.

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Financial Stability and Housing: A third of active-duty family respondents (33%) currently hold student loan debt and nearly all active-duty family respondents (94%) have at least one credit card. Already stressed by student loans, credit card debt, and out-of-pocket relocation costs, military families making PCS (permanent change of station) moves face long military housing waitlists, unaffordable civilian housing markets, and expensive rental costs, which can further add to their financial burden.

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Military Children's Education: Nearly two-thirds (61%) of active-duty family respondents report their oldest child is thriving in school, and 54% feel a sense of belonging to their school, but these educational experiences may be offset due to factors related to military life (such as relocation) and the current delivery method of education (such as virtual or hybrid schooling).

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Post Chapters

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Comments or questions about the survey may be directed to the Department of Applied Research at survey@bluestarfam.org

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