Gender Role-Focused Self-Efficacy Approach to Increasing Women's Propensity to Serve

The Recruitment and Retention (R&R) Subcommittee will study the connection between recruitment, self-efficacy, and propensity to serve to further examine a gender role-focused self-efficacy approach to increasing women's propensity. This will be an extension to the previous DACOWITS' research and recommendations conducted over the past decade regarding marketing and propensity.

- The Committee is interested in being updated on specific data collected and analyzed by the Joint Advertising Market Research & Studies (<u>JAMRS</u>) pertaining to women's recruitment, self-efficacy, and propensity to serve and targeted marketing by the Military Services to the 16–25-year-old female talent pool. The Committee requests a <u>briefing</u> from the <u>Office of People Analytics (OPA) via JAMRS</u> on the most current market surveys (e.g., <u>Futures</u> and <u>Influencer</u> surveys) to include:
 - a. Provide data and analysis regarding the factors indicating why women were more or less likely than men to be motivated to serve (e.g., education, travel opportunities, opportunity to help others).
 - b. Provide data and analysis regarding the self-efficacy and propensity to serve for young men and women aged 16-25 for the last 10 years, specifically highlighting changes, potential causes of the changes, and any potential trends necessitating additional actions by the Services.
 - c. Provide data and analysis regarding the percentages of male and female youth who were confident they could be successful in a military career, broken down by individual Service distinctions, highlighting differences in propensity between individual Services.
 - d. Provide research data related to actual or perceived barriers that impact young women's propensity to serve in the military (aged 16-25).
 - e. Provide trend data with respect to the percentage of young men and women (aged 16-25) who are eligible for military service over the last 10 years. Provide an analysis of the implications from these trends on the current and future ability for the Military Services to meet accession targets. Provide any specific distinctions between the pool of male and female applicants.
 - f. Provide an overview/explanation as to how OPA/JAMRS determines self-efficacy and propensity to serve among the recruitable population of young men and women (aged 16-25).
- The Committee requests a <u>literature review</u> from the <u>DACOWITS' Research Contractor (Westat)</u> on the topic of self-efficacy related to women in the military, in a military context, in non-traditional environments, and in male dominated career fields.
 - a. Summarize and provide an overview of definitions and concepts of self-efficacy or related relevant concepts from peer-reviewed literature. Provide and summarize any findings on self-efficacy in the military or in military contexts.
 - b. Synthesize peer-reviewed literature on self-efficacy for women and girls.
 - c. Provide research findings on self-efficacy for women and girls in non-traditional environments and male dominated career fields, such as in STEM, military, police, firefighting, construction, etc.
 - d. Identify any recommendations from peer-reviewed literature on how to increase self-efficacy for women and girls, and if possible, recommendations for increasing self-efficacy in women and girls in non-traditional environments and male dominated career fields.

Permeability (On/Off Ramp Between the Active and Reserve Components)

The R&R Subcommittee will explore the ability of Service members to transfer seamlessly between the Active and Reserve Components and whether there is a need for increased flexibility and permeability to enable Service members, particularly women to temporarily serve in a less-than full time status when needed. In addition, identify potential barriers to implement permeability polices and present findings with actionable recommendations to improve the overall retention of servicewomen.

The Committee is interested in actions being taken, as directed by the FY24 National Defense Authorization Act, to implement the <u>Space Force Personnel Management Act (PMA)</u>. The PMA authorizes the Space Force to implement permeability, which will create a single service construct, enabling flexible scheduling opportunities that will enhance its ability to find, develop, and retain individuals with a diverse set of skills.

The Committee requests a <u>briefing</u> from the <u>USD(P&R)</u> via <u>Military Personnel Policy (MPP)</u> and the <u>Military Services (Army, Navy, Marine Corps, Department of the Air Force (Air & Space), and Coast Guard)</u> on policies and processes that impact Service members ability to transfer back and forth between the Active Component and Reserve Component. What does the process look like today? Are their challenges for the Service member and the Services? Are there any lessoned learned from Career Intermission Program (CIP) that could be applicable to a more effective permeability policy?

In addition, the Committee requests the <u>Department of the Air Force (Space Force)</u> include within their briefing, current initiatives underway and planned with respect to permeability, with a specific focus on:

- a. Utilization of the 2024 RAND Corporation report, "Integrating Variable-Time Work Within a U.S. Space Force Component," recommendations, key findings, efforts to date, and planned actions.
- b. The Space Force's approach on the following:
 - i. Personnel available to work variable schedules with job- and mission-sharing, and full-time manpower can still be directed where needed.
 - ii. Available talent retained in a less-than-full-time status, when those personnel are no longer able to serve full-time (temporarily or permanently), because of the permeability provided by the construct.
 - iii. The construct allows participation of individuals who bring unique skills and abilities not organic to USSF.
 - iv. The construct provides supplemental and complementary talent and manpower to fill gaps or surge requirements.

Women in Submarines

The Employment and Integration (E&I) Subcommittee will examine the status of current gender integration efforts, as well as the climate and culture within the Submarine Force.

- In 2010, then Secretary of Defense Robert Gates lifted the ban barring women from serving aboard submarines. A year later, the Navy began integrating female officers on Ohio-class ballistic missile submarines (SSGNs). Over the past decade, the Committee has continued to follow the progress of women in submarines (WIS) through various requests for information (2015, 2018, 2019, and 2022). The Committee remains interested in the progress of women in the Submarine Force, and the delivery of submarines to support continued integration efforts. The Committee requests a <u>briefing</u> from the <u>Navy</u> on the status of women in submarine officer and enlisted integration efforts since 2010. Please include the following:
 - a. Gender breakdown of submarine accessions (officer and enlisted) from FY10 through FY24.
 - b. Gender breakdown of submarine rating/designator conversions (officer and enlisted) from FY10 through FY24.
 - c. The actual number and percent of men and women assigned to submarines (by officer/enlisted and class of submarine) from FY10 through FY24.
 - d. Retention rates for women assigned to submarines as compared to their male counterparts (officer and enlisted).
 - e. Number of women who have completed or are currently assigned to key development assignments (e.g., Department Head, Submarine Executive Officer) that prepare them for command opportunities.
 - f. The goal for the number of female integrated crews (by officer, enlisted, and platform) from FY10 through FY30. For the crew to be considered integrated, how many women (officers and/or enlisted) have to be assigned (percentage of crew)?
 - g. Any adjustments made to these goals since 2010, if applicable, and the rationale for the changes.
 - h. An updated timeline and status of the delivery of gender-neutral submarines, including any delays in delivery.
 - i. An updated timeline and any delays in the decommissioning schedule for submarines that do not accommodate women.
 - j. An updated copy of the current WIS Plan of Record, similar to the one provided to the Committee in September 2022 (via RFI 6).
 - k. Do any detailing restrictions remain in place for women in submarine assignments? Do assignment policies vary for officer and enlisted women?

Physical Fitness Standards and Eating Disorders

Over the past decade, the Committee has examined physical fitness standards to include body fat composition. The Well-Being and Treatment (WB&T) Subcommittee will conduct additional research on the prevalence of eating disorders among military women, which will be an extension of previous research and recommendations.

In 2016 and 2023, DACOWITS recommended that the Military Services should review and update the *DoD Physical Fitness and Body Fat Program Procedures* (DoDI 1308.03). The DACOWITS' 2016 recommendation was supported by a meta-analysis that reported military weight standards and fitness tests contribute to eating disorder symptoms in the military. In 2023, a Military Healthcare System (MHS) study, reported that from 2017-2021 the annual incident rate of eating disorders continued to increase year-over-year, and the incidence rate of eating disorders among military women is almost double that of civilian women. In 2023, DACOWITS' focus group participants reported that disordered eating was prevalent, as an effort to meet body composition standards. Eating disorders affect Total Force Fitness (TFF) and impact mental health, physical fitness, and military performance and readiness.

The Committee requests a <u>briefing</u> from the <u>Defense Health Agency (DHA) and the Military Services (Army, Navy, Marine Corps, Department of the Air Force (Air & Space), and Coast Guard) to address the following:</u>

- a. The prevalence rate (broken down by number and percent, gender, and paygrade groupings of E1-E5, E6-E9, O1-O4/W1-W3 and O5-O9/W4-W5) of diagnosed eating disorders and incidences of disordered eating from 2016 to present. In addition to providing prevalence rates, please provide information on the following:
 - i. How is the prevalence rate measured (e.g., surveys, encounter data).
 - ii. What screening tools are used to determine if a Service member is experiencing disordered eating?
 - iii. What treatment options are available for Service members experiencing disordered eating and/or diagnosed with an eating disorder?
- b. Training or tools provided to all Service members on nutritional fitness, maintaining a healthy weight, and dangers of disordered eating. Describe how often and in what setting training is provided.
- c. Provide an overview of the relationship between the height/weight and the fitness test, and whether it is tied specifically to the fitness test.
- d. Number of Service members (broken down by number and percent, gender, and paygrade groupings of E1-E5, E6-E9, O1-O4/W1-W3 and O5-O9/W4-W5) on a weight management program:
 - i. What criteria are used to determine if a Service member is placed on a weight management program?
 - ii. What criteria are used to remove a Service member from a weight management program?
 - iii. What type of nutritional fitness counseling or training is provided to Service members on a weight management program?
- e. Describe any ongoing efforts to revise current height, weight, and body fat composition standards.
- f. Describe any ongoing efforts to address unhealthy eating habits and/or disordered eating.

Perimenopause, Menopause, and Hormonal Imbalance Issues

The Well-Being and Treatment (WB&T) Subcommittee will examine ways in which servicewomen are navigating these unique health challenges, current resources available to them, and whether additional resources are warranted.

- The Committee requests a <u>briefing</u> from the <u>Defense Health Agency (DHA) and the Military Services (Army, Department of the Navy, and Department of the Air Force (Air & Space)), and Coast Guard, on the following:</u>
 - a. What Department of Defense and Service-specific research has been conducted or is ongoing that focuses on perimenopause (the menopausal transition), menopause, and hormonal imbalance issues servicewomen confront? If none, is any future research or study planned?
 - b. What policies and medical protocols exist to assist servicewomen undergoing perimenopause, menopause, and/or hormonal imbalance issues?
 - c. What research has been done to assess whether servicewomen may experience earlier or more severe onset of these conditions as a result of military service and/or exposure to uniquely military environments, such as hazardous conditions, lengthy deployments, combat stresses, hazardous materials, and extended high altitude or undersea exposure?
 - d. Do any health surveys of servicewomen have any questions related to perimenopause, menopause, and hormonal imbalance issues for women? If so, what are the questions and what are the results?
 - e. What is the incidence of onset of perimenopause, menopause, and hormonal imbalance issues in servicewomen by age, race, and ethnicity?
 - f. Provide data on the number and percent of servicewomen who have been treated for perimenopause, menopause, and hormonal imbalance issues in the last five years (2018-2023)?
 - g. What menopausal-specific training is provided to health care providers? Both general/primary care and women's health specialty providers?
 - h. Are health care providers trained sufficiently to recognize and diagnose the onset of perimenopause, menopause, and hormonal imbalance issues in servicewomen? Particularly in cases of unusually early onset?
 - i. What pharmacological treatment options (e.g., hormone therapy, vaginal estrogen, gabapentin, and low-dose antidepressants) are available in Military Treatment Facilities (MTFs) to support perimenopause and menopause?
 - j. What complementary and alternative medicine (CAM) options, for symptom management, are available in MTFs to support perimenopause and menopause?
 - k. How are servicewomen receiving information and counseling about perimenopause, menopause, and hormonal imbalance issues?

Impact on Military Mothers Reintegrating into Family/Home Life After Deployment

The Well-Being and Treatment (WB&T) Subcommittee will renew the 2019 DACOWITS' study which examined the impact of deployments on military mothers who reintegrate into family/home life after deployment. Determine whether additional policy development is required, or if the Department and Military Services have sufficiently addressed concerns.

In 2019, the Committee identified challenges, impacts, and issues military mothers experience returning from deployment as they reintegrate to family and work life, and subsequently recommended that the Secretary of Defense commission a foundational research study to identify and assess these potentially unique impacts on military mothers and identify measures to help ease their transition back to "normal" family and home life. The Committee seeks information on the progress of research and initiatives to address these reintegration concerns.

The Committee requests a <u>written response</u> from the <u>USD(P&R) via Military Personnel Policy (MPP) and Military Community and Family Policy (MC&FP) and both the Active and Reserve Components of the Military Services (Army, Navy, Marine Corps, Department of the Air Force (Air & <u>Space)</u>), <u>Coast Guard</u>, and the <u>National Guard Bureau</u> on the following:</u>

- a. What research or studies have been undertaken or is ongoing to identify the issues unique to returning mothers and reintegration? Provide links to or copies to findings and reports. What actions have been taken to address issues identified by the research or studies, if applicable?
- b. Section 555 of the FY21 NDAA directed the Secretary of Defense to develop policy that, among other issues, outlined "[r]esponses to the effects specific to covered members who reintegrate into home life after deployment." What policy, initiatives, or resources have been developed to assist returning military mothers with the challenges they face on return from deployment. Provide copies of relevant policies, training, and other documents,
- c. What are the issues and challenges that have been identified, including the restoration of the parent-child bond, and resumption of prior family roles and responsibilities?
- d. What policies and procedures does each Service have to support reintegration. Are there any programs specific to mothers and being a woman?
- e. Are there any resources or programs geared to military mothers prior to deployment to help them plan for and more successfully reintegrate post-deployment? If so, describe these efforts and provide links to policies, programs, etc.
- f. DACOWITS' 2019 focus group participants expressed that post-deployment reintegration/assistance efforts were male-centric and lacked resources to assist the unique challenges returning military mothers faced. What efforts have been made to address this important subset of re-integration assistance?
- g. What kind of mentorship and support are specifically provided to deploying mothers?
- h. What efforts have the Women's Initiatives Teams (WITs) initiated, if any, and how are the Services supporting those recommendations?
- i. What type of mental health screening/care is provided?
- j. What kind of follow up is provided and at what intervals?
- k. Is leadership training provided to military leaders about the challenges and difficulties of reintegration that military mothers may encounter, the range of impacts of those challenges, in order to increase knowledge and understanding? Provide links to or copies of such training.
- l. What second and third order effects of reintegration difficulties have been identified (e.g., on military readiness, work productivity, psychological and physical health, attrition rates)?
- m. Do exit surveys have questions related to whether reintegration/post-deployment challenges are a reason for separation?