

DEFENSE ADVISORY COMMITTEE ON WOMEN IN THE SERVICES

Quarterly Meeting Minutes

26-27 June 2012

The Defense Advisory Committee on Women in the Services (DACOWITS) held a full committee meeting on June 26th and 27th, 2012. The meeting was held at the Doubletree Crystal City, 300 Army Navy Drive, Arlington, VA 22202.

26 June 2012

Opening Comments

The Designated Federal Officer and DACOWITS Military Director, COL Ines White, opened the meeting and introduced Ms. Holly Hemphill, DACOWITS Chair. Ms. Hemphill introduced herself and made introductory remarks.

At Ms. Hemphill's request, all meeting attendees introduced themselves. The meeting agenda is located in Tab A¹.

Swearing-In of New Members

Ms. Hemphill introduced four individuals in attendance to be sworn in as new members of DACOWITS: FLTCM (Ret) Jacqueline DiRosa, LtGen (Ret) Frances Wilson, RADM (Ret) Elizabeth Morris, and MG (Ret) Gale Pollock. COL White administered the oath to the members, in accordance with the Federal Advisory Committee Act, and BG (Ret) Maureen LeBoeuf presented each with a DACOWITS pin.

Marine Corps Assignments Update

Col John Nettles, USMC Manpower & Reserve Affairs, and Mr. Dennis Judge, Marine Corps Development Command/Training and Education Command. (Power Point slides located at Tab B.)

In 2010 and 2011, DACOWITS recommended that the Department of Defense (DoD) eliminate the direct ground combat exclusion policy and direct the Services to do the same. Also in 2011, DACOWITS recommended that the Services develop validated physical standards associated with each Military Occupational Specialty (MOS). Following the Women in the Services

¹ All TABs referenced in this document refer to materials enclosed in the binder entitled *DACOWITS Business Meeting 26-27 June 2012*, which was distributed to the Committee members and posted on the DACOWITS website <http://dacowits.defense.gov/>

Restriction (WISR) review in February 2012, DoD announced changes to the assignment policy, eliminating the optional collocation restriction for women. DoD also directed the Services to review their closed positions and report to Secretary Panetta on the implementation of the DoD policy changes within six months. In September 2011, Col Nettles briefed the Committee on the Marine Corps' plans to test and develop physical standards. The current briefing provides an update on their progress in this endeavor. A summary of the briefing is provided below.

The Marine Corps is using a multi-pronged research approach to inform the Commandant as he makes a recommendation to Secretary Panetta in November concerning the integration of women into previously-closed positions. In the first phase of the research, the Marine Corps will evaluate the success of an "exception to policy" trial in which several hundred women in open MOSs will be assigned to units previously closed to them at the battalion level. Also, the Center for Naval Analysis will research the impact that opening additional assignments to women may have on the Marine Corps, such as on recruiting and retention, and will research best practices that other organizations and other countries have used in integrating women more fully. They will also conduct a survey of Marines this summer on topics relating to opening additional positions to women.

In the second phase, the Marine Corps will perform a quantitative research review to assess their physical fitness standards and study the performance of female Marine volunteers in an infantry officer course. They will assess their physical standards in two ways. First they will test their ground combat element (GCE) standards, which will involve physical tests performed by male and female Marine Corps volunteers to calculate baseline data. Second, they will analyze and validate the additional physical standards for closed MOSs (e.g., ground intelligence officer, ordnance vehicle maintenance officer).

The following are points from the question-and-comment period after the briefing:

- Committee members had several concerns regarding the GCE standards to be tested. The GCE standards evaluation is a two day test that will include three events – 1) lifting a Mark-19 grenade launcher above the head while wearing a 40 pound combat load, 2) evacuating a 165 pound mannequin with a 40 pound combat load, and 3) a 20 kilometer march in less than 5 hours while wearing a 71 pound assault load. Committee members asked if the standards being tested have previously been validated and are events commonly performed in the field. Mr. Judge responded that these tasks come from the Marine Corps basic standards, which are validated by the Marine Corps every two years to ensure the requirements match the reality of tasks necessary in the field. An outside, scientific body has not validated these standards, though Lt Col Mark Horner, representing the Office of Military Personnel Policy, added that DoD provided methodological guidance to the Marine Corps in 2000 on validation of physical standards. Committee members questioned whether Marines would actually be combat

effective after performing the march under load. Mr. Judge replied that this and other physical standards are common occurrences. RADM (Ret) Morris expressed concern that these standards were likely validated on an all-male population. Mr. Judge confirmed that the standards are based on combat and lessons learned. Ms. Campbell indicated that this has been an issue in civilian fields such as law enforcement, which already had physical standards in place for all-male populations, though later testing revealed these physical requirements to be unnecessarily strenuous and not indicative of tasks commonly performed in the field. Ms. Hemphill praised the Marine Corps' decision to modify the casualty evacuation test to allow Marines to drag, rather than shoulder-carry, the mannequin as an example of the Marines re-evaluating a standard to better match the realities of tasks that Marines perform in the field. Committee members asked whether the Marine Corps currently tests male Marines on their physical standards before they enter a GCE or other closed MOS position. Mr. Judge replied that the Marine Corps have not specifically tested men on the three tasks they will use to validate the GCE standards. However, he said these standards are part of the regular Program of Instruction (POI) that Marines are required to pass for the GCE and come from the training and readiness standards. Infantry Marines are required to pass every task in the infantry officer course POI and an advanced course for closed MOSs before entering those positions. The difference with the testing currently being done is that the requirements are now being performed during a consecutive two day period as opposed to throughout the course of training. The Marine Corps has historically tested individuals on these tasks only once, in their POI, and their commanding officer is then responsible for ensuring that Marines continue to meet the physical requirements thereafter. In response to questions from Committee members, Mr. Judge reported the current attrition rate for the School of Infantry is two percent overall.

- Committee members asked how the survey would be helpful in this process, given that the Marine Corps will already be collecting performance data. A representative from CNA Analysis and Solutions indicated that the survey is designed to answer questions the Commandant had about attitudes and perceptions of the force regarding the possibility of more positions being opened to women. It will assess, among other things, male and female interest in combat occupations, attitudes toward voluntary and involuntary assignments, recruiting topics, and concerns relating to unit cohesion. Col Nettles offered to provide a copy of the survey questions to DACOWITS. Committee members expressed concern with aspects of the questionnaire, specifically the potential for biased response options.
- The Marine Corps findings will not be conclusive by November, as no women will have graduated from the infantry officer POI yet. Col Nettles said this is because the Institutional Review Board mandated that the participants in this course be volunteers, and not enough people have volunteered for the course to meet the statistical threshold

necessary for the study. Committee members asked whether there may be so few volunteers because the women who pass this course will not earn an infantry MOS. By law requiring notice to Congress before opening positions, the Marine Corps cannot award this MOS to women at this time. Col Nettles confirmed, however, that any women who do volunteer and complete the school will have it documented in their file, should the Marine Corps change this policy in the future.

- In response to Committee members' questioning the usefulness of the "exception to policy" trials, Col Nettles elaborated on how the Marine Corps will be conducting and evaluating them. The Commandant met with the Commanders and Sergeant Majors in these units to share any concerns they may have about these trials. They emphasized ensuring that women are treated equally to men and that the women have the opportunity to succeed. The purpose of this part of the evaluation is to pinpoint additional requirements that would be necessary in order to open these positions to women. In order to evaluate these trials, commanders of these units will be completing evaluation forms. The Marine Corps is still drafting these forms. These can be provided to DACOWITS once approved.
- At the Committee's request, before the meeting, Lt Col Horner provided DACOWITS with a list citing reasons why each Marine Corps MOS is closed to women. Ms. Campbell remarked that this was the first time women's inability to meet physical standards has been used as justification for closing any of these jobs. Ms. Hemphill stated, since 1994, this justification had not been used in reports to Congress and by GAO. She questioned whether this was an accurate determination unless the Marine Corps had tested to see whether the "vast majority" of women were capable of meeting the physical requirements of these positions. Lory Manning from the Women's Research and Education Center commented that she was there in 1994 when the policy was created. She stated that positions were closed because they had always been closed. Things have always been looked at from the perspective of justifying why they should be opened - not justification for why they should be closed.
- Dr. Elise Van Winkle from ICF International referenced research cited in a briefing by Col Nettles at the September 2011 DACOWITS business meeting. This research indicated that Service women had slower road march speeds compared to men and was cited by Col Nettles as an indication of the gender differences in physical strength and ability. Dr. Van Winkle commented that Service women participating in this study complained of ill-fitting equipment and the authors felt this may have impacted gender differences found in road march speed. Dr. Van Winkle asked Col Nettles if the women participating in the current fitness tests and events are provided with equipment tailored to women's bodies. Col Nettles replied that women are provided with standard equipment, which has not been modified to fit women. Dr. Van Winkle mentioned that

DACOWITS has previously recommended steps be taken by the Services to ensure women are provided with properly fitting equipment and reiterated that this may impact performance on current tests of physical ability.

Army Assignments Update

MAJ Trina Rice, Women in the Army Assignments Policy Manager. (Power Point slides located at Tab C.)

In December 2011, upon completion of the WISR Review, the Army briefed DACOWITS on their plans to open additional MOSs to women. DACOWITS requested the Army update the Committee on their progress in this area. MAJ Trina Rice presented a review of these efforts, summarized below.

On February 9, 2012, the Army gave notice to Congress that they are removing the collocation restriction, as well as instituting a limited exception to the policy that restricts women from serving in direct ground combat positions below the brigade level (i.e., at the battalion level). On May 14, 2012, these initiatives took effect. On November 15, 2012, the Army will report the findings from these new initiatives to DoD.

Army opened over 13,000 new positions solely as a result of removing the collocation restriction. The removal of the collocation restriction impacts Active Duty, Guard and Reserve units. Army's other initiative that opens new positions to women – the “limited exception to policy” trial – authorizes the assignment of women to previously closed maneuver battalions in select Brigade Combat Teams. Army will limit these positions to Active Duty units to make it easier to monitor the integration of women into these units. Army has assigned over 200 women to these positions under the exception to policy trial.

Researchers from the Army Research Institute for the Behavioral and Social Sciences (ARI) will collect and analyze data from the “limited exception to policy” trial and Army will present these findings in their report to the Secretary of Defense in November. This will also include ARI's analysis of non-deployed units, as well as deployed units where women are attached to all-male units. ARI will collect this data through surveys, focus groups, and interviews. They will collect data from the men and women in the participating units, command staff, and individuals in the deployed units with women attached to their unit. They will base their evaluation criteria on duty performance, training and occupational rates, impact on cohesion and morale, impact on unit and individual readiness, and recruiting and retention rates over time. For the November update to the Secretary of Defense, the Army will assess the results of both the limited exception to policy trial and the removal of the collocation restriction.

The following are points from the question-and-comment period after the briefing:

- The researchers will not be directly observing individual performance in their assessment of the “limited exception to policy” trial. Rather, they will be relying on indirect reports from surveys, interviews, and focus groups. Additionally, the researchers will not rely on performance evaluations because those are conducted annually, and this is a six-month trial. Instead, ARI will be conducting interviews with the Commanders who ordinarily complete such performance evaluations. Commanders will be evaluating the performance of each individual in the interview process. A member from the audience reported that performance counseling will also be examined for this assessment. MG (Ret) Pollock commended the Army for evaluating both men and women.
- MAJ Rice reported that the remaining positions closed to women in the Army are closed either because of the direct ground combat restriction or the optional Special Forces restriction. The Army currently has 20 MOSs and five career fields that are closed to women, including infantry, armor, and Special Forces. MAJ Rice also mentioned that Army has *units* that are closed to women that contain *MOSs* that are open to women, and women could therefore be assigned to these units in their current MOSs without lifting the direct ground combat restriction. The Army is reviewing whether to recommend lifting this unit restriction for the November update. In response to a Committee question, MAJ Rice said it was possible that the Army could recommend that DoD lift the direct ground combat restriction but that they would likely not make this recommendation by November.
- A Committee member expressed concern that women entering newly-opened MOSs would be at a disadvantage compared to their male counterparts because they do not have the experience of previously serving in that career field. An Army representative, BG Barry Price, addressed this comment and clarified that the Army has only opened MOSs in career fields in which women have already been serving, so that women and men in these newly-opened positions will still have similar career backgrounds.
- The Army currently has no positions closed to women based on physical restrictions. BG Price added that the Army believes it already has gender-neutral physical standards for all occupational specialties, and MAJ Rice said that the Army started working with U.S. Army Training and Doctrine Command (TRADOC) and other Army commands three weeks ago to confirm that that they do, in fact, have appropriate gender-neutral physical standards in place.

Summary of DACOWITS Members Meetings with Australian Defence Force

Nancy Duff Campbell, DACOWITS member.

In order to identify best practices for integrating women into additional positions in the U.S. military, DACOWITS is reviewing the experience of other countries that have already integrated or are now moving to integrate women into combat arms positions. The Australian Defence Force (ADF) has decided to open all military jobs to women. Lt Col Gwenda Caspersonn of the ADF recently arranged for DACOWITS members to visit the Australian embassy to meet with members of the ADF and learn more about their plans for fully integrating women into the armed forces. Ms. Campbell reported the highlights of this meeting.

As background, in 1984 the ADF first allowed women to compete with men for all military positions, except those positions with direct combat duties (infantry, artillery, armor and certain combat engineers). In October 2011, the Australian government approved a five-year implementation plan to allow men and women to serve in all military positions, including those involving direct combat, provided they are able to meet the position's occupational requirements. They hope to begin integrating women into direct combat positions in 2013, and by January 2016 they plan to have all remaining positions opened to women.

Australia previously had physical standards, applicable to all military members and adjusted for age and gender, in addition to separate combat standards. A scientific body, the Defence Science and Technology Organisation (DSTO), with the support of the ADF, is currently developing gender-neutral standards for each military occupational group. The research team is not relying on any existing ADF standards to form the basis for their new standards. Rather, they are going into the field and are basing the physical requirements on tasks that members in these positions actually perform on a regular basis. They will develop a basic set of standards for all members of the military and more rigorous standards applicable for different occupational groups, such as combat arms and specialties within the combat arms. Furthermore, they emphasized that no man or woman is expected to pass these new standards on day one, as the force will train up to the standards. Their decision to develop and train to these new standards was driven by the need to reduce injury rates and not by the impending integration of women. It has taken them six years to develop these standards, though they believe that the ADF could have done so much quicker. They believe the U.S. would be capable of doing so in less than six years as well.

DACOWITS 2012 Focus Group Findings

Ms. Amy Falcone, ICF International. (Power Point slides located at Tab D.)

DACOWITS recently went on installation visits where members conducted focus groups with Service members examining the retention gap between men and women in the drawdown

environment and the health of military women in the field. Participants included women and men from all Services, both Active Duty and Reserve Components, and all pay grades. ICF provided research support to DACOWITS on this and has compiled and analyzed the focus group data. Ms. Amy Falcone from ICF presented a summary of the findings.

Women were less likely than men to plan on staying in the military and more likely to be undecided about their future military career plans. They reported staying in for financial reasons such as having a steady paycheck; for family reasons; and for aspects of the job like skills learned, sense of duty or pride and camaraderie. Having a stay-at-home spouse was one factor that allowed women to stay in the Service. Participants most commonly reported work-life balance, which many felt disproportionately impacts women, as the most common reason for leaving the military. Women also reported leaving due to the challenges of being in a dual military relationship and the difficulty of single Service members in finding a spouse while moving every few years. In addition, participants reported workplace reasons for leaving, such as not being happy with their job/MOS, lack of promotional opportunities, and a lack of role models. When asked what would influence them to stay in the military, some women said nothing could make them stay. Others reported they would stay in if they had greater schedule flexibility, a different job/MOS, or a good mentor.

When asked about the drawdown, the majority of participants did not believe it would influence their military career. Some felt the drawdown would affect men and women equally, while others felt it would affect one gender more than the other. Some felt it would affect women more because cuts would impact the administrative MOSs, which have higher concentrations of women. Others thought it was more likely to affect men because of cuts to the combat MOSs that are occupied primarily, if not entirely, by men. Most participants indicated they would consider voluntarily separating early if their Service gave them the option to do so.

Overall, women had difficulty recalling women-specific health concerns related to deployment. Eighty-one percent of the participants in these focus groups had deployed to Iraq or Afghanistan. Of those who reported health concerns while deployed, several women indicated having or knowing someone who had contracted a Urinary Tract Infection (UTI). These were commonly linked to women purposely dehydrating themselves to avoid urination. Hip, back, and knee pain related to wearing the gear was also reported. Participants reported pregnancy and family planning during deployment as issues that greatly affected women's performance in the field. They also mentioned mental health concerns, particularly related to the stress of leaving family and children at home while deployed and stress upon returning home.

In addition, women reported hesitancy to seek medical care. Participants were often uncomfortable with male medical personnel treating them for female health issues. There was a distrust of medical personnel and a feeling that the personnel do not receive sufficient training.

In addition, women reported a lack of medical equipment and supplies. Several were concerned about the lack of professionalism among the medical personnel and believed their health concerns were not taken seriously. Additionally, women reported stigmas against seeking medical care. They felt their co-workers viewed them as weak and trying to get out of responsibilities when seeking medical care. Women in leadership positions were hesitant to let the team down and were concerned they would not be good role models if they sought medical treatment.

DACOWITS also asked women about recent improvements in medical care and additional concerns they would like to see addressed in the future. Many felt the medical treatment of deployed women has improved. They mentioned improvements to the gear, medication and supplies available, mental health treatment, and the availability of women medical personnel. However, women reported that improvements were still needed in the availability of birth control for regulating menstruation, the consistent administration of pregnancy tests, and the availability and disposal of feminine hygiene products. They also mentioned the availability and design of the female urinary device as an area needing improvement. In addition, several women reported a need for improved pre-deployment information on women's health concerns, although participants offered differing opinions regarding how this should be accomplished.

The following are points from the question-and-comment period after the briefing:

- DACOWITS also asked, in the open discussion period at the end of the focus groups, if participants supported women in direct ground combat roles. The vast majority of participants, men and women, supported opening combat positions to women. Although in the minority, some participants raised concerns about women in combat positions. These concerns included men having a protective response; women having trouble meeting the physical demands of the positions; negative effects on the morale of the men; and the possibility for fraternization, sexual harassment, or sexual assault.
- RADM (Ret) Morris suggested examining data from the medical departments of each Service on this issue. Ms. Falcone agreed that this data would be useful but also acknowledged the usefulness of focus groups for collecting information on participants' reports of health concerns for which treatment was not sought and thus documentation would not exist.
- Committee members commented that it is important to look at women who are retiring at the 20 year mark as well, as this affects the gender breakdown at the highest ranks. An audience member commented on these statistics as they relate to the Navy. MG (Ret) Pollock suggested examining data on the breakdown of MOS by gender and Service to look for cases in which women are in command positions, as DACOWITS could examine retention by looking more closely at women seeking command-level positions. An

audience member presented a report to DACOWITS with DMDC data on this from 2006. While the Services did not historically assign women to command positions, many are now open to women and women are not taking advantage of these positions. Mentorship is important for women seeking these positions, yet many of the focus group participants reported not having a mentor. Women's lack of interest in command positions may also result from the challenges of being in a dual military family. Lack of mentorship and family challenges are both problems for women in the civilian world as well.

- Ms. Campbell drew attention to ICF's memorandum for DACOWITS updating the literature regarding gender differences in retention and recent DMDC data on the gender gap.

SAPRO DACOWITS Update

Maj Gen Mary Kay Hertog, Director, Sexual Assault Prevention and Response Office. (Power Point slides located at Tab E.)

DACOWITS studied sexual assault and sexual harassment in 2011 and is continuing to examine these issues. In 2011, DACOWITS recommended that the Services publish dispositions of sexual assault cases more broadly and that they include measures of sexual assault in command/organizational climate surveys. During the March 2012 business meeting, Mr. Jimmy Love briefed DACOWITS on DoD's response to a Government Accountability Office (GAO) report that indicated DoD should improve its efforts to address sexual harassment. In February 2012, DACOWITS members met with Maj Gen Hertog and four commanders to discuss methods to ensure commanders are held accountable for sexual assault and harassment in their commands. Since then, the Secretary of Defense has announced several new sexual assault initiatives. Maj Gen Hertog briefed DACOWITS on the implementation of these policies and explained the reasoning behind the initiatives. A summary of the briefing is provided below.

Maj Gen Hertog updated DACOWITS on the status of the new initiatives, some of which she said were being included in legislative proposals. In addition to elevating the disposition authority for rape and certain other sexual assaults to O6 or higher, other sexual assault initiatives that are expected to take effect are: 1) The Services will develop special victim capability units modeled after the Army system already in place; 2) Sexual Assault Prevention and Response (SAPR) disposition records will be collected and retained for up to 20 years, including non-judicial punishments (Article 15s); 3) SAPR training will be standardized across the Services for new and prospective commanders, and, within 14 days of joining Active Duty, new Service members will receive training that explains sexual assault to them and describes the consequences of committing sexual assault; 4) Victims of sexual assault in the Reserve Component will now be allowed to remain on Active Duty until the Services can conduct an investigation, giving victims access to the care they need; and 5) Commanders will be required to

conduct mandatory annual organizational climate surveys using a standardized set of questions. Additionally, Congress is seeking to establish an advisory council for oversight on sexual assault and sexual harassment in DoD, though Maj Gen Hertog thinks this council may be somewhat duplicative of both DACOWITS and SAPRO.

Maj Gen Hertog also updated DACOWITS on two initiatives that SAPRO is working towards implementing. First, SAPRO is working to establish a certification program to credential all Victim Advocates (VAs) and Sexual Assault Response Coordinators (SARCs) through the National Organization of Victim Assistance (NOVA) by October, 2013. Also, SAPRO is aggregating sexual assault and hazing incidents across Services and will be tracking this information through the Defense Sexual Assault Incident Database (DSAID). The database will be fully functional by August 31, 2012.

Maj Gen Hertog also reported that SAPRO will be getting a new director in July who will continue the work begun under Maj Gen Hertog.

The following are points from the question-and-comment period after the briefing:

- Hon. Deborah James commented that the initiatives described can be enacted without approval from Congress and questioned DoD's intention to wait for Congress to enact new laws. She was concerned with the amount of time required for laws on this to be put in place. Maj Gen Hertog responded that it helps to have the backing of Congress. In addition, she reported that the Services are already acting on these initiatives. For the Special Victim Capability, money has already been set aside and the Army and Navy are working on it.
- Committee members reported that, in their installation visits this spring, leaders indicated they had difficulty accessing personnel data from other Services, creating difficulties in tracking joint-Service offenders. DACOWITS members asked Maj Gen Hertog if all the Services would have access to DSAID records. She replied that, without a Freedom of Information Act (FOIA) request, only investigators and SARCs would have access to those records. However, the database will notify the Services of serial perpetrators if the perpetrator committed the offenses in that Service. For joint-Service offenders, in the event of an investigation, investigators would know about a perpetrator's offenses committed across Services.
- DoD left it to the Services discretion to determine whether the results of the mandatory annual organizational climate survey will be sent to the commanders' supervisors. The Air Force, for example, does not require that the survey results be sent to the commanders' supervisors. Committee members expressed concern that this allows commanders not to be held accountable to their supervisor for a toxic command climate,

as their supervisor might never see the survey results. Maj Gen Hertog thought that the supervisor would know about a toxic command climate in subordinate elements.

- FLTCM (Ret) DiRosa asked if data is being collected on the perpetrators of sexual assault that could be used to develop a profile of the perpetrators. Maj Gen Hertog responded that it is difficult to develop a profile of perpetrators. Maj Gen Hertog reported that perpetrators go through counseling as part of the treatment program when doing their jail time but do not undergo a full mental health evaluation.
- Committee members asked Maj Gen Hertog why she thinks sexual assault and sexual harassment continue to escape the attention of higher levels of leadership. The recent sexual assault scandal at Lackland Air Force Base was cited as an example. Maj Gen Hertog said that a stronger female presence in the military would help and said that the military needs to better train recruits about sexual assault. She agreed with a Committee member that this is a problem for society as a whole; saying that she thinks mandatory sexual assault training should begin as early as junior high.
- Ms. Campbell did not think that the DoD Sexual Assault and Harassment Advisory Council would be redundant with DACOWITS. She also inquired why the Secretary of Defense required that sexual assault, but not sexual harassment, cases be handled by higher ranking members, considering that sexual assault and harassment are often interrelated. Maj Gen Hertog said she did not understand the rationale behind this decision, but speculated that Secretary Panetta wanted higher-ranking members to deal with the most severe cases, allowing subordinate commanders to deal with lesser charges. Maj Gen Hertog did acknowledge that sexual harassment and sexual assault are interrelated.

27 June 2012

Research on Deployed Women's Health Issues

Lt Col Candy Wilson, Ph.D., United States Air Force (USAF) Nurse Corps. (Power Point slides located at Tab F.)

DACOWITS is focusing on the health issues of deployed military women as part of their 2012 research cycle and examined this topic in focus groups with women Service members during their installation visits this spring. At its March business meeting, representatives from Health Affairs briefed DACOWITS on a recent research effort involving the health issues of women after deployment. The Committee wished to hear about research efforts regarding health of women during deployment for their June Meeting. As a result, DACOWITS requested that Lt Col Wilson representing the Tri-Service Nursing Research Program (TSNRP), and COL Anne

Naclerio, from the Army's Surgeon General's Office, brief the Committee on current research efforts in this field.

Lt Col Wilson briefed the Committee on the TSNRP, with specific focus on the research efforts of the group she is involved with – the Military Women's Health Research Interest Group (MWHRIG). MWHRIG was created in 2009 by a group of military healthcare researchers to advance the current knowledge base on the health of women in the military. TSNRP is developing a literature repository to summarize the state of the health research for Active Duty women modeled after a VA database focused on health issues for women veterans.

Lt Col Wilson has researched iron deficiencies in military women. Iron deficiency has a negative effect on performance and may lead to lower physical fitness test (PT) scores for women, as its symptoms include fatigue, moodiness, and decreased cognitive performance. It can also create a delay in adjusting to high altitudes, a concern for those serving in Afghanistan. Lt Col Wilson said that women in deployed settings are likely not getting enough iron in their food provisions. Lt Col Wilson's research also revealed that calcium deficiency poses a problem for military women.

Of particular note to the Committee's research interests, TSNRP collaborated with experts on an additional paper investigating the illnesses of deployed military women and their treatment-seeking behaviors. Lt Col Wilson said that DACOWITS' focus group findings this year mirrored this study's findings. TSNRP's researchers interviewed 14 deployed women with urinary symptoms and discovered several overarching factors related to their health issues and their decision to seek or not seek care. They found that life in a deployed setting (e.g., long days, lots of walking, lack of clean showers, laundry not being clean) posed challenges to women. The researchers found that women did not trust healthcare providers because they seemed to preach a "no sex" attitude. Providers would often first administer an STD or pregnancy test to women seeking care for general urinary symptoms. Because of this, women did not seek care for fear of their healthcare provider seeing them as sexually active. Healthcare providers also did not provide enough birth control pills for deployed women, and access to birth control pills was limited down-range. Women also lacked trust in the chain-of-command, as commanders often discouraged women from seeking treatment for symptoms they felt were unimportant or when treatment would take them away from their unit for an extended period.

Lt Col Wilson described current research studies by her colleagues at MWHRIG, testing women's self-diagnosis kits for common genitourinary symptoms, feminine hygiene deployment toolkits, and the feminine urinary device/director (FUD). Research on the self-diagnosis kits and hygiene toolkits should be completed soon, and they hope to have these kits available to women at least in training environments, if not in the field, by the next year.

The following are points from the question-and-comment period after the briefing:

- Committee and audience members remarked that the military often lags behind in implementing healthcare research and asked Lt Col Wilson to elaborate on MWHRIG and TSNRP's efforts to disseminate their findings to military leadership. She stated that MWHRIG is a relatively new research program. They are attempting to increase their visibility by presenting at several forums and various military groups. MG (Ret) Pollock mentioned that nursing groups in particular, such as TSNRP, are rarely in a position to address their findings to leadership. Committee members and an audience member commended the work being done by Lt Col Wilson and her colleagues, and suggested ways to spread the word about this research. Committee members advised her to work with medical logisticians to effectively distribute the self-diagnosis and feminine hygiene kits to women in the field. A Navy representative remarked that there is currently a problem in getting FUDs for female aviators. Lory Manning of the Women's Research and Education Institute commented on a similar issue occurring with regard to female body armor – there is a disconnect between the research and putting it into practice.
- COL (Ret) Margarethe Cammermeyer suggested that Lt Col Wilson or her colleagues in MWHRIG and TSNRP present again at DACOWITS meetings so that DACOWITS can keep informed of their research. Also, at Ms. Hemphill's request, Lt Col Wilson agreed to provide the Committee with copies of the relevant research papers she presented at the meeting.
- Committee members stated that in DACOWITS focus groups women often remarked that they were hesitant to seek care from male medics. Lt Col Wilson commented on an ongoing study that reveals that women medics are familiar with this complaint, but often feel pigeonholed and are not interested in only treating women. This complaint frustrates them because male medics receive the same training as women medics. The study elaborated on techniques that male medics have adopted to develop rapport with female patients.
- MG (Ret) Pollock expressed concern that enlisted medics seem to be running sick call and performing duties beyond their training. She remarked that medics are trained for trauma and support roles and should not be used as primary healthcare providers. Committee members agreed and mentioned that few participants in the DACOWITS focus groups even mentioned physician's assistants in the wellness discussions and, in reality, medics may often be the primary person patients see in the military healthcare system.

Results from Study on Deployed Women's Health

COL Anne Naclerio, Chair, Women's Health Task Force, Office of the Surgeon General, U.S. Army. (Power Point slides located at Tab G.)

COL Anne Naclerio briefed the Committee on the results of another study examining the health of deployed women. The Army Women's Health Task Force, which was formed in July 2011 and brings together several subject matter experts to focus on women in deployed settings, supported the research. The research was not an official study and did not go through an Institutional Review Board. Instead, the Task Force held focus groups, interviews, town hall meetings, and conducted surveys of 150 women in deployed environments in Afghanistan. The Task Force also conducted an extensive literature review to compare their findings to the empirical literature. These efforts resulted in a white paper entitled "Concerns of Women Currently Serving in the Afghanistan Theater of Operations."

They identified six primary themes, each of which resulted in recommendations for improvement. These were women's health education, barriers to seeking care, uniform/personal protective gear fit, psychosocial effects of deployment, effects of deployment on children and families, and sexual assault. The first concerned a lack of health education. For example, some women had heard of FUDs but some had not, and many women had not heard of menstrual suppression methods. There was also a gap in knowledge about feminine hygiene. The Task Force recommendations included standard training in women's hygiene, contraception management and menstrual cycle control; self-diagnosis kits and information; and distribution of FUDs.

Women also identified barriers to seeking care. In one study, 69 percent of the Service members surveyed indicated their provider was a medic or independent duty corpsmen. Committee members expressed concern about this finding and indicated that if medics are not expected to fill these roles in garrison but are expected to do so in deployed settings, they need to be trained on this. Task Force recommendations included standardizing care regardless of location or level of provider.

Women reported problems with the fit of the uniform/personal protective gear, noting that the poor fit limits the function of these items and the soldiers wearing them. The Task Force recommended research and development studies with female representation.

With regard to the psychosocial effects of deployment, women expressed difficulty with both preparation for deployment and reintegration. Many women face an internal contradiction in the role they play down-range compared to the role they face coming home. Women also cope differently than men and, when displaying symptoms of PTSD, healthcare providers may not

attribute the symptoms to combat-related causes. The Task Force recommended further research relating to this finding.

Concerns about their families while they are deployed and the lack of preparation and support women receive during the reintegration period were also expressed. There is a lack of research on the effects on children when women deploy as opposed to men. Thus, the Task Force recommendations here were research on deployment effect on families, review of support programs and attention to training for child care providers.

Participants brought up sexual assault at nearly every location where interviews were held. Women had positive responses to the Army Sexual Assault and Prevention Program (SHARP) but expressed concern over having the right provider available at the right time to perform the exam. Also, women expressed a lack of trust in leadership to get cases prosecuted. The Task Force recommended physical measures to improve safety (e.g., locks and lighting) and a review of the policies regarding prevention and response to sexual assault in theatre. The Task Force also recommended professionalizing the Victim Advocate roles by providing national certification and continuing education for Unit Victim Advocates.

The following are points from the question-and-comment period after the briefing:

- Committee members asked if the study had any findings related to the availability of Plan B emergency contraception or access to abortion. COL Naclerio indicated that this was not something the study examined. COL (Ret) Cammermeyer recommended adding Plan B to the self-diagnosis kits provided to women. When Committee members mentioned that women in their focus groups expressed concern about self-reporting in order to receive Plan B, COL Naclerio was surprised that women were hearing a message that sexual activity is somehow prohibited. In her experience, she saw the military promoting safe sexual activity. At the Committee's request, COL Naclerio will look into providing Plan B in places where condoms are being provided.
- COL Naclerio indicated that the most important factor for the Task Force is awareness and pressure to get their recommendations enacted. The Task Force has members from the Surgeon's Generals of the other Services to help with the dissemination of their findings and recommendations. In addition, the military community needs to better inform civilian researchers of existing gaps in research in the military health field, as military researchers will not be able to conduct all of the needed research on their own.
- Ms. Campbell commented that DACOWITS made a recommendation related to improving combat-related equipment in their 2010 report. A military representative reported that the Army is actively looking into redesigning combat gear for Service

women. In addition, there is a uniform for members who have a smaller frame set to come out in six to eight months.


- A representative from the Navy reported that the Navy is getting pushback on the decision to allow a one-year post-partum deferment period. Committee members stated that women in the focus groups in 2011 did not want a fixed, mandatory, post-partum time period. Particularly for aviators, they wanted the option to choose to return sooner. Some Committee members suggested making the one year post-partum deferment optional. Lt Col Horner reported that the Services may not want to allow for a 12-month post-partum window, given the drawdown and the emphasis on ensuring that all Service members are deployable.
- Committee members asked why the one-year deferment period was only recommended for mothers. Some noted that there is literature that men and their children would benefit from a deferment as well. Col Naclerio responded that the recommended time of deferment corresponds with breastfeeding. Col Colston from the Office of the Assistant Secretary of Defense for Health Affairs added that while it is important for children to be around their parents, deferments have an effect on readiness and thus require a balance to be struck.

Public Forum

BG (Ret) Wilma L. Vaught, USAF, addressed those in attendance about the Women in Military Service for America Memorial (WIMSA).² BG Vaught commented on the history of DACOWITS and stated that the memorial recently created an exhibit dedicated to DACOWITS. 2012 marks the 15-year anniversary for the memorial, and it is the only place preserving the memory, in writing and memorabilia, of women who have served the country. The memorial has collected over 1,500 oral histories from women Service members to date. BG Vaught informed meeting attendees about the memorial's funding and registration goals and asked attendees to encourage women veterans they know to register for the memorial for free by calling 1-800-I-SALUTE. The 15th anniversary celebration will take place on October 19th and October 20th.

Meeting was adjourned.

² More information about the Memorial can be found on the WIMSA website at <http://www.womensmemorial.org/About/welcome.html>.



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Report Certified by
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DACOWITS Chair

DACOWITS MEMBERS IN ATTENDANCE

Ms. Holly Hemphill
Ms. Nancy Duff Campbell
BG (Ret) Maureen LeBoeuf
The Honorable Deborah James
COL (Ret) Margarethe Cammermeyer
BG (Ret) Julia Cleckley
SgtMaj (Ret) John L. Estrada, USMC
FLTCM (Ret) Jacqueline DiRosa
LtGen (Ret) Frances Wilson
RADM (Ret) Elizabeth Morris
MG (Ret) Gale Pollock