



DACOWITS RFI 14

Pregnancy

8 Dec 2020

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Pregnancy – Adverse Impact

14.a. What safeguards have been put in place to prevent servicewomen from being adversely impacted due to pregnancy/postpartum?

Assuming the question is in relation to servicewomen continuing on the same promotion and developmental timeline as their male counterparts, pregnancy/postpartum must be reviewed as a temporary medical situation. Pregnancy and postpartum put servicewomen in a temporary profile status. Those temporary profiles limit their ability to do certain things, such as, PME training, taking a physical fitness test, and deploying. Those profiles do not necessarily limit servicewomen in their daily duties.

The Army is developing policy that addresses any identified adverse impact to servicewomen limiting their attendance at PME training. In relation to the physical fitness test, the last test on file for servicewomen is used throughout their pregnancy and postpartum. The Field Manual (FM) 7-22, Holistic Health and Fitness, was published on 1 October 2020 and specifically sets the standard for a 12 month deferment for postpartum Soldiers taking the Army Combat Fitness Test (currently, the ACFT is not being used administratively or for adverse actions for any Soldiers in the Army).



Pregnancy – Leader Training

14.b. What training do commanders and supervisors receive regarding how to address pregnancy/postpartum in their units? Does this training include how to prevent and mitigate negative attitudes and bias towards pregnant/postpartum servicewomen?

While there is currently no formalized pregnancy training for commanders, AR 40-502, Medical Readiness, and DA-PAM 40-502, Medical Readiness Procedures, provide the guidelines of how to address Soldiers throughout their pregnancy and postpartum period. Additionally, the Army Military Equal Opportunity is updating annual training to add pregnancy discrimination as one of the biases.

Per AR 40-502, Medical Readiness, “The intent of these [pregnancy profiling] provisions is to protect the health of the Soldier and fetus while ensuring productive employment of the Soldier. Common sense, good judgment, and cooperation must prevail between policy, Soldier, and Soldier's commander to ensure a viable program.”



Pregnancy – Career Track

14.c.1 Does your Service have any measures in place to track career progression and promotion of pregnant servicewomen? No

14.c.2 What are they? None

The Army's personnel system does not track a Soldier's career progression and promotions based on their pregnancy. A pregnancy is considered a temporary medical condition that resolves itself over time.



Pregnancy – Surveys

14.d. Has your Service conducted any surveys or undertaken other measures to solicit feedback from servicewomen about their workplace and career experiences as a result of their pregnancy and/or postpartum leave/lactation requirements? What were the findings of those surveys?

The Army has not conducted specific surveys for pregnancy and/or postpartum leave/lactation requirements. In May 2020, the Army initiated the Department of the Army Career Engagement Survey for all soldiers collecting data on several categories including Army Life, Well-being, Organizational Climate, and other areas pertaining to military service, intentions, and recommendations. There was one specific question related to pregnancy.

- 25% of Female Service Member responses indicated that “Treatment based on race, color, national origin, religion, sex, sexual orientation, age, disability, genetic information, or pregnancy” in the workplace was an Extremely Important (12.77%), or Important (12.68%) reason to leave the Army
- This percent is roughly double that of the male responses (with 5% in each response)

*data as of Oct 2020



Pregnancy – Surveys Continued

- Of those who indicated it was an extremely important reason to leave, 38.1% of women indicated that pregnancy in the workplace contributed to their answer (males responded at 12.7%)
- Top 5 “extremely important reasons to leave the Army” between males and females

Female		Male	
1. Impact of Army life on Family plans for children.	29.1%	1. Effects of deployments on Family or personal relationships.	25.3%
2. Effects of deployments on Family or personal relationships.	27.9%	2. Impact of Army life on significant other's career plans and goals.	23.4%
3. Impact of Army life on significant other's career plans and goals.	26.9%	3. The degree of stability or predictability of Army life.	22.2%
4. Impact of military service on my Family's well-being.	25.6%	4. Impact of Army life on Family plans for children.	21.8%
5. Work/life balance for my Family or personal life when not deployed.	24.9%	5. Impact of military service on my Family's well-being.	21.5%

*data as of Oct 2020



Pregnancy – Surveys Continued

- Female responses indicated a higher degree of departure sentiment than males for the same issues
- Work/Life balance for my family or personal life when not deployed” was the 5th most important reason for females, taking the place of “the Degree of stability or predictability of Army life.”
- When asked if they would recommend Army Service to someone they care about, 47% of females and 60% of males said yes

*data as of Oct 2020



Pregnancy – Temporary Reassignment

14.e.1 How does your Service make reassignment determinations when servicewomen must be temporarily reassigned to other duties due to pregnancy, regardless of whether for individual or occupational-wide profile reasons? Do servicewomen have the opportunity to provide input on such reassignments? And who within the command has decision authority for such reassignments?

- Managing the Individual Medical Readiness (IMR) of Soldiers is the Unit Commander's responsibility with close collaboration and assistance from the unit or military treatment facility's (MTF) healthcare providers (AR 40-502, Medical Readiness). In the reassignment process at the enterprise level (HRC), the Soldier's individual Medical Readiness Classification code (MRC status) is taken into consideration and the future assignment must not violate their medical readiness classification (AR 600-8-11, Reassignment)
- At the enterprise level, Servicewomen are not reassigned outside of their military occupational skill and are not temporarily reassigned to other duties due to their pregnancy. However, if a Servicewoman submits a Compassionate Action reassignment request (AR 614-200, Enlisted Assignments and Utilization Management), the Servicewoman can provide input (preferences) for the reassignment, but pregnancies alone are not a basis for a compassionate request (AR 614-200, Chapter 5, Section III)



Pregnancy – Temporary Reassignment

14.e.2 Specifically identify how evaluation reports and follow-on assignments of those temporarily removed/reassigned from their specialty field due to pregnancy and operational deferments are handled.

- Evaluation reports: the Army does not have policy specifically addressing pregnancy in evaluation reports; the general guidance applies (AR 623-3, Evaluation Reporting System).
- Follow-on assignments: the Army does not have follow-on assignments for pregnant Servicewomen at the enterprise level.
- Operational deferments: the requests must be submitted to Commanding General, U.S. Army Human Resources Command (AHRC-EPO-P) and must be accompanied by a memorandum signed by the first general officer (or civilian equivalent) in the Soldier's chain of command, with the following exceptions: Brigade commander (colonel/O-6) may sign memoranda for BCT, and Corps Chief of Staff may sign memoranda for non-divisional units. These AHRC-EPO-P signature authorities may not be further delegated. (AR 600-8-11, Chapter 2, Section IV, 2-14).
- If the pregnant Servicewoman is in a Position of Significant Trust (e.g., Drill Sergeant Duty (DS)), the Servicewoman is removed from the DS Program for pregnancy and will receive assignment instructions to report back to DS duties or school, as applicable, normally 6 months after anticipated delivery, unless Soldier had completed 12 months or more of DS status when removed (AR 614-200, Chapter 8, 8-25).



Pregnancy – Temporary Reassignment 2

14.f. How does your Service make reassignment determinations for servicewomen who must be reassigned while on postpartum operational deferment? Do servicewomen have the opportunity to provide input on such reassignment? And who within the command has decision authority for such reassignments?

- At the enterprise level (HRC), the Army does not reassign servicewomen while on postpartum operational deferments. They proceed with reassignment after the deferment term date. If a deletion is requested, it will be considered. If approved, the servicewoman will remain at current installation or reassigned based on the needs of the Army, the Soldier's preferences, and professional development (talent management).
- The final approval authority for all requests for operational deletion or deferment is HRC and actions are done in accordance with guidance found in AR 600-8-11.



Pregnancy – Physical Fitness Testing

14.g. What are your Services' physical fitness testing requirements and deferment period for pregnant and postpartum servicewomen?

- The Field Manual (FM) 7-22, Holistic Health and Fitness, was published on 1 October 2020. It sets the standard for a 12 month deferment for postpartum Soldiers taking the Army Combat Fitness Test. During pregnancy and postpartum period, Soldiers maintain their physical fitness per the Pregnancy Postpartum Physical Training Program (P3T) and will return to unit training upon clearance from their profiling provider. Gradual reconditioning is emphasized.
- Per AR 40-502, Medical Readiness, the profiling of postpartum Soldiers may be modified, if upon evaluation of a physician, it has been determined the postpartum Soldier requires a more restrictive or longer profile because of complications or unusual medical problems.
- The guidance for profiling pregnant and postpartum Soldiers per AR 40-502 and DA-PAM 40-502, Medical Readiness Procedures, is currently under review.

DACOWITS RFIs #14



OPNAV N17
December 2020



DACOWITS RFI #14

PREGNANCY IN THE MILITARY

14a. What safeguards have been put in place to prevent servicewomen from being adversely impacted due to pregnancy/postpartum?

Safeguards are in place to prevent servicewomen from being adversely impacted due to pregnancy/postpartum address:

- **Officer/Enlisted Assignment/Placement**
- **Operational Deferment Tours (12 months)**
- **Waiver to Remain Onboard (postpartum)**
- **Spouse Co-location**
- **Physical Fitness Assessment Waiver (9 months)**

Data current as of 11 2020



DACOWITS RFI #14

PREGNANCY IN THE MILITARY

14b. What training do commands and supervisors receive regarding how to address pregnancy/postpartum in their units? Does this training include how to prevent and mitigate negative attitudes and bias towards pregnant/postpartum service women?

- **Commanding Officers are strongly encouraged to establish a Command Advisor on Parenthood & Pregnancy (CAPP)**
 - **Serve as an advocate and advisor to the command triad, and their Sailors.**
 - **Ensure all Sailors receive proper counseling, training, and guidance to understand their rights and responsibilities, mitigate negative attitudes and bias towards pregnant and postpartum servicewomen.**
 - **Enable work-life balance as Navy parents meet career demands and obligations.**

Data current as of 11 2020



DACOWITS RFI #14

PREGNANCY IN THE MILITARY

14c. Does your Service have any measures in place to track career progression and promotion of pregnant servicewomen? What are they?

- Navy does not actively track career progression and promotion of pregnant servicewomen but instead looks at progression and promotion of all service members via rating milestones.**

Data current as of 11 2020



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PREGNANCY IN THE MILITARY

14d. Has your Service conducted any surveys or undertaken other measures to solicit feedback from servicewomen about their workplace and career experiences as a result of their pregnancy and/or postpartum leave/lactation requirements?

Task Force One Navy held a Listening Session for Female Sailors and received feedback on family planning, having access to female role models, and childcare challenges.

The Navy conducts the biennial Personal and Professional Choices (PnPC) Survey. It includes sections on

- pregnancy**
- workplace experiences during pregnancy**
- postpartum leave**
- lactation requirements**

Data current as of 11/2020



DACOWITS RFI #14

PREGNANCY IN THE MILITARY

14d. What were the findings of those surveys?

The 2020 PnPC survey just closed so analysis is on-going, the following results are taken from the 2018 survey. All 2018 PnPC survey participants were asked about their command's support for pregnant female Sailors. Perceptions of command support were found to vary based on gender and parenthood.

- Compared to 55% of women, 67% of men agreed that their command is supportive of pregnant female Sailors.
- Those with children were more likely to agree that their command is supportive of pregnant female Sailors, 69% compared to 53%.
- Sixty percent of the survey participants support operational deferments for female Sailors including 56% of men and 69% of women.
- In terms of the implications of parenthood for female Sailors, less than half (36%) of survey participants agreed that having a child does not negatively impact a female Sailor's career including 26% of women and 42% of men.
- Fifty-three percent of women disagreed with this statement suggesting that there is a perception among female personnel that having a child or children detrimentally impacts female Sailors' careers.

Data current as of 11/2020



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PREGNANCY IN THE MILITARY

14e. How does your Service make reassignment determinations when servicewomen must be temporarily reassigned to other duties due to pregnancy, regardless of whether for individual or occupational-wide profile reasons?

- Reassignment determinations for enlisted Service members are based on operational or shore assignment at time of pregnancy. A Pregnant service member may remain onboard a sea duty billet up until the 20th week when the ship is in port.
- Upon pregnancy confirmation, commands submit transfer requests to NAVPERSCOM for Service members on an operational assignment or shore assignment deemed inadequate through completion of an Occupational Exposure of Reproductive or Developmental questionnaire.

Data current as of 11 2020



DACOWITS RFI #14

PREGNANCY IN THE MILITARY

14e. Do servicewomen have the opportunity to provide input on such reassignments? And who within the command has decision authority for such reassignments?

- **Service women can request to remain onboard an operational command during the pregnancy and 12 months post-delivery, requests are routed to PERS-454 as reassignment authority.**
- **Waivers must include endorsements from the service member, the Commanding Officer/Officer-in-Charge, and the OB medical provider. The Service member may request at any time to cancel the waiver necessitating transfer to shore.**

Data current as of 11 2020



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PREGNANCY IN THE MILITARY

14e. Specifically identify how evaluation reports and follow-on assignments of those temporarily removed/reassigned from their specialty field due to pregnancy and operational deferments are handled.

- **Evaluation reports are submitted as Detachment of Individual and NAVPERSCOM guidance ensures that pregnant service members are not adversely evaluated.**
- **Follow-on assignments after operational deferment tour will be handled by the Service member's rating detailer. PERS makes every effort to place pregnant Sailors in shore activity with a valid billet for their rating.**

Data current as of 11 2020



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PREGNANCY IN THE MILITARY

14f. How does your Service make reassignment determinations for servicewomen who must be reassigned while on postpartum operational deferment?

- All postpartum Service members are deferred from all transfers (e.g. PCS, TAD, TEMDU, etc.) to operational assignments for a period of 12 months following delivery.
- Postpartum Service members under operational deferment are exempt from participating in short underway and TAD periods, if it inhibits the Service member's ability to breastfeed or care for their child(ren).
- Service members who give birth to a stillborn child(ren) are entitled to 6 months operational deferment to support the mental health of the member, treat postpartum depression as necessary, and allow time to return to physical fitness standards.

Data current as of 11 2020



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PREGNANCY IN THE MILITARY

14f. (CON'T)Do servicewoman have the opportunity to provide input on such reassignment? And who within the command has decision authority for such reassignments?

- **Service members on post-birth 12-month operational deferment may request to terminate deferment at any point after their convalescent leave.**
 - **Waiver request sent to their individual detailee and must include endorsements from the Service member, current or prospective operational command, and the member's Health Care Provider.**
 - **Requests will be accompanied by an endorsement from the Service member's primary care manager or obstetric provider to ensure there are no medical issues associated with returning.**
 - **Requests will be granted on a case-by-case basis by the detailee. Service members are required to contact their detailee within 12 months of expiring operational deferment to seek deployability.**

Data current as of 11 2020



DACOWITS RFI #14

PREGNANCY IN THE MILITARY

14g. What are your Services' physical fitness testing requirements and deferment period for pregnant and postpartum servicewomen?

- **Pregnant Service members**
 - are waived from completing both portions of the Physical Fitness Assessment (PFA),
 - will NOT be required to participate in command/unit PT, Fitness Enhancement Programs (FEP), mock or actual PFAs, or Body Composition Assessments (BCA)
- **Pregnant Service members are permitted to participate in command/unit PT**
 - to their level of comfort and
 - in accordance with the Health Care Provider's (HCP) direction and guidance.
- **Postpartum Service members are exempt from participating in a PFA (both BCA and PRT sections) for nine months following a qualified birth event.**
 - If a Health Care Provider determines additional time is required, a medical waiver is granted.
 - If the nine-month waiver expires during a PFA cycle, (January-June or July-December), the member automatically participates in the next PFA Cycle.

Data current as of 11 2020



DACOWITS' RFIs for Pregnancy in the Military

December 2020

**Military Policy (MPO) Branch
Manpower and Reserve Affairs
Headquarters U.S. Marine Corps**



DACOWITS RFI

14. The Committee requests a briefing from each of the Military Services to address the below questions.

a. What safeguards have been put in place to prevent servicewomen from being adversely impacted due to pregnancy/postpartum?

Answer: Safeguards are established within the Marine Corps Policy Concerning Parenthood and Pregnancy (MCO 5000.12F). Per Marine Corps policy, COs and supervisors will ensure that pregnant and post-partum Marines are not adversely evaluated or receive adverse fitness reports or evaluations as a consequence of pregnancy or post-partum complications.

b. What training do commanders and supervisors receive regarding how to address pregnancy/postpartum in their units? Does this training include how to prevent and mitigate negative attitudes and bias towards pregnant/postpartum servicewomen?

Answer: Per MCO 5000.12F, parenthood and pregnancy training is provided during entry-level training for all Marines (officer & enlisted); also, per NAVMC 3500.18D, this training is incorporated in common skills training and COs will reinforce this training by ensuring Marines understand the importance of family care planning and the responsibilities of parenthood. There is no specific training to prevent/mitigate negative attitudes and bias toward pregnant/postpartum Marines; however, the Marine Corps will not tolerate such behavior.



DACOWITS RFI

14. The Committee requests a briefing from each of the Military Services to address the below questions. (cont.)

c. Does your Service have any measures in place to track career progression and promotion of pregnant servicewomen? What are they?

Answer: The Marine Corps does not have any measures in place to track career progression or promotion of pregnant Marines.

d. Has your Service conducted any surveys or undertaken other measures to solicit feedback from servicewomen about their workplace and career experiences as a result of their pregnancy and/or postpartum leave/lactation requirements? What were the findings of those surveys??

Answer: The Marine Corps has not conducted a survey or taken any measures to solicit feedback about workplace or career experiences as a result of pregnancy. However, in March 2020, the Marine Corps conducted a Primary Caregiver survey to determine interest in the Career Intermission Program (CIP) and Annual Leave as options to extend the time off after the birth/adoption of a child. Three main takeaways were: 1) a majority indicated that they would use 8 weeks of annual leave (if allowed) before returning to duty, 2) there were majorities at 12 and 52 weeks for how many total weeks are necessary before returning to duty, and 3) CIP with a 1:1 payback was more popular than the current CIP with a 2:1 payback.



DACOWITS RFI

14. The Committee requests a briefing from each of the Military Services to address the below questions. (cont.)

e. How does your Service make reassignment determinations when servicewomen must be temporarily reassigned to other duties due to pregnancy? Do servicewomen have the opportunity to provide input on such reassignments? And who within the command has decision authority for such reassignments? Specifically identify how evaluation reports and follow-on assignments of those temporarily removed/reassigned from their specialty field due to pregnancy and operational deferments are handled.

Answer: Reassignment determinations are made based on any adverse affects on the pregnant Marine's health, the health of the unborn child, or the health of fellow Marines. It is possible for Marines to provide input on their reassignments; however, there is no guarantee of special consideration in duty assignments or duty stations. Commanding Officers (COs) have the decision authority to only reassign Marines within their command/unit and only between units at the same permanent duty station. Marines who are transferred from a unit because of pregnancy will be reassigned to the same billet in the same command, or an equivalent billet in a command of the same type. Evaluation reports are handled no differently after reassignment and they will be based on demonstrated performance. Medical limitations and/or assignment restrictions, or periods of absence because of pregnancy, associated medical care, or convalescent leave, in and of themselves, shall not be the basis for downgrading marks or adverse comments.



DACOWITS RFI

14. The Committee requests a briefing from each of the Military Services to address the below questions. (cont.)

f. How does your Service make reassignment determinations for servicewomen who must be reassigned while on postpartum operational deferment? Do servicewoman have the opportunity to provide input on such reassignment? And who within the command has decision authority for such reassignments?

Answer: Same answer as item 14.e.

g. What are your Services' physical fitness testing requirements and deferment period for pregnant and postpartum servicewomen?

Answer: Pregnant Marines are exempt from Physical Fitness requirements once pregnancy is confirmed and they are exempt for 9 months after the date of the birth event; however, Marines are strongly encouraged to conduct a personal physical fitness program throughout pregnancy and postpartum period.

US Coast Guard Briefing to DACOWITS RFI 14 December 2020

- **Presented by:**
 - **CG Office of Military Personnel and CG Personnel Service Center**



14.A What safeguards have been put in place to prevent servicewomen from being adversely impacted due to pregnancy/postpartum?

- 10 USC 701 was updated by the NDAA, removing spousal/paternity leave (10 days) and adoption leave (21 days) and replaced them with Primary (42 days) and Secondary (21 days) Caregiver Leave while specifically speaking to Maternity Convalescent Leave (42 days) which was never in the law before.
 - Post-partum Active Duty members are authorized to defer TDY assignments up to 12 months following a birth event. In order to align Active Duty and Reserve policies, reserve members are authorized up to 12 months deferment from involuntary mobilization following a birth event.
 - Paternal Leave may be granted by District Commanders and Commanding Officers with the Commandants approval for periods up to a cumulative total of 30 days after certified necessary by a medical officer or practicing physician.
 - For one year immediately following the birth or adoption of a child, all service members are permitted to use a flexible work schedule at the discretion of the Commanding Officer/Officer in Charge.
 - Units are authorized to backfill for members on prenatal, maternity convalescent and primary caregiver leave for a period of up to 120 days of support. Funding is provided by centralized CG account vice unit funds. Backfill is provided by Reserve members using ADOS-AC orders.
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14.B What training do commanders and supervisors receive regarding how to address pregnancy/postpartum in their units? Does this training include how to prevent and mitigate negative attitudes and bias towards pregnant/postpartum servicewomen?

- There is not a standardized training given to commanders and supervisors to address pregnancy & postpartum.
- The contents of Pregnancy in the Coast Guard, COMDTINST 1000.9 is the principal vehicle used throughout the service to ensure unit command cadre and supervisors are provided guidance regarding how to address pregnancy/post partum related matters at their units.
- All Coast Guard unit commanders, commanding officers, officers in charge, deputy/assistant commandants, and chiefs of headquarters staff elements **have to** comply with the policy set forth in Pregnancy in the Coast Guard, COMDTINST 1000.9.
- **The policy states that** pregnancy status should not adversely affect the career pattern of the service member.
- Unit commanding officers or officers in charge **are required to** make every effort to ensure that pregnant service members are not subjected to harassment, imposition of personal opinions, or infringement of legal rights.



14.C Does your Service have any measures in place to track career progression and promotion of pregnant servicewomen? What are they?

The Coast Guard does not currently track the career progression and promotion of pregnant servicewomen.



14D. Has your Service conducted any surveys or undertaken other measures to solicit feedback from servicewomen about their workplace and career experiences as a result of their pregnancy and/or postpartum leave/lactation requirements? What were the findings of those surveys?

The Coast Guard has not conducted surveys or undertaken measures to solicit feedback from servicewomen specifically about their workplace and career experiences as a result of pregnancy and/or postpartum leave/lactation requirements.



14.E (1) How does your Service make reassignment determinations when servicewomen must be temporarily reassigned to other duties due to pregnancy, regardless of whether for individual or occupational-wide profile reasons?

PSC-EPM/OPM Response:

EPM and OPM utilizes the policy outlined in CIM 1000.8 (series) part 1.A.6.b. Assignments when making reassignment determinations when servicewomen must be temporarily reassigned due to pregnancy.

In short, The Coast Guard does not require or permit pregnant women to perform physical duties that could threaten the pregnancy or assign pregnant women beyond the availability of medical attention, for example, to aircraft and boat crews or vessel inspection teams.

During pregnancy and for six months after childbirth, the Coast Guard defers assigning otherwise eligible pregnant members on CONUS shore duty to shipboard or OCONUS assignments.

Pregnant women assigned to OCONUS locations with inadequate housing and medical facilities will transfer to locations where adequate facilities exist. If assigned to an OCONUS location where adequate housing and medical facilities already exist, the pregnant member will remain in that location until they complete their OCONUS tour.

The Coast Guard ultimately reassigns women who become pregnant while assigned to shipboard duty. Upon confirmation of pregnancy, the Commanding Officer of an afloat unit coordinates with the attending physician to determine when to reassign the pregnant member ashore, at the latest, by the 20th week of pregnancy.



14.E (2) Do servicewomen have the opportunity to provide input on such reassignments?

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- **PSC Response:** Yes. Officer and enlisted members requiring transfer due to pregnancy are encouraged to reach out to their Assignment Officer to discuss their career goals and desires for assignment.



14.E (3) And who within the command has decision authority for such reassignments?

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- **PSC Response**: The command may recommend members for certain assignments. However, PSC-OPM and PSC-EPM are the authority for assigning pregnant officer and enlisted members, respectively.



14.E (4) Specifically identify how evaluation reports and follow-on assignments of those temporarily removed/reassigned from their specialty field due to pregnancy and operational deferments are handled?

- **PSC-EPM Response:** Evaluation reports for pregnant enlisted members adhere to CIM 1000.2C chapter 4.D.1.3.c. The Coast Guard acknowledges that temporary conditions such as pregnancy may cause specific performance restrictions imposed by medical authority. While rating chains must not give preferential treatment, evaluation approving officials are required to ensure these members do not receive adverse evaluations solely for their temporary condition. Furthermore, Commanding Officers in consultation with the health care provider, must establish a reasonable expectation of performance given the member's temporary condition.
 - **PSC-OPM Response:** Evaluation reports for all officers adhere to CIM 1000.3A; the Coast Guard prohibits comments regarding pregnancy within officer evaluations. Assignments while Pregnant are handled in accordance with CIM 1000.8A. The Coast Guard acknowledges that temporary conditions such as pregnancy may cause specific performance restrictions imposed by medical authority. While rating chains must not give preferential treatment, evaluation approving officials are required to ensure these members do not receive adverse evaluations solely for their temporary condition. Furthermore, Commanding Officers in consultation with the health care provider, must establish a reasonable expectation of performance given the member's temporary condition.
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14F (1). How does your Service make reassignment determinations for servicewomen who must be reassigned while on postpartum operational deferment?

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- **PSC Response:** PSC-OPM and PSC-EPM utilize the policy outlined in CIM 1000.8 (series) part 1.A.6.b. Assignments while Pregnant and Postpartum. In short, a Postpartum member may elect TDY or voluntary mobilization orders within the 12 months following a birth event only if cleared by a Coast Guard medical officer and with approval from the first O-6/GS-15 in the chain of command.



14F (2). Do servicewoman have the opportunity to provide input on such reassignment?

PSC Response: Officers and enlisted members requesting transfer are encouraged to reach out to their Assignment Officer to discuss their career goals and desires for assignment



14F (3). And who within the command has decision authority for such reassignments?

PSC Response: The member's command may recommend members for certain assignments. However, PSC-OPM and PSC-EPM are the authority for assigning postpartum officers and enlisted members, respectively



14.G What are your Services' physical fitness testing requirements and deferment period for pregnant and postpartum servicewomen?

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- **PSC Response:** This question is not applicable for the Coast Guard.



Department of the Air Force

RFI #14: Pregnancy in the Military



**Office of Diversity & Inclusion
(In Coordination w/Directorate of
Military Force Management Policy,
Deputy Chief of Staff for
Manpower, Personnel and Services)
9 Dec 20**



RFI #14: Pregnancy in the Military

- **14a. What safeguards have been put in place to prevent servicewomen from being adversely impacted due to pregnancy/postpartum?:**
 - **AFI 36-2670, *Total Force Development* – updated to allow pregnant airmen to attend Professional Military Education, without a requirement to request exception to policy**
 - **AFGM2020-36-01 – ensured improved flexibility for time afforded to breastfeeding mothers for breastmilk expression and includes provision for breastmilk storage while TDY**
 - **Aerospace Medicine Waiver Guide – Pregnancy – update allows base medical professionals to approve waivers for uncomplicated pregnancy (12-28 weeks gestation), increasing flight opportunity (for those who seek such)**
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RFI #14: Pregnancy in the Military

- **14a (continued). What safeguards have been put in place to prevent servicewomen from being adversely impacted due to pregnancy/postpartum?:**
 - **AFMAN 11-402, *Aviation and Parachutist Service* – simulator flight time logged IAW AFI 11-401, *Aviation Management* (along with MAJCOM guidance), counts toward Operational Flying Duty Accumulator (OFDA) requirements, aviation incentive pay entitlement and aeronautical ratings for rated officers (except Flight Surgeons)**



RFI #14: Pregnancy in the Military

- **14b. What training do commanders and supervisors receive regarding how to address pregnancy/postpartum in their units? Does this training include how to prevent and mitigate negative attitudes and bias towards pregnant/postpartum servicewomen?:**
 - **No formal training has been established to date however, AF ODI is collaborating with the Womens Initiatives Team (WIT, an AF Barrier Analysis Working Group) to develop appropriate content to be incorporated in all levels of leadership training**



RFI #14: Pregnancy in the Military

- **14c. Does your Service have any measures in place to track career progression and promotion of pregnant servicewomen? What are they?:**
 - **Currently, no such measures are in place**

- **14d. Has your Service conducted any surveys or undertaken other measures to solicit feedback from servicewomen about their workplace and career experiences as a result of their pregnancy and/or postpartum leave/lactation requirements? What were the findings of those surveys?:**
 - **The AF has not conducted an official survey of this nature to date, but will coordinate with its AFBAWG WIT regarding a related project in the future**



RFI #14:

Pregnancy in the Military

- **14e. Reassignment determinations when servicewomen must be temporarily reassigned to other duties due to pregnancy:**
 - **AFI 36-2110, para 5.18.1. – 5.18.3.**
 - **An Airman medically confirmed as pregnant is not normally reassigned PCS while pregnant, except as provided for below**
 - **MPFs will reclama assignments as follows:**
 - **To any overseas location (long or short tour)**
 - **Within CONUS when RNLTD is after sixth month of pregnancy and move is not mandatory PCS**
 - **To a CONUS-isolated station**
 - **Airmen overseas will be curtailed due to pregnancy when:**
 - **Child will be placed out for adoption**
 - **Lack of obstetrical care or other medical considerations**
 - **Airman assigned to dependent-restricted location**
 - **Airman assigned to location where unaccompanied tour length is less than 18 months and Airman is not eligible, cannot qualify for, or is not permitted to serve an accompanied tour**
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RFI #14: Pregnancy in the Military

- **14e. (continued) Reassignment determinations when servicewomen must be temporarily reassigned to other duties due to pregnancy:**
 - **Pregnant Airmen in a mandatory PCS status will not be reassigned:**
 - **To any overseas location (long or short tour)**
 - **To any CONUS location during the 24-week closed period (12 weeks before or 12 weeks after expected delivery date)**



RFI #14: Pregnancy in the Military

- **14f. Reassignment determinations for Airmen who must be reassigned while on postpartum operational deferment:**
 - **AFI 36-2110, para 5.18.4. and 5.18.5.**
 - **During the 12-month period after the birth of a child, deferment from PCS is authorized**
 - **The military mother will be deferred from assignment to a dependent-restricted overseas tour or an accompanied overseas tour when concurrent travel is denied**
 - **Requests from pregnant Airmen to proceed on PCS other than as permitted above may be submitted as an exception**
 - **A medical statement from the attending physician and gaining MTF is included supporting the Airman's request**
 - **In addition to the guidelines above, AFI 36-2110, para 5.19. identifies additional considerations provided to Airmen whose wife is expected to give birth**
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RFI #14: Pregnancy in the Military

- **14g. Physical fitness testing requirements and deferment period for pregnant and postpartum servicewomen**
 - **AFI 36-2905**
 - **AF members are exempt from the fitness assessment during pregnancy**
 - **Pregnancies lasting 20 weeks or more are also exempt from the fitness assessment for 12 months after discharge from the hospital upon completion of pregnancy (delivery, miscarriage, etc.)**
 - **Service members are not required to test until the 1st day of the 13th month after discharge from the hospital of pregnancies lasting 20 weeks or more**
 - **AFI 48-133**
 - **Pregnancies lasting less than 12 weeks won't need to take a fitness test for up to 60 days**
 - **Pregnancies lasting at least 12, but less than 20, weeks will receive an 180-day exemption**
 - **Pregnancies lasting 20 weeks or more won't take a fitness test for a year**
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Headquarters U.S. Space Force

Defense Advisory Committee on Women in the Services

RFI #14

Women in the Space Force

8-9 Dec 2020





RFI #14 Pregnancy/Postpartum

14a. What safeguards have been put in place to prevent Servicewomen from being adversely impacted due to pregnancy/postpartum?

Response: USSF continues using AFI 48-133, *Medical Examinations and Standards*, which provides guidance on the policies and processes regarding pregnancy and/or postpartum profiles.

14b. What training do commanders and supervisors receive regarding how to address pregnancy/postpartum in their units? Does this training include how to prevent and mitigate negative attitudes and bias towards pregnant/postpartum Servicewomen?

Response: The AF Surgeon General (AF/SG) team will build medical briefs addressing these topics for presentation at all future USAF & USSF Commander courses.

14c. Does your Service have any measures in place to track career progression and promotion of pregnant Servicewomen? What are they?

Response: HIPAA currently prohibits access to this type of information to execute tracking and measurement by career field managers or through some at-depth centralized process.



RFI #14 Pregnancy/Postpartum

14d. Has your Service conducted any surveys or undertaken other measures to solicit feedback from Servicewomen about their workplace and career experiences as a result of their pregnancy and/or postpartum leave/lactation requirements? What were the findings of those surveys?

Response: Creating and launching a survey is one of the actions we plan to undertake as we continue building the USSF.

14e. How does your Service make reassignment determinations when servicewomen must be temporarily reassigned to other duties due to pregnancy, regardless of whether for individual or occupational-wide profile reasons?

Response: Reassignment decisions are typically made between the member and her Command team.



RFI #14 Pregnancy/Postpartum

How are evaluation reports and follow-on assignments of those temporarily removed/reassigned from their specialty field due to pregnancy and operational deferments handled?

Response: Members are kept in their current career field with some duty limitations to protect the health of mother and child. Evaluation reports focus on assessing the member's updated duties but we will review processes to ensure fairness. Operational deferments do not create negative consequences.

14f. How does your Service make reassignment determinations for Servicewomen who must be reassigned while on postpartum operational deferment?

Response: Once a member is placed on medical profile, her leadership makes the appropriate changes to her duties to accommodate the updated limitations while the member remains in place.

Do Servicewomen have the opportunity to provide input on such reassignment?

Response: Members can provide input on the temporary administrative duties they are assigned to in their units. Members are not usually reassigned or moved from their units while pregnant or in post partum.



RFI #14 Pregnancy/Postpartum

And who within the command has decision authority for such reassignments?

Response: Member's supervisor and commander.

14g. What are your Service's physical fitness testing requirements and deferment period for pregnant and postpartum Servicewomen?

Response: IAW AFI 48-133, *Medical Examinations and Standards*, members are placed on a physical fitness assessment deferment for 60 days, 6 months or 12 months, following a medical review.

14h. As the newest Service, with expanded authorities, how do you plan to address a-g above?

Response: Please see our answers in 14a-14g.