

# **THE ARMY FAMILY**

## **A White Paper**



**Eric K. Shinseki**



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Illustrations courtesy of the following sources: between pages 3 and 7, Frontier Army Museum, Fort Leavenworth, Kansas; and between pages 12 and 16, U.S. Army Community and Family Support Center, Alexandria, Virginia.

First Printing, 2003

CMH Pub 70-84-1

# FOREWORD

In the course of thirty-eight years of military service, my wife Patty and I have seen much that has changed and much that has endured in the United States Army. Equipment, training, and doctrine have all changed markedly, yet values, traditions, and loyal subordination to those who govern us have not. Nowhere has this striking mix of change and continuity been more apparent to us than with respect to the Army Family. Programs, emphases, and expectations concerning the Army Family have all changed radically, yet an underlying spirit of service and sacrifice continues to characterize the Army and its families alike.

Perhaps the most salient single initiative we personally have witnessed with respect to Army families has been Chief of Staff General John A. Wickham, Jr.'s *The Army Family* white paper of 1983 and all that flowed from it. That landmark document clearly recognized the changing relationships caused by the All Volunteer Army and the partnerships that would be necessary for its success. *The Army Family* announced robust cycles of research and analysis, consultation, and remedial action that led to such spectacularly successful initiatives as the Army Family Action Plan, Family Readiness Groups, and Army Family Team Building. When we compare the treatment afforded Army families during the Vietnam War with that routinely expected during recent deployments, it takes our breath away.

It has been twenty years since *The Army Family* white paper of 1983. Patty and I in our turn have done all we could to bring General Wickham's vision and promise to fruition. The last four years have seen a great deal of further progress benefiting Army families everywhere, the results of unflagging efforts on the part of commanders, community leaders, service organizations, soldiers, and spouses worldwide. Despite extraordinary deployment rates, quality of life for families has remained high and, with it, retention and readiness. The Army is working harder than ever, which is all the more reason to work harder than ever toward the well-being of the Army Family. This white paper is intended to provide a historical summary, survey, and assessment of changes and progress since 1983; to describe the Army Family and its circumstances today; and to discuss initiatives we as an Army have agreed upon as the way ahead. We have made wonderful progress in twenty years of Army-wide effort, yet much remains to be done.

9 June 2003

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# THE ARMY FAMILY

On 15 August 1983, then Chief of Staff of the Army General John A. Wickham, Jr., signed off on his groundbreaking white paper, *The Army Family*. This paper acknowledged the radical social transformation of the Army from a cadre of professionals leading a great mass of draftees and short-term enlistees to an all-volunteer force much more professional in its tenor. Of this force more than half were married. Rather than being peripheral concerns, family issues were now absolutely essential to both retention and readiness and thus to the success of the Army. General Wickham committed to a philosophy of partnership between the Army and the Army Family and targeted "Wellness" and "Sense of Community" as

major thrusts to be supported by both the Army and Army families.

General Wickham's initiative certainly was not the beginning of the Army caring for its people, but it did mark the first systematic effort to design programs, policies, and a research agenda comprehensive enough to address the Army's family concerns as a whole. The Year of the Army Family in 1984 emphasized the importance of the issues involved, and the Army Family Action Plan (AFAP) emerged as a mechanism for transforming philosophy into reality. Now, twenty years later, it is appropriate to again review historical precedent, assess progress, renew commitment, and focus on work that remains to be done.

## THE ARMY FAMILY, 1775-1983

The Army's willingness to acknowledge the critical role families play in its mission has moved from studied neglect, through ambivalent inclusion of families in military communities, to the current recognition that family well-being is an institutional imperative if the Army is to succeed. In its earliest years the tiny Army of the new republic avoided any formal reference to family issues. Militia regulations envisioned service proximate to home and hearth but gave little specific consideration to families. Many soldiers of the Regular Army were followed across the continent by their wives and children, yet the only regulations that recognized the families'

presence concerned the status of "camp followers" and gave regimental or post commanders complete authority over them and all other accompanying civilians. Some wives attained employment as laundresses, cooks, nurses, foragers, water carriers, and correspondence copiers, among other capacities. It was generally assumed that enlisted men were not married but acknowledged that many officers and senior noncommissioned officers (NCOs) were. Over time this implied an obligation to provide for such basics as food, shelter, and medical care for the relatively few Army families that were present. Such support was local, informal, and ad hoc.

During most of the nineteenth century, for example, the Army built houses for officers but only provided space to NCOs and enlisted so that they could build their own housing. The wives themselves organized to support each other and generally set the pace for whatever social life austere frontier posts would have.

By the late 1800s, the obligation to provide for basic family needs received formal recognition in Army regulations. The Army nevertheless tended to narrowly specify services and benefits and to restrict eligibility to the families of officers and senior noncommissioned officers. The Army considered families of junior enlisted men to be an unwanted burden. Army regulations, with few exceptions, forbade the peacetime enlistment or reenlistment of men with wives and minor children until 1942. Housing, medical care in Army facilities, rations-in-kind, and other associated benefits were not formally available to enlisted families. Local commanders and wives' groups did what they could to help out on a case-by-case basis. After the Spanish-American War, overseas service in Panama, the Philippines, Puerto Rico, or Cuba could be a bit more pleasant than life on the frontier. The cost of living in these exotic locales was low enough that a soldier's salary could go a long way.

The massive World War I mobilization came and went so quickly that it had little effect on rhythms of peacetime Army life. World War II was different. In 1940 the creation of a new civilian-oriented Army began as a result of the enactment of the Selective Training and Service Act. The tremendous Army expansion which followed Pearl Harbor found no agency prepared to assist the large numbers of young soldiers and families experiencing problems of adjustment, financial hardship, wartime separation, and emotional stress. Wartime Americans would not tolerate the neglect of such issues burdening their

drafted sons and brothers. Heretofore, the Army informally dealt with families requiring emergency support through post funds, chapel pantries or "helping hand" funds, cooperation with local charitable organizations, and referrals to the American Red Cross. The American Red Cross expanded its operations, but even its resources were not enough to meet skyrocketing requests for assistance. The Army needed an agency of its own to turn to without resorting to public charity or welfare. The Secretary of War directed the creation of Army Emergency Relief (AER) on 5 February 1942 as a private, nonprofit organization. The express purpose of AER was to collect and administer funds to relieve distress among Army members and their families. "The Army Takes Care of Its Own" became the AER slogan. AER cooperated with federal, state, county, municipal, and private agencies to utilize all potential resources to relieve soldiers and their family members. At about the same time the Secretary of War directed The Judge Advocate General (TJAG) to make adequate legal advice and assistance available to soldiers throughout the Army. By 1945, 1,600 offices for that purpose had been established.

The genesis of AER and legal assistance typified the Army's improvisational approach to dealing with families. Housing and rations-in-kind fell under the purview of the old Quartermaster Corps, health benefits were administered by The Surgeon General, and management of AER programs evolved into yet another insular bureaucracy. This trend of dealing reactively with family issues continued through the Korean War and beyond. However, the maintenance of a large standing peacetime Army at home and overseas during the Cold War made it impossible to revert to pre-World War II practices of discouraging the enlistment of married personnel. In Germany and, to a lesser extent, Japan and



Korea, entire American communities far from home sprang up to support units deployed overseas. Each was a microcosm of America, with housing, shopping, support activities, and recreational facilities gathered together. Construction abroad and on stateside posts established much expanded residential base communities that became the core of Army Family life. By 1960 family members outnumbered uniformed personnel in the active force. Family issues had to be addressed. Needs far outstripped such traditional resources as chaplains' programs or chapel charities. The Army Community Service (ACS) Program, established in 1965, was the first serious attempt to establish an umbrella organization for family services, to empower families, and to systematically build community cohesiveness. Another important step toward comprehensive family support was the creation of the Civilian Health and Medical Program of the Uniformed Services (CHAMPUS) in 1966. This program ensured adequate medical care for military families stationed at locations away from military treatment facilities or where specific military medical services were not available. During the early 1970s the United States Army, Europe (USAREUR), pioneered such initiatives as the community mayor program and the new parent support program that eventually caught on Army-wide.

Throughout this period Congress expanded the practice of authorizing monetary entitlements in lieu of goods and services. By 1983, for example, over 60 percent of soldiers lived in the civilian community and received a Basic Allowance for Quarters (BAQ) to offset the expense of housing.

Although thoughtful, useful, and effective, initiatives such as AER, ACS, and CHAMPUS were insufficient to meet the rigors of the Vietnam War or to sustain the excellence of the All Volunteer Army that followed in its wake. The Vietnam War was too long and too bloody and the families of the soldiers fighting it too dispersed, poorly informed, and poorly organized to allow for adequate support from "stovepipe" solutions. The family problems experienced during that difficult conflict demanded careful resolution if they were not to be repeated. Family issues were also too central to the success of the All Volunteer Army to trust to piecemeal solutions. Circumstances called for yet another long step forward in the historically evolving relationship between the Army and the Army Family. In 1982, the Army established the Army Family Liaison Office to solicit feedback and promote the concept of well-informed families ready for the challenges of Army living. Additionally, *The Army Family* white paper of 1983 suggested ever more dramatic change throughout the culture of the Army.



*Soldiers and their families enjoy the outdoors, c. 1900.*



*Soldiers and their wives travel by buggy in Montana, c. 1880.*



*An officer and his family relax on the porch of their military quarters, c. 1895.*



*Lieutenant of the 13th Infantry and his family, c. 1885*



*Army captain and his wife,  
c. 1877*



*A military wedding at Fort Leavenworth, c. 1910*



*Residents of Fort Sidney, Nebraska, prepare for a concert on the lawn, c. 1890.*



*Formal photographic portrait of an Army noncommissioned officer and his wife, c. 1918*

## THE ARMY FAMILY, 1983–2003

The Army of 1983 consisted of 789,000 active duty soldiers, 418,000 Army National Guardsmen, 475,000 Army Reservists, and 322,000 Department of the Army civilians. Of the service members, 13 percent were officers and 87 percent enlisted. Of the soldiers on active duty, 80 percent of the officers, 78 percent of the senior enlisted, and 28 percent of the first-term enlisted were married—a marriage rate exceeding 50 percent overall. Family members associated with these marriages included 384,000 spouses, 630,000 children, and 68,000 dependent parents or other relatives. Thus, family members outnumbered their active duty sponsors by a factor of one and a half to one. More than half of the career soldiers' spouses worked outside of the home, and these contributed 33 percent of the family income—as opposed to 19 percent for their civil sector counterparts. Career soldiers—those anticipating at least twenty years of service and retirement with pay and benefits—and family members kept a wary eye on the treatment accorded retirees and their family members, who numbered 499,000 retired service members and 683,000 surviving family members at the time. Clearly, this was not an Army wherein family issues could be ignored.

Since the closing years of the Vietnam era, Army spouses had been meeting with commanders informally to air problems with Army life and seek solutions. A Women's Symposium held in Munich, Germany, in August 1979 gave representatives from VII Corps communities the opportunity to identify and prioritize their concerns. In 1980, the Officers' Wives Club of the Greater Washington Area, assisted by the Association of the United States Army, sponsored the first Army Family Symposium. Similar worldwide

Army Family Symposiums met in 1981 and 1982. In 1984, the concept of identifying issues for Army resolution through worldwide representation of Army spouses became institutionalized in the AFAP.

AFAP provided a systematic mechanism for addressing family issues by convening annual conferences at installations, Major Army Commands (MACOMs), and Headquarters, Department of the Army (HQDA), where grassroots delegates brought forward their concerns. Installation-specific improvements created a local climate of progress while issues forwarded to MACOMs and HQDA affected benefit entitlements, programs, and services of the Army as a whole. The commander of the Headquarters, Department of the Army, Community and Family Support Center (CFSC), established in 1984, served as the executive agent for AFAP, assuring that each issue was referred to appropriate agencies to be worked until resolved. Progress was carefully monitored and reported at semiannual General Officer Steering Committee meetings until issues were settled or resolution was judged unattainable. During the period from 1984 through 2003, the AFAP fielded 542 issues, of which 357 are now characterized as completed, 85 are still active, and 93 declared unattainable. This activity resulted in 82 changes to national legislation, 130 revised Department of Defense (DOD) or Army regulations, and 140 improvements to programs and services. Of the 542 issues, 170 addressed force support, 108 relocation, 72 medical, 59 youth, and 57 family support. This is not to mention the even larger volume of concerns and issues resolved by subordinate commands or locally, one of the greatest strengths of the program. It became apparent from the beginning that the resolution of family issues broadly involved entire communi-



ties. Some AFAP issues, such as transportation to post for those living off post in USAREUR or the rationalization of quarters termination procedures, progressed quickly when aired at an appropriate leadership level. Other issues took longer. Given that there is insufficient room in this paper to discuss—or even list—all 542 AFAP issues, it might nevertheless be useful to discuss one particularly challenging and illustrative example, child care. See Appendix 1 for further information on unresolved AFAP issues.

Few issues presented a more obvious requirement for the All Volunteer Army than the need for quality child care. As previously stated, both parents worked outside the home in more than half of Army families, not to mention the 3 or 4 percent of soldiers who were sole parents. Yet the Army of the early 1980s paid little attention to child care. Thousands of children were on waiting lists, and most junior enlisted struggled to afford on- or off-post child care fees. Many child care centers were inappropriately built facilities, often reconfigured stables or World War II barracks. Over 70 percent did not meet fire and safety codes. Staffs were poorly trained and poorly paid. Annual turnover rates often exceeded 100 percent, and sloppy personnel policies contributed to lapses such as a shocking sexual abuse scandal at the Presidio of San Francisco Army base. The military was characterized by some as the “ghetto” of child care. Evidence mounted that poor performance in this regard adversely affected recruitment, morale, and retention.

Child care was an early and recurrent target of the AFAP. Year after year spouses surfaced inadequacies of the system, and the Army struggled to address their concerns. Construction invested in child care centers rose from zero dollars in 1981 to \$42,360,000 in 1986. Between 1983 and 2003, 132 child care centers were built or

renovated at a total cost of \$325,470,000. In concert with its sister services, the Army pressed for and secured the Military Child Care Act of 1989, enabling legislation that resolved a thicket of resourcing and policy issues. Staff compensation and training, staff-to-child ratios, child development programs, and child care facilities radically improved. A sliding scale child care fee system ensured that affordable child care was available to all. By 2000, 95 percent of military child care centers were accredited by the National Association for the Education of Young Children, versus 8 percent for the nation as a whole. The General Accounting Office validated both the quality and the affordability of Army child care in a comprehensive study of child development programs. To improve nationwide child care performance, in 1997 the President of the United States declared military child care a “model for the nation” and directed the Department of Defense to share its child care expertise with the public and private sectors. The Army’s steady improvements with respect to child care provide a fine example of the AFAP’s ability to effect change over time.

In addition to the attention given to child care, programs for older children received much needed emphasis. Over time, youth centers have progressed from being unsupervised adolescent hangouts to facilities that offer a wide range of educational and character-building extracurricular activities provided under professional supervision. This is the philosophy of Child and Youth Services (CYS). One particularly striking example of intervention on the behalf of young people emerged from the Army’s Secondary Education Transition Study (SETS), conducted by the Military Child Education Coalition. This study recognized that the Army’s 175,000 secondary school-age students moved three times more often than their civilian counterparts and experienced all of the

challenges that such moves imply. An indication of the complexity of guaranteeing quality education may be gained from the fact that the Department of Defense Education Activity (DODEA) itself operates 224 schools in seven states and fourteen countries. SETS identified the best practices with respect to the transfer of records, student transitions, extracurricular activities, calendars, faculty professional development, graduation requirements, and installation assistance that promise to ameliorate the adverse effects of such extreme mobility. School superintendents who participated in the SETS envisioned a memorandum of agreement among school districts likely to experience heavy student turnover. The Army again provided a groundbreaking example for the civilian sector, given that our nation as a whole experiences considerable movement of secondary school students. This is also illustrative of how broadly defined a single AFAP action can become.

Housing was also an early and recurrent target of the AFAP. The Army, in response to a congressional directive requiring a plan to eliminate all inadequate housing by 2007, developed an aggressive privatization program utilizing the Military Housing Privatization Initiative (MHPI) Act Congress granted in 1996. These authorities allowed the Army to leverage appropriated housing funds and assets to attract private-sector capital and expertise to operate, manage, maintain, and build on-post housing. The MHPI Act allows soldiers to use their Basic Allowance for Housing to pay rent for their on-post housing. By the end of 2006, approximately 82 percent of the government-owned inventory will be privatized. Since the MHPI Act only applies to U.S. installations, overseas bases are using traditional Military Construction Funds plus the additional funds freed up after government-owned family housing is privatized

to meet the 2007 goal of eliminating inadequate housing.

While the AFAP process helped to prioritize Army community needs, considerable focus on family issues occurred within deployable units as well. Change was driven not only by the increasing proportions of married servicemen and women, but also by an increased pace of overseas deployment. The disintegration of the Soviet Union removed the threat of global holocaust and, with it, the need for the great Cold War masses of forward-deployed troops. It did not, however, reduce the demand for rapid interventions into regional quarrels wherein American interests were at stake. Indeed, the opposite was true, and active duty deployments away from the family skyrocketed by 300 percent in a ten-year period. This phenomenon was even more exaggerated in the Reserve Component, which went from providing about a million duty days annually to providing about 12 million duty days annually—a twelvefold increase. Clearly, this ballooning incidence of family separation had to be addressed.

Harkening back to lessons from the past, the spouses of unit members deploying to peacekeeping in the Sinai Desert from Fort Bragg, North Carolina, organized into Family Support Groups (FSGs) for mutual support during the early 1980s. These units' careful selection of rear detachment commanders rounded out the partnership between the deployed unit and the spouses remaining behind and has become a hallmark of contemporary family support. After Family Support Groups had proven their value to the families of deployed soldiers, in 1984 the XVIII Airborne Corps Commander directed all his tactical units to form them. The concept caught on. By DESERT STORM, most deploying units throughout the Army had arrangements of this type. By the mid-1990s, Army Family research undertaken

by the Community and Family Support Center, the Army Research Institute for the Behavioral and Social Sciences (ARI), the Walter Reed Army Institute of Research (WRAIR), and others had given considerable attention to the phenomenon, and a corpus of generally agreed-upon usages and characteristics had emerged. Manned by volunteers, mature organizations featured telephone trees or other such internal communications, routine meetings for social or informational purposes, means for maintaining contact with deployed soldiers, access to counseling, provisions for mutual support or exceptional needs, and recreational activities for families. Some commands stood up family assistance resource centers as optimal settings for Family Support Group activities—such as the 1st Cavalry Division's famous "Yellow Ribbon Room"—and both deployments and homecomings were carefully choreographed. Poor preparations for reunion could be as problematic as the separation itself, so considerable study, thought, and counseling focused on the return as well as the deployment.

The evolution of Family Support Groups was not without its problems. Local issues and solutions varied widely in their composition and effectiveness; no standardized program existed to benchmark "what right looked like." Well-intentioned group leaders too often devoted an overwhelming disproportion of their time to a tiny fraction of spouses that were excessively dependent, overly demanding, seeking the early return of their sponsors, or beset with multiple problems too deeply rooted for an amateur's expertise. Failure to satisfy these hard cases could discourage those attempting to do so, while distracting them from more feasible efforts to deal with the modest emotional and material needs of the vast majority of the spouses. One of the lessons learned from Operation DESERT STORM was the need for readily

available training materials for ACS staff to train newly appointed FSG leaders. Operation READY (Resources for Educating About Deployment and You) was developed by CFSC in 1994, and the resultant FSG leader's handbook became the standard for all FSGs. Additionally, Army Family Team Building (AFTB) addressed and adjusted expectations through independent learning. Established in 1994, it undertook to train volunteers on an Army-wide basis, and then these trainers conducted training themselves through three levels of training emphasis. Family members received an "Army 101" approach to empowerment and independence while acquiring relevant knowledge and skills. In addition, English as a Second Language (ESL) programs, first introduced during the 1970s, were available to spouses facing language challenges. A shared picture of family readiness emerged across the Army, along with a caution to stick to the basics and refer the hardest cases to professional help.

The term Family Support Group transitioned to the term Family Readiness Group (FRG) to reflect the philosophy of being ready as opposed to waiting for the Army to take care of everything itself. Family readiness envisioned that spouses and families could weather their sponsors' absences with thoughtful but reasonable community support and a little help from their friends. Predeployment routines, including tightly coordinated multistation Preparation for Overseas Movement (POM) and family predeployment orientations, increased the odds that spouses had access to transportation, money, medical care, counseling, and other such support systems while their sponsors were gone. A Soldier Issue Forum convened by the Chief of Staff, Army (CSA), in 1989 had brought further attention to issues such as housing, health care, family care plans, and the impact of deployments. Spousal employ-



ment received attention, both with respect to preferential hiring on post when feasible and with respect to assistance in external placement. In December 2002, the Army Chief of Staff conducted an employment summit with Fortune 500 companies to increase private-sector employment opportunities for Army spouses and to facilitate skills training. At the same time volunteer work was recognized as satisfying in itself and as a bridge to eventual employment, and a Volunteer Summit in 2002 developed an action plan to further energize the Army's volunteer system. Another initiative toward spousal empowerment originated in 2002 as the Spouse Orientation and Leadership Development (SOLD) system. SOLD set goals in the areas of connecting, leading, contributing, and growing and envisioned the means to document skills, training, experience, and performance to reinforce personal portfolios. SOLD capitalized on the spousal tradition of community involvement by offering affirmative opportunities and partnerships with other spouses serving as ambassadors, lifeline coaches, and mentors in numerous Army communities.

Chaplains have long been an installation- and unit-based resource for specialized marriage and family pastoral counseling and education programs. The *Spring 2000 Sample Survey of Military Personnel* listed the chaplain as third behind family member and spouse or close friend as the person a soldier would most likely talk to about a confidential matter. Building on this institutional reputation, in the late 1970s the Army selected chaplains to attend specialized training in Family Life Ministry. As trainers, they enhanced the counseling and education skills of all unit chaplains. As service providers, they offered the alternative of spiritually integrated counseling and family education. A recent command initiative conducted by chaplains is the Building Strong and Ready

Families (BSRF) program, a unit-based skill training that can significantly enhance the confidence and resilience of young married couples and ease their transition into the military. It also provides a unit-level conduit to other agencies young families may not know exist on an installation.

Family empowerment envisioned expedient access to medical care without the sponsor's intervention. Over the past twenty years, Family Practice has expanded to accommodate both the numbers of family members and the likelihood of deployment. A specific Primary Care Manager (PCM) serves as a family's first-line health care provider, similar to the old family doctor. Health management is now proactive, fostering healthy lifestyles and frequent checkups. Since 1983, the Exceptional Family Member Program (EFMP) has ensured that families with dependents requiring sustained exceptional care will be assigned proximate to appropriate medical facilities, thus better meeting their specific health needs as well as reducing hardships should the sponsor deploy. Recognizing the dispersal of modern military communities, TRICARE was established in 1994 as a managed health care program to preserve a choice of health care providers and to improve access to care. The early growing pains of TRICARE gave it considerable visibility among recurrent AFAP issues, but the system has improved significantly and complaints about it have reduced over time. Providing adequate health care remains a complicated, costly, and difficult challenge for the nation as a whole, and continued focus on it will be necessary within DOD as well.

The twenty years since 1983 have witnessed extraordinary progress along the lines envisioned by *The Army Family* white paper of that year. The Army Family Action Plan has elevated one issue after another for consideration at the highest

levels, and the majority of these have been happily resolved. Army communities have made numerous advances in caring for their families, with the accolades accorded child care being a case in point. Family Readiness Groups have extended this sense of effective community into the context of the deployable unit, and Army Family Team Building has reinforced that success Army-wide. The working mechanics and operational impact of family readiness are now featured in the curriculum of officer and NCO leadership training pro-

grams, reinforcing unit leaders' appreciation of family issues. Family empowerment is greatly facilitated by a number of programs with the self-reliant spouse and the confident family as ultimate objectives. The Army has adapted well in twenty years' time. General Wickham's vision of a partnership between the Army and the Army Family focusing upon wellness and sense of community has certainly taken hold. All that having been said, what is the current posture with respect to family issues?



*Mrs. Patty Shinseki presents a plaque to an AFAP volunteer.*



*Child and Youth Services supervises recreational activities.*



*An Army Family Action Plan conference*



*A homecoming*



*Army programs provide a quality education.*



*Family issues are important to retention.*



*The Army strives to build a sense of community.*

## THE ARMY FAMILY TODAY

The Army today consists of 485,000 active duty soldiers, 351,000 Army National Guardsmen, 207,000 Army Reservists, and 199,000 Department of the Army civilians. Of the service members, 14 percent are officers, 2 percent warrant officers, and 84 percent are enlisted. Of the soldiers on active duty, 69 percent of the officers, 84 percent of the warrant officers, and 49 percent of the enlisted are married—a marriage rate of 53 percent overall. Family members associated with the marriages include 251,000 spouses, 461,000 children, and 3,600 other relatives. Thus, family members continue to outnumber their active duty sponsors by a factor of one and a half to one. Of the spouses not themselves in uniform, over 30 percent work outside the home full-time, about 20 percent work part-time, and 20 percent characterize themselves as unemployed but actively seeking work. Career soldiers and family members continue to keep a wary eye on the treatment accorded the retirees, now numbering about 526,000. Clearly, the Army must continue to view family issues as an important institutional priority.

Although the Army has downsized significantly since 1983, considerable continuities remain in its demographics. The marriage rate remains at about 53 percent. It seems to have peaked in 1992 before declining to present levels. The number of family members associated with these marriages continues at about the same proportion, at about one and a half to one. Spousal employment remains about the same at 50 percent, although the numbers of those actively seeking work are somewhat higher. Spousal employment continues to be a major concern of our Army families. In their broadest outlines the demographics of the Army Family of today resemble those of *The Army Family* white paper of 1983.

There are, however, matters of detail wherein Army Family demographics have changed. The proportion of the Active Army that is female has almost doubled from 9 percent in 1982 to 15 percent today. This has brought an increase in the proportion of dual military marriages. Almost 11 percent of the Army's families feature both husband and wife in uniform, with 6 percent of the Army's uniformed husbands and 42 percent of its uniformed wives married to a service member. This raises important issues with respect to joint domicile assignments and family care planning should two uniformed parents deploy at the same time.

There has also been an increase in the proportion of sole parents, 3.7 percent of active duty officers and 8.4 percent of active duty enlisted. This has important implications for child care and youth services. Attention to this particular demographic has led the Army to realize that sole parenthood is dynamic rather than static. Individuals can become sole parents through death, divorce, desertion, separation, or extramarital liaison, and many—if not most—eventually marry out of that status. A significant fraction of the remainder migrate out of sole parenthood because custody or guardianship changes. Issues related to sole parenthood are not simply resolved by providing child care during working hours. The sole parent often needs support, counsel, friendship, and advice as he or she copes with personal relationships and transitions from one marital or parental status to another. Noncustodial parents in uniform face their own complex issues in attempting to be responsible parents. Single soldiers who characterize themselves as already in committed relationships also need counsel and advice. Research indicates that these couples take each other into account making career



decisions and need emotional support during periods of separation.

A few comments on the ethnicity of the Army may be in order. Today's Active Army is 58.7 percent white, 25.1 percent African American, 9.5 percent Hispanic, and 6.7 percent other, as compared to the general population ages seventeen through nineteen with 66.7 percent white, 14.5 percent African American, 13.7 percent Hispanic, and 5.1 percent other. It seems that young black men are half again more prone to military service than their white counterparts. Young black women are four times more likely to join military service than their white counterparts and now represent 41.7 percent of the Army's uniformed women. The proportion of Hispanics in the Army has increased as well, more than doubling from about 4 percent in 1982 to about 10 percent today. The Army is truly multicultural and multiracial, as is the Army Family.

One result of the emphasis placed on the Army Family since 1983 is that we have learned much about families from a scientific point of view, largely because of the white paper's mandate for further research and studies. More than two decades of Army Family research by CFSC, ARI, WRAIR, RAND Corporation, and others have resulted in more precise user-friendly demographic databases and an impressive body of scientific studies. These agencies have used interviews, surveys, sensing sessions, demographic analysis, and other means to study the subject, allowing for greatly improved precision. An example of such precision involves the survey method. The *2001 Survey of Army Families* established that 88 percent of the respondents with children had children five years and younger, whereas 68 percent had children from six to ten, 37 percent had children eleven to twelve, and 40 percent had children sixteen to eighteen. Clearly, the lion's share of the community's family demand

should have accommodated children twelve and under, and yet over half of the community's spouses were dissatisfied with the availability of affordable child care. Interestingly enough, of those who did have access to Army child care, the overwhelming majority were satisfied with it. Such a mix of demographic and survey data is now widely used within the Army to bring problem areas to light and to contribute to their resolution. Examples, in no particular order, of insights gained through surveys and sensing sessions with respect to our contemporary soldiers and family members include the following:

- Men want to be participating fathers.
- Women want parenting shared.
- Women want to share in achieving family financial security.
- The desire for quality parental and marital relationships remains high.
- Separations and relocations are major family stressors; family readiness and deployment assistance are vital.
- Families want leadership support all the time, not just during crises.
- Spouses give priority to employment assistance that advocates for them to potential employers, helps build skills, and provides referrals.
- Educational models must enforce minimum standards for Army children everywhere and must ameliorate the disruption of required moves.
- Soldiers and families without children recognize the importance of family programs as a life cycle service.
- Soldiers who perceive that family and personnel support programs are available when and where they need them report significantly higher overall satisfaction with Army life.
- Leadership support dramatically enhances family programs.

Survey data have also been mobilized to track progress with respect to key issues surfaced by the AFAP. Medical care is a

recurrent and tightly focused AFAP issue. A recent survey established that family member satisfaction with the overall quality of medical care increased from 57 percent to 62 percent and with its availability increased from 47 percent to 60 percent within a five-year period. Similarly, satisfaction with Army dental care—with particular recognition of Delta Dental care, which is available to family members—rose from 47 percent to 51 percent with respect to overall quality and from 37 percent to 49 percent with respect to availability. Such progress has been accompanied by a broadening of the personnel entitled to health coverage. In March 2003, for example, the Department of Defense shortened the activation time for guardsmen and reservists from 179 days to 30 days for their family members to qualify to be enrolled in TRICARE Prime and TRICARE Prime Remote. Families that reside with qualifying reservists and guardsmen are eligible to enroll in TRICARE Prime Remote. Such a broadening of programs must be accompanied by an energetic marketing campaign. The Exceptional Family Member Program offers another case in point, with 59,127 now enrolled representing 8.3 percent of all family members. The AFAP of today is considerably reinforced by a wealth of survey and other analytic literature as it identifies and addresses family issues.

The Family Readiness Groups of today find considerable utility in survey data. One survey established, for example, that two-thirds of the spouses polled foresaw only slight problems coping with deployments of six months or less, whereas less than a third were similarly confident with respect to deployments of more than a year. The problems they foresaw were also instructive: 93 percent thought they were doing well taking care of children's health, 89 percent taking care of children at home, 85 percent obtaining needed transporta-

tion, and 83 percent working at a paid job. Only 50 percent, on the other hand, thought they were doing similarly well handling their own personal loneliness. For the increasingly empowered families that the Family Readiness Groups are intended to nurture, the emotional needs of constituent members remain the most important issues addressed.

Attempts to understand the all-important relationship between deployment and retention yield similarly complex results. Contrary to popular opinion, the inclination to reenlist does not go down as days away from home go up nor does family support for such reenlistment. It may well be that purposeful, well-managed, reasonably brief deployments actually make retention go up. First Termers who have had a single deployment are more prone to reenlist than those who have never deployed, and their families support them in that decision. Problems emerge with back-to-back deployments without sufficient recovery time, poorly managed deployments attended by confusion and lack of notification, or circumstances wherein family support is perceived to have been ignored. The manner in which soldiers and families are treated seems far more important than days away from home. Today's Army seems to be doing well in this regard. In a recent survey a somewhat higher proportion of spouses (61 percent) wanted their soldiers to stay in for a career than soldiers intended to stay in for a career (60 percent). In the same survey yet another 18 percent of both spouses and sponsors favored reenlistment or retention beyond their present obligations. Thus, more than three-quarters of the respondents—both spouses and sponsors—favored further service.

An important caveat on this rosy view is the continuing need to satisfy the expectations of both soldiers and their spouses for self-improvement through additional education and progressive employment.



The proportion of college participation among soldiers has roughly doubled since 1985. By their second enlistment nearly 80 percent of Army enlisted soldiers have some college education. Some gain credit through college equivalencies for skills they have acquired in the service, and some take advantage of available educational benefits while on active duty. In many cases, educational options are a precondition for reenlistment. Those who consider themselves to be on career status foresee a follow-on career, and those intending to get out short of retirement foresee an even earlier transition into another line of work. The spouses of both generally have career aspirations of their own, and 69.4 percent of Army spouses now have at least some college education. In recognition of the cost of college education, the Army encourages states to modify in-state tuition rate policies in favor of soldiers and family members. Although half of spouses are employed, many others are discouraged in their search for work, and Army spouses have a higher unemployment rate overall than their civilian counterparts. One of the

most striking aspects of today's Army is the value its members attach to further education and to meaningful employment.

This discussion of the Army Family today describes considerable continuity, some change, extraordinary diversity, demonstrated dedication, and great expectations. The development and exploitation of surveys, demographics, and other means of analyses have enhanced the capability of such institutions as the Army Family Action Plan, Army Family Team Building, and Family Readiness Groups to fulfill their mandates. They have also demonstrated how phenomena, previously considered separate, have become interconnected. Such diverse issues as professional development, pay and compensation, health care, family member education, family programs, financial readiness, and recreation repeatedly impinge upon each other as surveys and analyses progress. This ripple effect of mutual relationships has led Chief of Staff General Eric K. Shinseki to adopt a holistic approach to Army Transformation that he chose to label Army Well-Being, which will be addressed later.

## **EMERGING CHALLENGES TO THE ARMY FAMILY**

The Army and its families have a long history of coping with crises and change. The near future promises to be no different in this regard. Although the future can never be precisely foreseen, we can reasonably anticipate some of the difficulties that we will face.

The operational tempo for forces deploying and redeploying shows no sign of letting up soon and may well in fact increase. Recent campaigns in Afghanistan and Iraq have underscored the absolute necessity of "having boots on the ground" to achieve decisive results in war and to secure the peace. Even forces forward

deployed in Europe and Northeast Asia have found themselves further deployed elsewhere to respond to short-notice contingencies. An extended United States military presence in Central Asia and the Middle East seems likely, both to bring current operations in Afghanistan and Iraq to closure and to further persevere in the War on Terrorism. The War on Terrorism is truly global, raising the possibility of future military campaigns in distant places amid the broader sweep of diplomatic, economic, and humanitarian activities. Whether related to international terrorism or not, peacekeeping activities also seem

likely to require a substantial American presence for some time to come. All that we can foresee suggests that the Army Family will continue to cope with an operational tempo at least as challenging as it has been through the last several years.

Future overseas deployments seem far more likely to be unaccompanied rather than accompanied by family. This will result from the brevity of deployments for individuals and units, the austere environments into which units are likely to deploy, and the short notice such interventions are likely to provide. Coupled with the aspirations of most spouses to find meaningful work and the desirability of stabilizing children with respect to their educational options, the expeditionary nature of foreseeable future operations recommends further thoughtful attention to home stationing. Deploying soldiers are going to want to leave their families behind in robust communities that can readily meet their needs. Due attention must be paid to the full range of community capabilities and services—employment opportunities; child care; youth supervision; housing; medical care; religious support; educational facilities; Morale, Welfare, and Recreation (MWR) programs; Family Readiness Groups; quality rear detachments; and attentive leadership—if Army families are going to survive and even thrive when facing the recurrent operational separations that seem to be in their future.

Housing offers perhaps as strong an argument for thoughtful home stationing as spousal employment. The *2001 Survey of Army Families* established that 62 percent of spouses were satisfied with their housing. These included 51 percent of those renting off post, 54 percent of those in on-post government housing, 56 percent of those in off-post government housing, and 92 percent of those owning their own home off post. Clearly, those who owned their

own home were far more satisfied than those in any other category. Home ownership implies stability; soldiers want a certain confidence they will be in a place for a while before committing to buying a home. Home ownership can be a wonderful investment, given that a soldier is able to receive and invest into his home a housing allowance he would not be in receipt of if living in government housing. This prospect will be considerably reinforced by the current DOD initiative to reduce locally averaged out-of-pocket housing expenses to zero by 2005.

Modern communications technology will prove to be both a blessing and a curse to families in future deployments. On the plus side, ever-expanding digital capabilities have radically improved the ability of loved ones to stay in touch over great distances and through difficult circumstances. E-mails, cellular phones, digital photography, and the ever-present equipment to support them have multiplied the connectivity of Army families several times over. Virtual Family Readiness practices are now being used by units challenged by distances. Youth technology labs provide the equipment and the environment to encourage youths and teens to communicate with deployed parents. On the debit side, minute-by-minute television coverage from embedded newsmen may prove harrowing to one who has loved ones involved on the battlefield. One troubling vignette from Operation IRAQI FREEDOM concerned an understandably anxious mother who could not take her eyes off the television coverage portraying her son's unit, all the way up to the moment the young man was killed. She so wished that there had been a way to get away from the unrelenting tension. Younger children can have significant problems with such coverage as well. Studies indicate that preschoolers will react to particularly frightening film footage as if it happened next door rather

than far away and that repetitions of such imagery will cause them to believe the horrific events depicted have happened that many more times rather than that they happened once and are simply being replayed. Family Readiness Groups will have to cope with such downsides of emerging communications technology as well as with its obvious advantages.

A further issue emerging for Family Readiness Groups is the increasingly diverse organizational source of the members of deploying formations. Since Task Force Hawk deployed to support the Kosovo operation in 1999, it has become increasingly apparent that the unique demands of contemporary operations will often require specially designed task forces drawn from numerous units rather than the orderly deployment of a single unit. Joint and combined headquarters and the like are going to be even more diverse in the specialties they draw on. Recent deployments have stood up these ad hoc organizations on short notice, and rotational schemes complicate the picture with a shuffling to and fro of constituent personnel. If there is a framework unit, it can suddenly find itself responsible for family members from organizations with which it has had no previous relationship. Conversely, those organizations may well have only a few personnel deployed out of a much larger number. Family members from such a unit may well feel overlooked if their loved ones represent too few soldiers to be readily visible. This sense of isolation can increase in the case of individual guardsmen or reservists who are geographically challenged by the distances that separate their families from the Army communities supporting the deployment. We do not yet have a fully developed model to cope with such diverse and complex units, but we do need one.

Diverse organizational provenance can become even more complicated when deploying individuals are not themselves

soldiers. If one accepts that a commander is responsible for all that happens and fails to happen within his command, then it follows that he is similarly responsible for the well-being of all of those whose activities he directs. Their family issues become his family issues. A striking manifestation of this recently has been the increased presence of contractors. In earlier times contractors were minimally present to execute some discrete function or another. We now rely upon them so heavily that they are integral to the Army work force—and thus to the Army Family. This trend may continue as we endeavor to craft the work force to meet growing demands that support, but do not fall into, our core competencies. This relationship came home strikingly when a number of contractors were killed during the 11 September 2001 attack on the Pentagon and again when a number were killed during operations in Southwest Asia. In both cases the Army rightly came forward to offer the survivors assistance on behalf of these fallen comrades. Future commanders may well find themselves responsible for a mix of DOD civilians, contractors, interagency representatives, nongovernmental organizations, and allies as well as for the soldiers with whom they deploy.

Increased operational tempo in both the Active Component and Reserve Component and the increasing complexity of the expeditionary operations involved will challenge Family Readiness Groups as never before. Soldier and family support will require even further visibility throughout the Army so that no one is left behind. In units with active Family Readiness Groups about two-thirds of spouses actively participate and about one-fourth serve as group leaders or in positions of responsibility. Reasons for nonparticipation include not having heard about meetings, lack of time, and a desire to keep military life and personal life separate. Understandably, when crisis erupts the non-

participants are characteristically the least prepared and generally have the most difficulties. Fortunately, the spouses who have been participating have generally been sufficient in number to pull an organization through tough times. CFSC and ARI have produced Family Readiness Group manuals that are helpful for this purpose. However, as we have seen, the neat paradigm for integral unit deployment is increasingly giving way to more complex improvisational configurations. Deployable units are far more ready than the Army at large. Almost half of all Army families serve in organizations wherein there is no active Family Readiness Group, yet their sponsors are increasingly likely to deploy as individual augmentees. This is not to mention the nonsoldiers who may well join them and are likely to have no idea what a Family Readiness Group is or does.

Army Family Team Building is designed to complement the Family Readiness Groups and to deepen the contri-

bution they can make, but it is of little use to those who do not attend. Those who do attend give it high marks for increasing familiarity with community resources, helping one feel part of the Army, increasing confidence with respect to challenges, and increasing preparedness and self-sufficiency. Those who have not attended claim they do not have the time, do not feel the need, or do not find the times and hours of training convenient. Units and organizations without Family Readiness Groups are unlikely to have seen much in the way of AFTB attendance. As a result, we have a force wherein about half of the spouses consider their sponsor to be deployable and about half do not. The reality is that, in an age of high operational tempo, downsizing, complex deployment, and heavy reliance on individual augmentation, all sponsors are potentially deployable. Consistent leadership emphasis and support at all levels will greatly enhance family adjustment to the emerging challenges of deployment in a new era.

## THOUGHTS ON THE WAY AHEAD

The United States Army and the Army Family have together made great strides since 1983, but much remains to be done. The philosophical commitments to partnership, family wellness, and sense of community envisioned in the white paper of 1983 are now generally accepted. Ever increased merging of the Active Army, Army National Guard, Army Reserve, and the Army civilian work force creates further challenges and opportunities. The Army Family Action Plan has proven to be a highly effective means for surfacing issues and carrying them through to resolution. It should continue to do so. Family Readiness Groups, considerably enhanced by other support systems, have ably carried their organizations through deployments of

diverse challenge and scope. A challenge for the future is to expand their concepts into a seamless family assistance system that serves a diverse and geographically dispersed Army population, all of whom are deployment prone. Initiatives that started out as mere acronyms—ACS, CHAMPUS, CFSC, CYS, TRICARE, SETS, SOLD, and EFMP, for example—have become household words with robust meanings to Army families across the globe. Extensive studies and analyses by the Army Research Institute and others have refined our understanding of the pertinent issues and have enabled us to better address them. A firm foundation has now been built, and substantial momentum for further growth exists as well.



All soldiers must consider themselves deployable, and every Army Family must envision the prospective deployment of a loved one. The deployment psychology common to most tactical units must pervade the Army as a whole. Units must now anticipate the assignment of numerous augmentees, and organizations must envision the prospect of augmenting others. It is imperative that adequate provision be made for the families of deployed soldiers, Department of the Army civilians, and contractors in the Army's employ. The Army's human issues are too complex, diverse, and intertwined to be readily resolved by stovepipe solutions focusing on one particular issue or another; they must be transformed through a holistic integration involving the Active Army, the Army National Guard, and the Army Reserve together. To this purpose, in 1999 the Chief of Staff directed a comprehensive study of Army Well-Being, defined as the personal—physical, material, mental, and spiritual—state of soldiers (active, reserve, guard, retirees, and veterans), civilians, and their families that contribute to their preparedness to perform and support the Army's mission. The Army Team was defined to include the family members of soldiers and civilians as well as veterans and retirees. By 2003 the Army was exploring the concept of a Human Resources Command collectively responsible for human relations, soldier and family support, well-being lab sites, pay and compensation, and the civilian personnel program. The Deputy Chief of Staff, G-1, became the staff proponent for Well-Being. Well-Being is the human dimension of Army Transformation. It creates a strategic direction and focused integration of programs designed to support all constituency groups within the Army. In doing so Well-Being will measure, assess, integrate, and establish clear and concise goals that will fulfill the strategic needs of the Army and its people. This holistic

approach ties into a specific Well-Being philosophy as follows:

Army Well-Being is a Strategic Human Capital Management approach that seeks to influence personnel readiness by providing an environment in which its members are self-reliant, confident in the Army's commitment to them and their families, and focused on mission accomplishment. Such an approach is ultimately focused on the institutional objective of personnel readiness through recruiting, retention, and development, but recognizes those institutional objectives can be accomplished only if the needs and aspirations of its people are understood and met. According to the concept of Well-Being, each person exists in four dimensions or states of being—physical, material, mental, and spiritual. Additionally, people are constantly striving to fulfill four common aspirations—to serve, to live, to connect, and to grow. When unsuccessful in achieving fulfillment in either the dimensions or aspirations, people take action to increase their fulfillment. For the Army to be successful, it must provide the mechanism by which such fulfillment is attained by simultaneously supporting organizational objectives. Military life can be harsh and demanding, yet thousands volunteer and reenlist annually. Over the years, the Army has found ways to offset the demands of military life by offering fulfillment in areas important to its members. Many of the efforts to offset the sacrifice of service require few resources, but must be constantly nurtured lest they fail to keep pace with the changing expectations of our people. Caring leadership, values, camaraderie, traditions, sense of purpose, and a feeling of self-worth are all-powerful forces that can help to overcome the rigors of military life.

The Well-Being philosophy lays out four compelling strategic goals by which Well-Being is personalized for our people:

an opportunity for service; a competitive standard of living; a unique culture, sense of community, and record of accomplishment that engenders intense pride and sense of belonging; and an environment that allows individuals to enrich their personal life by achieving their individual aspirations. These goals have been further restated as To Live, To Grow, To Connect, and To Serve. Each goal is broken down into a series of categories and functions. The resultant Well-Being management processes provide mechanisms whereby the Army will synchronize a Well-Being Action Plan, Well-Being Status Report, Well-Being Resource Crosswalk, Strategic Communications Plan, and Strategic Readiness System within the overall Army Transformation Campaign Plan. The concept of Well-Being combines the principles of human behavioral science, elements of the Army's strategic planning process, and result-oriented performance measures. Well-Being does not replace existing programs but does increase coordination, effectiveness, and efficiency.

The execution of the Well-Being Action Plan must be proactive to be effective with respect to the Army Family. As successful as the Army Family Action Plan and Family Readiness Groups have been with respect to resolving issues, they often have been reactive in dealing with crises once identified. The Well-Being Action Plan envisions an anticipatory posture. Its strategy will include shifting of services toward a prevention model, cross-training of agency staffs, installation integrated planning systems, support staff connectivity with unit leadership, focus on the community as a whole, accountability, guidance to commanders

with respect to expectations, and appropriate funding for research and analysis. This strategy will refine, organize, and follow up on precedents already set for success achieved thus far.

Well-Being encompasses and unites the Army at large, seamlessly binding the Reserve and Active Components, geographically isolated communities, and communities inside and outside installation gates. It focuses on the overall population, addressing not only the small percentage who account for the greatest incidence of personal and family dysfunction, but also the larger group of individuals and families who experience few problems of this nature and are motivated by their interests, ambitions, and aspirations. By anticipating and providing proactive prevention and intervention methods, Well-Being increases skills and resiliency and strengthens at-risk individuals and families. By providing satisfactory standards of living, opportunities to become active partners in vibrant communities, and outlets to satisfy interests and aspirations, Well-Being gives constituents reasons to like being members of the Army community, to feel connected and committed to it as a way of life, and to take pride in service. Partnerships among diverse functional areas, disciplines, and agencies; individuals and groups; and constituents and leaders are the keys that make Well-Being much greater than the sum of its parts. The collaborative efforts create an environment and culture that capitalize on and celebrate the human dimension, embrace individuals and families for their potential and commitment, and create a strong linkage to readiness and retention.

## **SUMMARY**

During its 227 years of service the Army's relationship with its families has

moved from neglect to concern and from a heavy reliance upon the volunteer,

piecemeal and ad hoc, to an increasing reliance upon formal and federally funded policies, organizations, and systems. Army families, in turn, have accepted a relationship recognizing their responsibilities toward the Army. *The Army Family* white paper of 1983 was a watershed event in these regards, both because of the vision and goals with respect to partnership that it professed and because of the mechanisms for change it inspired, such as the Community and Family Support Center and the Army Family Action Plan. It also made provision for invaluable feedback and analysis by appropriately focused and funded research and research agencies.

Although much has been accomplished, much remains to be done. The Army can proudly point to a model child care system, robust Army Family Team Building, demonstrably capable Family Readiness Groups, and many other

advances as proof of progress during twenty years of consistent effort. However, the Army still loses or alienates too many soldiers because of family circumstances. Such issues as recurrent family separations, frequent relocations, and employment challenges for spouses who want to work outside the home remain topical. Proposals with respect to home basing, improved management of deployments, and preventing rather than fixing many family problems remain to be evaluated.

The Army's senior leaders are committed to furthering the progress of the past twenty years. Systems that are working well will continue to be reinforced. Further research and studies will be designed and funded. Perhaps most important, the Well-Being Action Plan is designed, and agencies executing it are empowered to take on Army Family issues in a manner that is pervasive, holistic, and proactive. This is our way forward into the twenty-first century.





# GLOSSARY

## **ACS (Army Community Service):**

Established in 1965, it assists commanders in maintaining individual, family, and community readiness by developing, coordinating, and delivering services that promote self-reliance, resiliency, and stability during times of war and peace. ACS Centers provide a wide range of services to ensure families and soldiers are ready for deployment at any time. Included in the programs and services offered by ACS are the following:

- Mobilization and Deployment Family Readiness
- Family Advocacy Program (FAP)
- Exceptional Family Member Program (EFMP)
- Employment Readiness
- Financial Readiness Program
- Relocation Readiness Program
- Volunteer Program
- Army Emergency Relief
- Operation READY materials
- Army Family Team Building
- Army Family Action Plan
- Spouse Orientation and Leadership Development (SOLD)
- Integrated Service Delivery
- Community Integration Council
- Unit Service Coordinator

**AER (Army Emergency Relief):** A nonprofit organization that provides emergency loans to soldiers in crisis, generally for food or travel but also for vehicle repairs, insurance, rent, or utility bills. AER also provides some educational financial assistance.

**AFAP (Army Family Action Plan):** It provides the opportunity for Army constituents to elevate standard-of-living concerns and ideas for improvements to leadership on a regular, on-going basis. In operation since 1984, AFAP is implemented via a series of Army-wide conferences through which issues that are submitted from Army communities are evaluated by constituent delegates who recommend the most important for resolution. AFAP provides commanders real-time information and enables them to act quickly to keep pace with a changing world. In so doing, it helps leaders protect and improve benefits, entitlements, and the overall Army and Department of Defense standard of living.

**AFTB (Army Family Team Building):** It emerged in 1994 as a result of lessons learned from Operations DESERT STORM and SHIELD. AFTB's mission is to educate members of the military community, particularly spouses, in developing skills and encouraging behaviors that strengthen self-reliance, promote retention, and enhance readiness. AFTB fosters individual and family readiness through a series of sequential, progressive training modules that provide information on the Army, systems and opportunities within the Army, and skills to support emerging and senior-level volunteer leaders.

**ARI (Army Research Institute for the Behavioral and Social Sciences):** It is the primary Army laboratory conducting research, studies, and analyses focused on the human dimension of the Army—the

soldier. In addition to conducting personnel research and development, ARI provides timely, scientific information for Army leaders via attitude and opinion surveys and analyses of Army occupations.

**Army Family Research and Evaluation Program:** It is sponsored by CFSC to generate scientific data needed for informed program and resource decisions for MWR and family support programs. The program is executed primarily by three research agencies: U.S. Army Research Institute for the Behavioral and Social Sciences, Arroyo Center of the RAND Corporation (RAND), and the Walter Reed Army Institute of Research (WRAIR). The research component collects and develops a sound, scientific body of knowledge about the relationships among soldier, family, community characteristics, leadership behaviors, readiness, retention, demographics, and family wellness. The evaluation component enhances common wisdom, expert opinion, and anecdotes with a solid, scientific database used to prioritize programs in terms of impacts on readiness and retention of quality soldiers, identify new and emerging needs, provide a clearer picture of how soldier and family needs should be addressed and how programs should be developed or adjusted, and allow comparisons between Army communities and civilian populations.

**BSRF (Building Strong and Ready Families):** It is a command program coordinated by chaplains and executed at the brigade level. The target population is first-term married or newly married soldiers to assist in their transition to marriage and the military culture. BSRF includes workshops and an overnight retreat. Couples learn marriage education skills such as communication, conflict management, problem solving, and strategies to strengthen their bonds as a couple. The

program integrates health promotion and addresses other family and community support programs.

**CFSC (Community and Family Support Center):** It is a Field Operating Agency of the Assistant Chief of Staff for Installation Management. The mission of the CFSC is to develop and formulate plans, strategies, and standards to achieve "First Choice" Morale, Welfare, and Recreation (MWR) programs, support commanders in the implementation of the Army's MWR programs, and operate and manage assigned MWR activities. Generally, in accomplishing this mission the CFSC will provide a preeminent organization that achieves and sustains "First Choice" programs, which contribute significantly to the Army's Well-Being. (CFSC 10-1, Organizations and Functions, 1 August 2001.)

**CHAMPUS (Civilian Health and Medical Program of the Uniformed Services):** A program of medical benefits provided under public law to specified categories of individuals who are qualified for these benefits by virtue of their relationship to one of the seven uniformed services. It is not an insurance program, but rather a method of accessing needed health services for military beneficiaries from the civilian sector.

**Community Integration Council:** The Community Integration Council, composed of representatives from diverse functional areas and disciplines, serves as the oversight body within the Integrated Service Delivery (ISD), providing efficient and effective multifunctional and multidisciplinary utilization of resources to support overall community well-being.

**CYS (Child and Youth Services):** The consolidation of Child Development

Services and Youth Services into Child and Youth Services began in 1997. The change to a CYS configuration gains operational efficiencies and predictability of child and youth services across the Army. The Army CYS organization is composed of four delivery systems: Child Development Services (CDS), School-Age Services (SAS), Youth Services (YS), and CYS Liaison, Education, and Outreach Services (CLEOS).

- **CDS**—Child Development Services is composed of facility-based care in Child Development Centers (CDCs) and home-based care in a Family Child Care (FCC) program that offers child care in certified government quarters. Full-day and part-day care for infants, toddlers, pre-school, and kindergarten is provided as well as hourly and extended hours and long-term care.

- **SAS**—School-Age Services offers before and after school programs, full-day programs during school vacations and closures, and summer camp for children generally in the 1st to 5th grades.

- **YS**—Youth Services offers regularly scheduled programming and occasional use options for middle school youth and teens.

- **CLEOS**—CYS Liaison, Education, and Outreach Services provides central registration, resource and referral, instructional, and outreach care options.

**DODEA (Department of Defense Education Activity):** It operates 224 schools in seven states and fourteen countries, with over 106,000 students. The quality of education available to children of military parents is a recurrent AFAP issue. DODEA plays a central role in this regard overseas and an important role within CONUS.

**EFMP (Exceptional Family Member Program):** A mandatory enrollment program that works with other military and

civilian agencies to provide comprehensive and coordinated community support, housing, education, medical, and personnel services to families with special needs members. Active duty soldiers with exceptional family members who require specialized services enroll in EFMP so that the availability of services to meet the special needs can be considered in the military personnel assignment process.

**Employment Readiness:** It provides information, referral, and training workshops in the areas of employment, education, skills training, transition, and volunteer opportunities. The program assists spouses and family members who are part of the mobile military lifestyle in obtaining employment and in maintaining careers even as they relocate on a continuing basis.

**Family Life Chaplain Program:** The Army trains twelve selected chaplains a year at two Family Life Chaplain Training Centers. The fifteen-month training model focuses on marriage and family counseling and consists of graduate school, a counseling practicum, and pastoral integration. Graduates in turn train unit and installation chaplains and chaplain assistants in pastoral counseling, family life ministry, and crisis intervention.

**FAP (Family Advocacy Program):** It provides resources for commanders and families to resolve family problems and enhance individual, couple, and family functioning. The program emphasizes prevention, education, prompt reporting, investigation, intervention, and treatment. FAP provides seminars for units covering a variety of topics to include conflict resolution, communication skills, stress management, parent education, respite care, foster care, relationship support, and safety education.

**Financial Readiness Program:** It provides services to assist soldiers and families in living within their means and in investing for the future. Emphasis is placed on money management, proper use of credit, financial planning for deployment, transition and relocation, insurance, and check-writing principles. Through the debt liquidation program soldiers are provided guidance to work with their creditors to regain stable and manageable financial positions. Financial Readiness also educates soldiers on their rights as consumers. The Financial Readiness Program was initially referred to as the Consumer Affairs and Financial Assistance Program (CAFAP).

**FRG (Family Readiness Group):** An organization of family members, volunteers, soldiers, and civilian employees who together provide an avenue of mutual support and assistance and a communication network among the members, the chain of command, and community resources. FRGs promote self-sufficiency, resiliency, and stability for family members during times of peace and war. Family Readiness Groups were initially referred to as Family Support Groups (FSGs).

**ISD (Integrated Service Delivery):** It ensures integration of well-being functions and services by systematically evaluating, redesigning, or establishing community partnerships that contribute to the strength of the mission and family readiness.

**MHPI (Military Housing Privatization Initiative):** The act was passed by Congress in 1996 and later extended until December 2014. These authorities allow the military services to leverage appropriated housing funds (BAH) and on-post housing assets to attract private-sector capital and expertise to operate, manage, maintain, and build housing.

**Mobilization and Deployment Family Readiness:** It supports commanders of Active and Reserve Component forces and emergency essential civilians during predeployment, mobilization, deployment, homecoming, and stability and support operations, including mass casualties, evacuation, and natural disasters. Services offered include training rear detachment personnel, Family Readiness Group leaders, and designated family sponsors; giving predeployment briefings; activating and operating Family Assistance Centers; and assisting single or dual military couples and dual emergency-essential civilian couples in developing family care plans.

**MWR (Morale, Welfare, and Recreation):** A quality-of-life program that directly supports readiness by providing a variety of community, soldier, and family support activities and services. These include social, fitness, recreational, educational, and other activities that enhance community life, foster soldier and unit readiness, promote mental and physical fitness, and generally provide a working and living environment that attracts and retains quality soldiers.

**Operation READY (Resources for Educating About Deployment and You):** A series of training modules, videotapes, and resource books for ACS staff to use in training and informing soldiers and families, commanders, Family Assistance Center staff, Family Readiness Group leaders, and other stakeholders in family readiness about understanding, planning, and coping with deployments, to include the dynamics of homecoming and reunion.

**PCM (Primary Care Manager):** A professional provider assigned to be the main health care provider for an individual or family. Based on the age and gender of



the individual, a PCM may be an internist, family practitioner, pediatrician, general practitioner, gynecologist, physician's assistant, or nurse practitioner. The PCM may be a civilian network provider or a military provider, depending on the status of the patient and the level and location of TRICARE enrollment.

**RCI (Residential Communities Initiative):** This is the Army version of the 1996 Military Housing Privatization Initiative passed by Congress. The program allows a soldier's BAH to be paid to a partnership between the installation and a private business for the purpose of revitalizing on-post housing and reducing the housing deficit.

**Relocation Readiness Program:** It provides services designed to train and prepare soldiers and families to make well-informed plans that result in successful relocations. Education, training, and information services include overseas orientations, cross-cultural training, pre- and post-move briefings, relocation counseling, and comprehensive information via the Standard Installation Topic Exchange Service (SITES), an automated database of all major military installations. Household items are available through the Lending Closet, and sponsor training is provided to units, program trainers, and sponsors. The Relocation Readiness Program was initially referred to as the Relocation Assistance Program (RAP).

**SAF (Survey of Army Families):** An Army-wide survey conducted about every four years to examine aspects of well-being important to Army families. SAFs I (1987), II (1992), III (1995), and IV (2001) assisted CFSC and the Army Staff to do the following:

(1) Assess the status of Army Family Action Plan issues, (2) Assess family mem-

ber attitudes about the Army, (3) Identify new and emerging concerns, (4) Supplement other evaluation and research efforts, and (5) Assess the impact of deployments and separations.

**SETS (Secondary Education Transition Study):** A 1999 study conducted at nine Army communities and installations to understand the effects of mobility during high school and provide recommendations to improve transition predictability for mobile high school students. The SETS report, executive summary, parent guidebook, and information outlining how other districts can join in an MOA were released in July 2001. The SETS materials are available through distribution by the Military Family Resource Center via e-mail request.

**SIF (Soldier Issue Forum):** An informal forum convened from 1989–1994 for senior Army Staff leaders to discuss soldier issues candidly and one-on-one with the CSA. Members of the SIF included the Vice Chief of Staff, the Director of the Army Staff, the Assistant Chief of Staff for Installation and Environment Management, the Deputy Chief of Staff for Personnel, The Judge Advocate General, the Chief of Chaplains, the Director of Management, the Sergeant Major of the Army, The Surgeon General, the Inspector General, the Chief of Engineers, the Chief of Public Affairs, the Director of Programs and Evaluation, and the Commander, CFSC. The SIF encouraged timely, "directed telescope" focus on issues that affect readiness, training, and quality of life. During five years SIF members discussed over 120 issues and positively resolved 40 percent of them.

**SOLD (Spouse Orientation and Leadership Development):** It leverages existing services, systems, and internet

technologies to connect Army constituents, especially spouses, to the Army and its unique and vibrant culture. By involving spouses in affirmative opportunities and partnerships from the time they become part of the Army and throughout their Army experience, SOLD significantly expands and enhances the reciprocity between spouses and the Army. The web-based SOLD Personal Development Process contains referral sources of service and information, a personal portfolio to record an individual's training and experience, and the opportunity to contact ambassadors, lifeline coaches, and mentors to acquire information, advice, and guidance from experienced and knowledgeable individuals.

**TRICARE:** The DOD's worldwide health care program for active duty and retired uniformed services members and their families. It consists of three major categories and a special program for retirees over the age of 65.

a) **TRICARE Prime:** a managed care option similar to a civilian HMO. Active duty service members are required to enroll, and this is the only option that requires enrollment. Active duty family members, retirees, and their family members are encouraged, but not required, to enroll. There are no deductible and no fees, cost shares, or co-pays for active duty and their family members.

b) **TRICARE Extra:** a preferred provider option (PPO). Beneficiaries choose a doctor, hospital, or other medical provider within the TRICARE network. There are a deductible and a 15 percent cost share.

c) **TRICARE Standard:** a fee-for-service option. Beneficiaries have the flexibility to see any authorized provider of choice. This is the most expensive plan,

requiring a deductible, a 20 percent cost share for active duty family members, 25 percent for retirees and family members, and a co-pay.

d) **TRICARE for Life:** a special program for beneficiaries aged 65 and over who are eligible for Medicare Part A and are enrolled in Medicare Part B. This program is used in conjunction with either TRICARE Extra or Standard, with Medicare paying a portion of the health care costs.

**USC (Unit Service Coordinator):** Unit Service Coordinators are ACS staff members placed directly in units to provide information, awareness, training, and services. The staff members have sufficient general knowledge to respond to diverse inquiries and requests for assistance.

**Volunteer Program:** It manages, supports, and encourages Army-wide volunteerism, resulting in important benefits for the Army and its volunteers. Volunteering provides the opportunity to serve, to meet challenges, to learn about the Army and the community, to acquire new skills, to obtain work experience, to network, to build friendships, and to become a cohesive part of the community.

**WRAIR (Walter Reed Army Institute of Research):** It is the largest, most diverse, and oldest laboratory in the U.S. Army Medical Research and Materiel Command. It conducts research on a range of militarily relevant issues, including naturally occurring infectious diseases, combat casualty care, operational health hazards, and medical defense against biological and chemical weapons. WRAIR scientists enhance the understanding of military operations and environments, including the stresses and exposures troops encounter and the performance requirements of a deployed military force.

# **APPENDIX 1**

## **Army Family Action Plan (AFAP) Issues**

(Status as of 9 June 2003)

## ARMY FAMILY ACTION PLAN ISSUES

| Issue                                | Issue #<br>(Year) | Recommendation  |
|--------------------------------------|-------------------|---|
| Counseling<br>(CONUS)                | 474 (2000)        | Increase the number of professional marriage and family counselors in CONUS under-served locations.   |
| Counseling (RC)                      | 465 (1999)        | Allow soldiers and family members up to one year post-mobilization to identify the need for service-connected counseling problems.  |
| Counseling<br>(Remote Areas)         | 522 (2002)        | Provide and fund licensed marriage and family (M&F) counseling services in remote areas.  |
| Dental<br>(Insurance Costs)          | 509 (2002)        | <ol style="list-style-type: none"> <li>1. Reduce member cost share to 20% for dental services not already covered at 100% in the TRICARE active duty and retiree dental programs.</li> <li>2. Increase maximum annual benefit to \$1,500 for active duty and retirees.</li> </ol>                                     |
| Dental<br>(Preauthorizations)        | 533 (2002)        | <ol style="list-style-type: none"> <li>1. Provide response to soldier and BCAC within 7 days of receipt of request for civilian dental care for service members.</li> <li>2. Increase staffing of Military Medical Support Office (MMSO) to improve efficiency in processing claims and preauthorizations.</li> </ol> |
| EFMP (Staffing &<br>Standardization) | 220 (1993)        | <ol style="list-style-type: none"> <li>1. Address EFMP staffing shortages and unfilled positions.</li> <li>2. Standardize EFMP enrollment forms among the military services.</li> </ol>   |
| EFMP<br>(Respite Care)               | 501 (2002)        | Authorize use of and provide OMA funds to either pay or subsidize respite care for EFMP families.   |
| Employment<br>(Effects of A76)       | 518 (2002)        | Amend the Federal Acquisition Regulation (FAR 52.207-3) to include Military Spouse Preference (MSP).  |



Progress Toward Resolution

Remaining Requirements

1. Shortages identified at 9 installations, requiring 10 marriage/family therapists. FY03 contract (Healthfax) for 10 therapists (\$750K/yr) funded by MEDCOM. As of Mar 03, 7 of 10 therapists have been hired. Army MEDCOM intends to fund FY04 contract with FY03 end-of-year resources.
2. MEDCOM is monitoring Army Behavioral Health Initiative and Employee Assistance Program for impact on marriage/family counseling services.

Army Funding

1. Army G-3 Operations Directorate's Operations Division is developing a Deployment Cycle Support Program (DCSP).
2. The Well-Being Survey of Reserve Components (FY03) demonstrates positive response to possible chaplain/family assistance workshops.

Army Policy

1. MEDCOM is assessing the feasibility of remote M&F therapy services.
2. USAMEDCOM will monitor status of the following: a) G-1 multidisciplinary study on Army well-being, including a behavioral health initiative designed to create a cohesive program for provision of social/related services, and b) G-3 exploration of an employee assistance program modeled after a program already serving several federal agencies.

DOD Policy

1. TRICARE Management Activity (TMA) does not support lowering cost shares because it would increase premiums—active duty (AD) would assume 40% of the increase and retirees, 100%.
2. New retiree dental plan contract increases both the maximum annual and orthodontic benefit to \$1,200.
3. Contract recompetitions: 2005 for AD and 2007 for retirees.

DOD Policy  
(no additional action planned)

1. In FY02, MMSO implemented a new automation system, added a dentist staff member, and reduced processing time to 5 days for 95% of initial requests for civilian dental care.
2. OTSG will monitor MMSO's progress deploying Health Insurance Portability and Accountability Act (HIPPA) compliant technology to receive and send preauthorization information electronically. E-mail is not a secure means for transmission of personal data under HIPPA.

DOD Systems Development

1. CFSC is developing a staffing matrix determining requirements for EFMP and other ACS programs.
2. DOD developed a standardized medical and education form (DD Form 2792) to coordinate overseas assignments of sponsors with EFMs. The forms are being revised to meet HIPPA compliance. Change to AR 608-75 will allow Army to use the content of the DD form but retain its own disclosure statement.

Army Regulation

1. CFSC is determining the appropriate legislative avenue.
2. CFSC developed a UFR for the FY05-09 POM (\$2.3M annually) for respite care for 2% of the 60,000 EFM enrollees (1,200 EFMs) for a maximum of 16 hrs. per month at a rate of \$10/hr.

Legislation

1. The Military Spouse Preference Program only applies to DOD.
2. Only federal employees adversely affected by a decision to convert to contract or Intergovernmental Support Performance have Right of First Refusal. OSD does not support extending the right to others.

Action outside Army or DOD purview  
(Federal Reg)

## ARMY FAMILY ACTION PLAN ISSUES (CONT.)

| Issue  | Issue #<br>(Year) | Recommendation   |
|--|-------------------|--|
| Employment<br>(Opportunities)                  | 38 (1989)         | <ol style="list-style-type: none"> <li>1. Increase federal employment opportunities for active duty family members who do not have prior federal service.</li> <li>2. Allow family members hired on Excepted Appointments to attain career-conditional status.</li> </ol>  |
| Employment<br>(NAF Comp Time)                  | 479 (2000)        | Authorize compensatory time for all full-time NAF employees. (Nonexempt employees are covered by the Fair Labor Standards Act and must receive overtime instead of comp time.)   |
| Employment (Pay<br>Comparability)              | 499 (2002)        | Amend the Federal Employees Pay Comparability Act (FEPCA) to establish a minimum 5% general increase annually until pay comparability is achieved.   |
| Employment<br>(Unemployment<br>Compensation)   | 524 (2002)        | Enact legislation that will direct States to establish relocation during PCS moves as an involuntary separation, thereby granting unemployment compensation to all qualified recipients.   |
| Entitlements<br>(Retirement Info)              | 492 (2002)        | <ol style="list-style-type: none"> <li>1. Implement retirement benefits information programs at intervals during a soldier's career.</li> <li>2. Publish Army Retirement Services website address biannually on LES for AD and RC.</li> <li>3. Inform spouses of retirement benefits through family programs.</li> </ol> |
| Entitlements<br>(Career<br>Recognition)        | 494 (2002)        | Implement a tiered recognition package:<br>-at 10 years: warm-up suit in Army colors,<br>-at 15 years: ten days nonchargeable leave, and<br>-at retirement: commemorative timepiece.   |
| Entitlements<br>(Incapacitation Pay<br>for RC) | 232 (1989)        | Improve timeliness of Incapacitation Pay procedures.   |
| Entitlements<br>(Dependency<br>Determination)  | 458 (1999)        | Establish the date of marriage, adoption, or other legal action as the authorization date to establish dependent status for travel and transportation entitlements.  |

| Progress Toward Resolution   | Remaining Requirements                                   |
|--|--|
| <ol style="list-style-type: none"> <li>1. Since 1985, a number of civil service reform initiatives have stalled in Congress or failed to gain union support.</li> <li>2. Army is working with OSD to prepare legislation based on demonstration project best practices. Army is also working with MEDCOM to test its spouse and family member referral program.</li> </ol>   | Legislation  |
| <ol style="list-style-type: none"> <li>1. Approximately 15,000 employees (55% of NAF work force) cannot receive compensatory time off because they are nonexempt employees.</li> <li>2. Legislation to authorize comp time for nonexempt NAF employees was submitted for FY04 cycle but was dropped from consideration.</li> <li>3. Army must determine if it will submit the initiative again.</li> </ol>   | Legislation  |
| <ol style="list-style-type: none"> <li>1. In Mar 02, the President's Pay Agent estimated the civilian pay lag at 19%, however, OPM, Labor Dept, and OMB do not support FEPCA as a method for determining or achieving pay comparability between the federal and private sector.</li> <li>2. The Army will work with DOD on alternative strategies to achieve pay comparability.</li> </ol>   | Legislation  |
| <ol style="list-style-type: none"> <li>1. Army submitted the unemployment compensation recommendation to OSD's Civilian Personnel Management Service Benefits Legislative Work Group.</li> <li>2. The working group cited a Supreme Court decision upholding a denial of benefits to a claimant who voluntarily quit a position to follow her spouse. OSD will not support further attempts to initiate this type of legislation.</li> </ol>   | Legislation (not supported—no additional action planned) |
| <ol style="list-style-type: none"> <li>1. Army will coordinate with TRADOC to develop format of instruction to cover retirement topics for NCOES and Officer/Warrant courses.</li> <li>2. AD Retirement Services website posted on Jan 03 LES. G-1 pursuing biannual posting of AD &amp; RC retirement web addresses. Also exploring web-based tool to provide retirement/survivor information and benefits calculation.</li> <li>3. G-1 is pursuing dissemination of retirement information via family programs.</li> </ol> | Army Policy  |
| <p>The Army has a viable recognition/awards program, recognizing longevity when soldiers reenlist by awarding the Good Conduct Medal; a biennial pay raise for all soldiers; and, at retirement, a parade/ceremony/presentation of U.S. flag.</p>  | Army Policy (no additional action planned)               |
| <ol style="list-style-type: none"> <li>1. DOD target is decision of cases within 30 days of notification of injury, illness, or disease. Army streamlined procedures for Incap Pay extensions. Primary impediment is LOD investigation.</li> <li>2. Revision to AR 135-381 (Incapacitation of RC Soldiers) and a new DA Pam will ensure compliance with new DODI (RC Incap System Management). Revision to AR 600-8-4 (Line of Duty Reg) at PERSCOM.</li> </ol>  | Army Regulation  |
| <ol style="list-style-type: none"> <li>1. JFTR change to establish the date of marriage, adoption, or other legal action as authorization for dependency status to allow travel and transportation was not supported by the other services.</li> <li>2. G-1 will explore the feasibility of changing the JFTR to allow SMs to use remaining HHG authorization to move newly acquired dependents' HHG.</li> </ol>   | DOD Policy   |

## ARMY FAMILY ACTION PLAN ISSUES (CONT.)

| Issue  | Issue #<br>(Year) | Recommendation  |
|--|-------------------|---|
| Entitlements<br>(Military Spouse Preference) | 530 (2002)        | <ol style="list-style-type: none"> <li>1. Allow military spouses to apply for any NAF or APF position without invoking military spouse preference.</li> <li>2. Authorize military spouses to select specific grade levels and job series when using MSP.</li> </ol> |
| Entitlements<br>(Survivor Benefits)          | 391 (1994)        | Treat active duty deaths as 100% disability retirement, thus providing Survivor Benefit Plan (SBP) compensation to all eligible survivors.  |
| Entitlements<br>(Remote Duty)                | 442 (1998)        | Compensate soldiers for additional expenses incurred when "remotely" assigned.  |
| Entitlements<br>(TLE Increase)               | 455 (1999)        | Extend TLE to 14 days (currently 10 days).  |
| Entitlements<br>(RC BAH)                     | 493 (2002)        | <ol style="list-style-type: none"> <li>1. Provide RC soldiers on active duty full BAH after 30 days.</li> <li>2. Pay RC soldiers on active duty in excess of 140 days the full BAH from the first day of activation.</li> </ol>                                     |
| Entitlements<br>(RC Retirement)              | 506 (2002)        | Authorize RC soldiers the option to receive a reduced rate of retired pay at age 50 or wait until 60 to receive full retired pay.   |
| Entitlements<br>(OCONUS COLA)                | 512 (2002)        | <ol style="list-style-type: none"> <li>1. Authorize payment of the first six months' COLA entitlement in a lump sum upon arrival at an OCONUS duty station.</li> <li>2. Begin full COLA at 7th month of assignment.</li> </ol>                                      |
| Entitlements (RC Parachute Jump Pay)         | 514 (2002)        | Change Parachute Jump Pay to a monthly rate. ( <i>Jump pay is currently computed on a daily rate, hence RC members receive a prorated amount based on days in duty status.</i> )  |
| Entitlements<br>(Medical Cov for RC)         | 523 (2002)        | <ol style="list-style-type: none"> <li>1. Establish a civilian health care allowance for activated RC soldiers.</li> <li>2. Require civilian health insurance providers reinstate preactivation medical benefits if a soldier elects the TRICARE option.</li> </ol> |

| Progress Toward Resolution  | Remaining Requirements |
|---|------------------------|
| <ol style="list-style-type: none"> <li>1. A 2-year European Command pilot allows military spouses to apply for and be selected for part-time or nonpermanent positions without losing MSP. Army will work with DOD to affect policy changes based on pilot results.</li> <li>2. In CONUS, spouses can select the grade levels and job series for MSP by registering in PPP as Cat 3 eligibles and OCONUS by selective submission of applications.</li> </ol>                                | DOD Policy             |
| <ol style="list-style-type: none"> <li>1. FY02 NDAA extends SBP benefits to spouses/children of all service members who die on active duty, regardless of years of service (retroactive to 10 Sep 01).</li> <li>2. OMB disapproved an FY04 legislative initiative to extend the same survivor benefits to spouses or children of RC soldiers who die in the line of duty while in IDT status.</li> </ol>  | Legislation            |
| <ol style="list-style-type: none"> <li>1. No support for remote duty pay. G-1 working group composed of CSMs and SGMs concluded that Army's priority should continue to be competitive pay.</li> <li>2. FY02 legislative initiative to increase CONUS COLA was disapproved—new proposal submitted for FY05.</li> <li>3. FY00 NDAA approved paid parking for recruiters, ROTC, and MEPCOM. AFAP Issue 513 seeks child care for remotely assigned soldiers.</li> </ol>                        | Legislation            |
| <ol style="list-style-type: none"> <li>1. Approximately 60% of military families exceed TLE entitlement. DOD deferred legislation to extend TLE to 15 days to FY05 due to funding (\$18M). Army supports the initiative and will monitor progress.</li> <li>2. Recent TLE changes include the following: TLE for initial PCS; increase from \$110 to \$180/day maximum; elimination of BAH/BAS offsets in TLE computation.</li> </ol>   | Legislation            |
| <ol style="list-style-type: none"> <li>1. Legislation to lower the 140-day threshold to 30 days was deferred to FY05, then dropped. Army cost, \$30M. Entitlement to full BAH is a discussion topic in working group preparing a report to Congress, due Aug 03.</li> <li>2. Army request to eliminate requirement that 140 days be served at one location was denied based on Comptroller General decision that a soldier cannot receive full BAH and be in a temporary status.</li> </ol> | Legislation            |
| <ol style="list-style-type: none"> <li>1. The 9th QRMC reviewed several RC retirement options and determined more study was needed.</li> <li>2. RC retirement will be included in reports that are due to Congress in 2003 addressing Reserve compensation and entitlements.</li> </ol>   | Legislation            |
| <ol style="list-style-type: none"> <li>1. An FY02 legislative proposal to provide lump sum COLA was not supported and an FY03 proposal was returned by OMB.</li> <li>2. Legislative proposal will be forwarded to Congress in the FY04 Omnibus.</li> </ol>  | Legislation            |
| <p>A GAO study on Reserve special pays is pending. Based on that report, the ASD (RA) will determine if the office will pursue a legislative change for specific special pays that impact the RC soldier.</p>   | Legislation            |
| <ol style="list-style-type: none"> <li>1. An FY04 legislative proposal to allow mobilized reservists either to participate in TRICARE or to receive a voucher toward their private insurance premiums was deferred to the FY05 legislative cycle.</li> <li>2. Army is monitoring the progress of the legislative initiative.</li> </ol>   | Legislation            |



## ARMY FAMILY ACTION PLAN ISSUES (CONT.)

| Issue  | Issue #<br>(Year) | Recommendation   |
|--|-------------------|--|
| Entitlements<br>(MGIB Expiration)              | 525 (2002)        | Eliminate the ten-year expiration date for MGIB benefits.  |
| Entitlements<br>(Retirement DLA)               | 528 (2002)        | Authorize and fund a Dislocation Allowance (DLA) for retiring service members.   |
| Entitlements<br>(CONUS COLA)                   | 451 (1999)        | Lower the CONUS COLA threshold to 7%.  |
| Entitlements (Pay<br>Reform)                   | 461 (1999)        | Implement pay table reform (especially for enlisted personnel).  |
| Entitlements<br>(RC Family<br>Member Training) | 520 (2002)        | Authorize and fund Invitational Travel Orders (ITO) for spouses to attend annual unit commander's briefing and orientation.  |
| Family Support<br>(INS Assistance)             | 515 (2002)        | <ol style="list-style-type: none"> <li>1. Establish a liaison at installation level to assist family members with the INS process.</li> <li>2. Obtain Immigration and Naturalization Service (INS) approval for DOD-administered fingerprinting and physical exams.</li> </ol> |
| Family Support (In-<br>State Tuition)          | 521 (2002)        | <ol style="list-style-type: none"> <li>1. Waive out-of-state tuition for military family members who reside in a state on military orders.</li> <li>2. Retain in-state tuition status once established.</li> </ol>   |
| Family Support<br>(RC Mobilization)            | 527 (2002)        | Create a Mobilization Preparation Program to provide assistance to RC soldiers and families for transition from reserve status to mobilization.  |
| Family Support<br>(Mob/Depl)                   | 380 (1994)        | Fund Mobilization/Deployment Readiness positions at installations, Reserve ARCOM/TAACOM, and NG STARCs.  |

| Progress Toward Resolution  | Remaining Requirements                                   |
|---|--|
| <ol style="list-style-type: none"> <li>1. The Veterans Affairs estimates cost to eliminate MGIB expiration date is \$1.8B annually.</li> <li>2. In Feb 03, MGIB Working Group (all services) supported the recommendation. Legislative action to begin in Fall 2003.</li> </ol>   | Legislation  |
| <ol style="list-style-type: none"> <li>1. Cost estimate is \$20M annually.</li> <li>2. USPACOM submitted this initiative for FY05 legislative cycle. Army supported the initiative and will monitor its progress.</li> </ol>  | Legislation  |
| <ol style="list-style-type: none"> <li>1. Lowering threshold 1% would add 14 cities and increase CONUS COLA by \$25 for current recipients. Potential cost, \$14M. An FY02 legislative proposal to lower CONUS COLA threshold was not supported.</li> <li>2. Initiative submitted for FY05 legislation.</li> </ol>  | Legislation  |
| <ol style="list-style-type: none"> <li>1. Based on analysis conducted by the 9th QRMC, DOD established a benchmark that military compensation should equal 70% of the earnings of civilians with comparable education and years of experience. Mid-grade and senior enlisted fall below the benchmark.</li> <li>2. Targeted pay raises, implemented in FY03 and proposed in the FY04 budget, continue the incremental corrective action proposed by the 9th QRMC.</li> </ol>                            | Legislation  |
| <ol style="list-style-type: none"> <li>1. Federal law prohibits use of APF to pay expenses (per diem) of spouses and family members. To be placed on Invitational Travel Orders, the traveler must be an active participant who performs a direct service. Attendance at a training conference does not meet requirements for ITOs.</li> <li>2. Organization may develop distant learning modules, provide traveling teams, or videos (via web or mail) to those who cannot attend meetings.</li> </ol> | Legislation (not supported—no additional action planned) |
| <ol style="list-style-type: none"> <li>1. CFSC is working with PERSCOM to develop an overall plan to assist family members with the immigration process.</li> <li>2. CFSC will meet with the INS to seek approval of DOD fingerprinting and physical exams.</li> </ol>  | Action outside Army or DOD purview (INS)                 |
| <ol style="list-style-type: none"> <li>1. The CSA initiated Army's involvement with in-state tuition at Jul 02 Education Summit. Initiative began in 5 states with largest Army populations (GA, KY, NC, TX, and VA). Letters/packets from G-1 to 5 states dispatched 28 Feb 03. Installation Cdrs informed and involved.</li> <li>2. Reporting and monitoring process will continue until a conclusion is reached in each state.</li> </ol>  | Action outside Army or DOD purview (States)              |
| <ol style="list-style-type: none"> <li>1. Social services provided by local, state, and federal agencies and clergy.</li> <li>2. Family Readiness Program in place and functioning with staff at each RSC and Direct Reporting Command. Mobilization briefings include TRICARE, ARC, AER, PAO, FRG, JAG, and emotional and financial issues.</li> <li>3. FY05/09 POM request for spouses to attend predeployment briefings.</li> </ol>  | Army Funding   |
| <ol style="list-style-type: none"> <li>1. 32 installations have a full-time Mobilization/Deployment Readiness specialist, remainder function as additional duty for ACS staff member. The Army requirement is 80 positions. ACS is seeking approval for additional authorizations and will include requirements in FY05-09 POM.</li> <li>2. The NGB has 54 State Family Program Coordinators. The USARC has 24 GS Family Program directors and 25 contractors.</li> </ol>                               | Army Funding   |

## ARMY FAMILY ACTION PLAN ISSUES (CONT.)

| Issue  | Issue #<br>(Year) | Recommendation   |
|--|-------------------|--|
| Family Support<br>(ACS Positions)            | 491 (2002)        | <ol style="list-style-type: none"> <li>1. Provide authorizations and funding for all ACS positions according to the U.S. Army Manpower Analysis Agency Staffing Guidelines.</li> <li>2. Fund the Well-Being initiatives that support ACS.</li> </ol>   |
| Family Support<br>(AFAP/AFTB)                | 421 (1997)        | Provide funding for program and staff for AFTB and AFAP programs (AD and RC) and an accounting code to capture expenditures.   |
| Family Support<br>(Child Care Reimbursement) | 449 (1999)        | Allow reimbursement of child care costs for family members attending command-sponsored training, such as Operation READY, English as a Second Language, budget classes, and AFTB.  |
| Family Support<br>(Installation Access)      | 519 (2002)        | <ol style="list-style-type: none"> <li>1. Streamline local installation access procedures for caregivers.</li> <li>2. Educate commanders and community on access process.</li> <li>3. Resolve multiservice/component access issues.</li> </ol>   |
| Family Support<br>(AFAP/AFTB)                | 466 (1999)        | Implement program standards for AFAP and AFTB. Update program circulars outlining HQDA, MACOM, and installation responsibilities.  |
| Family Support<br>(Unaccompanied Tours)      | 480 (2000)        | Assign sponsorship of waiting families to the garrison chain of command and require Military Personnel Service Centers to notify ACS and garrison commander of waiting families in the area.   |
| Family Support<br>(Dependency)               | 516 (2002)        | <ol style="list-style-type: none"> <li>1. Streamline application process for dependency determination.</li> <li>2. Provide clear guidance and instruction with checklist of submission procedures.</li> <li>3. Notify soldier of receipt of documents and provide feedback on disposition of request.</li> </ol> |
| Family Support<br>(OCONUS Adoption)          | 476 (2000)        | Authorize reimbursement of adoption expenses incurred by service members serving in a foreign country or U.S. territory.   |
| Family Support<br>(MGIB Distribution to FMs) | 497 (2002)        | Authorize all soldiers with at least 10 years of service to distribute MGIB benefits to dependents without additional reenlistment requirements.   |

| Progress Toward Resolution   | Remaining Requirements      |
|--|-----------------------------|
| <ol style="list-style-type: none"> <li>1. CFSC request for 185 requirements through Total Army Analysis 2005–2009 (TAA 05–09) is being staffed. \$9.6M for the new requirements is an emerging requirement in the FY05–09 POM. CFSC requesting \$19.6M in FY05–09 POM for the 292 authorization shortfall on the FY04 TAADs.</li> <li>2. \$26.7M is in the FY05–09 POM for ACS Well-Being initiatives.</li> </ol>  | Army Funding                |
| <ol style="list-style-type: none"> <li>1. \$3.2M was provided in FY01–02 for 56 positions at forward-deployed and power projection/support platforms. In FY03, \$8.2M was funded to support program operations and 138 joint AFAP/AFTB program manager positions.</li> <li>2. An accounting code to track expenditures was implemented in FY02.</li> </ol>   | Army Funding (attained)     |
| <ol style="list-style-type: none"> <li>1. Installation activities may transfer funds to installation CYS. Army CYS authorized NAF and APF.</li> <li>2. Army pursuing submission of \$1.3M APF requirement and change in applicable regulatory guidance regarding use of APF to fund command-sponsored child care.</li> </ol>   | Army Funding and Regulation |
| <ol style="list-style-type: none"> <li>1. Army regulation sets Army access policy; local access policies set by installation commanders.</li> <li>2. G-1 will work with IMA on identifying and resolving access issues.</li> <li>3. Army must focus effort on educating commanders and community.</li> </ol>   | Army Policy                 |
| <ol style="list-style-type: none"> <li>1. AFAP standards approved and implemented in 01. Three AFTB standards approved at Sep 02 EXCOM. Accreditation standards for both programs were implemented in FY02 in concert with ACS accreditation.</li> <li>2. AFAP and AFTB regs submitted to U.S. Army Publishing Agency (USAPA) in Nov 02. Projected publication, 4th Qtr FY03.</li> </ol>   | Army Regulation             |
| <ol style="list-style-type: none"> <li>1. Garrison staff is unable to assume sponsorship for waiting families.</li> <li>2. All personnel scheduled for overseas tours are required to attend ACS overseas briefing. ACS will request addresses of waiting families and will include waiting families in the ACS Outreach Program. Change to AR 608–1 submitted to USAPA for publication, 4th Qtr FY03.</li> </ol>  | Army Regulation             |
| <ol style="list-style-type: none"> <li>1. Currently, soldiers are given DFAS fax number to submit dependency requests. There are no provisions to verify submission or feedback from DFAS. Issue was submitted to Army Business Initiatives Council.</li> <li>2. Issue was briefed to SECARMY as a deferred issue. Actions are being worked prior to development of an implementation plan.</li> </ol>   | DOD Policy                  |
| <ol style="list-style-type: none"> <li>1. OCONUS soldiers may receive reimbursement for adoption expenses if they seek assistance through Legal Assistance and utilize a recognized adoption agency.</li> <li>2. Expansion of adoption reimbursement to qualified overseas agencies is in the FY04 legislative cycle.</li> </ol>   | Legislation                 |
| <ol style="list-style-type: none"> <li>1. The FY02 NDAA restricts MGIB distribution to soldiers with designated critical skills who reenlist for 4 years. Army will monitor Air Force test to distribute MGIB to dependents and review outcomes.</li> <li>2. Removing "critical skill" requirement and allowing Service Secretaries to offer transferability to all service members would cost \$700M first year/\$80M each year after. FY03 legislation to remove those requirements was unsuccessful.</li> </ol> | Legislation                 |

## ARMY FAMILY ACTION PLAN ISSUES (CONT.)

| Issue   | Issue #<br>(Year) | Recommendation  |
|---|-------------------|---|
| Family Support<br>(Spouse Tuition Assistance) | 475 (2000)        | Establish and fund a program Army-wide for spousal tuition assistance.  |
| Family Support<br>(OCONUS WIC)                | 438 (1997)        | Establish (resource) the supplemental food program for WIC for OCONUS personnel.  |
| Force Support<br>(AER for RC)                 | 351 (1993)        | Establish an emergency relief program (similar to AER) for the RC.  |
| Force Support<br>(Retirement Svc)             | 529 (2002)        | Authorize and fund a Retirement Service Officer at each Regional Support Command.   |
| Force Support<br>(Running Shoes)              | 507 (2002)        | Increase Clothing Replacement Allowance (CRA) to allow for semiannual replacement of running shoes.   |
| Force Support<br>(Financial Planning)         | 441 (1998)        | <ol style="list-style-type: none"> <li>1. Establish a full-time command financial specialist position at battalion level Army-wide.</li> <li>2. Establish financial management education beginning at the lowest level in Army school systems.</li> </ol>                             |
| Force Support<br>(Personnel)                  | 462 (1999)        | Increase personnel to meet mission requirements.  |
| Force Support<br>(DEERS Info)                 | 496 (2002)        | <ol style="list-style-type: none"> <li>1. Provide commanders the DEERS extract report monthly.</li> <li>2. Develop a web-based system linked to AKO to check DEERS.</li> <li>3. Implement reminders on soldiers' LES to check DEERS status.</li> </ol>                                |
| Force Support<br>(Personnel-Pay System)       | 473 (1999)        | <ol style="list-style-type: none"> <li>1. Mandate training at all levels for personnel who process financial transactions.</li> <li>2. Improve processing times for critical financial transactions (such as housing allowance, promotions, and change in marital status).</li> </ol> |



| Progress Toward Resolution   | Remaining Requirements                   |
|--|--|
| <ol style="list-style-type: none"> <li>1. The Voluntary Education Service Chiefs agree that spouse Tuition Assistance (TA) would be well received but not at the expense of the active duty program.</li> <li>2. Per VCSA directive (Nov 02 AFAP GOSC), Education Division coordinated cost for spouse TA with Army Budget Office. However, differences in the unfinanced requirements in soldier TA must still be resolved.</li> </ol>  | Legislation                              |
| <ol style="list-style-type: none"> <li>1. DOD Health Affairs TRICARE Management Activity began implementation of OCONUS WIC in Jan 01. Full implementation accomplished in Dec 02.</li> <li>2. Program established at 53 OCONUS locations, serving 25,500 participants in 11 foreign locations in Europe, Pacific, and Latin America.</li> </ol>   | Legislation (attained)                   |
| <ol style="list-style-type: none"> <li>1. AER Board of Managers has repeatedly voted down requests to assist RC soldiers activated for fewer than 30 days.</li> <li>2. AER did not respond to VCSA's letter (signed Apr 02) asking for change to AER charter that would align its RC assistance with that of the other services' aid societies. Follow-up letter from CAR is being staffed.</li> </ol>   | Action outside Army or DOD purview (AER) |
| <ol style="list-style-type: none"> <li>1. In Feb 03, the U.S. Army Reserve Command requested existing Position Description from DA Retirement Services Office.</li> <li>2. USARC is developing a cost analysis for 10 positions to be placed at each Regional Support Command.</li> </ol>  | Army Funding                             |
| <ol style="list-style-type: none"> <li>1. Effective 1 Oct 01, Army provides initial entry training soldiers \$60 toward the purchase of running shoes. No running shoe allowance is in the annual CRA.</li> <li>2. To add 2 pairs of running shoes/year to CRA, the Manning PEG will have to concur/fund during FY06-10 POM. (FY06 cost \$44M; FY06-10, \$217M.)</li> </ol>  | Army Funding                             |
| <ol style="list-style-type: none"> <li>1. No HQDA support to add unit financial specialist to force structure.</li> <li>2. Financial training added at BT, AIT, and first duty station. The SMA recommended a pamphlet with appropriate financial planning information for various school levels. Content is being reviewed by TRADOC and will be submitted to the SMA for final approval.</li> </ol>  | Army Policy                              |
| <ol style="list-style-type: none"> <li>1. Current Force Structure Allowance (FSA) is capped at 480K. FY03 projected Army End Strength is 489.3K for a fill of 101.94%.</li> <li>2. Manning goal reached: 100% aggregate fill for all AC divisions, ACRs, and Early Deploying Units (EDUs). FY03 focus continues to target 10 active divisions, 2 ACRs, separate brigades, FY02/03 EDUs, and the equitable distribution of remaining targets to all fill Priority 2 TOE and TDA units.</li> </ol> | Army Policy                              |
| <ol style="list-style-type: none"> <li>1. Providing a monthly DEERS report would not solve the problem.</li> <li>2. System being developed whereby AKO will read data from DMDC and present basic DEERS information to authenticated user—projected operation in May 03.</li> <li>3. In Aug 02, DFAS began placing quarterly reminder on LES to review DEERS status.</li> </ol>  | Army Systems Development                 |
| <ol style="list-style-type: none"> <li>1. The AG School placed an S1 Tool Kit on its website for commands to use locally in conducting S1 sustainment training.</li> <li>2. The Defense Integrated Military Human Resources system (Personnel and Pay) (DIMHRS Pers/Pay) will resolve the Army's Personnel and Pay System integration issues. Army Initial Operating Capability for DIMHRS scheduled for Jun 04.</li> </ol>  | DOD Systems Development                  |

## ARMY FAMILY ACTION PLAN ISSUES (CONT.)

| Issue   | Issue #<br>(Year) | Recommendation   |
|---|-------------------|--|
| Force Support<br>(MGIB)                             | 385 (2001)        | Allow Veterans Education Assistance Program (VEAP) era soldiers remaining on active duty to enroll in the MGIB.  |
| Force Support<br>(State Laws)                       | 467 (1999)        | Adopt a model uniform code of rights and protections for members of the armed forces.  |
| Force Support<br>(Incentives for Mil<br>Techs [RC]) | 483 (2000)        | Authorize military technicians (MT) to receive incentives contained in the Selected Reserve Incentives Program (SRIP).   |
| Force Support<br>(RC Employer Tax<br>Credit)        | 486 (2000)        | Provide tax credits to employers of reservists mobilized/deployed in support of a contingency operation or pursuant to a Presidential Selected Reserve Call-up or mobilization.                      |
| Housing<br>(Privatization)                          | 440 (1998)        | Eliminate all inadequate Army Family Housing units and the housing deficit by 2010.  |
| Medical (Staffing)                                  | 484 (2000)        | <ol style="list-style-type: none"> <li>1. Increase medical and dental personnel to support the entire OCONUS military community.</li> <li>2. Build transition time for med/den personnel.</li> </ol> |
| Medical (Military<br>Pregnancy/<br>Postpartum)      | 532 (2002)        | Develop and implement a standardized, mandatory, Army-wide pregnancy/postpartum program with command emphasis that addresses readiness and a return to physical fitness and weight standards.        |
| Medical (TRI-<br>CARE Regions)                      | 505 (2002)        | Reduce the number of TRICARE regions and allow beneficiaries to access routine and specialized medical care in other regions.  |
| Medical<br>(Nutritional<br>Supplements)             | 508 (2002)        | Provide TRICARE coverage for all medically necessary nutritional substances or therapeutic dietary supplements prescribed by a health care provider.   |

| Progress Toward Resolution  | Remaining Requirements |
|---|------------------------|
| <ol style="list-style-type: none"> <li>1. Army supports legislative change to allow "VEAP era" soldiers to convert or receive the MGIB. Previous legislative proposals have been unsuccessful.</li> <li>2. In Feb 03, a House resolution was submitted to allow a one-year period for all VEAP era soldiers remaining on active duty to enroll in MGIB with a \$2,700 contribution.</li> </ol>  | Legislation            |
| <ol style="list-style-type: none"> <li>1. DOD has not forwarded a Draft Model Code that addresses such issues as taxation, tuition, voting, vehicle registration, and licensing.</li> <li>2. Legislation to update Soldier's and Sailor's Civil Relief Act was submitted to the 108th Congress. Included are provisions addressing personal property tax, income tax brackets, and property leases affected by deployment or PCS.</li> </ol>  | Legislation            |
| <ol style="list-style-type: none"> <li>1. This is a no-cost initiative since the number of MTs has already been included in the formulas to figure bonus money because of their drilling reserve participation.</li> <li>2. Survey fielded to support anticipated FY05 legislative initiative to include MTs in affiliation bonuses.</li> </ol>   | Legislation            |
| <ol style="list-style-type: none"> <li>1. RC employer tax initiatives were deferred in the FY02 and 03 legislative process.</li> <li>2. The Reserve Employer Tax Credit Assistance Act of 2003 has active support of the Reserve Officers Association, National Guard Association, and the U.S. Chamber of Commerce.</li> </ol>   | Legislation            |
| <ol style="list-style-type: none"> <li>1. Army is programming elimination of all inadequate houses by 2007 and full sustainment of owned inventory in FY06. RCI is the primary strategy in U.S.</li> <li>2. The Family Housing Master Plan expands RCI to 28 sites, 80% of U.S. inventory. <ul style="list-style-type: none"> <li>- Forts Carson, Hood, Lewis, and Meade are privatized (15,727 units).</li> <li>- Forts Bragg, Campbell, Irwin, and Hamilton and Presidio of Monterey scheduled for transfer in 2003.</li> </ul> </li> </ol> | Army Funding           |
| <ol style="list-style-type: none"> <li>1. Europe initiated venture capital projects to fund increased Fam Practice/Peds staff support and is monitoring RC rotations impact on specialty shortages.</li> <li>2. Europe/Korea implemented process improvements to enhance access to care.</li> <li>3. Korea established a central appointment desk and is coordinating backfill efforts with USARC.</li> <li>4. PERSCOM does not support the overlap of medical/dental personnel.</li> </ol>   | Army Policy            |
| <ol style="list-style-type: none"> <li>1. USACHPPM developed a Pregnant/Postpartum Soldiers Certification Program. Personnel from the military treatment facility, garrison, and units are to be utilized as trainers. Program sustainment is based on certification, training, and oversight by a DA proponent. Training materials are developed, and certification manuals and program guides were sent for endorsement.</li> <li>2. USACHPPM identifying core classes and essential information.</li> </ol>                                | Army Policy            |
| <p>CONUS TRICARE regions will be reduced from 11 to 3. A request for proposals was released 1 Aug 02, and bids are being evaluated. Contract award is set for Jun 03, with setup to be phased in by region between Apr and Nov 04.</p>  | DOD Policy             |
| <ol style="list-style-type: none"> <li>1. Medicare Part B, Veterans Affairs, and most civilian insurance plans cover supplements for tube feedings only.</li> <li>2. The TRICARE Management Activity is considering a change to its current nutritional therapy policy/regulations. It is anticipated that changes would address only nutritional supplements prescribed by a physician as medically necessary.</li> </ol>  | DOD Policy             |

## ARMY FAMILY ACTION PLAN ISSUES (CONT.)

| Issue   | Issue #<br>(Year) | Recommendation   |
|---|-------------------|--|
| Medical<br>(RC Information)                           | 510 (2002)        | <ol style="list-style-type: none"> <li>1. Clarify and simplify written RC medical information and translate these publications into other languages.</li> <li>2. Develop multilingual education videotapes for RC.</li> </ol>  |
| Medical<br>(Remote Areas)                             | 517 (2002)        | Increase TRICARE reimbursements to competitive rates as an incentive to recruit and retain medical care providers in remote areas.   |
| Medical<br>(Surgery)                                  | 534 (2002)        | Extend TRICARE covered benefits to include autologous blood collection, processing, and storage costs.   |
| Medical<br>(Pre/Postnatal<br>Benefits<br>Information) | 535 (2002)        | <ol style="list-style-type: none"> <li>1. Create a brochure that explains the prenatal, delivery, and postpartum tests and procedures routinely covered by TRICARE.</li> <li>2. Disseminate this brochure to patients, post on website, and place in military health care facilities.</li> </ol>       |
| Medical<br>(Vision Readiness)                         | 490 (2002)        | Require annual vision readiness (VR) screenings for all soldiers (active, guard, and reserve).   |
| Medical<br>(TRICARE<br>Referrals)                     | 536 (2002)        | <ol style="list-style-type: none"> <li>1. Allow Primary Care Manager (PCM) to authorize referrals up to 1 year for specialty and chronic care TRICARE Prime patients.</li> <li>2. Authorize the specialist to order necessary diagnostic testing without additional referrals from the PCM.</li> </ol> |
| Medical<br>(OCONUS Access)                            | 487 (2000)        | <ol style="list-style-type: none"> <li>1. Expand personal service contracts at remote OCONUS sites and within the host nation to provide health care services.</li> <li>2. Ensure host nation providers receive timely payment for services.</li> </ol>  |

| Progress Toward Resolution   | Remaining Requirements                            |
|--|---|
| <ol style="list-style-type: none"> <li>1. 90,000+ TRICARE info cards/CDs were distributed thru mobilization stations, family support centers, and e-mail/phone requests. Informative websites linked at <a href="http://TRICARE.osd.mil/reserve">http://TRICARE.osd.mil/reserve</a>. TMA and MEDCOM provide e-mail help services.</li> <li>2. The national TRICARE Marketing/Education contractor will be required to develop beneficiary information in Spanish, German, Korean, etc. TMA is developing a Spanish RC TRICARE pamphlet. TRICARE CD/info card being considered for language translation.</li> </ol> | DOD Policy  |
| <ol style="list-style-type: none"> <li>1. TRICARE reimbursement rates are indexed to Medicare reimbursement rates. TRICARE Management Activity is working to implement a bonus payment plan under the Health Provider Shortage Area initiative.</li> <li>2. The House repealed the planned FY03 4.4% Medicare payment cut and instead increased the Medicare payment level by 1.6%. The 1.6% increase to TRICARE Maximum Allowable Charges went into effect 1 Apr 03.</li> </ol>   | DOD Policy  |
| <ol style="list-style-type: none"> <li>1. TRICARE covers collection, processing, and storage of autologous blood when transfused to the patient and when used for scheduled surgical procedures requiring use of blood as a medical necessity.</li> <li>2. OTSG will request that TMA advertise TRICARE coverage of the collection, processing, and storage of autologous blood.</li> </ol>  | DOD Policy  |
| <ol style="list-style-type: none"> <li>1. TRICARE Management Activity conducted focus group testing of obstetrics marketing information in Jan 03.</li> <li>2. The Army Medical Department (AMEDD) will request and help TMA develop/test a pre/postnatal benefits information brochure. AMEDD will work to prioritize funding so TMA can produce and deploy pre/postnatal information pamphlet in 4th Qtr FY03 and assist TMA post information on TRICARE/other websites.</li> </ol>  | DOD Policy  |
| <ol style="list-style-type: none"> <li>1. Currently, there is no standard VR process within any of the military services.</li> <li>2. A DOD vision readiness screening program was developed. Following approval of the Assistant Secretary of Defense (Health Affairs), the military services will disseminate policy for annual vision screenings for all service members during SRPs. Estimated DOD-wide cost of the information management portion of this initiative is \$230K.</li> </ol>  | DOD Policy  |
| <ol style="list-style-type: none"> <li>1. TRICARE is a triple-option health care plan. TRICARE Prime requires management by the enrollee's PCM. TRICARE Standard and Extra allow beneficiaries more freedom of choice.</li> <li>2. Hospital commanders or contractor case managers can facilitate special treatment needs of patients with complex illnesses or special therapy requirements.</li> </ol>   | DOD Policy (no additional action planned)         |
| <ol style="list-style-type: none"> <li>1. The Federal Acquisition Regulation precludes personal services contracts in remote locations. TRICARE Europe's preferred provider network has more than 1,200 professionals/institutions. Claims processing above 95% since Jan 00.</li> <li>2. TRICARE Global Remote Overseas Health Care contract was awarded to Int'l SOS (ISOS) to provide cashless/claimless health care. Coverage (Fall 03): Central/South/Latin America, Canada, Western Pacific, parts of Europe.</li> </ol>   | DOD Policy (attained)<br>Implementation Necessary |



## ARMY FAMILY ACTION PLAN ISSUES (CONT.)

| Issue   | Issue #<br>(Year) | Recommendation   |
|---|-------------------|--|
| Medical<br>(RC Insurance)                                       | 122 (1989)        | Provide the RC nonsubsidized group health and dental insurance.  |
| Medical<br>(Remote Sites)                                       | 488 (2002)        | Provide TRICARE Prime Remote for active duty family members (TPRADFM) to all active duty family members who reside in TPR zip code areas. <i>(ADFMs who reside with their sponsor are eligible for TPR.)</i>       |
| Relocation (HHG<br>Re-engineering)                              | 307 (1991)        | <ol style="list-style-type: none"> <li>1. Award moving company contracts based on performance and claims history as well as cost.</li> <li>2. Provide full replacement value for lost or damaged HHG.</li> </ol>   |
| Relocation<br>(Sponsorship)                                     | 454 (1999)        | <ol style="list-style-type: none"> <li>1. Establish a trained sponsorship pool at unit or installation level.</li> <li>2. Report sponsorship monitoring and evaluation findings to higher headquarters.</li> </ol> |
| Relocation<br>(Weight Allowance)                                | 457 (1999)        | Amend enlisted portion of the PCS weight allowance table to more closely match the officer weight allowances.  |
| Relocation (2d<br>POV Shipment<br>OCONUS)                       | 526 (2002)        | Fund the shipment of a second POV for OCONUS tours.  |
| Relocation<br>(Professional<br>Weight Allowance<br>for Spouses) | 531 (2002)        | Authorize 500 pounds of professional weight for all spouses for items required for employment and volunteering.  |
| Volunteer<br>(Expansion)  | 184 (1988)        | Expand benefits to volunteers in any program or service that provides support to service members and families.   |

| Progress Toward Resolution   | Remaining Requirements     |
|--|----------------------------|
| <ol style="list-style-type: none"> <li>1. An FY03 legislative initiative addressing reservists' civilian health insurance during mobilization was unsuccessful. A proposal was not submitted in FY04 because of ongoing studies.</li> <li>2. OSD Reserve Affairs submitted an FY05 legislative initiative to allow Ready Reservists to enroll in TRICARE Prime or receive a voucher toward private health care premiums.</li> </ol>  | Legislation                |
| <ol style="list-style-type: none"> <li>1. Ineligible categories include families of mobilized reservists assigned outside the TPR area, college students, and relocating families (unaccompanied tour).</li> <li>2. FY03 legislation provides TPRADFM to ADFMs who remain in their current TPR location while the sponsor serves an unaccompanied tour and to FMs who reside in a TPR area with an RC sponsor ordered to AD for more than 30 days.</li> <li>3. SECARMY submitted an FY04 legislative proposal to OSD seeking to remove the "resides with" eligibility requirement of TPRADFM.</li> </ol> | Legislation                |
| <ol style="list-style-type: none"> <li>1. Recommended features for DOD's Future Personal Property Program include full value replacement, best value awards, direct claims settlement, direct communication between customer and transportation provider, customer satisfaction survey, and E-commerce billing. New program to cost 13% over current program.</li> <li>2. Military services and industry support new program; plan FY05 roll out.</li> </ol>   | Army Funding               |
| <ol style="list-style-type: none"> <li>1. AR 600-8-8 (The Total Army Sponsorship Program) was revised to address sponsorship training and reporting requirements.</li> <li>2. Army is identifying a division to test a CONUS version of S-GATE.</li> <li>3. Spouse Orientation and Leadership Development (SOLD) funding included \$200K for sponsorship program. ACS outcome measures will gauge effectiveness of sponsorship.</li> </ol>   | Army Regulation (attained) |
| <ol style="list-style-type: none"> <li>1. Administrative weight allowance increased from 2,000 to 2,500 lbs. for E1-E5 (1 Oct 02). FY02 NDAA increased PCS weight allowance for E1-E4.</li> <li>2. An OSD working group proposal to increase weight allowances by an average of 8% resulted in an FY04 legislative initiative. The initiative was deferred to the FY05 legislative cycle.</li> </ol>   | Legislation                |
| <ol style="list-style-type: none"> <li>1. The shipment of one POV to and from OCONUS on PCS orders is established by law and requires service concurrence for a change to the law.</li> <li>2. Army G-4 is working with G-1 to determine the number of accompanied OCONUS personnel and to solicit service concurrence.</li> </ol>   | Legislation                |
| <ol style="list-style-type: none"> <li>1. By law, the JFTR authorizes shipment and/or storage of professional books, papers, and equipment in a soldier's profession that are needed for the performance of official duties.</li> <li>2. Army G-4 is working with G-1 to define "professional items," determine number of personnel and cost, and solicit comments and concurrence from other services.</li> </ol>   | Legislation                |
| <ol style="list-style-type: none"> <li>1. OSD published a DODI addressing voluntary service in DOD in Mar 02. Army already activated policies in 1998 in an HQDA letter.</li> <li>2. AR 608-1 revision includes a "Volunteer" chapter. Projected publication is 4th Qtr FY03.</li> </ol>   | Army Regulation            |

## ARMY FAMILY ACTION PLAN ISSUES (CONT.)

| Issue                                     | Issue #<br>(Year) | Recommendation   |
|---|-------------------|--|
| Child Care<br>(Remote Sites)              | 513 (2002)        | Locate and subsidize child care spaces in local community child care programs for use by geographically isolated active duty soldiers who do not have access to military child care systems on installations.                                      |
| Child Care<br>(Surveillance<br>Equipment) | 447 (1999)        | Fund, purchase, and install audio/video surveillance equipment in all Child Development Centers (CDCs).  |
| Youth (Program<br>Standardization)        | 439 (1997)        | Standardize teen programs by establishing standards and providing guidelines on effective teen programs and services.  |
| Youth (Leadership<br>Forums)              | 502 (2002)        | <ol style="list-style-type: none"> <li>1. Fund current Youth Services budget to provide Youth Leadership Forums and instructor/student training.</li> <li>2. Establish Youth Leadership Forums as a baseline program in Youth Services.</li> </ol> |
| Youth Education<br>(School Liaison)       | 453 (1999)        | Authorize and fund full-time School Liaison Officers (SLO) at every Army installation.   |
| Youth Education<br>(Kindergarten)         | 432 (1997)        | Implement full-day kindergarten in DOD schools.  |
| Youth Education<br>(PE in DODDS)          | 503 (2002)        | <ol style="list-style-type: none"> <li>1. Provide a standardized PE program throughout DODEA schools that contains 5 periods of vigorous exercise per week.</li> <li>2. Fund program without impacting existing school budget.</li> </ol>          |
| Youth Education<br>(Access to<br>DODDS)   | 478 (2000)        | Provide space-available, tuition-free DODDS education to family members of DOD nonsponsored, full-time NAF employees and DOD contractors.  |

| Progress Toward Resolution  | Remaining Requirements  |
|---|-------------------------|
| <ol style="list-style-type: none"> <li>1. Geographically isolated active duty soldiers pay substantially more for child care than those who reside on or near a military installation.</li> <li>2. Actions include the following: <ul style="list-style-type: none"> <li>- Locating comparable quality community child care options;</li> <li>- POM 05–09 UFR to “buy down” cost of care to DOD rates (\$31M/yr); and</li> <li>- Marketing materials geographically to inform soldiers of options.</li> </ul> </li> </ol> | Army Funding            |
| <ol style="list-style-type: none"> <li>1. Purchase and installation of security systems funded for 158 child and youth facility sites—three-year fielding schedule.</li> <li>2. Funding attained for recurring maintenance and replacement at CDCs.</li> <li>3. OMA Tail for maintenance and replacement for school age/youth centers remains unfunded—validated in FY04–09 POM (\$3.4M).</li> </ol>  | Army Funding            |
| <ol style="list-style-type: none"> <li>1. Youth Services established benchmarks and standards to sustain quality programs. This includes baseline programming, staff training, and leveraging personnel and financial resources.</li> <li>2. Key requirements addressed and validated in FY04–09 POM remain unfunded—youth sponsorship program, youth program sustainment, and youth participation increase from 20% to 35% of the eligible youth population.</li> </ol>  | Army Funding            |
| <ol style="list-style-type: none"> <li>1. Funding (\$475K) to provide annual regional or alternative Army-wide Youth Leadership Forums will be submitted for FY05–09 POM.</li> <li>2. CFSC working with IMA regional CYS staff to develop procedural guidance to include installation forums as a component of CYS baseline programming.</li> <li>3. Coordination under way to submit as an objective in Army Well-Being Plan.</li> </ol>   | Army Funding            |
| <ol style="list-style-type: none"> <li>1. \$6.8M funded in FY02–07 POM for 68 SLOs.</li> <li>2. \$4.9M funded in FY03 for 49 additional SLOs.</li> </ol>  | Army Funding (attained) |
| <ol style="list-style-type: none"> <li>1. Full-day kindergarten has been implemented in 126 schools (all DDESS schools [CONUS] and 79 DODDS schools).</li> <li>2. Full implementation planned at remaining 17 schools by 2004–2005 school year, with the exception of 3 schools in Japan/Korea.</li> </ol>  | DOD Funding             |
| <ol style="list-style-type: none"> <li>1. Expanding PE to 5 days/week is unattainable by DODEA alone due to budget constraints, school day, and other DODEA priorities.</li> <li>2. During summer 2003, selected PE teachers will be trained in adapted PE to address the PE needs of students with disabilities.</li> <li>3. DODEA will collect data on PE enrollment. Also examining increasing the HS graduation requirement by .5 credits (nutrition &amp; physical activity).</li> </ol>                             | DOD Funding and Policy  |
| <ol style="list-style-type: none"> <li>1. In 2002, dependents of local-hire, full-time overseas NAF employees were authorized space-available, tuition-free DODDS enrollment.</li> <li>2. Legislative initiatives seek authority to enroll children of full-time, locally hired APF and NAF employees in DODDS on a space-required, tuition-free basis and children of government contractors on a space-required, tuition-paying basis.</li> </ol>   | Legislation             |

## ARMY FAMILY ACTION PLAN ISSUES (CONT.)

| Issue                           | Issue #<br>(Year) | Recommendation   |
|---------------------------------|-------------------|--|
| Youth Education<br>(Impact Aid) | 379 (1994)        | <ol style="list-style-type: none"><li>1. Pursue full funding for Impact Aid.</li><li>2. Encourage organizations to support solving the problem of Impact Aid.</li><li>3. Require installation commanders to work with school systems to educate the community on Impact Aid.</li></ol> |



| Progress Toward Resolution  | Remaining Requirements |
|---|------------------------|
| <ol style="list-style-type: none"> <li>1. FY02 legislation increased funding 15%; FY03 funding increased 4%.</li> <li>2. Army works closely with private organizations that advocate for Impact Aid.</li> <li>3. Army efforts to inform families and commanders include AFTB modules, School Liaison Officer outreach, senior level officer/NCO leadership courses, and spouse seminars.</li> </ol> | Legislation            |



# **APPENDIX 2**

## **Selected Research**

(As of 9 June 2003)



## SELECTED RESEARCH

### RAND ARROYO CENTER

*Families and Mission: A Review of the Effects of Family Factors on Army Attrition, Retention, and Readiness* (1987)

Surveys available literature on family-manpower relationships, identifies gaps in policy formulation, and suggests directions for future research.

*Families in the Army: Looking Ahead* (1989)

Documents trends, anticipates directions of future change, identifies issues and implications for force management and service delivery policies.

*Army Families and Soldier Readiness* (1992)

Focuses on extant family needs and how they are affected by family characteristics and Army policies.

*Army Morale, Welfare, and Recreation Programs in the Future: Maximizing Soldier Benefits in Times of Austerity* (1994)

Examines ways in which MWR programs are fiscally managed and develops a decision-making model that can assess relative costs of various MWR provision options.

### ARMY RESEARCH INSTITUTE FOR THE BEHAVIORAL AND SOCIAL SCIENCES (ARI)

*How To Support Families During Overseas Deployments: A Sourcebook for Service Providers* (1996).

Focuses on what we have learned about how families cope with deployments and the Army support mechanism that they rely upon.

*What We Know About Army Families* (1993)

Focuses on key findings of the Army Family Research Program (1986–1993), including family demographics, adaptation, ACS, role of families in soldier retention and readiness.

*Sample Survey of Military Personnel* (semiannual)

Covers MWR, family, and single soldier issues; program use and satisfaction.

### WALTER REED ARMY INSTITUTE OF RESEARCH (WRAIR)

*The Reciprocal Nature of Work and Family: Spouse's Perception of the Army/Family Interface and Its Impact on Soldier Retention* (1989)

Gulf War Research

Focuses on deployed soldier MWR and waiting spouse stress, support programs, and coping.



## **CFSC/ARI/WRAIR**

*Survey of Army Families* I (1987), II (1991), III (1995), IV (2001)

Focuses on trends in stresses and satisfaction, emerging family issues, MWR programs, and deployment.

## **CALIBER ASSOCIATES**

*Assessment of Army Family Action Plans 1-4* (1987)

*Morale, Welfare & Recreation (MWR) Programs and Readiness Links* (1996)

*Evaluation of the Army Family Team Building (AFTB)* (2002)

Additional studies, reports, and books are available via the DOD Military Family Resource Center: <http://mfrc.calib.com/>.