MILITARY FAMILY SUPPORT PROGRAMMING SURVEY
FALL 2014
ABOUT

MILITARY FAMILY ADVISORY NETWORK
The Military Family Advisory Network (MFAN) is a group of military families working together to improve the lives of America’s military and veteran families.

Our collective expertise encompasses a wide range of topics that affect all families, including ours, but we respond through the lens of our military families and the challenges and benefits that define us. We are the spectrum of military families: those on and off base; those deployed and at home; active duty, reserve, and veterans.

We work together to
- inform our community about the resources and benefits designed for military families,
- bridge the communication gap between our community and the public and private agencies that serve us, and
- forge common ground with civilians.

To learn more about MFAN visit www.militaryfamilyadvisorynetwork.org.

THE INSTITUTE FOR VETERANS AND MILITARY FAMILIES (IVMF)

The Institute of Veterans and Military Families (IVMF) at Syracuse University acted as a third-party reviewer at the completion of the research process.

The IVMF is the first interdisciplinary national institute in higher education focused on the social, economic, education and policy issues impacting veterans and their families post-service. Through a focus on veteran-facing programming, research and policy, employment and employer support, and community engagement, the institute provides in-depth analysis of the challenges facing the veteran community, captures best practices and serves as a forum to facilitate new partnerships and strong relationships between the individuals and organizations committed to making a difference for veterans and military families.

To learn more about the IVMF visit its website at vets.syr.edu.
A LETTER FROM OUR ADVISORS

Our mission at MFAN is to build a community of military and veteran families who are well-informed, equipped with tools for success, connected to leaders, and embraced by the general public.

Because the mission of MFAN is to help military families find and use programs to support their needs, MFAN undertook a survey to better understand these needs. We used the survey as a tool to identify which services military families use, determine the quality of family support programs, and identify gaps between military family needs and resources available.

The morale of our servicemembers and their families has a huge impact on their work both at home and abroad. As advisors, we know that the love and support that servicemembers receive from their families is vital. When there are gaps between the needs of military families and available resources, both servicemembers and their families face unnecessary stress.

Thank you to the military families who completed the survey—your experiences and opinions matter. We will continue to share the information collected from the survey with other organizations and agencies that seek to serve our families, and your responses will help inform MFAN’s efforts in 2015.
AUTHORS

Michele Kimball, Ph.D.  
*Primary Investigator, MFAN Advisor*

Shannon Rzasadin  
*Coauthor, MFAN Executive Director*

**Coding team:**

Jeremy Hilton  
*Research Assistant, MFAN Advisor*

Cara Koscher  
*Research Assistant, MFAN Volunteer*

Sandra Perez  
*Research Assistant, MFAN Advisor*

Janet Sanchez  
*Research Assistant, MFAN Advisor*

Rebekah Sanderlin  
*Research Assistant, MFAN Advisor*

Erin Voirol  
*Research Analyst, MFAN Advisor*

**With support from:**

Randi Cairns  
*MFAN Advisor*

René Campos  
*MFAN Advisor*

Sarah Johnson  
*MFAN Volunteer*

Tammy Moore  
*MFAN Advisor*

Linden Rock  
*MFAN Volunteer*

Emma Scherer  
*MFAN Volunteer*

Bianca Strzalkowski  
*MFAN Advisor*

Claire Woodward  
*MFAN Advisor*

The Institute of Veterans and Military Families (IVMF) at Syracuse University acted as a third-party reviewer at the completion of the research process.

The Military Family Advisory Network (MFAN) is a 501(c)(3) dedicated to building a community of military and veteran families at home and abroad who are well-informed about resources designed to serve them, equipped with tools for success, connected to leaders who serve the military family community, and embraced by the general public. We translate the needs of military families in a way that service providers can understand, and translate services in a way that speaks to our families.
TABLE OF CONTENTS

INTRODUCTION .......................................................................................................................... 6

METHODOLOGY ........................................................................................................................ 7

DEMOGRAPHICS ....................................................................................................................... 9

RESULTS .................................................................................................................................. 9

Question: What support programming are you receiving that you really like? ....................... 9
Question: What’s missing? What support do you need that you don’t have? ......................... 12
Question: Overall, how do you feel about the quality and availability of support programming? ......................................................................................................................... 17
Question: What kind of unemployment support do you receive? ......................................... 17
Question: What kind of wellness support do you receive? .................................................... 19
Question: What kind of education support do you receive? ................................................ 25
Question: What kind of financial readiness support do you receive? .................................. 26
Question: What kind of transition support do you receive? .................................................. 28

Specific Services ................................................................................................................... 30
Commissary/Exchange ........................................................................................................... 30
Healthcare/Military Treatment Facility .................................................................................. 33
MWR ..................................................................................................................................... 35
Military Family Support Center .............................................................................................. 37

Recommendations ............................................................................................................... 40

Endnotes ............................................................................................................................... 43
INTRODUCTION

The mission of the Military Family Advisory Network (MFAN) is to help military families find and access effective programs to support all their needs. To comprehend the programs that families need and use, MFAN developed a survey to help advisors better understand the state of military family support efforts.

This is essential because military families are highly anxious about the effects of sequestration and looming budget cuts. As a result, military families are facing increasing financial insecurity, not only from the worry about the loss of their current paychecks, but also from the concern about changes to their retirement benefits.

While developing the survey, MFAN consulted with the Military Compensation and Retirement Modernization Commission (MCRMC), established by Congress. MCRMC is currently evaluating how service members are compensated and whether that structure is fiscally sustainable. MCRMC will release its findings in February 2015. In June 2014, MCRMC released an interim report detailing the existing compensation in the following categories: pay and retirement, health benefits, and quality-of-life benefits. In its interim report, MCRMC noted that the nation’s current financial difficulties make it more likely that the pressure will increase on the uniformed services’ budgets. To continue to maintain and recruit a quality all-volunteer force, the commission recognizes the need to provide more progressive, flexible compensation systems for service members. MCRMC understands that the spouses make many household decisions, specifically about family support services. MFAN has shared survey data with MCRMC so that the voices of military spouses are considered in the commission’s report.

There are nearly 100 different compensation benefits for service members, 40 health benefit programs, and more than 200 quality-of-life benefits administered by government agencies. Additionally, there are countless support programs managed by nongovernmental companies and nonprofit agencies. MFAN’s goal was to understand how military families use and prioritize the myriad services available to them.
METHODODOLOGY

It is important to evaluate the existing body of research when developing a methodological plan. In the area of military family support needs, research generally comes from three sources: academic institutions, military family support organizations, and government agencies.

Academic research about military family life tends to analyze the effects of combat deployments on the family unit, the mental health of spouses and children during and after deployment, or military spouse employment, but not the issues surrounding programs intended to support military families.

Much of the existing body of research developed by nonprofit agencies sheds light on the issues of greatest concern among military families. For example:

- Blue Star Families has produced three surveys that detail the top obstacles military families face. The surveys do not explore family programming specifically, but they evaluate the top issues of concern among families year after year.

- The National Military Family Association (NMFA) has taken a more focused look at issues facing families, such as military spouse credentialing, transitioning, moving, and children and deployment. In 2009, NMFA explored family support programming by providing a list of 10 predetermined categories of support and how families would rate them numerically.

- The Military Officers Association of America contracted with the Institute for Veterans and Military Affairs at Syracuse University to examine military spouse unemployment, finding that the unemployment rates among military spouses are much higher than those of their civilian counterparts, and almost all military spouses feel they are underemployed.

Within government agencies, there have been efforts to evaluate the status of military families. For example, the report of the Second Quadrennial Quality of Life Review in 2009 analyzed how military families were faring from a variety of perspectives by bringing together the results of independent surveys from within Department of Defense (DoD) military branches. The report did not evaluate specific family programming. And since early 2013, the DoD Common Services Task Force has been reviewing the effectiveness of its programming; no results have yet been released. Neither of these reports would include all programs offered to military families, however, given that the Coast Guard does not fall within DoD’s purview.

The intent of this study was to fill the void in the body of research by analyzing support programming from the perspectives of military families. The research questions were:
- What kinds of support programs are military families using?
- How do they perceive those programs?
The target population of this study was anyone with access to military support programming, so it was open to active duty members, veterans, retirees, and their families. Due to the specific target population, participants were contacted using a combination of purposive and snowball sampling.\textsuperscript{16} The purpose of the study was to understand the kinds of support programming military families were using and how they perceived those services. Therefore, because predictability and generalizability were not goals, a random sample was unnecessary.\textsuperscript{17} The survey was fielded online from July 31 to Aug. 25, 2014.

It was imperative that respondents answered based on their own personal experiences, with little interference from the survey instrument.\textsuperscript{18} Therefore, most of the survey consisted of open-ended questions. Respondents were free to answer or skip most questions. The only questions required were: how the respondent was affiliated with military life, such as spouse, veteran, or active duty member; the branch of service; and the closest military base. Participants who did not respond to the required questions or who had no military affiliation were not permitted to continue taking the survey.

The survey questions began as broad and wide-ranging: What support programming do you like? What is missing? How do you feel about support programming overall? The survey questions then focused on specific programming in five areas shown to be issues of common concern: unemployment, wellness, education, financial readiness, and transition. After that, the questions became yet more specific, referring to services commonly accessed: commissaries; military treatment facilities; morale, welfare and recreation; and housing, childcare, and military family support centers. Even within the specific sections, the topics were used as prompts, but the responses were open-ended.

The survey yielded more than 17,000 unique responses. They were coded in two phases: first descriptive coding, followed by axial coding.

A team of coders was trained in descriptive coding to maintain consistency. Descriptive coding was used for the first round, requiring the coder apply a short word or phrase to describe the phenomena being discussed. Descriptive coding is a way to split or “fracture” the data to analyze it in detail.\textsuperscript{19} Each coder developed analytic memos to describe the emerging categories. Coders then sent them to the primary investigator.\textsuperscript{20} The primary investigator performed member checks on every coding document to ensure validity.

When descriptive coding was complete, axial coding was employed, requiring that the more detailed themes found in descriptive coding are bound back together to make sense of larger categories that emerged.\textsuperscript{21} Then, the responses were quantized to better articulate the large number of codes.\textsuperscript{22} (Note: Respondents could give several reasons for their choices, so their answers could yield more than one code. Therefore, in some cases responses may equal more than 100 percent.)
DEMOGRAPHICS

There were 1,519 participants in this study from nearly 300 locations around the world. Participants were mainly from U.S. military communities and ranged from Kodiak, Alaska to Key West, Fla. There were more than 27 installations outside the contiguous United States (OCONUS) including in the South Pacific, Asia, and Europe.

The majority of participants—88 percent—were spouses. All branches of service were represented. The distribution was almost perfectly aligned with the overall distribution of service members in the United States:

RESULTs

Overall, the responses were diverse and, as a whole, comprehensive. Within each topic of programming, respondents were clear in noting their perceptions and identifying their needs.

Question: What support programming are you receiving that you really like? 
(n=1,141)
The question was intended to provide an overview of top issues. The question appeared before more focused questioning, so many of the topics noted in responses appear again later in this report.

The top five categories of support programming are listed below. Percentages following each heading indicate the percentage of respondents who named that as their top response.

*Base/post amenities: (41 percent)*
Of the 21 amenities listed in this category, the most popular were the commissary (57 percent) and exchange (23 percent). (Commissary and exchange use is detailed later in this report.)

- “I love having our commissary on base and the BX. To have those things on base and close are invaluable to a busy mom like myself.” — Air Force spouse
Healthcare: (32 percent)
This category included both actual medical care and Tricare coverage. Within the category, 40 percent said they had medical care and 32 percent listed Tricare.

- “The most valuable is our healthcare. It is one of the biggest benefits as to why we stay in. We have access to great healthcare. And when they don’t get it right, they have created programs like ICE to have complaints heard to try to fix those issues.” — Army spouse
- “Having an onsite MTF we don’t have one now, and we’ll never accept another overseas posting that doesn’t have an MTF.” — Air Force spouse

Support from nonprofits: (15 percent)
Participants listed 38 specific agencies, including military relief societies that provide valued support. The most frequently listed support came from the USO. Families were highly appreciative of programming outside government agencies. One Army spouse said, “We appreciate the discounts and programs offered by other organizations but don’t always need to take advantage. There are a lot off military families out there in worse situations than ours.” (Full list in Appendix A)

Morale, Welfare (Well-being), and Recreation (MWR): (15 percent)
Within the MWR category, youth programming was the most popular. An Army spouse said, “The MWR puts together great morale boosting events for the kids. We are infinitely grateful.” (MWR use is detailed later in this report.)

Family support services: (family centers, FRG, FRS, ombudsmen, etc.) (12 percent)
Family support services run the gamut from deployment support, to family events, to emergency assistance. “I enjoy the ‘spouses night out’ put on by the key spouses. I also enjoy the family gatherings and holiday events, especially when my spouse is deployed. It makes being away from family more bearable when you can get together with others,” an Air Force spouse said.

Below are other common responses to the question, shown in order of frequency (sample comments in various categories are included only when noteworthy):

None: 77
Do not receive any support
- “Nothing comes to mind I’ve been married to the military now for 9 years, and it has always been like getting my teeth pulled for answers or even help. My husband is active duty and as he was a tech sergeant when we married there are no programs to help us either with school and other issues that we have had.” — Air Force spouse
- “We don’t use any of these. We pride ourselves in being able to do things in our own with out any kind of hand out.” — Army spouse
- “As a Coast Guard family there is not much assistance we get because the CG is a part of DHS and not a part of DoD. Since there is no other military installation where we are at we don’t have access to the commissary, MWR, etc. The closest large military installation is 2+ hours away.” — Coast Guard spouse
Education: 65

Gym access: 59

Childcare: 54
Child Development Centers were the most popular in this category.
- "We both work full time and long, unpredictable hours. CDC has been the best thing for our family." — Army spouse

Continuing education classes: 4
Resilience training, team building were the most popular in this category.
- "Army Family Team Building (and similar resiliency classes) was about as invaluable as they came. I am almost willing to say those classes should be mandatory for new spouses, but to make someone do something is a stretch." — Army spouse

Housing: 42 (housing use is detailed later in this report)
- "We also love base housing. It makes it easy to have a nice home in a nice area. We can’t afford much, so the house being all paid for (rent & utilities) is amazing!" — Air Force spouse
- "The only support we are currently receiving is the BAH. This is an issue for a lot of places and needs to be reviewed because most times it isn’t enough to pay for a rental when there isn’t housing available for the unit." — Coast Guard spouse

Subsistence assistance: 36
WIC, food banks were the most popular in this category.
- "The food programs they provide because a lot of the times we can not afford enough food for our family." — Navy spouse
- "We currently are utilizing the WIC program. We are definitely grateful for that, as it has saved our lives a bunch of times in between paydays." — Coast Guard spouse

Internet support: 45
Facebook pages, websites, and bloggers were the most popular in this category.
- "We find other support in Facebook pages for the units or the military community. Love how everyone is always so willing to offer help, advice or just an ear to listen to each other." — Coast Guard spouse

Travel support: 37
Leisure travel and Space-A were the most popular in this category.

Civilian military discounts: 37

Religious support: 24

Family and friends: 24
Retirement benefits: 23

Counseling services: 20
  - “Counseling services for our elementary school children. Their counselor is employed through the hospital on post but has her office within their school, so she is available throughout their school day. They don’t have to miss school to receive regular therapy sessions.” — Army spouse

Community support: 17

Aid Societies: 13
These include the Navy-Marine Corps Relief Society, Air Force Aid Society, Army Fee Assistance Program, Army Emergency Relief, and Coast Guard Mutual Assistance.

Employment support: 12

Spouses clubs: 12

U.S. Department of Veterans Affairs: 12

Survivor benefits: 9
  - “I couldn’t keep a roof over my head without it.” — surviving spouse of deceased Air Force service member

Banking: 8

Pay: 7

Question: What’s missing? What support do you need that you don’t have? (n=542)
The responses to this question were highly diverse: for the 542 responses, there were 682 codes. Within those codes, four themes emerged: the need for improvements in family life issues, healthcare, employment, and pay and benefits. Overall, 8 percent of the respondents said they did not need any additional support programming.

Family Life
This was the largest overarching category: 25 percent of respondents identified family life as an area where they need more support. The most common subcategories were the needs for more childcare; more support for deployed families; more family activities; and more fitness options for families, including gym memberships.

More childcare: Within this category, the largest response was the need for childcare (11 percent); including hourly care for spouses who want to look for jobs, go to medical appointments, or go to the gym. (Childcare is further detailed later in this report.)
• “The CDC on base has a year waitlist. This is ridiculous. No one can wait on a list for a year.” — Air Force spouse

• “The only thing that I truly would like, is some help with childcare. There has to be a better way. If I’m in a waiting list for over a year, then I’m not the only one and there is a need for more options. I don’t work because I don’t want my entire paycheck to pay for my two children in daycare. Maybe I’m missing something, but for families that are constantly moving there has to be more options. And why does a nonmilitary family have preference over a military family with placement? My husband has a relative whose wife is a government employee, and her son is at [the CDC] before my children, whose father is active duty military. The entire system makes no sense!” — Navy spouse

• “I would love to do resiliency training but am unable to do so because of the high cost of childcare for the length of the class.” — Army spouse

• “I need childcare but the base childcare at every base we’ve been to seems understaffed and inadequate, so we don’t feel comfortable with using it. Childcare off base is hit and miss, and of course always more expensive, regardless of quality.” — Navy spouse

More help when moving: For example, respondents requested more say in where they move, contacts with other families who have moved to the new area, information about the new area, and help filing claims.

• “Raise shipment weight allowances. Inspect movers better, on the job, prior convictions of packers, etc. Better consistency of services through housing contractors. To whom do they answer for upholding of their contracts? They should be reviewed in the style of ‘command climate survey’ and be fully expected to live up to any deficiencies. There should be total transparency in any complaints filed with the offices, too. They are paid with taxpayers’ money.” — Army spouse

Education assistance: Spouse respondents especially sought assistance for education beyond an associate’s degree, or assistance for officers’ spouses. (This may be in response to MyCAA, an education assistance program offered to junior enlisted and junior officer spouses of active duty members within the DoD.)

More support for families of deployed service members

• “Currently, with this unit, and during a deployment, there is zero FRG. It is very sad that we don’t have a cohesive group going through this separation together.” — Army spouse

• “It would be nice for kids to interact with other kids going through deployments, like play dates and such. Or help and advice getting your child through the deployment.” — Air Force spouse

More family activities, especially fitness options
**Healthcare**

Healthcare was the second-largest overarching category, 22 percent of respondents identified healthcare as an area where they need more support. Within this category, most participants said they needed:

**More support for the Exceptional Family Member Program**
- “TRICARE does not recognize ABA therapy as a medically necessary service despite coverage in the civilian sector, Medicaid, and the Federal Employee Health Benefit plans. TRICARE has announced a 4-year Autism Care Demonstration, but the cost shares for non-active duty family members for a bulk of the services under the program do not accrue to the family catastrophic cap. This results in monthly cost shares of $300-$500 a month for my family (on top of all other healthcare costs).” — Marine Corps spouse
- “We have been in 20 years, and the EFMP program has hindered my husband’s career because could not rotate properly. We have gotten no support. We have even had a detailer tell us we should beat the crap out of our autistic son to get him to comply. We have had hard copy orders yanked from us because of my son’s health. We are looking forward to retirement in a few months because we know it will be better for our family especially my husband’s peace of mind.” — Navy spouse
- “The EFMP program needs more funding to help these families. Many people find the respite care to be the most valuable asset and they took away a good portion of it from the clients.” — Marine Corps spouse

**More mental health support for their families**
- “My husband has suffered greatly with mental health and substance abuse issues. While the Army did step in to help him, they did absolutely nothing to help me or my infant daughter to see if we needed any help, etc.” — Army spouse

**An increase in the quality of healthcare**
- “My husband could use actual medical support. He’s falling apart physically, and his back will never be the same. Instead of taking it seriously, they push it under the rug. He’s suffering and our marriage is suffering because of it. There is no real support on base. I wish we had a good experience here and that my husband could make a career out of the military, but this base has been so terrible I can’t wait until he is out.” — Air Force spouse
- “It took a year to convince our primary care to give my daughter a referral to an immunologist—she was diagnosed with an immune deficiency. Basically, someone needs to be there to stand up for families when the medical personnel don’t listen.” — Marine Corps spouse
- “More consistency from base to base with medical and prescriptions, everything from wait time for an appointment to consistency in care when PCSing. Getting a routine, nonemergency medical appointment when PCSing enroute or upon arrival is a nightmare. Referrals don’t transfer with you. You need a new appointment with a new PCM to beg for the referral—an out-of-network provider you’ve been seeing for years.” — Navy spouse
Help understanding healthcare, navigating Tricare
- “We need information on Tricare for retirees, no answer on Tricare phones, can’t log in on website, and no local liaison for Tricare.” — Spouse of Army retiree
- “We need our Tricare office back, they closed it, and some things just can’t be handled over the phone.” — Air Force spouse

More access and options under Tricare
- “I would also love to see more holistic care like chiropractic or acupuncture be included in what’s covered under our health insurance. This care is very beneficial and has it’s place in the treatment process.” — Marine Corps spouse
- “We had a lot of trouble acquiring our son’s power wheelchair and some sort of transport for the chair. TRICARE refused to purchase any sort of mobility for the wheelchair because they considered this a "luxury." I firmly believe that it’s pointless to provide a family with a $33,000 power wheelchair but not provide any sort of way to safely transport it and give them the mobility and accessibility they deserve—the WHOLE point of having the chair to start with.” — Marine Corps spouse

Employment
The single largest response to any one topic (without additional subtopics in an overarching category) was a call for employment assistance among spouses. About 17 percent of respondents said they would like to have more assistance. Most of responses were focused on finding general employment assistance, but this category also included calls for help finding jobs overseas and help for educated, experienced spouses who want to maintain careers.

Assistance for spouses trying to find work overseas
- “Jobs available for spouses, instead of the 80 percent that are reserved for German nationals! Make jobs available for those with a bachelor’s degree.” — Army spouse
- “The wives need help finding jobs! I don’t think it is fair that the Military only hires within and when overseas locals have priority over spouses who need the money.” — Marine Corps spouse stationed overseas

Assistance for experienced spouses who want to maintain careers
- “I reached out to the NAVFAC office on base, was told by the installation environmental program director that I shouldn’t even bother trying to get a job in his office since I’m not prior military, despite the fact that I have a masters in environmental management from Yale University, with four years work experience under my belt, and he had two open positions that I qualified for. And then his assistant proceeded to offer me a temporary summer internship that paid $250/week for 40 hours of work mowing lawns and trimming trees. If that’s not insulting, I don’t know what is.” — Marine Corps spouse
- “I’ve tried using the career assistance programs but there seems to be no help for people who have established careers. If I wanted to work in the day care center or the commissary, they would have been very helpful. When I went to the career
center and explained that I have a masters degree in x-field and an established career in a specific area, I was handed a blank generic resume form and told to go online and look for base jobs at the commissary. I went online and found civilians who work on base in the field I’m education/experienced in, went back to the career center to ask for advice on how to contact that department and/or apply for any openings, and was told they didn’t know anything about that and again directed to the commissary job openings. There wasn’t even an attempt made to try to look up any information for me. It was a gigantic waste of my time to even try to use that resource and now I feel very alone in the giant task of re-establishing my career every time we relocate.” — Air Force spouse

- “Ideally I’d like support for my MBA level career. I’m offended that the assumption is always that spouses are less educated than our active duty service members.” — Navy spouse

**Pay and Benefits**
The third-largest overarching category was pay and benefits, in which 13 percent of those who responded asked for a very specific list of increases. Within that list, most respondents asked that the military budget be left alone. Some examples:

- “I would rather our tax money go toward keeping the promises already made to active duty and retired service members rather than expanding programs.” — Army spouse
- “Support is limited because it is always the first thing cut when politicians think they can save money. They reach into the pocket of service members instead of their own.” — Army active duty member
- “A decent defense budget. So, we aren’t constantly being threatened with losing benefits or having pay hijacked so the government can play politics. I hate having to fight to have our expensive household items ‘crated’ to protect them, or worrying about our household goods being overweight because it now includes all those military ‘must read’ books my husband has collected during his career. I feel like our government is failing us. They speak support, then pull the funding.” — Army spouse
- “The assurance that the government won’t hold our spouses’ pay checks hostage while debating military funding is missing. Enough Coast Guard funding so that proper parts can be ordered and enough support staff can be assigned to a station is missing. The poor funding the Coast Guard has to deal with causes stress on the job, which in turn causes stress at home.” — Coast Guard spouse

Also within the pay and benefits category, respondents asked for more availability and oversight in housing, more access to financial advisors and legal services, and more help understanding benefits. For example, a spouse of a deceased Army veteran said, “After loss of husband, it took 17 months for his VA pension to come through. He paid into SPB 28 years, and because he was a disabled vet and assumed I would receive both SBP and VA pension. I was informed I could not have both.”
Question: Overall, how do you feel about the quality and availability of support programming
\((n=556)\)

Generally, respondents said they felt positive about the quality of support programming when it was available. They said that it is inconsistent from location to location, and it can be very hard to access. Those reporting difficulties accessing programming attributed it to confusion about what is available and not knowing where to go to find information, and living away from a base or post with support facilities.

About 41 percent said their experiences using support programming was positive. About 20 percent said programming was adequate, while 19 percent said their experiences have been negative. About 15 percent said they had difficulty accessing programming:

- “I wouldn’t mind at least getting information about all of the different support areas, but no one is just willing to hand it out. You have to know who to ask for it and that is like pulling a needle from a haystack.” — Air Force spouse
- “It is very hard to find out information, particularly if you or your spouse is new to the military. There are no instructions for becoming a military affiliated family, and smooth integration requires a large amount of research done on personal time.” — Army spouse
- “I am so frustrated with military life and I keep hoping it will get better as both my husband and I have a great sense of pride in the United States of America and our proud to serve in whatever capacity we can. I can understand the difficulty that lies in trying to provide help for everyone but I feel that as new members to the military we have virtually been swept under the rug. The only thing that I have been able to utilize was a Facebook page for while my husband was going through OSUT but once he was done I feel very disconnected from everything military related. I’m trying to navigate a whole new lifestyle with a baby due any day and what feels like no support from the great nation that my husband is working to defend. I need someone to reach out and care a little bit that this is all very confusing and hard. I’ve read what I can on websites but I can’t get a lot of answers on most because we don’t have a unit assigned so they don’t know who to put me in contact with.” — Army spouse

Additionally:
- 6 percent said their experiences have been inconsistent from location to location
- 3 percent said they don’t want support programming cut
- 2 percent said retirees need more support
- 1 percent said families without children are overlooked

Question: What kind of unemployment support do you receive?

\section*{Unemployment}
\((n=350, \text{ but } 217 \text{ responded they did not need programming})\)

Of the remaining:
- Military Family Center: 24 percent
▪ State workforce office: 23 percent
▪ Military nonprofit: 20 percent
▪ No assistance received / self-guided: 17 percent
  ▪ “It has never occurred to me to utilize military resources for job searching, as
    I have the impression that they feature low paying jobs.” — Navy spouse
▪ DoD employment program: 7 percent
▪ Other: 5 percent
▪ FRG: 2 percent

**Job searches**

(n=386, but 139 responded they did not need programming)

Of the remaining:

▪ Military Family Center: 26 percent
▪ DoD job board: 20 percent
▪ Military nonprofit: 15 percent
▪ Internet search: 14 percent
▪ No assistance received / self-guided: 9 percent
▪ Friends: 4 percent
▪ State workforce office: 3 percent
▪ Other: 2 percent
▪ Military transition assistance program: 2 percent
▪ Civilian job board: 2 percent
▪ Online job fair: 1 percent
▪ In-person job fair: <1 percent

**Employment Fair**

(n=324, but 168 said they have not been to one or don’t need them, and eight said they would like to attend, but they are not available in their locations)

Of the remaining 148 who have attended a job fair:

▪ Military Family Center: 38 percent
▪ Military nonprofit: 19 percent
▪ Attended one, but it wasn’t helpful: 18 percent
▪ Attended, nonspecific: 9 percent
▪ Installation: 6 percent
▪ Virtual job fair: 3 percent
▪ Military Transition Assistance: 2 percent
▪ Other: 2 percent
▪ State workforce center: 1 percent
▪ VA: <1 percent
▪ Social media: <1 percent
▪ Self-guided: <1 percent

**Resume Building**

(n=338, but 145 said they did not need or use resume building)

Of the remaining:

▪ Military Family Center: 52 percent
Military nonprofit: 17 percent
Tried to get help and couldn’t: 9 percent
Self-guided: 8 percent
Military Transition Program: 7 percent
State workforce center: 3 percent
Paid for assistance: 2 percent
DoD assistance: 2 percent
College/university: 1 percent
Family or friend: <1 percent
Church: <1 percent

Question: What kind of wellness support do you receive?

Medical care
(n=572)
Military Treatment Facility, on-base care: 29 percent
Receiving care: (nonspecific yes answer): 20 percent
Tricare: 16 percent
Civilian care (off base): 10 percent
General medical care: (checkups, well care etc.): 7 percent
Specialists: 6 percent
None: 5 percent
Positive experiences: 4 percent
VA: 3 percent
Hospital care: 1 percent
Negative experiences: 1 percent
Limited care: <1 percent

Illustrative responses:
“#1 benefit. As a retiree we still have a hard time paying the increasing costs as a working family.” — Spouse of Army retiree
“I don’t trust the military clinics with my health.” — Navy spouse
“Doctors are hit-or-miss. Is there a way we can check up on records/background of military docs like we can in the civilian force?” — Army spouse
“This has been the most frustrating! We have a baby due any day now and I have to drive nearly four hours to get to a hospital that was considered covered by Tricare. The doctor I have been seeing has been absolutely fantastic! However, there is a hospital right here in my town three blocks away with my personal doctor I have had for 15 years and I would have very much preferred to see him.” — Army spouse

Health Insurance
(n=608)
Tricare: 74 percent
Yes, nonspecific: 18 percent
None: 3 percent
Civilian care: 1 percent
Negative experiences: 1 percent
N/A: 1 percent
General government insurance: <1 percent
Private insurance: <1 percent
United Healthcare: <1 percent
VA: <1 percent
Medicare: <1 percent
Union: <1 percent

**Prescriptions**
*(n=551)* 94 percent of respondents said they have used prescriptions. Of those, they reported:
- Use them, unspecified: 43 percent
- On-base pharmacies: 25 percent
- Tricare, Express scripts: 23 percent
- Civilian pharmacies: 6 percent
- VA: 3 percent
- Mail order: <1 percent

**EFMP**
*(n=314)*

*Enrolled:* 60 percent
- Unspecified care: 85 percent
- On-base care: 7 percent
- Civilian care: 5 percent
- Tricare: 3 percent

*No care, not enrolled:* 40 percent

About 16 respondents relayed negative experiences under EFMP. (This question did not measure for quality of experience, but the frequency seems relevant.)
- “The EFMP program has meant a lot of needless paperwork for my insignificant ‘condition.’ I’m sure it is a great program when used appropriately. In too many cases, it is just an additional burden on the families who shouldn’t actually be in the program, or families who have orders refused because the gaining command doesn’t even review the individual merits of each case.” — Spouse of a Navy retiree
- “Too complicated - paperwork is unclear and a lot of hassle.” — Army spouse
- “Needs to be better managed with strong follow ups on mental health cases.” — Army spouse

**Nutrition**
*(n=315)*
- “There are nutrition classes offered by local spouses, which is great. The produce at the commissary seems to go bad overnight, though, and makes it difficult to get fresh.” — Air Force OCONUS spouse.
Receiving support: 60 percent. Of those:

- On-base care: 28 percent wellness center, gym
- Unspecified: 23 percent
- Follow USDA guidance: 13 percent
- Base hospital: 8 percent
- Seeing doctor, nutritionist: 5 percent
- Classes on base: 5 percent
- Commissary: 3 percent
- VA: 3 percent
- Negative experiences: 3 percent
- Personal care: 3 percent
- School: 2 percent
- Branch support: 1 percent
- Civilian support: 1 percent
- Grocery store: 1 percent
- Gym: 1 percent

No support: 40 percent

Fitness
(n=201)

Engaging in fitness activities: 80 percent. Of those:

- Base gyms: 51 percent
- Unspecified: 22 percent
- Civilian gyms: 6 percent
- MWR: 6 percent
- Running track on base: 4 percent
- Stroller warriors: 3 percent
- Civilian classes: 1 percent
- Exercise at home: 1 percent
- Personal trainer: 1 percent
- Physical therapy: 1 percent
- Community fitness groups: 1 percent
- Base classes: <1 percent
- Military OneSource: <1 percent
- University gym: <1 percent

Not engaging in fitness activities: 20 percent

Childcare at gyms
The most common comment throughout the fitness section was the need for childcare at base gyms. Spouses would like to use the amenity, but they can’t if childcare is not available. As a result, they are not going or they are paying for memberships in civilian gyms.

- “I go off base, because the CD is full for drop-in care, and I need daycare.” — Marine Corps spouse
“Quantico (BPAC Gym) has a childcare co-op. This is the only example I know of that has allowed milspouses to utilized on-base facilities and workout childcare.” — Marine Corps spouse

“The gym is very good. But with no offered child care and or a mommy-me workout playroom a lot of family members don’t always get to utilize the gym as often as they would like.” — Navy spouse

“We no longer use on post gyms since childcare has been cut. It makes more sense to pay monthly and use the YMCA off post.” — Army spouse

**Mental Health**

*(n=293, but 125 said they had never needed or used mental health services.)* The remaining 168 described services as:

- Civilian provider: 14 percent
- Military OneSource: 13 percent
- Tricare coverage: 13 percent
- Family support program or referral: 12 percent
- Nonspecific, received care: 12 percent
- Base medical: 10 percent
- Positive experiences: 8 percent
- Hard to find help: 7 percent
- VA: 5 percent
- Negative experiences: 4 percent
- General counseling: 4 percent
- Chaplain: 3 percent
- Don’t know: 1 percent
- Primary Care Managers: 1 percent
- Need more options and providers: 1 percent
- Give an hour: <1 percent
- SECO: <1 percent

**Illustrative responses:**

- “I am very disappointed in the official mental health system provided via the medical units. I did some research on them and their idea of confidentiality was pretty poor. I love the idea of the MFLCs but my actual experience has been mixed. Of the five I’ve spoken with, three were absolutely flighty and one was just so-so. Only one was a great counselor who provided value.” — Navy spouse
- “I use my university’s program because the Tricare doc couldn’t remember my name.” — Navy spouse
- “This is desperately needed support for military spouses and family but regardless of what you are told, using these services does have a stigma and can very much impact your spouses career. I do not use the facilities in base, but I have used Military One Source for services. Justifying care with Tricare is a hassle in an already stressful situation.” — Navy spouse
- “Will never use mental health services provided by the military, if the government ‘owns’ my medical record, they can use this against my family.” — Air Force spouse
Pediatric Healthcare
(n=311)
- Military hospital / clinic: 38 percent
- General use, unspecified: 16 percent
- Civilian providers: 14 percent
- Positive: 11 percent
- Tricare: 9 percent
- No care: 9 percent
- Negative: 4 percent
- Hard to access care: 2 percent

Children / Adolescent Mental Health
(n=249) Most of the respondents to this question, 63 percent, said they have not needed mental health services for their children. Of those who had:
- 24 percent use on-base care
- 23 percent receive care, unspecified
- 16 percent used Tricare to find their services
- 13 percent said it was difficult to access services, some because there were no providers available to them
  - “Have to travel over 70 miles to a doctor for my son.” — Marine Corps Spouse
  - “This area needs to be looked at. Again, most outsourced and very frustrating.” — Air Force Spouse
- 9 percent went through Military OneSource to find care
- 6 percent used civilian care
- 4 percent use FOCUS
- 2 percent used the Strong Families program
- 1 percent went through a caseworker
- 1 percent was referred by a family support center

Respite Care
(n=217)
Most of the respondents to this question, 84 percent never used any kind of respite care.

Of the remaining respondents, 34 percent, said they have had difficulty accessing services:
- “Can’t even get it with all the damn paperwork,” one Army active duty member said.
- “Has become complicated and the contractor never has providers,” an Army spouse said.
- “The program was cancelled for the majority of families. When it was in force, I used it monthly and it was a wonderful blessing,” said a Marine Corps spouse.
The most common ways respondents said they are accessing respite care was: (The numbers for this section were very small, and therefore statistically insignificant. However, the information provided is relevant.)

- Through EFMP referrals
- On base
- YMCA
- Coast Guard Foundation
- Medicaid
- Local church

**Emergency Assistance**

\[(n=272)\]
Respondents could interpret an emergency in any way they wished. It was most commonly defined as a medical or financial emergency. For example, one Air Force spouse said, “The Red Cross. My father-in-law passed away earlier this year and the Red Cross was able to get my husband home from deployment, as well as arranging for me to travel back to the US from Japan.”

Most of the respondents to this question—41 percent—said they did not need emergency assistance. But when they did need help, they relied on:

- Military Treatment Facility: 28 percent
- Civilian emergency room: 16 percent
- Received help, unspecified: 16 percent
- Red Cross: 8 percent
- Tricare: 6 percent
- Family readiness support: 6 percent
- Military Relief Societies: 6 percent
- Urgent Care: 4 percent
- 911: 3 percent
- Nurse phone line: 2 percent
- Family and friends: 1 percent
- Lives of Promise: <1 percent
- Medicare: <1 percent
- Military OneSource: <1 percent
- Operation Homefront: <1 percent

However, perhaps most disconcerting, 8 percent said they had trouble finding help in emergencies. And a few of those said that, as a result, they went without assistance or incurred high bills:

- “With my retired husband not employed and me only working 30 hours weekly for $12 an hour, when I should have gone to the ER, I didn’t because of the $50 co-pay. Instead I curled up in a ball, cried in pain, until I literally passed out after taking some narcotics we had from a surgery I had last year.” — Navy retired spouse
- “VA stuck us with bill because we didn’t drive 69 miles to VA ER for non life or death,” Marine Corps veteran’s spouse.
“They covered the cost of the ambulance, which I eventually had to pay back.” — Navy spouse

**Question: What kind of education support do you receive?**

**Tuition Assistance**

(n=373)

- Have used: 50 percent. Those respondents listed 14 tuition assistance programs, the GI Bill and MyCAA being the two most popular.
- Have not used: 29 percent
- Responded N/A: 13 percent
- Said they are not eligible or do not qualify: 6 percent
- Don’t know: 1 percent

**School Liaison Officers**

(n=254)

- Have used or know they exist: 31 percent. Within that group, 24 percent reported positive experiences, especially during PCS transitions. Negative experiences were reported by 18 percent of the group, specifically because they did not receive the help they needed.
- Have not used, but know they exist: 16 percent
- Not available to them: 24 percent
- N/A: 26 percent. These could be families without school-aged children, or families who homeschool or send their children to private schools.
- Don’t know about them: 3 percent

**Scholarships**

(n=257)

- Have used or know they exist: 19 percent
- Have not used, or having trouble getting them, but know they exist: 39 percent
  - “No. I actually had an extremely difficult time finding graduate level scholarships for military spouses. My application was rejected by the few that I did apply (despite the fact that my area of focus is in improving design and livability of military bases...), and it appeared most of the recipients were either going into teaching or nursing. That experience was extremely discouraging for me as a military spouse with an education and career in environmental management and urban planning.” — Marine Corps spouse
  - “Our daughter is leaving for college next week, she has applied for over 200 scholarships and has not received even 1. I understand they are competitive, but it seems like they penalize military kids for working hard & getting a full tuition scholarship. There are FAR more costs to college, than tuition.” — Spouse of Navy retiree
- N/A: 49 percent
Interstate Compact on Educational Opportunities for Military Children

(n=101)

- **Have used, know what it is:** 11 percent
  - Positive experiences: “We have used this to get our children into the next level of language when the new teacher didn’t want to take them...great equalizer for those of us that move every two/one years with high school children” — Air Force spouse
  - “I’m glad this exists because it made me sure my transferring senior could graduate without crazy requirements at the new school” — Navy spouse
  - Negative experiences: “Useless unless schools implement, which I’ve seen scant attention to.” — Air Force spouse

- **Have not used, know what it is:** 71 percent
- **Don’t know what it is:** 10 percent
- **N/A:** 7 percent

**Tutoring**

(n=203)

- **Used:** 13 percent. The most popular among those who reported where they are accessing tutoring was Tutor.com, a free program for DoD families. The next most popular was school-sponsored tutoring. Participants are also using online resources, Kumon, Military OneSource, Red Cross, and tutoring from youth centers.

- **Have not used, but know about it:** 43 percent
- **Don’t know about it:** 6 percent
- **N/A:** 37 percent

**Question: What kind of financial readiness support do you receive?**

**Financial Counseling**

(n=312)

The majority of respondents to this question—46 percent—said they received no financial counseling. The remaining responses were relatively fragmented.

- **Some support, nonspecific:** 14 percent
- **Family support services:** (like support centers, FRG, FRO, etc.): 12 percent
- **USAA:** 8 percent
- **Navy-Marine Corps Relief Society:** 5 percent
- **Base or branch services:** 4 percent
- **First Command:** 3 percent
- **Private:** <1 percent
- **Navy Federal:** <1 percent
- **Church:** <1 percent
- **Military OneSource:** <1 percent
- **Self-guided:** <1 percent
- **ACAP:** <1 percent
- **VA:** <1 percent
- **Dave Ramsey:** <1 percent
**Insurance**  
(*n*=305)  
- USAA: 41 percent  
- None: 31 percent  
- Some, nonspecific: 10 percent  
- Tricare: 4 percent  
- SGLI: 3 percent  
- Base services: 2 percent  
- State Farm: 2 percent  
- Geico: 1 percent  
- Private: <1 percent  
- Armed Forces Insurance: <1 percent  
- Bank: <1 percent  
- Navy Mutual Aid: <1 percent  
- Progressive: <1 percent  
- Self: <1 percent  
- VGLI: <1 percent  
- First Command: <1 percent  
- FRG: <1 percent  
- Marine Federal: <1 percent  
- Navy Federal: <1 percent  
- VA: <1 percent

**Taxes**  
(*n*=270)  
- None: 40 percent  
- Base services: 20 percent  
- H&R Block/ Military OneSource: 12 percent  
- Some, nonspecific: 11 percent  
- Self: 6 percent  
- CPA: 5 percent  
- TurboTax: 4 percent  
- Online: 2 percent  
- Exempt: <1 percent  
- JAG: <1 percent  
- Private: <1 percent  
- TaxSlayer: <1 percent  
- Bank: <1 percent  
- Jackson Hewitt: <1 percent  
- IRS: <1 percent  
- Kleber Tax Center: <1 percent  
- Liberty County: <1 percent  
- United Way: <1 percent  
- USO: <1 percent
Real estate/housing
(n=320)
- None: 31 percent
- Military Housing: 19 percent
- VA Home Loan: 10 percent
- BAH: 7 percent
- Some, nonspecific: 6 percent
- Automated Housing Referral Network: 5 percent
- Real estate agent: 5 percent
- USAA: 5 percent
- Self: 4 percent
- Military By Owner: 2 percent
- Base services: 1 percent
- Armed Forces Insurance: <1 percent
- Military OneSource: <1 percent
- Navy Federal: <1 percent
- HUD-VASH: <1 percent

Question: What kind of transition support do you receive?

Moving
(n=371)
- Branch assistance: 32 percent
- Some assistance, unspecified: 29 percent
- No assistance or DITY: 20 percent
  - “None. I had to move everything while he was at work. Could not get a day off to move us.” — Army spouse
  - “Ha! No help here.” — Coast Guard spouse
- Non branch specific organization: 8 percent Move.mil, USAA, Military OneSource
- Negative experiences: 12 percent (This question did not ask about the quality of experience, only what was used.)
- Private moving service: <1 percent

Legal
(n=338)
About 62 percent reported using some form of military legal aid. Of those who described the services they requested, wills and powers of attorney were by far the most used: 38 percent and 39 percent, respectively. The rest of the services used were: legal advice, notary, financial issues, healthcare proxies, taxes and trusts. “My husband and I have started making it a habit to take care of legal stuff all at once and together. In my experience you can’t do anything legally, as a military spouse without the active duty member present or without his permission on a POA. As soon as our last expired we got a new one just to save on the hassle and allow me to assist my husband with chores when he’s working. We are currently working on our wills. The office is amazing at making the process easy and pain-free,” said a Navy spouse.
Of the remaining who did not use military legal assistance, 31 percent reported not needing or using legal assistance. About 5 percent said they used private legal services that they pay out of pocket. A few—about 2 percent—used non-branch specific services, such as USAA.

**Deployment**

*(n=326, however, for 45 respondents, deployments are not relevant to their situations, so they responded not applicable. Also, some respondents described more than one deployment experience. Therefore, the figures are most effective as a snapshot of where and if families are accessing assistance.)*

About 64 percent have found some sort of deployment support. Of those who have found support, they reported relying on:
- Family readiness volunteers: FRG, FRO, Ombudsmen, etc.: 47 percent. These results showed some negative experiences, but generally positive. “It’s nice to know someone is looking out for me while my husband is down range.” — Air Force spouse
- Family support Centers: 18 percent
- Nonspecific: 15 percent
- Outside agencies, nonprofits: 13 percent. Respondents listed nine agencies specifically: Blue Star Families, Esposas Militares Hispanas USA, Heartlink, Hearts Apart, Red Cross, Stroller Warriors, USO, Yellow Ribbon, and YMCA. “Stroller Warriors were my support during this last deployment. Don’t know what I would have done without this group and the accessibility to running trails and playgrounds for our children. So many times spouses turn to unhealthy outlets when faced with the deployment stress. This group was my therapy.” — Marine Corps spouse
- Branch: 13 percent said they were supported from within the military branch. “Totally depends on the command. With the Marines, they have it locked on & do it right. The Navy (active duty with reserve battalions) have NO CLUE & there is ABSOLUTELY NO SUPPORT for the active duty families left behind.” — Spouse of Navy retiree.
- Family and friends: 9 percent
- Military OneSource: 2 percent
- USAA: 2 percent
- Chaplain: <1 percent
- Library: <1 percent

No support: 36 percent said they have not accessed any support.
- “My husband has been deployed many times, and I can say that I have never gotten any help, not even a phone call to see how things are going.” — Air Force spouse
- “That’s a joke right?” — Army spouse
- “Oh my God—NONE. Absolutely NONE. Key spouse program -FAILURE. Readiness centers, support centers, whatever, no one cares. On my own. Alone for
a year. NO ONE CARES about families going through a deployment.” — Air Force spouse.

**Retirement**

*(n=224, but 67 said retirement was not applicable to their situation.)* Of the remaining:

*No assistance:* 64 percent said they had either didn’t use services because they didn’t need them or they didn’t know how to find them. This figure may also be representative of the fact that many of the respondents were spouses. For example, one Air Force spouse said, “Not made available to spouses.” An Army spouse said, “Retirement and separation—find a friend who can help you through, but you can be left floundering and not knowing what to do.”

*Assistance:* The remaining 36 percent said they mainly found assistance through their military service branch, such as TAPS, IPAC, ACAP and STARS.

**Specific Services**

**Commissary/Exchange**

*Commissary:* The majority of respondents have access to a commissary and/or an exchange.

![Access to a Commissary and/or Exchange](image)

<table>
<thead>
<tr>
<th>Access</th>
<th>No access</th>
</tr>
</thead>
<tbody>
<tr>
<td>91%</td>
<td>9%</td>
</tr>
</tbody>
</table>
Most participants who answered the question (n=638) said they live within a 10-minute drive of the Commissary and/or exchange.

The primary shopper, by far, is the spouse at 85 percent (n=595). He or she shops at the commissary at least (n=623):

- Weekly: 53 percent
- Monthly: 27 percent
- Quarterly: 5 percent
- Rarely: 11 percent
- Never: 4 percent

The reasons respondents gave for whether they shopped at the commissary or exchange centered mainly on convenience, price, and selection. The responses were mixed into one open-ended question, (n=602), so the list that follows shows the frequency of responses within categories.

**Reasons for shopping at the Commissary:**

- Convenient: 116
- Low prices: 297
- Good selection: 73
- Good quality: 10
- Familiar: 10
- American foods (OCONUS): 10
- Supporting the base: 5
- Friendliness: 4
- Accessible: 3
- Service: 3
- Organic choices: 2
- Ethnic foods: 1
Reasons not to shop at the commissary:
- Inconvenient: 128
- High prices: 67
- Poor selection: 47
- Poor quality: 47
- Too crowded: 16
- No organic choices: 10
- Surcharge: 4
- Inaccessible: 2

Generally, respondents’ negative comments about the commissary were focused on meat and/or produce. Wal-Mart was often used as a foil against the commissary as a preferred place to shop for lower prices. However, OCONUS families were highly complimentary of the commissary.

The exchange was much less popular in comments than the commissary, and complaints mainly focused on the prices being too high.

While respondents said they shop more often in the commissary than in the exchange. They were split evenly on whether they shopped in both on the same trip (49 percent) or just one of them (51 percent). Similarly, the responses were split evenly on whether they access other installation services when they shop: 51 percent said they do and 49 percent said they don’t.

If they do access other services, they are accessing a variety of base amenities. The 299 who answered affirmatively gave 660 examples of 49 unique options. The following list shows the frequency of their choices:
- Gas: 98
- Medical/pharmacy: 51
- MWR: 32
- Post office: 30
- Class 6: 27
- Minimart: 20
- Travel tickets: 20
- Class 6: 27
- Haircut: 25
- Bank: 16
- Family support center: 11
- Park/playground: 11
- Car wash: 10
- Pool: 10
- Exchange: 9
- Uniform shop: 9
- Dry cleaner: 8
- Coffee shop: 6
- Mini mall: 6
- Thrift: 6
- Video store: 6
- ID office: 5
- Tailor: 5
- Youth sports: 5
- Auto hobby: 4
- Golf course: 4
- Craft store: 3
- DEERS: 3
- Furniture store: 3
- Legal: 3
- Schools: 3
- Vitamin store: 3
- Bingo: 2
- Commissary: 2
- Lawn and garden shop: 2
- Miscellaneous, nonspecific: 2
- Volunteering: 2
- Auto registration: 1
- Auto service: 1
- Cable store: 1
- Cell phone shop: 1
- Dental: 1
- Farmers market: 1
- Flower shop: 1
- Hardware store: 1
- Lemon Lot: 1
- Shooting range: 1
- Vet: 1
- Watch repair: 1

**Healthcare/Military Treatment Facility**

Most respondents—79 percent—said they have access to a Military Treatment Facility (MTF). A general evaluation of respondents’ perceptions of the kind of treatment one receives at an MTF yielded:

![Quality of Care at MTFs](image)
For those who responded to this question (n=528), 79 percent had access to an MTF. Most of them, 61 percent, lived within 20 minutes of the facility. About 13 percent lived 21 to 40 minutes away.

The reasons for choosing to use an MTF varied. Most who responded to the question (n=519) said they do use one, at 78 percent. The six most commonly reported reasons participants gave for choosing the MTF:

- **Required**: 27 percent said they chose it because they had no choice because it was required as part of Tricare Prime. Of those, many seemed to think they had no other option other than Tricare Prime.
- **Convenience**: 23 percent said they chose it for the convenience of having all care in one place nearby.
- **Quality of care**: 16 percent said they chose it for the quality of care they receive.
- **Cost**: 13 percent said they use it because they cannot afford to pay copays or for Tricare Standard.
- **Overseas**: 4 percent said that because they are overseas, the only real option for medical care is the MTF.
- **Only option**: Similarly, 3 percent said they saw the MTF as the only realistic option.

Of the 22 percent who chose not to use an MTF, there were also six main reasons for their decisions:

- **Access**: 36 percent said they wanted access to appointments and the ability to see general doctors and specialists in a timely manner.
- **Poor care**: 31 percent said they received poor care at an MTF.
- **Distance**: 19 percent said distance kept them from using an MTF.
- **Referred elsewhere**: 11 percent were referred to other providers.
- **Inconsistent care**: 5 percent said the turnover of providers and inconsistent care were the reasons they did not use the MTF.
- **Other insurance**: 5 percent said they had other insurance.

If they chose healthcare elsewhere, the reasons they did so were:

- **Poor care**: 34 percent said they chose not to go to MTFs because of poor care.
- **Referrals**: 26 percent said they were referred to other treatment centers because either doctors weren’t available or their more complex medical conditions required they go elsewhere.
- **Access**: 25 percent said the lack of timely appointments with both regular doctors and specialists motivated them to look elsewhere.
- **Convenience**: 18 percent wanted more convenient healthcare, including a closer distance.
- **Continuity**: 4 percent wanted continuity of care.
- **Choice**: 3 percent wanted to make their own healthcare choices.
The majority of the respondents—77 percent—said they have access to indoor or outdoor military-sponsored recreational facilities. Half of the respondents said they use them at least monthly, the rest said they use them yearly or never.

Types of facilities available: (n=465)
- Basic indoor: 26 percent. Gyms that hold a range of equipment and classes.
- Basic outdoor: 25 percent. Outdoor tracks, fields, and nature paths.
  - “I don’t use the gym as childcare is an issue, and they don’t offer it. I joined the YMCA (which is awesome for military families) as they offer childcare.” — Air Force spouse
  - “Never. Parking is awful! and the hours of the pool I would like to use don’t work for me. They are only open a short time in the early morning and then during lunch up until dinner. Because of cut backs, the hours aren’t great and because of money woes, the parking hasn’t been improved like it should.” — Navy spouse
- Pool: 16 percent
- Entertainment: 7 percent. A variety of on-base options including bowling alleys, libraries, and movie theaters.
- Extensive outdoor: 4 percent. Expansive outdoor facilities including rock climbing, golf courses, paintballing, tracks, fields and nature paths.
  - “Often - it’s free equipment rental and why not? The military goes to a lot of effort to make living in Alaska bearable and if it wasn’t used, it wouldn’t be offered. We treat every duty station like a working vacation!” — Spouse of Army retiree
- Extensive indoor: 3 percent. A wide range of group classes, indoor tracks, pools, and rock walls.
- Unsure: 2 percent
  - “Living off-base, we never know what is going on. We are isolated from military activities.” — Navy spouse
  - “On the last installation we used them weekly, here being that I don’t know where anything is and my spouse will not arrive for another month I won’t receive any information until he does arrive.” — Army spouse
Lake: 2 percent
Events/Activities: 1 percent. Various sports programs or groups for spouses, children, and families.

**Housing (n=568)**
The majority of the respondents—72 percent—said they do not live in housing. Many of their reasons for choosing whether to live on or off base are in alignment — it is the outcome that determines the choice. Affordability, convenience, availability, and quality were some of the most common defining factors.

*Reasons for choosing to live in housing:*
- Convenience: 26 percent
- Affordability: 22 percent
- Security: 11 percent
- Camaraderie: 6 percent
- Mandated housing: 6 percent
- Quality of housing: 5 percent
- Availability: 2 percent
- Nonspecific: 2 percent
- Quality of schools: 1 percent
- Number of pets allowed: 1 percent
- ADA accessible: <1 percent

*Reasons for choosing to live off base:*
- Unavailability of base housing: 27 percent
- Affordability: 21 percent
- Lack of quality of base housing: 18 percent
- More privacy / control of home than in housing: 6 percent
- Convenience: 6 percent
- Quality of schools: 3 percent
- Nonspecific: 2 percent
- Safer than on-base housing: 2 percent¹
- Number of pets allowed: 2 percent
- Mix with civilian community: 2 percent
- ADA accessible: 1 percent
- Camaraderie: <1 percent
- Security: <1 percent

¹ Regarding safety in base housing: Some of the respondents specifically said their safety concerns were for stairs in base housing — and most of these were in housing developments in various parts of Germany. During the data collection period, there was a high-profile story of a military spouse dying after falling down the stairs.
Illustrative responses about housing:
- “The house had mildew, heater didn’t work properly, it wasn’t spacious” — Army spouse
- “We could get much more for our BAH in town that with military/PPV housing and have access to stronger schools” — Navy spouse
- “I love the housing options they offered. I love the services they provide and I love that I am on base especially when my husband is deployed.” — Navy spouse
- “I like the security of being on base. I like that my kids can go out and play and I feel that they are safe. Plus it is so close to school and the commissary.” — Marine Corps spouse
- “The time on the waitlist for housing was longer than my spouse’s assignment here, so there was no other choice than to rent in town.” — Navy spouse

Childcare (n=654)

Most of the respondents—80 percent—said they do not use childcare services outside their homes. For those who do, or who are looking, priorities for childcare outside their home are security and safety. Affordability is also a priority, and it seems to be one of the gatekeepers for care—if it is too expensive, they keep looking. Certification, clean environment, location, and quality round out the top six priorities.

- Security: 51 percent
- Affordable cost: 29 percent
- Certifications: 23 percent
- Clean environment: 21 percent
- Location: 19 percent
- Quality: 18 percent
- Accessible hourly care: 9 percent
- Low provider-child ratio: 5 percent
- References: 5 percent
- Tutoring: 5 percent
- Provides food: 4 percent
- Reliability: 4 percent
- Tutoring: 4 percent
- Background checks: 2 percent
- Handle special needs children: 1 percent
- After-school care: 1 percent
- Support nursing working mothers: 1 percent

“Price is always the first consideration. Second is the credentials of the employees watching my son. If they have stimulating teaching plans for the day, and an open visiting policy I will give them a chance. However, I’ve always done a lot of exploring when choosing daycare until the CDC. The price was so great that we just trusted the military installation childcare experience for our son.” — Navy spouse
“Affordable, which on post care is not. I do not want to spend $500 a month for it. I looked for other options in German daycare I pay 106 euro a month, which is about $180 for full-time care, and she has better chance of learning stuff.” — Army spouse

Military Family Support Center \((n=341)\)

About two-thirds of the respondents said they have access to a military family support center. These centers differ from FRGs, FROs, ombudsmen, etc. in that they are funded centers with paid employees. (The latter are volunteers.)

Just over half of the respondents—55 percent—said they do not use the services there. The remaining said they use:

- Military Family Center: 14 percent (Joint Education Center, Family Member Employment Assistance Program, Personal Financial Management Program, Relocation Assistance Program, L.I.N.K.S., and Marine Corps Family Team Building)
- Employment assistance: 6 percent
- Minimal services (fax, Internet): 3 percent
- MWR: 3 percent
- Deployment services: 2 percent
- FRG: 2 percent
- EFMP: 2 percent
- Financial counseling: 2 percent
- Servicemember services: 1 percent
- All: 1 percent
- Education: 1 percent
- Federal subsidy program: 1 percent
- Transition Assistance: 1 percent
- Survivor outreach: <1 percent
- Childcare: <1 percent
- Religious services: <1 percent

Of those who use the services, their perceptions of the quality are:

![Perceptions of quality of military family support center](image)
Other places families are accessing support services are: \(n=318\)
- None: 51 percent
- Religious group: 12 percent
- Family or friends: 10 percent
- Civilian groups: 9 percent
- Online support group: 7 percent
- Other DoD support programs: 4 percent
- Family readiness: 3 percent
- Military nonprofits: 3 percent
- Mental health professionals: 1 percent
- Healthcare group: <1 percent

Respondents said they wish they had access to: \(n=227\)
- Resource listings: 10 percent
  - “Information. Need to know what is available prior to utilizing. And even if we did have access - it does not speak to the wait time of accessing those services.” — Spouse of Air Force retiree
- Expanded healthcare: 8 percent
- Affordable childcare: 7 percent
- More youth programming: 7 percent
- All: 7 percent
- Military Family Advocate: 7 percent
  - “Case management services would help so much. Then fleet and family could act as brokers connecting military families to one another.” — Navy spouse
- Networking opportunities: 6 percent
- Mental Health: 6 percent
- MWR: 5 percent
- Employment assistance: 3 percent
- Deployment support: 3 percent
- Financial counseling: 3 percent
- Local discounts, support: 2 percent
- Education Assistance: 1 percent
- School transition assistance: 1 percent
- DoD for Coast Guard: 1 percent
- Transition assistance (Retirement classes for spouses): 1 percent
- Expanded religious services: 1 percent
- Legal assistance: 1 percent
- PCS assistance: <1 percent
RECOMMENDATIONS

The 1,519 participants in this survey provided extensive access to the multitude of experiences they had accessing a great variety of military family support programs. The results showed that base amenities and healthcare rose to the top as some of the most appreciated support benefits. Family support—specifically childcare—was one of the most requested areas of assistance. Additionally, participants said they wish they had more help for EFMP family members and navigating healthcare as a whole. They also said, throughout the results, that employment assistance is still a great need for spouses and veterans. Participants said they have found help through nonprofit agencies and relief societies to meet a variety of needs outside the military support system.

As a result of the participants’ perceptions of support programs, five main recommendations emerged.

Recommendation: Investigate whether public-private partnerships with nonprofit agencies can more efficiently serve military families. Conduct additional research on the efficacy of support programs and whether they are reaching families.

Military families are as diverse as the general public—different families have different needs. Further research should be completed to evaluate the efficiencies and effectiveness of specific programs to then establish if programs are a worthwhile investment for military agencies, both in terms of meeting family needs as well as contributing to military readiness. The results were rife with participants sharing stories of having trouble accessing programs, specifically when discussing their overall experiences with support programs, and accessing emergency care, pediatric healthcare, childcare, respite care, military treatment facilities, and mental health for adults and children.

We recommend specifically investigating whether it would be more efficient, effective, and financially sound for government agencies to invest in public-private partnerships to support nonprofits that military families currently turn to in times of need.

Throughout the results, the participants said they find assistance through nonprofits, as well as civilian resources in their communities. Nonprofits rose to the top as one of the respondents’ most effective support systems. Many military families said they turned to nonprofits to meet needs specifically around employment support, deployment support, and financial emergencies. For example, respondents cited military relief societies as groups to which they turn for financial counseling, and most importantly, groups that assisted them through emergencies.

Recommendation: Avoid budget cuts to commissaries and sustain the budget. Commissaries are highly valued by military families.

About 75 percent of respondents live within 30 minutes of a commissary. Military families depend on the commissary for its cost savings and convenience—more than half visit the commissary on a weekly basis. While the exchange is far less popular than the
commissary, when military families visit the commissary they are also likely to access other installation services like: gas, salon, minimarts, the exchange, coffee shops, dry cleaners, etc. Revenues from these services fund MWR programs—another highly valued service. It is probable that if the commissaries are cut, military families will be less likely to shop at other installation stores, therefore directly impacting MWR funding.

**Recommendation:** Provide more opportunities for childcare for military families, and streamline existing childcare services to better serve families.

Access to quality, timely, and affordable childcare is a specific need that directly correlates with healthcare, wellness, and employment. Military spouses state that they are in specific need of hourly childcare so that they can go to doctor’s appointments, job interviews, and participate in physical fitness activities. The DoD and the Coast Guard should improve tracking at CDCs to create a streamlined system that captures waiting time. Policy should then be adjusted so that families have access to reliable childcare that includes hourly care.

**Recommendation:** Review the existing healthcare system to ensure families have access to timely, quality care, both direct and purchased care within the Defense Health System.

Military families said they use military healthcare out of necessity. Military families cited healthcare as something that they like and need, but said it was also a top issue of concern. Most respondents described their healthcare at Military Treatment Facilities as only adequate, and throughout their responses about a variety of healthcare support systems, they said that it was difficult to access. The review of the healthcare system should continue and DoD should examine access and quality of care as well as wait time, referrals, and access to specialists with military treatment facilities (direct care) and Tricare (purchased care).

**Recommendation:** Tailor employment support to the specific needs of military families.

Employment continues to be a top concern for military families, however, many respondents said that they did not need or did not access existing employment programs. Yet respondents said they needed more support in the employment arena. This is because respondents said they want specific support for their personal circumstances—trying to get work overseas, finding work after transition, or trying to continue a professional career through a series of moves. There also seem to be other barriers, such as lack of childcare, that interfere with military spouse employment. Therefore, assess current spousal and transition programs to meet existing employment needs and identify opportunities to enhance programming to address currently unmet needs.
Appendix A:

Nonprofits respondents named are listed first in order of frequency, then in alphabetical order.

USO: 55
Stroller Warriors: 28
Operation Homefront: 14
Unspecified nonprofits: 13
Esposas Militares Hispanas USA: 10
Blue Star Families: 9
Moms of Preschoolers: 4
Red Cross: 4
Veteran’s Organizations: 4
MOAA: 3
Semper Fi Fund: 3
Boy Scouts / Girl Scouts: 2
Care Coalition: 2
AARP: 1
Elizabeth Dole Foundation: 1
Fisher House: 1
Green Beret Foundation: 1
Green Care for Troops: 1
Hearts Apart: 1
Hemophilia Foundation: 1
Heroes at Home: 1
Heroes Care: 1
Homefront America: 1
Lives of Promise: 1
MachoSpouse: 1
Make a Wish: 1
Milconnect: 1
Military Assistance Mission: 1
Military Order of the Purple Heart: 1
Military Outreach: 1
Military Special Needs Network: 1
MSJDN: 1
Navy SEAL Foundation: 1
NMFA: 1
Operation Heal our Patriots: 1
Raising Raiders: 1
TACA: 1
Task Force Dagger: 1
Endnotes


Creswell, 126-127.


Recently, Adm. James E. “Sandy” Winnefeld extolled the value of collaborative partnerships to harness the private sector’s innovation and agility and apply those practices to help families navigate the intricacies of military life. “Public-private partnerships help both of us navigate a complex bureaucratic landscape and synchronize our efforts to effect real change,” he said. In addition, Adm. Winnefeld said a joint Public-Private Partnership Working Group was working toward developing comprehensive guidelines to encourage such partnerships.