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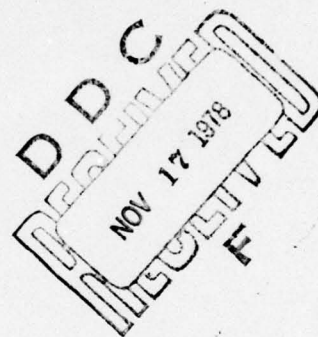
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PREGNANCY IN THE NAVY: IMPACT ON ABSENTEEISM,
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<p>Because of objections to the optional discharge and leave provisions of the Navy's present pregnancy policy, a study was conducted to determine the impact of pregnancy on Navy absenteeism, attrition, and workgroup productivity and morale. Data were obtained by analyzing administrative records for and conducting a survey of a previously identified longitudinal sample and by interviewing an aviation squadron sample. Results showed that abolishment of the present discharge option would increase the number of days lost by women.</p>		

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lower women's attrition rates, and increase the impact of pregnancy on workgroup productivity and morale. Further, if mandatory discharge for pregnancy were reinstated, it would decrease female absenteeism, increase female attrition, and increase workgroup turnover. Finally, if the policy's leave provisions were changed, it could reduce workgroup efficiency, while not improving morale of male Navy members, since interview results showed that most were not aware of them.

It was recommended that the present pregnancy policy be retained in its entirety, that Navy members of all ranks be made aware of the policy's leave provisions, and that present findings, which contradict many assumptions held about pregnancy's impact on the Navy, be widely disseminated.

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FOREWORD

This study was undertaken at the request of the Chief of Naval Personnel. One of the samples included in the study consisted of the female and male cohort samples of 1975 enlistees that are being utilized to investigate attrition among first-term female enlisted personnel under Exploratory Development Work Unit 55.521.021.03.03, Personnel Assimilation and Supervision.

Appreciation is expressed to Ms. Patricia J. Thomas, for her extremely valuable guidance and manuscript critiques, and to Dr. Kathleen Durning, for her insightful comments and suggestions. Appreciation is also expressed to Master Chief Personnelman David E. Perkins for his enthusiastic and skillful data collection efforts at geographically dispersed aviation training squadrons and his valuable contributions to the study design and data interpretation processes.

Portions of this study were presented at the Eighty-Sixth Annual Convention of the American Psychological Association in Toronto, Canada, in August, 1978, and in numerous briefings during the first part of 1978.

DONALD F. PARKER
Commanding Officer

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SUMMARY

Problem

The Navy's present pregnancy policy, implemented in 1975, gives Navy women who become pregnant the option to request discharge or to remain on active duty. A number of Navy managers have objected to the provisions of this policy. Some have objected to the optional discharge for pregnant women, claiming that it (1) results in high turnover of personnel and/or (2) adversely affects morale because women have a means of honorable discharge not available to men. Others favor a return to the policy of mandatory discharge, claiming that allowing pregnant women to remain on active duty reduces productivity and causes a decline in morale because of the hardship the pregnant woman places on her workgroup. Finally, some Navy managers feel that the policy of not charging maternity leave against the women's leave record is unfair because Navy women incur considerable lost time for pregnancy-related illness and disability.

Objective

The objectives of the present study were (1) to determine how pregnancy affects female attrition and absenteeism, (2) to examine the impact of the pregnant woman on workgroup productivity and morale, and (3) to determine the attitudes of Navy personnel toward the pregnancy policy and the pregnant coworker.

Approach

Two samples were selected for use in the study. The first was a previously identified longitudinal sample of approximately 1000 females and 1000 males who entered the Navy in 1975, and the second, aviation training squadron members of varying pay grades. The first sample was surveyed to determine their attitudes toward the pregnancy policy, their expectations and experiences of the impact of the pregnant coworker, and their own dependency status. Also, administrative records were analyzed to determine their absenteeism and attrition rates.

Interviews were conducted with members of the aviation squadron sample to determine their familiarity with the pregnancy policy, attitudes toward the policy, and experiences in working with pregnant Navy women. In both samples, all women who currently were or had been pregnant were questioned on the amount of their pre- and post-delivery time off, and on experiences encountered during pregnancy.

Findings

1. Women were significantly more likely to be absent for medically-related reasons; and men, for disciplinary-related reasons. The amount of time lost in one year was approximately 422 days per 100 women; and 703 days per 100 men. However, women were paid for 396 of their 422 lost days; and men, for only 186 of their 703 lost days.

2. Women who had given birth reported average absenteeism comparable to reports of civilian women--approximately 2 weeks during pregnancy; and 6 weeks, after delivery.

3. Attrition rates after 2 years' service were equal for female and male members of the longitudinal sample. Pregnancy accounted for the highest percentage (41%) of female discharges; and unsuitability, for the highest percentage (36%) of male discharges.

4. Eighty-three percent of the female dischargees were honorably discharged, compared to 30 percent of the men. When pregnancy discharges were omitted from the analysis, comparable percentages were 81 and 30 percent.

5. Over two-thirds of men and women who had worked with a pregnant woman reported little or no impairment of workgroup productivity. However, half of all male and one-third of all female survey respondents anticipated that it would be a hardship.

6. Survey respondents who had been pregnant while in the Navy reported limited effects on their relationships with peers or supervisors. Similarly, the large majority of interviewees of both sexes reported that a pregnant coworker had no effect on workgroup morale.

7. In interviews conducted with members of the aviation squadron sample, one-half of all the females, three-fourths of the male coworkers, and one-third of the male supervisors indicated that they were unaware of the leave provisions of the pregnancy policy.

8. The majority of women and men (85 and 59% respectively) in the longitudinal sample endorsed the optional discharge as well as the leave provisions of the pregnancy policy. (They were familiar with these provisions since a description of the policy was included in the survey instrument.)

Conclusions

Abolishment of the present discharge option would (1) increase the number of days lost by female enlisted personnel due to the increase in pregnancy-related absences, (2) increase the medical services required by Navy women's dependents, (3) lower enlisted women's attrition rate by as much as 40 percent, and (4) intensify the impact of pregnancy on workgroup productivity and morale.

If mandatory discharge for pregnancy were reinstated, it would (1) decrease female absenteeism by eliminating pregnancy-related absences, (2) increase female attrition to rates prevailing prior to implementation of the optional discharge policy, and (3) increase workgroup turnover, which would adversely affect workgroup morale and productivity.

Finally, if maternity leave were charged against annual leave, it would likely reduce workgroup efficiency by encouraging pregnant and postpartum women to work when they are not physically able to perform their duties. Further, it may not improve morale of male Navy members to the extent suggested, since interview results showed that most were not aware of the leave provisions.

Recommendations

1. The present pregnancy policy should be retained in its entirety.
2. Efforts should be made to inform Navy members of all ranks of the policy's leave provisions.
3. Relevant findings of the present study, which contradict many assumptions held about the impact of pregnancy on the Navy, should be disseminated to personnel at all echelons.

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INTRODUCTION

Problem

In 1975 the Navy abolished its policy of mandatory discharge for pregnancy. At present, the Navy woman who becomes pregnant has the option to request discharge or to remain on active duty. The many pregnant women who have chosen to remain in the Navy as the result of this new policy have been the cause of concern and even controversy on several issues. The areas of concern include:

1. The relationship between the pregnant worker's special requirements and limitations, real and imagined, and her job effectiveness or productivity.
2. The amount of pre- and post-delivery time "lost" to the Navy due to pregnant women who remain on active duty.
3. The policy of not charging pregnancy-related absences as annual leave.

These concerns have led some Navy members to argue that the current pregnancy policy must be changed, or the old policy reinstated. However, since the military services do not routinely collect data concerning pregnancies, these arguments are generally based on personal experience and attitudes rather than factual information.

Upon examining these issues, it appears that much of the controversy relates to the basic question of the cost effectiveness of male versus female personnel. Although the time women are absent for pregnancy-related illness and disability is most assuredly a cost to the Navy, it is only one of many factors affecting cost effectiveness of Navy personnel. Other factors that, of necessity, must be considered are attrition and absenteeism for reasons other than pregnancy, including unauthorized absences, confinement, hospitalization, and drug and alcohol rehabilitation.

Purpose

The objectives of the present study were: (1) to assess the impact of the present pregnancy policy on female absenteeism and attrition, (2) to compare the absenteeism and attrition rates of female and male personnel, (3) to evaluate coworker's perceptions of pregnant women's effects on workgroup morale and productivity, and (4) to examine the attitudes toward both the pregnancy policy and the pregnant coworker held by those who have and have not worked with pregnant women.

Background

Military Pregnancy Policies

From the time women were first admitted to the military services, the policy for dealing with pregnant personnel has been mandatory discharge. However, in the early 1970s, in three cases involving Air Force women, the constitutionality of this policy was challenged (Beans, 1975). In two of these

cases,¹ federal district courts upheld the regulation on a rational basis, declaring that it was a military necessity since the pregnant woman would impede satisfactory completion of the military mission. In the third case,² however, the court ruled that the policy deprived women of due process of law, by interfering with their fundamental right to bear children. The court conceded that there was a rational basis for the policy, since pregnancy did affect military efficiency due to the lost time involved. However, it ruled that a less drastic treatment than discharge must be provided. The court suggested that reassignment to a less arduous or dangerous job, transfer to another command, or other such measures could be taken to fully utilize the pregnant servicewoman without adversely affecting military efficiency. Before these conflicting lower court rulings could be resolved by the Supreme Court, the three women were reinstated in the Air Force.

About the same time the Air Force cases were being heard, a Marine Corps woman was being discharged for pregnancy (York, in press). She did not object to the discharge but to the fact that she was denied the opportunity to reenlist after her baby had been delivered and given up for adoption. Thus, she charged the Marine Corps with sex discrimination. On hearing her case,³ the court treated the military as a separate, specialized society, apart from civilian society, intimating that women waive the right to bear and raise children on signing their enlistment papers. As York notes, "the District Court was persuaded that there was even '... an undertaking on her part that she would not become subject to the debilitating consequence of pregnancy.'"

In April 1975, the Department of Defense (DoD) directed all of the military services to implement the current policy of optional discharge. Today a pregnant servicewoman who is performing her job in a satisfactory manner cannot be discharged against her will.

Army Policy and Survey. Upon receiving the DoD directive, the Army requested a delay in implementation, which was denied. Accordingly, the Army implemented a pregnancy policy in May 1975 that provides for retention of active duty women who become pregnant after entry unless they elect to be discharged. If it can be determined that a woman was pregnant prior to entry on active duty, she is involuntarily discharged. Pregnant women assigned in the continental United States who request discharge may specify a discharge date no later than 60 days prior to expected date of delivery. If they elect to stay, they cannot be sent overseas, either as individual replacements or as members of a deploying unit.

Under the Army policy, women may continue their regular duties during pregnancy at the discretion of their physician. They may be placed on sick in

¹Struck v. Secretary of Defense, 460 F.2d 1372 (9th Cir. 1971), vacated and remanded for consideration of the issue of mootness, 409 U.S. 1071 (1972); and Gutierrez v. Laird, 346 F. Supp. 289 (D.D.C. 1972).

²Robinson v. Rand, 340 F. Supp. 37 (D. Colo. 1972).

³Crawford v. Cushman, 378 F. Supp. 717 (D. Ver. 1974).

quarters status prior to delivery, normally not to exceed 4 weeks, and may be granted convalescent leave, usually no more than 6 weeks, during the postpartum period. If additional time is requested, they may be granted annual leave or leave without pay. A woman who is a sole parent may apply for a hardship discharge if she finds she cannot fulfill her military obligations without neglecting her child.

After the Army pregnancy policy had been in operation for 1 year, an Army study group surveyed Army commanders in an attempt to determine the policy's impact on unit deployability and efficiency (Women in the Army, 1976). Survey findings, first released in June 1976, showed that, at any one time, 3.8 percent of Army women are pregnant and nondeployable. For every full-term pregnancy, then, the individual cannot be deployed for approximately 9 months. This report also indicated that pregnant women are frequently placed on sick in quarters status prior to the authorized 4 weeks prenatal period, resulting in 40 to 87 days of sick in quarters status prior to delivery. As a result of this practice, the average Army woman who carries her pregnancy to term is absent from duty 105 days. A comparison of medically-related lost time of female and male officers revealed that the average number of days lost by women was over twice that lost by men, and that almost half of the time lost by the female officers was due to pregnancy.

Comments solicited from the major Army commands suggest that pregnant women adversely affect morale. Other service members believe that the women receive preferential treatment in duty hours, duty assignment, and sick call. Further, they resent having to take on extra duties during the absence of pregnant women or being assigned to an undersirable location due to their nondeployability.

Based on these findings, the study group recommended that the current policy be reversed. The Army subsequently asked DoD to cancel or change the policy forbidding involuntary discharges and to reinstate the old policy of mandatory discharge.

The conclusions of the Army report may be inappropriate due to several deficiencies:

1. The lost time reported for pregnancy cannot be evaluated because the sample used is not described in terms of either size or individual characteristics (e.g., rank and occupation).
2. It is unclear whether the assertion that pregnant women negatively impact on morale is based solely on comments of an unknown number of Army commanders or of other service members.
3. The report did not provide data on the extensiveness of nondeployability of men (Castle, Note 1).
4. The sample used in comparing medically-related lost time of male and female officers was too small for drawing major conclusions about the effects of the pregnancy policy (Castle, Note 1).

5. The study group failed to include several pertinent reasons for lost time. While lost time for pregnancy and sole parenthood was discussed at length, no data were presented for areas where women have better records than men (e.g., discipline, desertion, unauthorized absence, drug use, alcohol abuse). This fact was brought out by a DoD report (1977) on women in the military, which concluded: "Women may have about the same total lost time as men on the average; but, much more importantly, women would appear to have a propensity for much less lost time than the low quality male accessions they would replace (if the number of women in the Army were increased)" (p. 35).

Based on these criticisms, it appears that the Army survey was unsuccessful in assessing the impact of pregnancy and the lost time associated with it. Thus, Castle (Note 1) recommended that a comprehensive analysis of duty time lost by both women and men--for all reasons--be conducted to examine pregnancy problems in proper perspective.

Navy Policy and Controversy. Under the Navy's pregnancy policy, women who become pregnant are retained unless they request discharge for the convenience of the government or a release to inactive duty (BUPERSMAN 3810170). Requests for discharge must be submitted 4 months prior to desired release date; however, the actual discharge date may be delayed up to the time of delivery. Requests for discharge after delivery must be based on either hardship/dependency or sole parenthood. As in the Army, if it is determined that a woman was pregnant prior to entry or during the initial training period, she is involuntarily discharged as unqualified for military service.

Pregnant women who remain on active duty may be placed in light duty status, at the discretion of their physician, and subsequently assigned to sick in quarters status prior to hospitalization for delivery. Time spent in light duty, sick in quarters, and in the hospital is not chargeable to annual leave. A period of convalescent leave--not to exceed 30 days--may be granted during the postnatal period by the hospital commanding officer (CO) on the advice of the attending physician. Convalescent leave in excess of that time must be authorized by the Chief of Naval Personnel (CNP) (BUPERSMAN 3020160). Many times, however, physicians request a second period of convalescent leave after examining post-partum patients at the end of their first leave periods. This practice results in a number of women receiving more than 30 days convalescent leave without requiring CNP authorization. Return to duty is based upon the woman's physical condition, as determined by her physician on a case-by-case basis. Any leave taken in addition to the convalescent leave authorized by the hospital CO or the CNP must be requested under the command's leave program, and, if granted, charged against annual leave.

Since its implementation, the Navy pregnancy policy has stirred considerable controversy, as indicated in the following paragraphs:

1. The Naval Inspector General (IG) (Carmody, Note 2), after observing Navy women worldwide, concluded that pregnancies constitute "the most serious problem in the management control of enlisted personnel." He stated that (a) pregnant women affect command readiness, morale, and good order because of their inability to stand inspections and watches and their extensive time off for pregnancy-related illness and disability, and (b) male personnel resent the time off for delivery because it is not charged against the woman's leave record. As a result of his findings, the IG recommended that the Navy reexamine its pregnancy policy.

2. The general sentiment expressed by the IG was reinforced in a point paper prepared by a Master Chief Petty Officer of the Command in the air training community (Pierce, Note 3). He stated that the pregnancy policy had created a morale problem among male service members, who feel that its leave provisions are contrary to equal opportunity practices. Female members are granted time off without being charged as leave "when the reason for the absence is not incident to naval service and is the result of the individual's personal action as opposed to disability which is inflicted as a result of service in the Navy." To resolve this problem, he recommended that pregnancy-related absences be classified as leave without pay or as administrative absence, to be made up at the end of active obligated service.

3. The Commanding Officer of an overseas Naval Communication Station (Price, Note 4) objected to the policy of allowing pregnant women to be discharged, maintaining that it adversely affected his command at the organizational as well as the personal level. He stated that the policy resulted in a 20 percent unplanned loss rate, which impacted on the manpower stability of the command and the costs associated with personnel training, administration, and transfer. Further, he observed that male service members feel the policy is inequitable, since it allows female members to be honorably discharged prior to completion of their active duty obligation by simply submitting a request through the chain of command to the Commanding Officer. Since no comparable means of honorable discharge exists for men, he felt that such practice could be viewed as discriminatory and a violation of the Navy's equal opportunity program. To remedy the situation, he recommended that the option of discharge for pregnancy be withdrawn, and that only hardship/sole parent discharges be provided.

In response to the allegations made by the Army study group and the comments made by several Navy members on the impact of the pregnancy policy, the Assistant Chief of Naval Personnel (Smedberg, Note 5) declared that the policy not only conforms to the provisions of Title VII of the Civil Rights Act but also is "morally and practically correct." He observed that the Navy did not appear to be experiencing problems to the extent alleged, noting that no evidence was available other than emotional opinion, to substantiate either supporting or opposing views.

A subsequent compilation of data available within the Department of the Navy provided the needed empirical evidence. A comparison of absenteeism and discharge records of Navy women and men (Binkin & Bach, 1977) showed that women cause fewer disciplinary problems and are less likely to be involved in drug use or alcohol abuse than men. Although women constitute 4 percent of all naval personnel, they account for less than 1 percent of the days lost for drug and alcohol rehabilitation. Further, a comparison of the reasons for time lost by Navy women and men showed that desertion and unauthorized absence accounted for over three-quarters of the days lost by men; and pregnancy, for over half of the days lost by women. Overall, the absentee rate of men was almost twice that of women. However, generalizations from these data are limited since many reasons for lost time were not included in the analysis. These reasons included hospitalization and convalescent leave, which account for too much lost time to be disregarded. According to Hoiberg (in press), in the years from 1966 to 1975, 25 to 30 percent of all enlisted Navy women were hospitalized each year. In 1975, pregnancy-related diagnoses accounted for over one-fifth of all hospitalization days attributed to Navy women; and deliveries, for the greatest number of noneffective days. However, as Hoiberg

notes, the "1975 hospitalizations for pregnancies, which included abortions and deliveries, involved less than 5 percent of all enlisted Navy women on active duty." Of this total, 2 percent were hospitalized for deliveries; and 3 percent, for abortions.

The impact of the current policy on the discharge of enlisted women is not clear since most previous reports have combined discharge for pregnancy with those for marriage and/or minor children. For example, during fiscal year 1972, the Department of Defense reported that almost one-third of female discharges were attributable to pregnancy or to having minor children.

Finally, a DoD (1977) comparison of female and male attrition during the first year of enlistment shows that the attrition rate of Navy women was slightly lower than that of Navy men (10.0 vs. 10.7%). At the end of 2 years, the pattern was still apparent: Approximately one-fifth of the women (20.7%) and one-fourth of the men (24.3%) had left the Navy.

Civilian Pregnancy Policies

In years past, the civilian policy for dealing with pregnant women employees was not unlike that of the military services: They were usually required to leave. This policy of termination was believed necessary for the protection of the pregnant woman and her unborn child. It also reflected the notion that females were not serious, permanent employees. Based on this premise, women were often not allowed to participate fully in fringe benefit programs available to men. For example, employers commonly excluded from disability coverage those disabilities related to female reproductive organs and pregnancy.

The advent of World War II, with its shortage of manpower, marked a transition in the treatment of female workers. As millions of women entered the work force, providing essential labor to war-related industry, employers began to reassess their policies and practices. Women were no longer considered as "expendable" workers; rather, their training and commitment were seen as vital to the war effort. As a result, the idea of granting maternity leave to women who became pregnant rather than terminating them originated. With the end of the war, however, thousands of women left the labor force. Many left of their own volition, but many others--particularly married women--were terminated involuntarily (Williams, 1977). Thus, many of the patterns of discrimination common before the war were renewed at its end.

In the post-war years, the treatment of pregnant workers improved slightly. Although 40 percent of employers continued to fire women when they became pregnant, others provided maternity leave. Of these, about half mandated that the women remain on leave for a specified period of time pre- and postpartum, and only six percent allowed women to use accrued sick leave for pregnancy-related illness and disability (U.S. Congress, 1977, pp. 10-11). Thus, maternity leave was charged as leave without pay.

In 1964, Title VII of the Civil Rights Act was passed, which generally prohibits employment discrimination on the basis of sex, race, color, religion, and national origin. At the same time, the Equal Employment Opportunity Commission (EEOC), which is responsible for issuing guidelines for interpretation of the Act by the courts and by employers, was established. In 1972, the

EEOC guidelines stated that pregnancy should be treated as any other temporary disability for matters of leave, benefits, reinstatement, health and disability insurance, and sick leave. As a result, policies affecting pregnant workers changed dramatically. A 1973 survey of employers revealed that 90 percent had adopted maternity leave policies, most of which allowed the employee or her physician to determine how long she could remain on the job. About three-fourths of the employers provided that pregnancy-related illness be treated as any other for purposes of leave (U.S. Congress, 1977, pp. 147-165).

In spite of the greatly improved circumstances, many pregnant women still found themselves subject to inequitable policies. These inequities, described in the following paragraphs, were debated in several recent court cases.

Arbitrary Leave Dates. In a number of separate decisions, the Supreme Court invalidated policies that required public school teachers to take leave at a certain month of pregnancy and to remain on leave for a certain period of time after delivery.⁴ The central theme of these decisions was the court's rejection of policies requiring arbitrary cut-off dates for purposes of maternity leave. Some of these policies were struck down for violation of due process; and others, for lack of a rational basis. Regardless of the basis of the decision, the court has clearly rejected rules that treat all pregnancies alike, rather than on a case-by-case basis (Beans, 1975; U.S. Department of Labor, 1976).

Paid Maternity Leave. The issue of whether or not salaries should be paid to women employees who are unable to work because of pregnancy-related illness and disability has probably stirred more controversy than any other. The most publicized case on this issue was filed in 1972 by a group of female union members employed by the General Electric (GE) Company. They charged GE with sex discrimination, stating that the company's sickness and accident insurance plan paid GE employees benefits for every type of nonoccupational sickness or accident but refused to provide benefits to women disabled by pregnancy. Thus, men were provided income protection against all disabling conditions, while women were not. This issue was battled through several lower courts, all of which ruled that the GE policy violated Title VII of the Civil Rights Act. The Supreme Court reversed these decisions in a 1976 ruling,⁵ which determined that the GE disability program was insurance against sickness and accident "which covers some risks, but excludes others." The court thus held that the insurance plan was not discriminatory because "there is no risk from which men are protected that women are not."⁶ Following the Supreme Court decision, legislation was submitted to Congress to amend Title VII to prohibit sex discrimination on the basis of pregnancy.

⁴Green v. Waterford Board of Education, 473 F.2d 629 (2d Cir. 1973); Heath v. Westerville Board of Education, 345 F. Supp. 501 (S.D. Ohi 1972); LaFleur v. Cleveland Board of Education, 39 L Ed. 2d 52 (1974).

⁵General Electric v. Gilbert and IEU 7 FEP Cases 796 (E.D. Va. 1974).

⁶Quote from majority opinion of Supreme Court, written by Justice William Rehnquist.

Cost of Pregnancy-related Absences. Cost is the primary tool used to defend policies excluding pregnancy from temporary disability benefits. Estimates of the cost of pregnancy benefits, provided by representatives of the GE Company, approached two billion dollars, a figure that many regarded as unrealistic. Doctors testifying in the GE case stated that 90 percent of childbearing women are disabled for 6 weeks or less by pregnancy and childbirth, and that many were able to work up to the time of delivery and were fully recovered in 2 or 3 weeks (Brief for Martha V. Gilbert, et al., Note 6). GE rejoined by asserting that providing disability payments would encourage women to stay away from work longer than they would if such benefits were not available.

Other opponents of implementing paid maternity leave argue that, since women already receive a disproportionately large share of temporary disability benefits, adding maternity benefits to existing programs would not be "fair." Statistics do, in fact, point to higher illness and hospitalization rates for women. For example, results of a National Health Survey (U.S. Department of Health, Education, and Welfare, 1977) showed that, during a 1-year period, 17 percent of all women in the 17-24 age group, compared to 6 percent of all men in that group, required hospitalization. The women surveyed reported an average of 6.7 days per year confined to bed, either at home or in the hospital, compared to 3.4 days for men. Temporary disabilities, however, are only one component of a multifaceted income protection plan. As Williams (1977) notes, "While women may account for more sick leave and temporary disability days, men constitute a heavier drain on worker's compensation and long-term disability programs" (p. 23).

Proponents of employee pregnancy disability coverage also point to the cost of providing medical and hospitalization coverage to the wives of male employees. For example, the wives of GE employees were reported as having a fertility rate one and one-half times greater than that of female employees. Thus, even with the addition of disability payments to existing hospital and medical benefits for pregnant employees, the per capita costs of procreation would remain lower for GE female employees than for male employees.

An additional factor related to cost is the potential loss resulting when women fail to return to work following maternity leave. In this regard, study results show that 40 to 50 percent of new mothers do not return to work, compared to almost 100 percent of workers taking other types of disability leave (U.S. Congress, 1977, p. 88). Kistler and McDonough (1975) questioned these statistics. They maintained that, since the reported return rate for maternity leave was confounded by the fact that the leave was unpaid, "the conclusion that quit rates under a paid program would be identical to quit rates under unpaid maternity leave has not been validated" (p. 60).

Voluntary Disability. Many opponents of paid maternity leave maintain that pregnancy is different from other temporary disabilities because it is voluntary. They argue that the parent is responsible for financing the birth as well as the resulting period of disability. Others counter that pregnancy is not necessarily voluntary because contraceptives are not 100 percent effective and are associated with significant side effects. Further, they argue that disability policies do not exclude other voluntarily incurred disabilities; for example, the GE policy covered injuries resulting from participation in sports, attempted suicide, and hair transplants.

Foreign Country Pregnancy Policies

Unlike the United States, foreign countries commonly provide disability benefits for pregnant civilian workers as a matter of law. Williams (1977) stated: "All countries of Western and Eastern Europe have by law provided income protection to disabled workers including pregnant workers. Similarly, all but five of the countries in the western hemisphere provide such protection" (p. 20).

Since many foreign countries continue to limit the female members of their military services to those who are unmarried and/or without children, policies regarding pregnancy have either not been formulated or have not been widely disseminated. The policies implemented by four countries are discussed below:

1. Canada. Prior to 1971, only single women could enlist in the Canadian Forces. However, under current policies, neither marital status nor dependents directly affect females' enlistment eligibility, and those who become pregnant while in service are not discharged. Unpaid maternity leave is granted for up to 15 weeks, during which time the servicewoman receives full medical coverage and unemployment benefits (Binkin & Bach, 1977).

2. USSR. Women in the Soviet Union enlist for a 2-year term, during which time they are trained in traditionally female specialties. They cannot remain on active duty during pregnancy or return after giving birth. Instead, they are released to reserve units (Binkin & Bach, 1977).

3. Great Britain. Women who enlist in the Women's Royal Naval Service (WRNS) may obligate themselves to either 6 or 9 years of service. However, they have the option to leave the service when they marry and must leave if they become pregnant (Dawson, 1978).

4. Australia. Female members of the Australian Defense Force are restricted from a number of noncombat jobs and have different rank and pay categories than men. Despite these inequities, women who become pregnant are permitted to remain in the service (Thomas, 1978).

METHOD

Sample

Two samples of Navy enlisted personnel were studied--a longitudinal sample of first-term personnel and an aviation squadron sample.

Longitudinal Sample

The longitudinal sample was a cohort sample of female and male enlisted personnel, who had entered the Navy in the summer of 1975. This cohort sample, which included about 1000 members of each sex, had previously been identified for a longitudinal study of Navy women. Thus, their status and experiences in the Navy have been monitored since they enlisted. This sample was considered appropriate for the present study for several key reasons. First, all had enlisted under the present pregnancy policy. Second, since the women in the sample are in the age group associated with the highest birth rates,⁷ their discharge rates for reasons of pregnancy should reflect the impact of the present policy. Also, the data on retention of pregnant Navy women are indicative of the medical, child care, and other dependent services that will be required by the increasing proportion of women entering the military. Finally, both female and male sample members are similar in pay grade and in the amount of remaining obligated service, having entered recruit training in the same time period. This is a significant consideration because of the general consensus that reasons for lost time vary as a function of pay grade; that is, it is believed that absenteeism and disciplinary offenses are greatest at the E-1 through E-4 levels. Accordingly, it is more appropriate to compare absenteeism and attrition rates of men and women in this sample than to compare such rates in a simple proportionate sample of each sex, since women are concentrated in the lower pay grades.

Aviation Squadron Sample

The aviation squadron sample (N = 125) was selected from four aviation training squadrons, in the VT, VS, VF, and VA communities in California and Florida. These particular squadrons were included in the study because they had the greatest proportions of female personnel and the highest incidence of pregnancy.

The sample included 72 females and 53 males. An attempt was made to include all women who were or had been pregnant at their present command, especially those in nontraditional female ratings. The males consisted of pay grade peers who worked in the same offices and shops as the females, and senior chief petty officer supervisors in work areas where more than two women were assigned.

⁷U.S. National Center for Health Statistics, Vital Statistics of the United States, 1975, reports 114.7 live birth per thousand women aged 20-24 years, 66.7 per thousand for all women.

Data Collection

Data were collected by administering a survey to and analyzing administrative records for the longitudinal sample, and conducting interviews with the aviation squadron sample.

Survey Instrument

The questionnaire administered to the longitudinal sample was designed (1) to determine marital and parental status of respondents, (2) to obtain self-reports of absences and the reasons for them, (3) to gain information on the extent of pregnancy-related absences and their effects, both actual and anticipated, on workgroup productivity, (4) to measure attitudes toward the present Navy pregnancy policy, and (5) to measure attitudes toward and perceived treatment of the pregnant Navy woman. Two forms were developed--QUEST 3 for women, and QUEST 4 for men (see Appendix). The forms were identical except that QUEST 3 included nine additional items. The first of these items asked women whether they intended to remain in the Navy if they became pregnant; and the second, whether they were or had been pregnant while in the Navy. The remainder queried women who answered "yes" to this latter question on their experiences, both personal and occupational, during pregnancy.

The survey questionnaires were mailed in May 1977 to members of the longitudinal sample who were still on active duty and for whom valid addresses were available--701 women and 754 men. Seventy percent of the women (N = 487) and 60 percent of the men (N = 437) responded. The extent of nonresponse bias, if any, is not known. If present, such bias may be reflected in an overrepresentation of personnel who were or had been pregnant, as they would be more sensitive to the subject matter of the survey, and an underrepresentation of personnel with high rates of unauthorized absenteeism, as they would be less likely to respond.

Personal Interview

During the period from May to August 1977, members of the aviation squadron sample were interviewed by a male Master Chief Personnelman with extensive experience in interviewing military women and men on sensitive and often controversial issues. The interviewer followed a structured interview guide (see Appendix, page A-13), which focused on the interviewee's perception of the (1) effect of pregnant women on workgroup morale and productivity, (2) extent of pregnancy-related absences, (3) experiences of pregnant Navy women, and (4) adequacy of the present pregnancy policy. The interviewer recorded interviewee's responses directly on the interview guide.

Administrative Records

Navy Finance Center Master File. Pay records from the Joint Uniform Military Pay System (JUMPS) master file, maintained by the Navy Finance Center, were acquired for all members of the longitudinal sample who were on active duty as of 1 July 1976. These records, obtained for 821 women and 872 men, yielded information on lost time due to unauthorized absence, confinement, convalescence leave, and awaiting physical evaluation board.

Naval Health Research Center Records. In-patient hospitalization records were acquired from the Naval Health Research Center (NHRC) for all members of the longitudinal sample who were on active duty as of 1 January 1976. From these records, the number of days sample members were hospitalized (including time related to pregnancy) during calendar year 1976 was determined.

Attrition of longitudinal sample members was assessed from records maintained by NHRC, which are derived from the BUPERS enlisted master file. The records report the date of discharge, the reasons for discharge, and the type of discharge granted.

Analysis of Data

Survey and Interview

The frequency of responses to each alternative was determined for all items on the QUEST surveys. Comments made by aviation squadron sample members and write-in responses made by longitudinal sample members were content-analyzed and coded into numeric categories. Chi-square tests, z ratios of differences between proportions and t ratios of differences between means were computed, where appropriate, to determine whether differences in response patterns were statistically significant. Except where otherwise indicated, those who selected the "no opinion" option were excluded from further analyses.

It was originally believed that a simple comparison of female and male responses would be inappropriate due to the possible effect of sea duty on absence rates for men. However, when the chi-square statistic was computed on the nine items related to absences to determine if sea or shore duty status did affect males' responses, statistically significant differences were encountered on only one item. Thus, it was decided that the responses of sea-duty and shore-duty males realistically could be combined for comparison with responses of the females.

For some analyses, the women and men were divided into two occupational groups: (1) those in traditional female ratings,⁸ which have been open to women for several years and (2) those in nontraditional ratings, which are considered male-appropriate. Nonrated personnel who indicated the rating for which they were striking were included in these analyses. Items were also analyzed by gender, marital status, parental responsibilities, and female parturition, as appropriate.

Administrative Records

Data from the pay and hospitalization records were analyzed by gender and type of absence reported. The numbers of days of absence and absences per

⁸Traditional female ratings were defined as: NC, RM, YN, LN, PN, DP, SK, AC, AG, DK, MS, IS, SH, JO, PC, LI, AK, AZ, PT, HM, DT, MU, DM, CTA, CTO, CTI, and CTR.

100 persons during the applicable 12-month period were computed. Male absences documented in the pay records were also examined on the basis of the member's duty (sea or shore) status.⁹

Discharge rates for females and males were computed for sample members separated from the Navy prior to 1 July 1977. The reasons for their discharge and the type of discharge granted were analyzed by gender.

⁹Sea/shore status was determined by inspection of the unit identification code number for the member's unit of assignment at the time when the absence commenced. Members assigned to units categorized as Type 2 (Sea Duty) or Type 4 (Nonrotated Sea Duty) (Enlisted Transfer Manual, NAVPERS 15409) were considered to be on sea duty. All other members were considered to be on shore duty when their absences originated.

RESULTS

Dependency Data

Table 1 presents the marital status and parental responsibilities of the women and men in the longitudinal sample. Women were more likely than men to report being married ($z = 1.96$, $p < .05$). However, men were significantly more likely to have children, either living with them at their present duty station or with someone else, a finding that supports Binkin and Bach's (1977) contention that male enlistees were twice as likely to have dependents as the female enlistees. Binkin and Bach (1977) also reported that, of those with dependents, the men averaged almost twice as many as the women (2.43 vs. 1.24). Similar findings have been recorded for civilian employees. For example, it was reported that female workers at GE were less likely to have children than were the males. Moreover, female employees reportedly had much lower birth rates than the wives of male employees (U.S. Congress, 1977).

Table 1
Marital Status and Parental Responsibilities of
Longitudinal Sample Members

Item	Female (N = 481) (%)	Male (N = 434) (%)	\underline{z} Ratio of Difference
Married	36	30	1.96*
Have children at present duty station	6	14	3.94**
Have children living elsewhere	3	8	3.44**

Note. Missing data for six females and three males.

* $p < .05$

** $p < .01$

Lost Time of Navy Women and Men

The cost effectiveness of Navy personnel is greatly influenced by the number of days they are absent from the workplace. Since the days "lost" to the Navy include absenteeism as well as attrition, both are examined in the following paragraphs.

Absenteeism

Female-Male Comparisons. Table 2, which summarizes the absenteeism data obtained for the longitudinal sample, shows that women and men clearly differ in terms of incidences and extent of lost time. Women were significantly more likely to be absent for medically-related reasons; and men, for disciplinary reasons. These findings correspond to those reported in previous studies (Binkin & Bach, 1977; Hoiberg, in press; U.S. Department of Health, Education, & Welfare, 1977).

Table 2
Recorded Absences Over a 12-month Period for
Longitudinal Sample Members

Reason for Lost Time	Number of Absences		Number of Days		t Ratio of Difference
	Per 100 Persons		Absent Per 100 Persons		
	Female	Male	Female	Male	
<u>Joint Uniform Military Pay System Records (Females = 821, Males = 872)</u>					
Convalescent leave ^a	6	1	108	25	4.04*
Awaiting physical evaluation board	- ^b	1	11	19	0.71
Confinement (civil and military)	0	2	0	80	2.86*
Unauthorized absence/ desertion	2	15	26	437	5.79*
Subtotal	8	19	145	561	
<u>Naval Health Research Center Records (Females = 886, Males = 936)</u>					
Hospitalization ^c	28	11	277	142	- ^d
Total	36	30	422	703	- ^d

^aIncludes pregnancy-related absences.

^bLess than .5 per 100.

^cIncludes hospitalization related to pregnancy.

^dCannot be computed due to nature of hospitalization data.

* $p < .01$.

The hospitalization data show that there were 28 admissions for every 100 women in the 12-month period. This finding is highly consistent with Hoiberg's report on the health care needs of Navy women (in press), which states that, for the period 1966 to 1975, there were from 25 to 30 admissions each year per 100 women. This result suggests that (1) women in the longitudinal sample did not differ from enlisted women generally, at least in relation to health care needs, and (2) the hospitalization rates of Navy women have been relatively stable since 1966, despite changes in the discharge provisions of the pregnancy policy.

The women incurred over 2-1/2 times more incidences of hospitalization in the 1-year period than men. This female-male disparity parallels that discovered in the civilian population by the U.S. Department of Health, Education, and Welfare (1977), which reported that women aged 17 to 24 incurred approximately 19 hospitalizations per 100, compared to 7 per 100 men. It is interesting to note that the hospitalization rates of Navy women and men are about 1-1/2 times higher than that for their age cohorts in the civilian sector.

The number of days of unauthorized absence (including returned deserters) recorded for the longitudinal sample was 16 times higher for the men than for the women (437 vs. 26). These findings conform to the report by Binkin and Bach (1977), which noted that Navy women are responsible for a very small proportion of all days lost because of unauthorized absence or desertion.

Finally, Table 2 shows that the total lost time per 100 women was 422 days annually compared to 703 days per 100 men. These data suggest that Navy females have fewer nonproductive days than males. However, the pay status of the lost days should also be considered. Of the reasons reported in Table 2, only those related to medical conditions (i.e., convalescent leave, physical evaluation board, and hospitalization) are subject to pay. Consequently, men were paid for only 186 of the 703 reported lost days compared to 396 of the 422 days lost by women.

Additional data on absences of the longitudinal sample were obtained through the QUEST surveys. The results are provided in Table 3. One unexpected finding was that more men than women reported being absent for personal reasons, which included family illness and commissary visits (44 vs. 37%). Other findings were more consistent with those in previous reports (e.g., Binkin & Bach, 1977). That is, proportionately more men than women reported absences for disciplinary reasons and drug and alcohol rehabilitation, while more women than men reported being absent for reasons of illness or medical checkups. A similar proportion of women and men reported being absent due to accidents occurring either on-or off-duty.

The QUEST surveys asked respondents to indicate whether they felt men or women took more time off for family illness, personal matters, and personal illness. In most cases, respondents of both sexes indicated that time taken by men and women was about the same. Those who did perceive a difference generally attributed greater absenteeism to members of the opposite sex.

Table 3
Absences Reported by Longitudinal Sample

Reason for Absence	Female (N = 487) (%)	Male (N = 437) (%)	<u>z</u> Ratio of Difference
Personal reasons in past month (family illness, commissary, exchange)	37	44	2.17*
Disciplinary reasons in past month (Captain's Mast, Court Martial)	2	5	2.51*
Own illness, dental or medical checkups in past month	57	33	7.31**
Drug or alcohol rehab. in past 12 months	1	3	2.20*
Off-duty accident in past month	3	2	0.97
On-duty accident in past month	5	5	0.00

*p < .05.

**p < .01.

Pregnancy-related Absence. On the QUEST 3 survey, pregnant and post-partum women were asked how many hours they had been off duty because of prenatal checkups, not feeling well, and restricted duty hours prior to delivery. Figure 1 summarizes their responses as a function of their stage of pregnancy. As shown, women in their first 3 months of pregnancy reported being absent for an average of 2 working days since the beginning of pregnancy; those in their 6th or 7th month of pregnancy, 4 days; and post-partum women, 11 days or approximately 2 workweeks. Although these data do not represent a large number of pregnancies, they do suggest that pregnancy-related absences occur at all stages of pregnancy, and at a fairly constant rate until the last 2 months. The total number of days lost prior to delivery reported by these Navy women is, on the average, considerably lower than the 40 to 87 days lost reported for Army women (Women in the Army Study Group, 1976).

Table 4 provides data obtained from women in both samples on absences resulting from delivery and recovery from childbirth. As shown, the length of absences ranges from only 2 weeks to almost 4 months, with an average of about 6 weeks. This corresponds to reports of civilian doctors, who have testified (Brief for Martha V. Gilbert et al., Note 6) that pregnancy normally requires leave of 6 weeks or less.

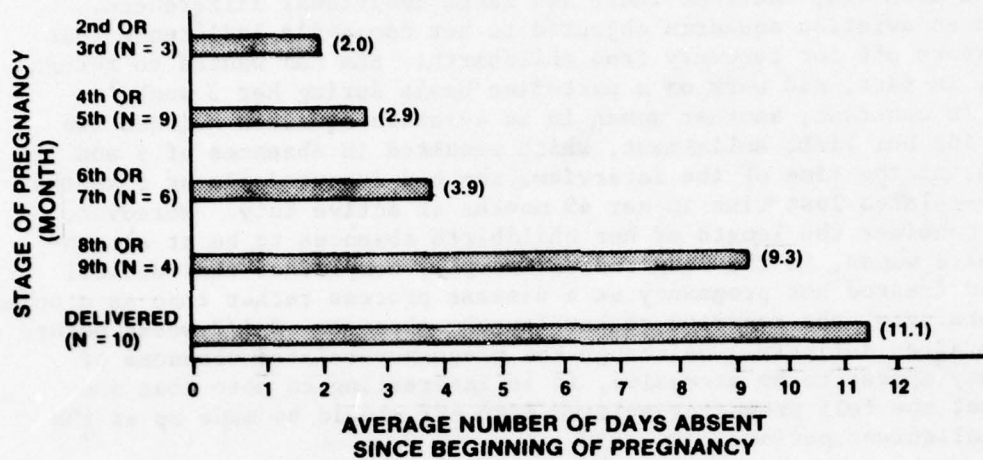


Figure 1. Pregnancy-related absences by stage of pregnancy.

Table 4
Post-delivery Absences

Length of Absence (Weeks)	Frequency
2	1
3	2
4	3
5	4
6	6
7	2
8	1
9	1
11	1
16	1

The comments made by survey and interview respondents suggest that factors other than physical conditions may also affect the extent of pregnancy-related absences, and that there are large individual differences. One woman in an aviation squadron objected to her command's insistence that she take 3 weeks off for recovery from childbirth. She had wanted to return earlier and, in fact, did work on a part-time basis during her 3 weeks' "absence." In contrast, another woman in an aviation squadron had had two children during her first enlistment, which resulted in absences of 9 and 12 weeks. Thus, at the time of the interview, she had incurred almost 5 months of pregnancy-related lost time in her 49 months of active duty. Moreover, she did not consider the length of her childbirth absences to be at all unusual. A third woman, in the longitudinal sample, complained that medical personnel had treated her pregnancy as a disease process rather than as a normal event. Accordingly, she reported rather lengthy absences--8-1/2 weeks before and 11 weeks after delivery. Although the pregnancy-related absences of this woman may appear to be excessive, it is interesting to note that she indicated that she felt pregnancy-related time-off should be made up at the end of the enlistment period.

Attrition

Attrition represents a form of lost time because the unit must function with an unfilled billet until a suitable replacement can be found. Attrition during the early stages of the first enlistment is especially costly to the Navy because of its initial investment in the military member. The retention rates of women and men in the longitudinal sample, which were derived from discharge information included in the Naval Health Research Center files, are provided in Figure 2. As shown, by the second quarter of FY77, approximately three-fourths of both women and men remained on active duty. Thus, the women were as likely as the men to complete the first 2 years of their enlistment.

Although the attrition rates of women and men at the end of the first 2 years of service were equal, the two groups differed substantially in their reasons for discharge. Table 5 shows that pregnancy accounted for the greatest proportion of female discharges (approximately one-tenth of the original sample), followed by unsuitability. For males, unsuitability accounted for the greatest proportion of discharges, followed by misconduct or desertion. It is interesting to note that the proportion of women discharged for unsuitability was almost identical to that for men (35 vs. 36%); however, the proportion of women discharged for misconduct or desertion was much lower than that for men (4 vs. 17%).

These findings indicate that, even though optional discharges for pregnancy account for a significant proportion of the losses of Navy women, such discharges do not appear to result in higher attrition rates for women than for men. Moreover, because a request for discharge for pregnancy must be submitted several weeks prior to the actual discharge date, the impact of a loss for pregnancy is less than that for such reasons as desertion and misconduct.

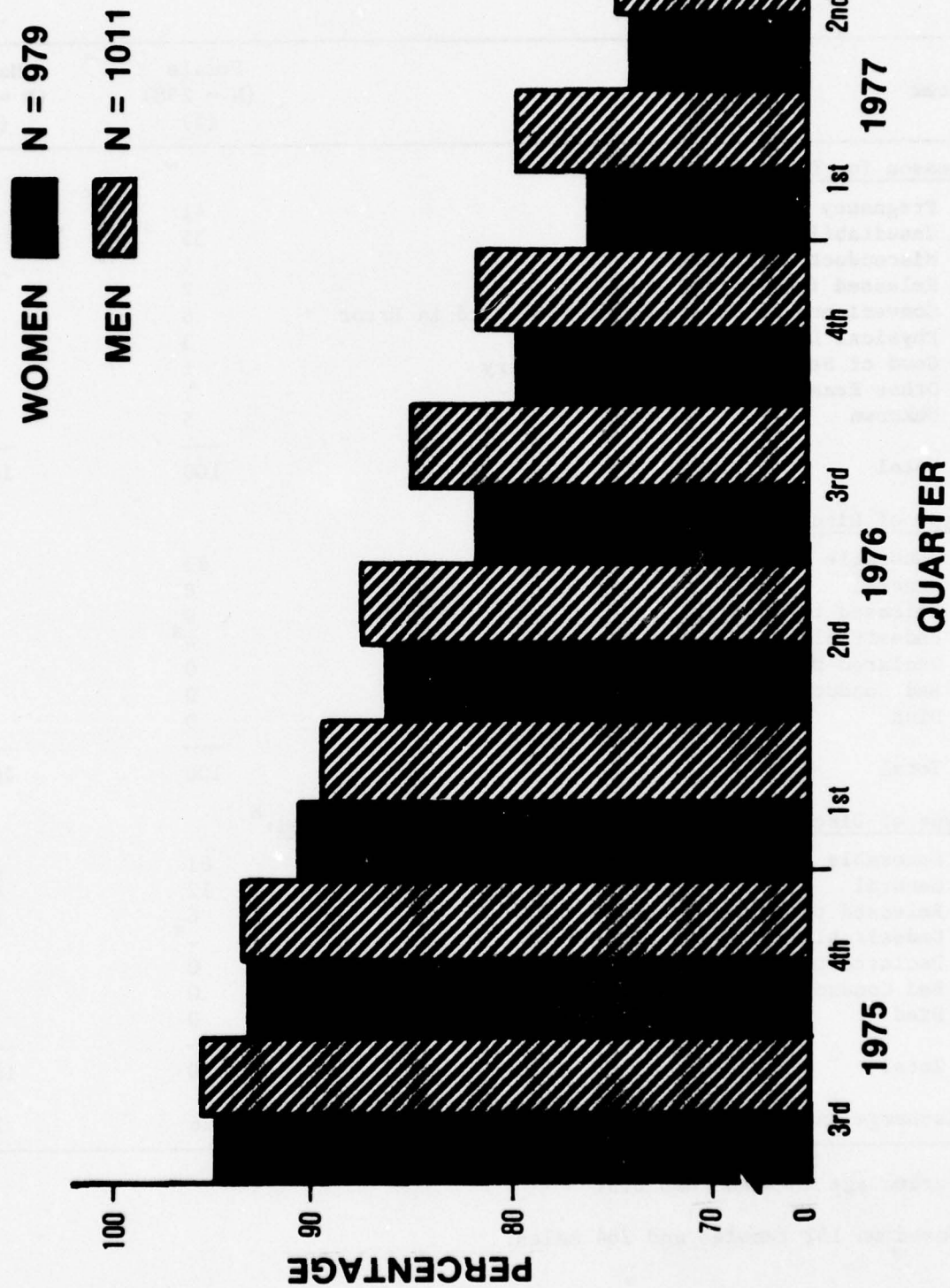


Figure 2. Percentage of women and men on active duty by quarter.

Table 5

Discharges Granted to Longitudinal Sample Members
During First 2 Years of Service

Item	Female (N = 258) (%)	Male (N = 264) (%)
<u>Reason for Discharge:</u>		
Pregnancy	41	--
Unsuitability	35	36
Misconduct or Deserted	4	17
Released from Active Duty	2	10
Convenience of Government or Enlisted in Error	8	8
Physical Disability or Died	3	7
Good of Service or Fraudulent Entry	1	4
Other Reasons	1	5
Unknown	5	13
Total	100	100
<u>Type of Discharge:</u>		
Honorable	83	30
General	8	48
Released to Inactive Duty	9 ^a	14
Undesirable	--	4
Declared Deserter	0	2
Bad Conduct	0	1
Died	0	1
Total	100	100
<u>Type of Discharge, when Pregnancy Discharges Excluded:</u> ^b		
Honorable	81	30
General	12	48
Released to Inactive Duty	6 ^a	14
Undesirable	--	4
Declared Deserter	0	2
Bad Conduct	0	1
Died	0	1
Total	100	100
Discharge Rate	26	26

^aPercentage is less than 0.5.

^bBased on 152 females and 264 males.

Men and women also differ as to types of discharge granted. As shown in Table 5, 83 percent of the women received honorable discharges, compared to 30 percent of the men. This disparity has been attributed to the fact that women have a means of honorable discharge that is not available to men; that is, the optional discharge of pregnancy. However, when women who received pregnancy discharges (N = 106) were excluded from this analysis, the proportion of women granted honorable discharges changed very little--from 83 to 81 percent.

Given that pregnancy contributes significantly to female attrition, the question arises as to the proportion of pregnant enlisted women who elect to be discharged and the reasons for their decisions. In the QUEST survey, all women were asked whether they would stay in the Navy if they should become pregnant. Almost half (46%) said they "probably" or "definitely" would get out; one-fifth, that they "probably" or "definitely" would stay in; and the remainder were either undecided or had no plans to have a child in the future. In the aviation squadron sample, eight pregnant women were interviewed regarding their career plans. Four reported that they were leaving the Navy; and four, that they were remaining. Those women who were planning to get out, averaging 33 months in service, cited family responsibility as the primary factor in their discharge decision more often than dissatisfaction with the Navy. The four women who were remaining on active duty averaged 20 months' service time. These women, as well as nine others who reported they had already had a child while serving in the Navy, most often cited enjoyment of their work as the reason for remaining, followed by money, security, and fulfillment of their military obligation. Some of these women did plan to leave upon completion of their enlistment, primarily because of the difficulties they anticipated in obtaining joint assignment with their Navy husbands.

These data suggest that half of junior enlisted women who become pregnant leave the service prior to delivery. This estimation, however, is accurate only to the extent that the sample used is representative of all junior enlisted women.

Effect of Pregnant Navy Women on the Workgroup

Productivity

Because of the physical limitations of pregnancy and job-related factors hazardous to the unborn, the pregnant Navy woman must sometimes alter her duties or the pace at which she completes them. In addition, she may be absent from work periodically either for medical checkups or because she is not feeling well. These factors, coupled with the leave directly associated with delivery, have all been cited as affecting satisfactory performance of both the individual woman and her workgroup. Accordingly, members of both samples who actually had worked with pregnant women were asked whether their presence had caused any hardship. Results are provided in Table 6, which shows that 71 percent of the survey respondents felt that their pregnant coworker had created little or no hardship for the group; and 68 percent of the aviation squadron interviewees, that their pregnant coworkers had had no effect on their workgroup's productivity. These responses were not related either to the respondents' sex or work role.

Table 6

Impact of the Pregnant Worker on Workgroup Productivity

Item	Alternative	Percentage Agreeing
<u>Survey Sample (N = 297):</u>		
Level of hardship caused by pregnant coworker(s)	Little or no hardship	71
	Some hardship	23
	Big hardship	4
	Some caused hardship; others did not	2
<u>Aviation Squadron Sample (N = 54):</u>		
Effect of pregnant coworker on workgroup productivity		
	No effect	68
	Minor effects	28
	Major effects	4

This latter finding is particularly noteworthy since it contradicts the assumption that women in nontraditional jobs would have a greater effect on productivity due to their inability to perform physically arduous tasks. It appears that the workgroup is much more flexible than anticipated. For example, several interviewees stated that workgroup members assist pregnant women in performing the more demanding duties or actually assume these duties temporarily. In return, the women appear to be making an earnest effort to carry their full workload. Some of the women in the aviation squadrons even worked extra hours to compensate for their time off.

Although two-thirds of the respondents who had worked with pregnant women reported little or no hardship due to their presence, a very different picture emerges when responses of those who had not worked with pregnant women were included in the analysis. Table 7, which presents survey respondents' expectations of the impact of a pregnant coworker, shows a wide disparity between responses made by women and men: Over two-thirds of the women indicated that they felt pregnant women would have little or no effect on the workgroup, compared to only half of the men. A similar disparity exists between responses made by men based on actual observation and those based on expectations (71 vs. 51%--Tables 6 and 7 respectively), perhaps because they are either overestimating the physical demands of their jobs or underestimating female capability to perform those jobs. The responses made by women based on observation and those based on expectations (71 vs. 68%) are more consistent, perhaps because of their heightened sensitivity to the pregnancy issue.

Table 7

Survey Respondents' Expectations of the Impact of the
Pregnant Coworker as a Function of Work Role

A pregnant woman in my workgroup. . .	<u>Female</u>		<u>Male</u>	
	Nontraditional Female Job (N = 80) (%)	Traditional Female Job (N = 329) (%)	Nontraditional Female Job (N = 104) (%)	Traditional Female Job (N = 51) (%)
Would have little or no effect	68	68	50	53
Would be a hard- ship only if off duty several weeks for recovery from childbirth	7	15	7	22
Would be a hardship both during preg- nancy and during recovery period	21	15	36	23
Do not agree with above alternatives	4	2	7	2
χ^2 for all females vs. all males = 22.18*				

* $p < .01$

Note. Includes responses of those who had and had not worked with pregnant women.

Reassignment of Pregnant Women

On the QUEST 3 survey, women were asked whether they had been pregnant since they joined the Navy. In response, 29 reported that they were pregnant at the time of the survey; 11, that they had been pregnant but had given birth; and 59, that they had been pregnant but that pregnancy had been terminated. Of these women, 16 reported that they had been assigned to different duties or schedules within their workgroup or to a different workgroup as a result of pregnancy. This number included a higher proportion of women who had given birth than those who were pregnant (55 vs. 31%), which suggests that the workload of some of those in the latter group would be lightened at a later date. It included only 2 percent of those whose pregnancies had been terminated, which is not surprising since termination probably occurred in the early months. Women who had a duty change were more likely to be given different duties within their own workgroup than to be reassigned to a different group.

The 16 survey respondents who had been reassigned during pregnancy were asked several additional questions. Their responses, which are provided in Table 8, indicate that most of them were reassigned in the fourth or fifth month. The supervisor usually initiated the change and the women felt it was a good idea because their former duties were not appropriate during pregnancy.

Table 8

Experiences of Survey Respondents Who Were Reassigned
to Other Duties During Pregnancy

Item	Number ^a
When reassigned (month of pregnancy)?	
2-3	3
4-5	8
6-7	2
Whose idea to reassign you?	
Own idea	1
Supervisor's	9
Both own and supervisor's	2
Other	1
Was reassignment a good idea?	
Yes	11
No	2
Why was reassignment a good idea?	
Duties not appropriate	9
Eased worries of others	2
Not good--could have performed regular duties	2

^aThree of the 16 women did not respond to these questions.

Two of the women, however, said it was not a good idea because they could have performed their regular duties, and two others indicated that they were reassigned primarily to ease the worries of others, such as their supervisors or husband.

When survey respondents were asked what they felt were appropriate duties for a pregnant woman in their workgroup, a significant difference emerged between response patterns of women and men. As shown in Table 9, more females felt that a pregnant woman should remain in the workgroup and continue her regular duties; and more males, that she should be assigned to a safer or easier job. Based on the responses reported in Table 7, it was anticipated that men in nontraditional female jobs would have more protective attitudes toward the pregnant woman. This expectation was confirmed when the responses were analyzed by work role (untabled). Forty-three percent of the men in non-traditional female jobs, compared with 28 percent in traditional female jobs, thought the pregnant coworker should be reassigned to a safer or easier job in the command. For female respondents, however, work role was unrelated to their responses.

Table 9

Survey Respondents' Attitudes Toward the Work
Assignment of Pregnant Coworkers

A pregnant woman in my workgroup should:	Female (N = 482) (%)	Male (N = 164) (%)
Continue her regular duties	35	24
Be given lighter duties within the workgroup	22	28
Be reassigned to safer/ easier job in command	17	38
Some other policy	26	10
Total	100	100

$\chi^2 = 45.07^*$

*p < .01.

A considerable number of respondents--26 and 10 percent of females and males respectively--responded to this item by providing written comments (identified as "some other policy" in the table). Thirteen percent of the females advocated a flexible policy adjusted to the needs of the individual. That is, they felt that reassignment of a pregnant woman should depend on the physical demands and risks associated with her job, the progression of her pregnancy, and complications arising due to pregnancy. Interestingly, this suggestion corresponds not only to the present Navy policy, which provides for reassignment if recommended by the woman's doctor based on her unique work/physical condition, but also to the Supreme Court decisions, which ruled that all pregnant women cannot be treated alike, but must be considered on a case-by-case basis. Most of the remaining women and the majority of the men making written responses advocated that the pregnant woman continue her regular duties until the latter part of her pregnancy and then be given lighter duties within the workgroup.

Interpersonal Relationships

Interpersonal relationships among workgroup members have considerable impact on workgroup performance. The factors affecting those relationships include those that cause temporary changes in the status of a workgroup member, such as pregnancy. Thus, to assess the effects pregnancy has on workgroup morale and personal relationships, women in the longitudinal sample who were or had been pregnant while on active duty were asked to describe the effect of their pregnancy on (1) their relationship with their supervisor and with

their workgroup members, and (2) their life in the Navy. Table 10 summarizes responses made concerning effects on relationships by women who were currently pregnant, who had given birth, or whose pregnancies had been terminated. As shown, the highest percentage in all three groups reported that it had "no effect" on their relationship with their supervisor, and only 10 percent overall reported that it had a negative effect. The women also reported insignificant effects on relationships with other workgroup members. For example, 60 percent of the women who had given birth reported that their pregnancy had had no effects at all.

Table 10
Experience of Survey Respondents Who Have
Been Pregnant Since Joining the Navy

Item	Pregnant Now (N = 24) (%)	Had Baby (N = 10) (%)	Pregnancy Terminated (N = 40) (%)
<u>Effect on relationship with supervisor:</u>			
No effect	50	40	41
Did not know	0	0	19
Negative	8	10	12
Helpful, supportive	17	10	19
Worried, protective	4	10	7
Treated fairly	0	20	0
Generally positive	21	10	2
<u>Effect on relationship with workgroup members:</u>			
No effect	44	60	38
Did not know	0	0	25
Negative	4	10	5
Helpful, supportive	16	20	12
Worried, protective	12	10	0
Generally positive	16	0	15
Both positive and negative	8	0	5

Over two-thirds of the women who were or had been pregnant (N = 68) (untabled) reported the effects pregnancy had upon their life in the Navy. Of these, over half reported that it had no effect. However, 16 women reported experiencing negative attitudes from Navy personnel, including pressure to have an abortion or to obtain a discharge; and one, that she felt her pregnancy had adversely affected her evaluation marks. Further, six reported becoming more aware of birth control; four, experiencing emotional upsets; and three, finding the work too tiring.

The effects of the pregnant woman on her workgroup morale were ascertained by interviewing members of the aviation squadron sample who had worked with a pregnant woman (N = 54). They included women and men of all pay grades in both traditional and nontraditional female jobs. Since no differences were found in responses as a function of sex or work role, they were combined. Three-fourths reported that the pregnant coworker had had no effect on morale; one person, that she had had extremely negative effects; and the remainder, that she had had only slightly negative effects. These results do not mean, however, that coworkers feel that the pregnant woman is not being treated differently because of her condition. As shown in Table 11, 65 percent of the men who had worked with a pregnant woman report that she was given special consideration. On the other hand, only 42 percent of the women felt the pregnant woman was given special treatment; and 38 percent, that she was actually discriminated against.

Table 11
Survey Respondents' Perceptions of the
Treatment of Pregnant Navy Women

Treatment of pregnant Navy women you have known	Female (N = 370) (%)	Male (N = 69) (%)
Discriminated against	38	13
Given special consideration	42	65
Neither of the above	20	22

Attitudes Toward Present Pregnancy Policy

It is generally assumed that coworkers' reactions toward the pregnant Navy woman are related to their attitudes toward the pregnancy policy. For example, in the point paper from the Master CPO of the Command (Note 3), it was stated that the leave provisions of the pregnancy policy contributed to declining morale and resentment among males. Because the Master Chief's remarks referred to men in the air training community, the present study investigated these complaints further through interviews with the aviation squadron personnel sample. The interviewer first asked respondents whether they knew the policy for granting time off for pregnancy, and then conducted sufficient probing to determine whether they were aware that pregnancy absences are not charged against pay. In Table 12, which presents the results of that inquiry, males have been divided into two groups--coworkers and supervisors--since it was hypothesized that coworkers would be more resentful because of the leave provisions of the pregnancy policy. In fact, however, only 25 percent of the coworkers in the training squadron knew that pregnancy-related absences are not charged against pay, compared to 64 percent of the supervisors, who were expected to be better informed than the coworkers. Half of the females interviewed were unfamiliar with the policy.

Table 12
Aviation Squadron Interviewees' Awareness of
Pregnancy Leave Policy

Item	Female (N = 72) (%)	Male		
		Coworkers (N = 20) (%)	Supervisors (N = 28) (%)	All (N = 48) (%)
Aware that pregnancy absences are not charged against pay?				
Yes	49	25	64	48
No	51	75	36	52

These findings suggest that objections to pregnancy-related absences do not necessarily stem from the policy per se but, rather, from the more immediate effects the absence has upon the workgroup. In fact, the complaints reported by interviewees were evenly divided between complaints related to policy and to the extent of pregnancy leave. The 17 women in the aviation squadron sample who were pregnant or had given birth were asked if they had heard complaints from their coworkers about the time they had taken off or would be taking off for childbirth. Thirteen were not aware of any complaints from coworkers, three had heard complaints, and one reported that her pregnancy had actually generated a more positive attitude change among her coworkers.

Since the pregnancy policy was described in the QUEST questionnaire, the survey could not measure respondents' familiarity with the policy's leave provisions but it did measure their attitudes toward those provisions. As shown in Table 13, the responses made by women and men were widely disparate. An overwhelming majority of the women--84 percent--endorsed the present policy, compared to 59 percent of the men. A total of 38 percent of the men did not approve of pregnancy leave being "free": 13 percent felt that it should be charged against the woman's leave record; and 25 percent, that it should be made up at the end of the enlistment. At present, Navy policy does specify that absences for certain reasons must be made at the end of enlistment. These absences include those due to confinement for disciplinary reasons, unauthorized absence, and sick misconduct.¹⁰ Although 25 percent of the men indicated that pregnancy leave should be made up in the same manner, they were not adverse to pregnant women being retained in the Navy. As shown in Table 13, only 8 percent of the males and 3 percent of the females felt that the pregnant woman should be removed from active duty. The majority of both women and men (84 and 59%) agreed with the present policy of optional discharge. Some of the women also suggested (in write-in comments) that optional discharge should be available to women who have given birth and find that they cannot adequately fulfill their responsibilities to the Navy and to their infants. Men, on the

¹⁰Sick misconduct is officially defined as a medical absence resulting from reckless and wanton misconduct.

other hand, were more likely to consider the contractual obligation of military service: Almost one-third indicated that pregnant women should be required to complete their entire enlistment. These findings indicate that the majority of both junior enlisted Navy women and men support the provisions of the present pregnancy policy. However, 38 percent of the men favored a more punitive treatment of pregnant women, which may be a reaction toward the special consideration they feel such women receive.

Table 13
Longitudinal Sample Members' Opinions of Pregnancy Policies

Item ^a	Female (%)	Male (%)
<u>Time taken off for childbirth should be:</u>		
Treated the same as time taken for illness and injury	84	59
Made up at the end of enlistment	11	25
Charged as leave or leave without pay	4	13
Some other policy	1	3
	$\chi^2 = 68.38*^b$	
<u>The active duty pregnant woman should be:</u>		
Required to complete her entire enlistment	13	32
Given the option of discharge	84	59
Removed from active duty	3	8
Some other policy	- ^c	1
	$\chi^2 = 63.45*^b$	

^aThe first item was responded to by 466 women and 409 men; and the second, by 469 women and 383 men.

^bChi-square computed for frequencies in first three categories only.

^c- = less than .5%.

* $p < .01$.

DISCUSSION AND CONCLUSIONS

As more women enter the Navy and plans are advanced to assign women to ships, it is imperative that policies and attitudes relating to Navy women support their full utilization. Due to the increasing concern about the impact of pregnant Navy women, the present study examined policies and attitudes relating to pregnancy as well as the effects of the pregnant Navy woman on her workgroup. Two samples were selected for use in the study: The longitudinal sample was selected since it included Navy women who presumably had the highest incidence of pregnancy (first-term enlistees); and the aviation squadron sample, because it included women who, if they became pregnant, were assumed to have a significant effect on their workgroup. Thus, the findings may not be generalized to all Navy enlistees, although they provide several insights into the differences between Navy women and men in their patterns of absenteeism and attrition.

The major impetus for conducting the present study was objections to the provisions of the present pregnancy policy. The results of this study point to the likely consequences of changes to the leave and discharge provisions of the policy as well as the possible effects of accepting more women into the Navy.

Abolishment of Discharge Option

If the discharge option for Navy women were abolished, the number of days lost by female enlisted would increase due to the increase in pregnancy-related absences. Most of the additional days lost would be paid as they would be health-related absences. In this regard, it should be noted that the amount of time lost due to pre- and post-delivery care (approximately 2 weeks and 6 weeks respectively) by Navy women is comparable to that reported for normal deliveries of civilian women and considerably less than the absenteeism reported for Army women. Further, even with these absences, this study showed that junior enlisted women lost fewer days than their male counterparts, primarily due to the men's unauthorized absences.

This policy change would naturally result in a greater number of pregnant women on active duty. It probably would not affect demands for obstetrical services, since pregnant women who are discharged presently receive military medical care until they have recovered from childbirth. However, it is likely to increase the services required by Navy women's dependents, unless hardship discharges were liberally granted after childbirth.

Finally, although findings of this study showed that pregnancy continues to be a major reason for discharge of junior enlisted women, the policy of optional discharge has effectively lowered women's attrition rate to that of men. If the discharge option were abolished, the attrition rate of women may drop by as much as 40 percent; that is, to only 60 percent of the attrition rate of their male counterparts.

Present findings show that pregnant women who remain in the Navy create little or no hardship for their workgroup, reportedly due to the reassignment of pregnant women to lighter duties, assistance from other workgroup members,

or extra work hours self-imposed by pregnant women to compensate for time off or physical limitations. The results also suggest that the effects of the pregnant woman on the morale and personal relationships of her workgroup are not extensive. However, if the discharge option were abolished, the number of active duty pregnant women would increase, and pregnancy might have a greater impact on the workgroup. For example, temporary assignment to lighter or safer duty may be more difficult to provide. Males who are recommended for such assignments may even be preempted by pregnant women. Also, coworker support and assistance during pregnancy may diminish.

Mandatory Discharge

If the policy of mandatory discharge for pregnancy were reinstated, it would have significant implications. First, it would decrease female absenteeism by eliminating pregnancy-related absences. Second, it would affect health care requirements of Navy women, especially if discharged pregnant women were denied military maternity care. Third, the attrition of junior enlisted women would increase. As a result, the female attrition rate would be higher than that of males, as was true prior to implementation of the optional discharge policy. Also, because of the increased female attrition, workgroup turnover would be higher, which could adversely affect both workgroup morale and productivity, particularly in groups with a high proportion of billets filled by women.

Chargeable Maternity Leave

If the policy's leave provisions were changed so that maternity leave were charged against the woman's leave record, both absenteeism and workgroup productivity could be affected. In regard to the latter, such a policy change could enhance workgroup productivity by reducing malingering by pregnant Navy women. Conversely, it could reduce the workgroup efficiency by encouraging pre- and postpartum women who have limited leave to report for work when they are physically unable to perform their duties. The results of the present study do not directly address this issue, although the finding that the average Navy woman loses no more time than the average civilian woman suggests that malingering is not a major problem. Thus, the second effect described may be more likely to occur.

Chargeable maternity leave may not improve the morale of male Navy members to the extent suggested by some Navy managers, since 75 percent of the male coworkers who were interviewed did not know the provisions of the leave policy, and 60 percent of the male survey respondents support the present policy. In fact, charging maternity leave could result in a decline in morale of enlisted women, as 84 percent of the female survey respondents endorse the present policy.

Enlistment of More Navy Women

Lifting the restrictions on the number of women accepted into the Navy may result in pregnant Navy women having greater impact because of their greater numbers. More pregnant women would be on active duty due, in

general, to the higher enlistment of women and, specifically, to the enlistment of women of an age associated with high pregnancy rates. Thus, the impact of pregnancy on the absenteeism, attrition, and morale of junior enlisted personnel may increase.

Some indicators point to other possibilities, however. In years to come, efforts to recruit women will be directed more and more toward those with nontraditional job interests, who may differ from present-day enlistees in the propensity to have children. If they are less likely to have children, the impact of pregnancy would be no greater and may even be less than that presently observed. Conversely, if their pregnancy rates are equivalent to those of present-day Navy women, their nontraditional orientation may have other effects. Such women may be less likely to regard parenting as a full-time pursuit and more likely to remain in the Navy during pregnancy and after. The present study does not address this issue, though future related research would be beneficial to Navy managers.

RECOMMENDATIONS

It is recommended that the current pregnancy policy be retained in its entirety for the following reasons:

1. It is consistent with EEOC guidelines regarding the retention of pregnant workers, the provision of paid maternity leave, and the treatment of pregnant workers on a case-by-case basis.

2. It has reduced the attrition rate of women to that of men.

3. The majority of personnel surveyed (84% and 59% of women and men respectively) endorsed both the discharge and leave provisions of the present policy.

However, consideration must be given to the sizeable proportion of male enlistees surveyed (approximately 40%) who object to the present policy. Their opposition, coupled with the anticipated build-up of women in the Navy, may increase the impact of the pregnant Navy woman beyond the level presently observed.

Since it appears that objections to pregnant women in the Navy often stem from misunderstanding of policy and/or misconceptions of their organizational and personal impact, it is recommended that Navy personnel of all ranks be informed of the discharge and leave provisions of the Navy pregnancy policy. It should be made clear that (1) post-partum leave is usually convalescent leave authorized by the Commanding Officer, based on a physician's evaluation of an individual's condition, (2) leave taken in excess of authorized convalescent leave is treated like any other voluntary absence--that is, it is charged against the woman's leave record, and (3) light duty status, prescribed by the physician, is based on medical necessity and is not chargeable as annual leave.

Finally, it is recommended that the relevant findings of the present study be disseminated to personnel at all echelons. Of particular import are the findings relating to the attrition and absenteeism of women and men, the impact of pregnant women on morale and productivity, and the average number of days off duty taken for pregnancy and childbirth. This information may be disseminated by: (1) inclusion in the Captain's Call Kit, (2) publication in the Navy Times and other military periodicals, and (3) incorporation into workshops and training programs conducted by the Navy's Human Resource Management Centers. Emphasis should vary on the basis of audience sophistication and need; for example, supervisors would benefit from a discussion of physical limitations associated with pregnancy and reassignment procedures; and junior enlisted, by a discussion of time lost by women, including pregnancy-related absences, as compared to time lost by men.

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APPENDIX
SURVEY AND INTERVIEW FORMS

QUEST SURVEY

You are a member of a group of Navy personnel whose careers are being followed from recruit training to the time of discharge. At RTC you answered one questionnaire and, a few months ago, another questionnaire was mailed to you asking for your reactions to the Navy after more than a year on active duty. The time and effort you spent filling out these questionnaires are greatly appreciated. This research is very helpful to the Navy in its efforts to make the best use of the skills and abilities of persons who enlist.

Privacy Act Statement

Under the authority of 5 USC 301 Departmental Regulations, you are requested to complete the enclosed questionnaire. It asks about your present Navy job, additional background information, time off from duty, and the effects of pregnancy on both the work-group and the pregnant woman in the Navy. Your answers will be used in strictest confidence by the Navy Personnel Research and Development Center for statistical research purposes only and will never be seen by your Command or become a part of your service record. The answers of all respondents will be combined and analyzed. In no case will your answers be used in making any decisions that would affect you individually. Your name and social security number are needed in order to match this questionnaire to the ones you already filled out.

Because this survey is only being mailed to a select groups of persons, it is very important that everyone answer the questions. You are not required to provide this information; your participation in the survey is voluntary. Some of the questions are very personal, but such information is important in developing fair policies for all Navy people. By asking everyone in the sample the same questions, the Navy will gain more insight on what is needed to attract and keep talented women.

When you have completed this questionnaire, please seal it inside of the enclosed return envelope. Mail it to:

Navy Personnel Research and Development Center
Code 307 SS
San Diego, California 92152

The following items were administered to both men and women.

BUPERS 5314-59

PLEASE ENTER YOUR NAME AND SOCIAL SECURITY NUMBER IN THE BLANKS PROVIDED BELOW. THEN CHOOSE THE ONE LETTER OR NUMBER WHICH BEST DESCRIBES YOUR ANSWER AND WRITE IT ON THE LINE NEXT TO EACH QUESTION NUMBER. WHEN YOU ARE ASKED TO WRITE OUT YOUR ANSWER, PLEASE WRITE IT IN THE SPACE PROVIDED.

Name _____ Social Security No. _____

1. What is your rating? _____ If nonrated, what rating are you striking for? _____
- _____ 2. What is your marital status?
 - A. Single (never married)
 - B. Married
 - C. Other (divorced, separated, widowed)
- _____ 3. How many children (including stepchildren) do you have who are with you at your present duty station?
 - A. None
 - B. One
 - C. Two or three
 - D. Four or more
- _____ 4. Do you have any children who do not live with you at your present duty station?
 - A. No
 - B. Yes, my child/children are temporarily living somewhere else because of my present duty assignment
 - C. Yes, my child/children are temporarily living somewhere else for some other reason
 - D. Yes, someone else has permanent custody of my child/children
- _____ 5. What type of duty are you presently assigned to?
 - A. CONUS shore duty
 - B. Overseas shore duty
 - C. (Males only) CONUS sea duty including deployable squadron
 - D. (Males only) Overseas sea duty, including deployable squadron

_____ 6. What are your reenlistment intentions?

- A. Intend to get out at end of first enlistment
- B. Hope to get out before end of first enlistment
- C. Intend to reenlist
- D. Undecided

THE FOLLOWING QUESTIONS ASK ABOUT TIME TAKEN OFF FROM DUTY FOR SEVERAL DIFFERENT REASONS.

Indicate below whether you have taken off during duty time for each of the different reasons listed. Do not count time when you were on leave.

_____ 7. Personal reasons such as going to the commissary or exchange, illness in the family, etc.

_____ 8. Disciplinary reasons such as for Captain's or XO's Mast or court martial.

_____ 9. Your own illness, dental care, and medial checkups (other than for accidents). Count all time that you were absent from duty, whether in the hospital/dispensary or not.

_____ 10. Injury from off-duty accidents. Count all time you were absent from duty whether in the hospital/dispensary or not.

_____ 11. Injury from on-duty accidents. Count all time you were absent from duty, whether in the hospital/dispensary or not.

_____ 12. Other reasons (specify reasons and number of hours absent from duty for each reason): _____

_____ 13. Have you been hospitalized during the past 12 months?

- A. No
- B. Yes

If "yes," how many days were you in the hospital? (Do not count convalescent leave) _____

_____ 14. Have you been on convalescent leave during the past 12 months?

- A. No
- B. Yes

If "yes," how many days were you on convalescent leave? _____

- _____ 15. Did you lose any time from duty for UA or confinement in past 12 months?
- A. No
B. Yes
- If "yes," how many days did you lose? _____
- _____ 16. Did you spend any time at a drug or alcohol rehabilitation center in the past 12 months?
- A. No
B. Yes
- If "yes," how many days were you off duty for drug or alcohol rehabilitation? _____
- _____ 17. In general, who seems to take more time off because of a family member being sick or needing medical checkups, men or women?
- A. Men
B. Women
C. About the same
D. No opinion
- _____ 18. In general, who seems to take more time off for personal matters such as going to the commissary or exchange, men or women?
- A. Men
B. Women
C. About the same
D. No opinion
- _____ 19. In general, who seems to spend more time at sick call and being sick, men or women?
- A. Men
B. Women
C. About the same
D. No opinion
- _____ 20. Do you personally feel that women get too much time off while they are pregnant?
- A. Haven't worked around any pregnant women in the Navy
B. Yes
C. No
D. No opinion

- _____ 21. Do you personally feel that women get too much time off for delivery and recovery from childbirth?
- A. Haven't worked around any women who gave birth while in the Navy
 - B. Yes
 - C. No
 - D. No opinion
- _____ 22. If a woman in your workgroup became pregnant and was not discharged from the Navy, what duties do you think she should perform?
- A. Continue her regular duties
 - B. Be given lighter duties within my workgroup
 - C. Be reassigned to a safer or easier job in my Command
 - D. None of the above (explain) _____
- _____ 23. If a woman in your workgroup became pregnant and was not reassigned to another workgroup or discharged, how do you think it would affect the rest of the workgroup?
- A. Little or no effect on workgroup
 - B. A hardship for workgroup only if she was off duty for several weeks to have baby
 - C. A hardship for workgroup both during pregnancy and when she was off duty to have baby
 - D. None of the above (explain) _____
- _____ 24. Since joining the Navy have you ever had a pregnant woman in your workgroup? (Do not count yourself if you have been pregnant.)
- A. No
 - B. Yes and she caused a big hardship for the workgroup
 - C. Yes and she caused some hardship for the workgroup
 - D. Yes and she caused little or no hardship for the workgroup
- _____ 25. In general, how do you think women are treated who get pregnant and stay in the Navy to have their babies?
- A. Never knew any
 - B. Strongly discriminated against
 - C. Somewhat discriminated against
 - D. Neither discriminated against nor given any special consideration
 - E. Given some special consideration
 - F. Given a lot of special consideration
 - G. No opinion

_____ 26. What do you think the Navy's policy should be about keeping a pregnant woman on active duty?

- A. She should be required to complete her entire enlistment
- B. She should be given the option to request discharge before the baby is born
- C. She should be required to get out of the Navy before the baby is born
- D. Some other policy (specify) _____

_____ 27. It has been suggested that the Navy require women to make up any time they take off for childbirth and recovery by adding this time to the length of their enlistment. Present policy treats absence for childbirth the same way as for those due to illness and accidental injury, which do not have to be made up unless they result from reckless and wanton misconduct. What do you think the Navy's policy should be?

- A. Treat pregnancy the same as illness and accidental injury (present policy)
- B. Require that the time be made up at the end of enlistment
- C. Charge as leave or leave without pay, if leave is used up
- D. Some other policy (specify) _____

28. Please feel free to make any other comments about the Navy's policies on pregnancy, its treatment of pregnant women, etc.

The following items were administered to women only.

- _____ 1. If you decided to start a family or have another child, do you think you would stay in the Navy?
- A. Don't plan to have any (or any more) children
 - B. Definitely would stay in
 - C. Probably would stay in
 - D. Don't know
 - E. Probably would get out
 - F. Definitely would get out

- _____ 2. Have you been pregnant since you joined the Navy?
- A. No
 - B. Yes I am pregnant now
 - C. I was pregnant and already had a baby
 - D. I was pregnant but pregnancy was terminated without having baby

ANSWER QUESTIONS ONLY IF YOU ARE NOW PREGNANT OR HAVE BEEN PREGNANT SINCE JOINING THE NAVY.

- _____ 3. If you have been pregnant since you joined the Navy, when did you find out that you were pregnant?
- A. During RTC
 - B. During Class "A" School
 - C. After completing school/training
- _____ 4. If you are pregnant now, what are your plans?
- A. Does not apply--no longer pregnant
 - B. Terminate my pregnancy and stay in the Navy
 - C. Have my baby and stay in the Navy
 - D. Get out of the Navy
 - E. Undecided
- _____ 5. If you are pregnant now, what month of pregnancy are you in (enter number)?
- _____ 6. Have you performed (or did you perform) your regular duties throughout your pregnancy?
- A. Same duties and schedule as before I was pregnant
 - B. Same duties but sometimes worked shorter hours than before I was pregnant
 - C. Assigned to different duties within my workgroup
 - D. Assigned to a different workgroup

Please describe what your regular duties were at the time you became pregnant. _____

IF YOU ANSWERED A OR B TO QUESTION 6, PLEASE SKIP TO QUESTION 7. IF YOU ANSWERED C OR D, PLEASE ANSWER REMAINING PARTS OF QUESTION 6 BELOW.

Please describe the type of duties you were reassigned to: _____

When were you reassigned to other duties? In my _____ month of pregnancy.

Whose idea was it to reassign you (your own idea, your supervisor's, the doctor's or some other person(s)? _____

Do you feel it was a good idea to reassign you to other duties at that time? _____. Why, or why not? _____

7. Please describe the effect of your pregnancy upon the following:

Your relationship with your supervisor _____

Your relationship with other members of your workgroup _____

Your relationship with other individuals at your Command _____

The way you were treated by medical personnel _____

Any other effects upon your life in the Navy (specify) _____

8. If you had a baby since joining the Navy, how many weeks were you off duty for delivery and recovery from childbirth? _____ weeks
9. Altogether about how many hours do you think you have been (or were) off duty for prenatal check-ups, not feeling well, duty hours restricted by the doctor, etc., during your pregnancy? _____ hours

INTERVIEW SHEET

INTERVIEW NUMBER _____

Rate/Rating.

Sex.

Marital status.

How long at command.

Time in Service.

Number of females in work group.

Number of experiences working at a command having females.

Number of experiences seeing females in jobs normally held by men in the Navy.

Have you worked with females in nontraditional jobs?

How much time off have you had during the past month for each of the following?

Personal matters.

Personal illness or doctor visits.

NJP.

Drug/alcohol rehab.

Off-job accident.

Pregnancy:

Effect on productivity.

Other impacts on work group.

Effect of time off on morale.

Impact of unplanned loss vs. planned loss.

Policy on time off for pregnancy (pre/post delivery):

Do you know what the policy is?

What effect does present policy have on morale?

What policy do you think would be fair?

Number of days you anticipate a pregnant female would be off.

Amount of on-job time off (e.g., hangovers, tired because of moonlighting, etc.).

FOR PREGNANT FEMALES OR MOTHERS SINCE JOINING

Perception of how others feel about the time off you got/will get.

Differences in jobs due to pregnancy.

Policy on time off accounting--what would you like for policy?

What influenced your decision to remain in Navy?

Were you pregnant during assignment to Class "A" School?

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