MILITARY PERSONNEL

Visibility over Junior Enlisted Servicemember Access to Services on Bases Could Be Enhanced

Why GAO Did This Study

Junior enlisted servicemembers constitute more than half of DOD’s enlisted force. To sustain the force and help ensure continued growth in all ranks, DOD provides a wide array of services and programs on its military bases, including dining facilities; fitness centers; and medical clinics. Senate Report 113-176 included a provision for GAO to review junior enlisted servicemember access to services and programs on military bases.

This report evaluates (1) the extent to which DOD’s policies and procedures for on-base services and programs consider access by junior enlisted and what factors influence their implementation; and (2) the extent to which DOD and the military services collect and share information and data on junior enlisted access to on-base services to identify any potential access issues. GAO evaluated DOD, military service, and base policies and data-collection tools; conducted 17 nongeneralizable discussion groups with junior and senior enlisted servicemembers randomly selected at four bases identified to represent a range of size and locations; and interviewed officials from OSD, the military services, and four bases.

What GAO Found

Department of Defense (DOD) policies and procedures at multiple levels—the Office of the Secretary of Defense (OSD), the military services, and four bases DOD visited—govern on-base services and programs and establish access for all servicemembers, including junior enlisted, who are in the early stages of their military career and in the first four of nine pay grades of the military compensation system. Further, implementation is influenced by several factors. GAO found that policies referenced the entire active-duty, enlisted, or base populations, and did not distinguish between specific groups—such as by pay grade or rank. For example, Defense Health Agency policy regarding medical care includes provisions for all active-duty servicemembers, of which junior enlisted servicemembers are a subset, as part of a priority system for access to medical care. Further, at four bases GAO visited, implementation of policies and procedures was influenced by factors such as available budgetary resources and low usage of services or programs. Base officials stated that budget cuts and sequestration diminished their ability to provide services and programs at a level that met current needs of all servicemembers.

DOD’s efforts to collect data on on-base services and programs do not address junior enlisted servicemember access issues, including those identified in GAO-led discussion groups. Further, DOD has mechanisms for sharing information across the department on initiatives and other good practices, but these also do not focus on junior enlisted servicemember access issues. In all 17 discussion groups, participants provided comments—positive and negative—on access to the following: (1) dining facilities, (2) medical care, and (3) transportation. For example, 6 of 11 junior enlisted discussion groups reported having problems scheduling medical appointments in a timely manner. However, GAO found that formal data-collection mechanisms used by DOD, the military services, and four bases—including surveys, utilization rate data, and town halls—did not fully capture potential access issues related to these type of concerns because they did not include (1) direct questions on access to all services and programs, (2) opportunities to follow up on reasons for dissatisfaction, or (3) options for open-ended responses. For example, DOD’s Status of Forces Survey of Active Duty Members asks about satisfaction with hours of operation of the commissary, but does not ask about satisfaction with or access to most other services and programs. According to participants in 9 of 17 discussion groups, feedback from informal mechanisms, such as discussions with supervisors where access may be discussed, may not be relayed to decision makers or acted upon once received. Finally, DOD’s information-sharing methods include a number of policy boards with representatives from the services, but the efforts are broader than identifying or addressing issues specific to junior enlisted servicemembers. DOD officials stated that they believe access is not a widespread problem and satisfaction questions and other efforts are sufficient to obtain needed data on access. Without reviewing and considering existing data-collection and information-sharing mechanisms and taking action, DOD is missing opportunities to enhance its efforts to provide services and programs that encourage retention and contribute to DOD’s goal of a trained and ready force.