



Commissioned Corps Women's Issues Advisory Board

Listening Session
August 10, 2023

Moderated by CCWIAB's Reproductive
Health Committee



Agenda

- Welcome
- Presentation: Reproductive Health Committee Activities and Initiatives
- Open Discussion
- Survey



Disclaimer

The information presented and any interpretations of policies are those of the presenters and do not necessarily represent the official position of the USPHS.



Today's Presenters

CDR Cria Perrine, PhD

Chief, Epidemiology Branch
Coronavirus and Other Respiratory Viruses Division
National Center for Immunization and Respiratory Diseases
Centers for Disease Control and Prevention
Atlanta, GA
Email: cperrine@cdc.gov

CDR (sel) Shannon Thor, PharmD, MS

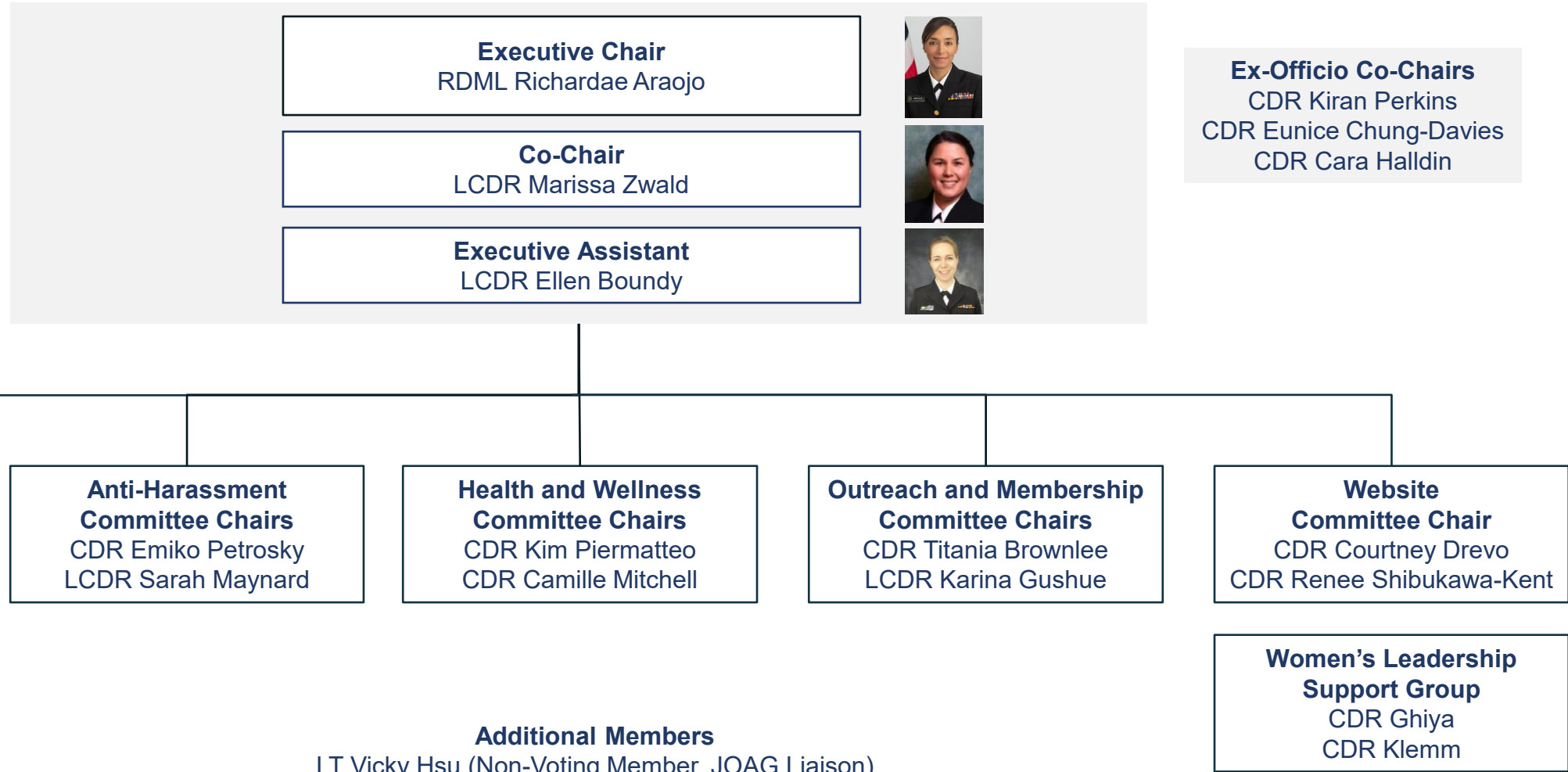
Deputy Director
Europe Office
U.S. Food and Drug Administration
U.S. Mission to the European Union
Brussels, Belgium
Email: Shannon.Thor@fda.hhs.gov



CCWIAB's
Reproductive Health Committee
(RHC) Activities and Initiatives



Current Organizational Structure



Last Updated July 12, 2023



Reproductive Health Committee

- Includes 3 subcommittees:
 - Pregnancy
 - Postpartum
 - Family Planning

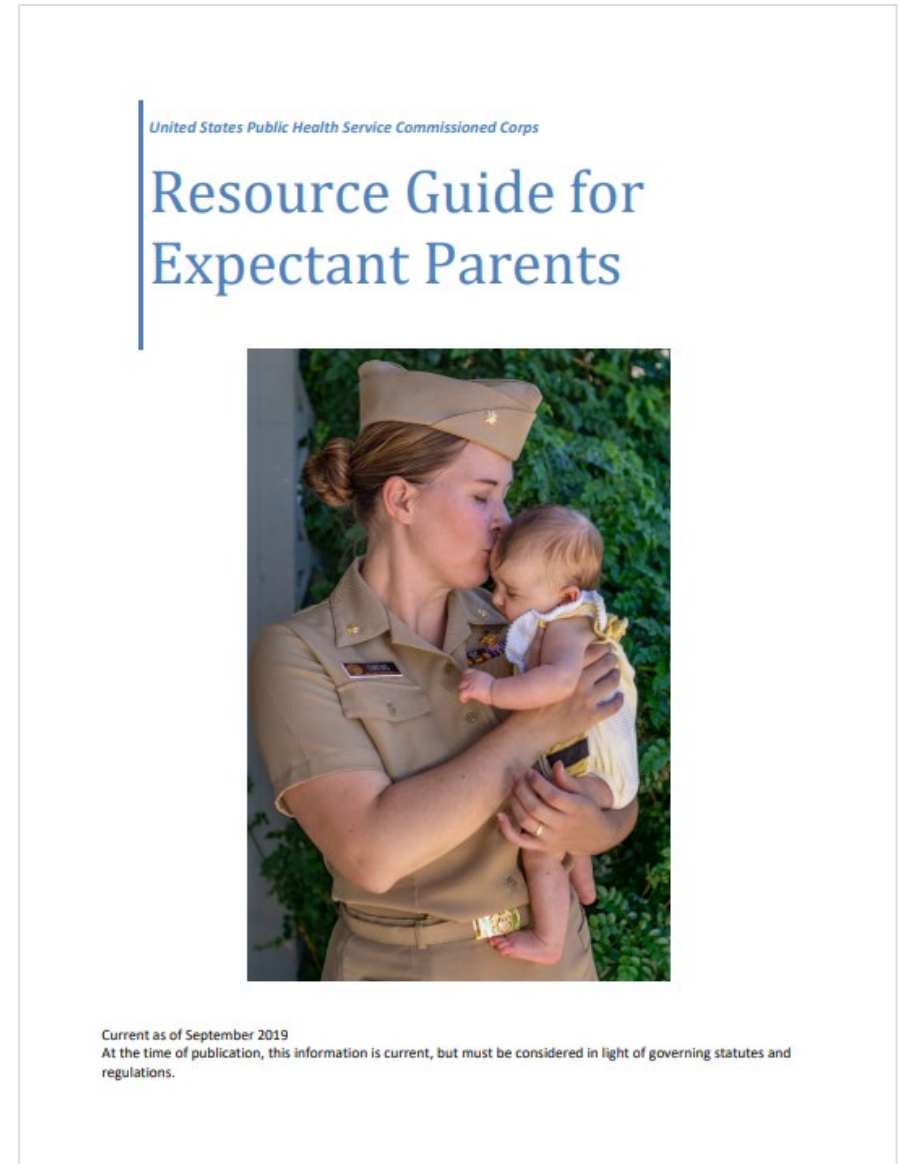


Resource Guide for Expectant Parents

Topics include:

- Pregnancy checklist
- Maternity and paternity leave
- Postpartum care and information
- Postpartum depression resources
- Breastfeeding information
- Medical waivers
- Adoptive parents
- Infertility

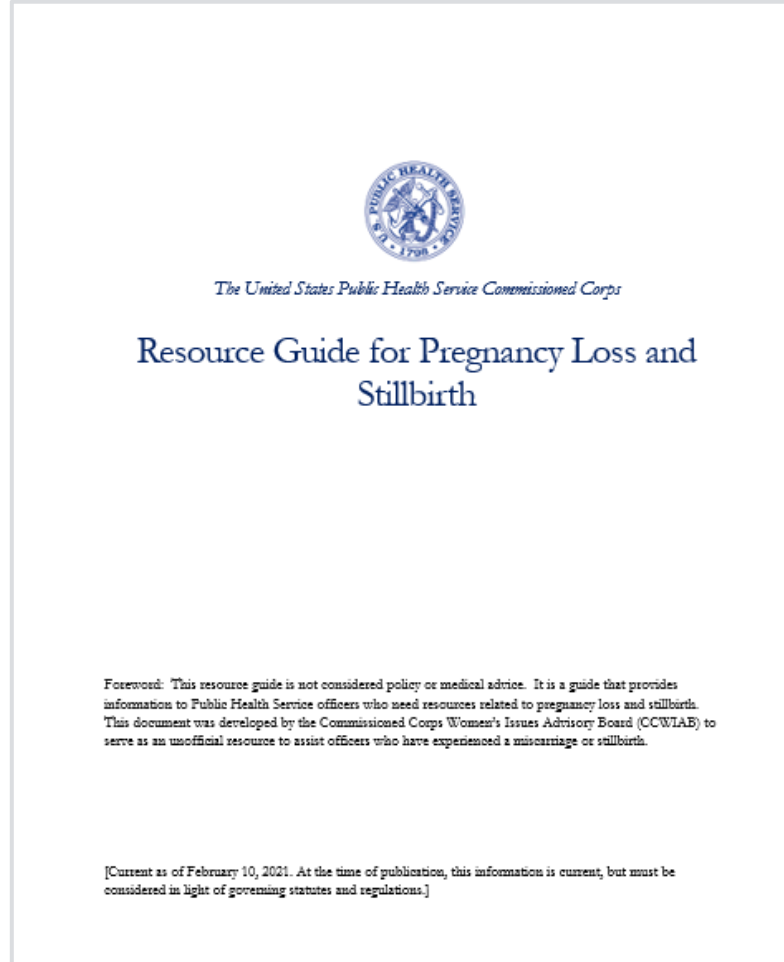
Available at <https://dcp.psc.gov/osg/ccwiab/ccwiabresources.aspx>



Resource Guide for Pregnancy Loss and Stillbirth

Topics include:

- Physical and emotional aspects of loss
- Leave and support services available to officers



Policy Recommendations

Joint Travel Regulation Revision: Breast Milk Shipment as a Travel Accommodation, Effective 4/7/2022

- Specifies that the cost of shipping breast milk may be reimbursed as a travel accommodation for a special need during temporary duty (TDY) travel.
- Expenses may include reasonable commercial shipping fees, excess baggage, disposable storage bags or nondurable containers, cold shipping packages, refrigeration, and transport.
- Expenses will be reimbursed up to a maximum of \$1,000 when authorized.

Memorandum on JTR revision:

<https://media.defense.gov/2022/Apr/14/2002977280/-1/-1/0/BREAST-MILK-SHIPMENT-AS-A-TRAVEL-ACCOMMODATION-JTR.PDF>

Full JTR:

<https://www.defensetravel.dod.mil/Docs/perdiem/JTR.pdf>



Policy Recommendations

Breastfeeding & Deployments Advocacy

- Successfully advocated for new policy supporting officers choosing to breastfeeding past the expiration of the 12 month pregnancy waiver



Commissioned Corps Women's Issues Advisory Board
Breastfeeding and Deployments in USPHS

Medical Waivers for Breastfeeding

There are three types of [Medical Affairs Branch \(MAB\) waivers](#) that may relate to breastfeeding:

Waiver Type	Waiver Description
Pregnancy Waiver	Exempts officers from deployment during pregnancy and for 12 months after the anticipated delivery date (regardless of infant feeding method)
Breastfeeding Waiver – Requested after Pregnancy Waiver expires	After the expiration of the Pregnancy Waiver at 12 months, officers should be prepared to deploy. A Breastfeeding Waiver may be requested to ensure additional lactation resources are available when deployed or at a CCHQ or RDB training. Granted for 5-month intervals, with ability to extend as needed. The officer will be assigned to a Medical Readiness Category 2 (MRC-2) which will communicate to the deployment team that regular breaks, electricity, and refrigeration must be provided. <i>If an officer is on a Breastfeeding Waiver and these accommodations cannot be met during the deployment, the officer will not be rostered for that deployment.</i>
Deployment Waiver – Requested	Requests for a full deployment waiver due to breastfeeding will only be considered



Policy Recommendations

Fertility Treatments and Deployments

- Successfully advocated for time-limited deployment waivers for officers undergoing fertility treatments



Commissioned Corps Women's Issues Advisory Board Fertility Treatment and Deployments in USPHS

Medical Waivers for Fertility Treatment

The Medical Waiver Program within the Medical Affairs Branch (MAB) includes personal exemptions from deployment and/or completing some readiness requirements. The following instructions are meant to serve as a supplement to the [Medical Waiver Program website](#) outlining the process for applying for a waiver due to fertility treatment. Types of fertility treatments vary and can include medication, surgery, intrauterine insemination, or assisted reproductive technology (e.g., in-vitro fertilization [IVF]) ([CDC, 2021](#)).

TRICARE does not cover the cost of some fertility treatments, and officers may be financially responsible for these costs.¹ Deployment waivers granted for fertility treatment do not affect TRICARE coverage or provide financial support for treatment through TRICARE.

Fertility Treatment Waiver Process for Deployments



Policy Recommendations

New Army Directives for Parenthood, Pregnancy, and Postpartum

- New directives provide support for officers regarding pregnancy, postpartum, parental leave, and fertility treatment
- CCWIAB compared new Army directives with current PHS policies to discuss where alignment would be feasible



SECRETARY OF THE ARMY
WASHINGTON

MEMORANDUM FOR SEE DISTRIBUTION

SUBJECT: Army Directive 2022-06 (Parenthood, Pregnancy, and Postpartum)

1. References. For references, see enclosure 1.
2. Purpose. This directive updates Army policy and executes Secretary of Defense priorities pursuant to reference 1f. It incorporates evidence-based health and wellness guidance to improve quality of life, promote flexibility, and enable all Soldiers to safely continue their duties, return to readiness, perform critical assignments, and advance in their careers while growing their Families. This directive is grounded in the Army People Strategy; Diversity, Equity, and Inclusion Annex; Holistic Health and Fitness practices; Department of Defense Equal Opportunity Policy; and medical guidance. It also serves as part of the broader Action Plan To Prioritize People and Teams.
3. Applicability. This directive applies to the Regular Army (RA), Army National Guard (ARNG)/Army National Guard of the United States (ARNGUS), and U.S. Army Reserve (USAR).
4. Policy. For the definitions of terms used in this directive, see enclosure 2.
 - a. Postpartum Body Composition Exemption. This paragraph applies to all Soldiers after the conclusion of pregnancy, including Soldiers who experience perinatal loss.
 - (1) The body composition exemption in reference 1t, paragraph 3–15, for pregnant and postpartum Soldiers is increased from 180 days to 365 days (12 months) after the conclusion of pregnancy.
 - (2) Army Body Composition Program (ABCP). Pursuant to references 1d and 1t, all postpartum Soldiers who do not meet the Army body composition standard after 365 days following the conclusion of pregnancy will be entered into the ABCP.
 - (3) Soldiers who become pregnant while enrolled in the ABCP and (a) have been enrolled in the ABCP for fewer than 30 days before the start of pregnancy (the estimated date of conception as noted by a medical provider) or (b) have been enrolled in the ABCP for fewer than 90 days before the start of pregnancy, and have been demonstrating satisfactory progress every month, will have their flag removed as erroneous.





Assisted Family Planning Support Group (AFPS)



- **Who We Are:** Part of the Women's Leadership Support Group (WLSG) in collaboration with the Commissioned Corps Women's Issues Advisory Board (CCWIAB)
- **Our Mission:** To support PHS officers who are seeking fertility treatment, interested in fertility resources, or desire assisted family planning support (e.g., adoption, etc.)
- **Our Goal:** To empower and learn from each other while providing unconditional support to each individual officer and each challenge faced
- **Our Foundations:** Confidentiality, Trust, and Support
- **Our Meetings:** Occur once a month via Zoom

Contact: Anne.Tobenkin@fda.hhs.gov

Open Discussion



Open Discussion

- **To Ask a Live Question:**
 1. Raise your hand in Zoom
 2. Moderator will announce your name and invite you to ask your question
 3. Unmute yourself when prompted in Zoom to ask your question
- **To Ask a Written Question:**
 1. Type your question in the Zoom chat
 2. Moderator will read your question aloud

CCWIAB Resources

- For more information on CCWIAB and to view CCWIAB's Charter, please visit: <https://dcp.psc.gov/OSG/ccwiab/>
- To view CCWIAB's Resource Guides, please visit: <https://community.max.gov/display/HHS/CCWIAB+Resources+for+PHS+Officers>
- To join the CCWIAB listserv, please subscribe via the NIH listserv page: <https://list.nih.gov/cgi-bin/wa.exe?SUBED1=CCWIAB&A=1>



Please take our survey:

<https://www.surveymonkey.com/r/3MY2VBW>

1. Did the CCWIAB Listening Session meet your expectations?
2. Did the CCWIAB Listening Session resonate with your own experiences?
3. What suggestions do you have to improve the next CCWIAB Listening Session?
4. What topics are important to you that CCWIAB should feature in a future Listening Session?
5. What topics are important to you that CCWIAB should better address as an advisory group?

**If you are unable to access the survey link, please feel free to email your responses to CDR Kim Piermatteo at Kimberly.Piermatteo@fda.hhs.gov.*

Current CCWIAB PAC Liaisons

Rank	First Name	Last Name	Email	Category	Agency	Committee
CDR	Titania	Brownlee	Titania.M.Brownlee@uscg.mil	Dentist	USCG	Outreach and Membership
CDR	Courtney	Drevo	Courtney.Drevo@fda.hhs.gov	Dietician	FDA	Website
CDR	Cria	Perrine	hgk3@cdc.gov	Scientist	CDC	Reproductive Heath
CDR	Emiko	Petrosky	xfq7@cdc.gov	Physician	CDC	Anti-Harassment
CDR	Kimberly	Piermatteo	Kimberly.Piermatteo@fda.hhs.gov	Engineer	FDA	Health and Wellness
CDR	Yvonne	Santiago	yvonne.santiago@fda.hhs.gov	HSO	FDA	Ad-hoc Essential Healthcare
CDR	Renee	Shibukawa-Kent	Renee.Shibukawa-Kent@fda.hhs.gov	Veterinarian	FDA	Website
LCDR	Emily	Gaffney	emily.gaffney@ihs.gov	Nurse	IHS	Reproductive Heath
LCDR	Karina	Gushue	Karina.gushue@ihs.gov	Therapist	IHS	Outreach and Membership
LCDR	Sarah	Maynard	sarah_maynard@nps.gov	EHO	NPS	Anti-Harassment
LCDR	Shannon	Thor	shannon.thor@fda.hhs.gov	Pharmacist	FDA	Reproductive Heath

Thank you for joining us today!



COMMISSIONED CORPS
OF THE U.S. PUBLIC HEALTH SERVICE

