

Tailoring Medical Standards for Air Force Personnel

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ISSUE

Service members must meet medical standards set by the U.S. Department of Defense (DoD) to ensure that they are fit to serve in the U.S. military (see Figure S.1). However, the individual services establish additional standards for specific career field categories. To ensure that critical skill needs are met in the future, the Department of the Air Force is interested in better ways to assess and align personnel to career fields and asked RAND Project AIR FORCE to explore the use of medical standards for such purposes, including the social implications to Air Force culture.



APPROACH

The study team used weight and hearing standards to illustrate options for tailoring servicewide medical standards. To gauge support for tailored standards, the team held focused discussions with 25 stakeholders, including 14 from three specialty areas: cyber, aircraft maintenance, and remotely piloted aircraft. In addition, the team developed and conducted a survey focused on potential barriers in Air Force culture to implementing tailored weight and hearing standards for airmen in cyber career fields—highly technical career fields with fewer physical demands. The survey also addressed perceptions related to other medical conditions (such as asthma or depression) and potential uses for genetic testing.



CONCLUSIONS

- DoD policies on medical standards might present policy barriers to Air Force–tailored medical standards—limiting the degree to which standards could be relaxed.
- In general, subject-matter experts questioned the value of tailoring medical standards.
 - Requirements for deployment serve as a significant barrier.
 - The need for tailored medical standards was not apparent; experts cited the waiver process as having sufficient flexibility to tailor standards to individual cases.
 - Airmen in leadership positions who have met relaxed standards might not be perceived as effective or command respect.
 - Lowering standards might result in lower acceptance of coworkers.

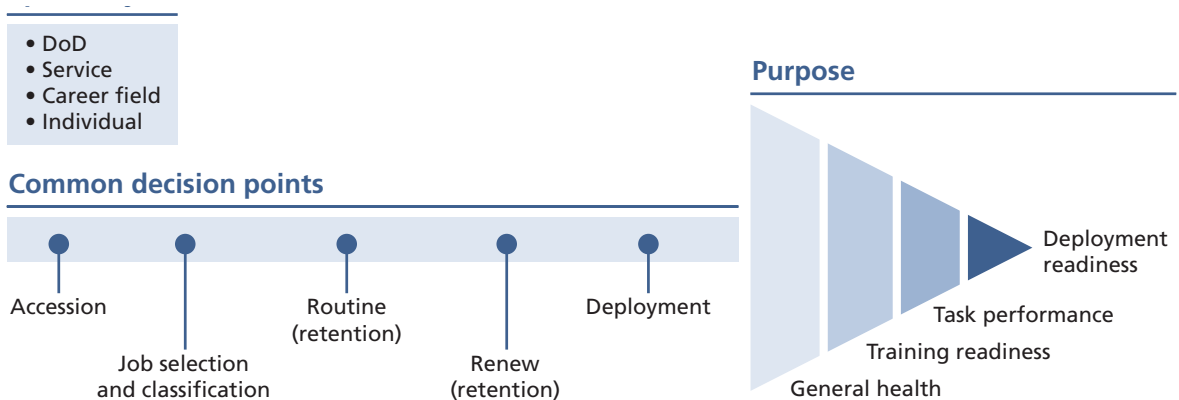
- Survey findings revealed potential cultural barriers and suggest that relaxing medical standards might not be equally accepted by airmen.
 - Perceptions toward airmen not meeting weight standards were more negative than toward those with hearing conditions.
 - Concerns about overweight coworkers related to perceptions of fairness (the need for accommodation), stereotypes, and the ability to maintain self-discipline.
 - Concerns about hearing impairment focused on performance, safety, and putting coworkers at risk.
- Airmen were not fully supportive of the use of genetic testing for purposes outside communicating potential genetic conditions.



RECOMMENDATIONS

- *Proceed carefully with any plans to further implement biomarkers into the accession process.* First, consider a voluntary program on a trial basis that would use results to inform applicants of health risks but not to influence selection, classification, or other personnel decisions.
- *Balance potential concerns about fairness with underlying cultural concerns when considering policy changes.* Communication, systematic and transparent decisionmaking, and training and education would be essential to implementing tailored medical standards.
- *Evaluate the potential benefits and consequences of a fully tailored medical standard.* Before pursuing the implementation of tailored standards, use trial tests with various options, such as limited-term waivers for a temporary condition and permanent waivers for a permanent condition, to assess the potential benefits and consequences.

FIGURE S.1. OVERVIEW OF KEY FACTORS FOR MEDICAL STANDARDS IN THE MILITARY



NOTE: Medical standards are used for screening purposes throughout an airman's career. These standards help determine whether airmen meet general health requirements for accession and retention, whether an airman is capable of performing required tasks for job selection and classification, and whether an airman is ready for training or deployment. Policies are set by DoD, by the services, and for individual career fields or communities. Collectively, these policies determine the qualification of individual airmen at different points in their careers.



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