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UNITED STATES INSTALLATION MANAGEMENT COMMAND
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ATZJ-HB (40-66a)

05 July 2023

MEMORANDUM FOR All United States Army Garrison (USAG) Fort Jackson Soldiers

SUBJECT: U.S. Army Garrison Policy Memorandum #36 - Parenthood, Pregnancy, and Postpartum Policy

1. References.

- a. Army Directive (AD) 2022-06.
- b. Additional references listed in Enclosure 1 to Army Directive (AD) 2022-06.

2. Purpose. Provide command guidance on lactation, family care plans, duty away from home, and convalescent leave. This policy 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. The intent is 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.

3. Policy. For the definitions of terms used in this policy, see enclosure 2 to Army Directive (AD) 2022-06.

a. Lactation Accommodations. Lactating Soldiers will be provided adequate lactation breaks and a designated lactation area.

(1) Soldiers who are lactating are entitled to lactation breaks regardless of how long it has been since the child's birth. A child beginning to eat solid foods does not negate a Soldier's individual need for lactation breaks. However, Soldiers who are no longer lactating do not require lactation breaks.

(2) Lactation breaks must be accommodated at least every 2-3 hours and for not less than 30 minutes each break.

(3) Commanders of lactating Soldiers must designate a private space with locking capabilities for lactating Soldiers to breastfeed or express milk. This lactation space must not be a restroom. The space must include a place to sit, a flat surface (other than the floor) to place the pump on, an electrical outlet, a refrigerator to store expressed milk, and access to a safe water source within reasonable distance from the lactation space.

(4) Soldiers who continue breastfeeding or expressing milk following the expiration of their 365-day postpartum deployment deferment are eligible for field training and mobility exercises. However, lactating Soldiers remain exempt from CTC rotations, deployments, or any training events where lactation accommodations cannot be provided, for up to 730 days (24 months). If in question, lactation may be verified through the Soldier's profiling provider.

b. Family Care Plans (FCPs). FCPs support the commander's ability to oversee mission, readiness, and deployability, and ensure that Family members are adequately cared for when Soldiers are deployed, on TDY, or are otherwise not available due to military requirements.

(1) Soldiers will not be required to utilize the long-term guardianship provisions of the FCP to meet short-term, unforeseen childcare requirements or for routine military duties occurring outside of normal duty hours, such as charge of quarters and staff duty.

(2) To ensure Soldiers have adequate time to arrange childcare, commanders will provide three (3) weeks notice for duty requirements outside of normal duty hours or for significant changes to a Soldier's normal duty hours (absent exigent circumstances). Regardless of the circumstances, adverse action will not be taken against a Soldier who cannot arrange childcare for duties outside of normal hours when the Soldier was given less than the required three (3) weeks advance notification.

(3) Soldiers will be provided at least six (6) weeks notification, in writing, before they are required to activate the long-term guardianship provisions of their FCP for routine TDY, school attendance, multi-day exercises, or similar duty that involves travel or extended periods of absence from the home outside of normal duty hours. The 6-week notification requirement does not apply to military operations or missions assigned because of a national emergency or activation of forces on prepare to deploy orders or similar orders.

(4) Soldiers should be afforded maximum flexibility to attend to short-term, unforeseen parenting requirements when necessary, even when doing so may interfere with military duties. Such situations may include, but are not limited to, unscheduled childcare responsibilities due to child development center or school closures or child illness. In cases where training and operational requirements allow a Soldier's absence, the Soldier will not be charged ordinary leave if remaining in the local area to care for their children.

(5) Involuntary separation due to parenthood will only be initiated if a Soldier has been adequately counseled concerning deficiencies in their FCP and given adequate

time and opportunity to overcome them. Prior to initiation of separation, all available counseling and rehabilitative options, including intra-post transfers, will be considered.

c. Duty away from home - Operational and Training Deferment.

(1) To ensure that at least one parent is home with their child, all birth parents (Soldiers who physically give birth) are deferred or excused for 365 days after the birth of their child from all continuous duty events that are in excess of one (1) normal duty day/shift. These events include, but are not limited to: field training, Collective Training Events away from home station (unit of assignment), and temporary duty (TDY).

(2) This 365-day deferment also applies to single Soldiers and one Army member of a dual-military couple in cases of adoption and long-term child placements (such as long-term foster care placement) when the child is a minor at the time of adoption or placement. This deferment does not apply in cases of stepparent or sibling adoption. In cases where a Soldier uses a surrogate, and the Soldier becomes the legal parent or guardian of the child, the event will be treated as an adoption, and the operational and training deferment applies.

(3) This 365-day deferment will also apply to other non-birth parents, as necessary, to ensure that at least one parent is home with their child throughout the 365-day deferment period. I am the approval authority for these (non-birth parent) deferments and this authority will not be delegated.

(4) Dual-military parents. Birth parents may transfer their deferment to their Army spouse or co-parent during the 365-day period. If operationally feasible, dual-Army parents can alternate based on mission throughout the 365-day period.

(5) The 365-day deferment also applies to Soldiers undergoing fertility treatment who have received a justification memo for treatment or a referral to a fertility specialist by a gynecologic surgeon/obstetrician. The stabilization period will be up to 365 days from the date of the first appointment while undergoing fertility treatment. Both members of a dual-Army couple will be stabilized when undergoing treatment. A 365-day stabilization will also be provided for Soldiers whose spouses are undergoing fertility treatment (including when the spouse is a Civilian or a member of another military service). The intent is to create the best environment for treatment success without hindering the Soldier's career.

(6) Soldiers who qualify for this deferment will be reported as exempt from deployment using the requisite Movement Non-Availability Reason (MVNAR) or non-deployable reason codes in the appropriate human resources personnel system.

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(7) Soldiers who are currently in a deployment deferment status will be extended no longer than 365 days from the date of the qualifying birth, adoption, or child placement event, unless eligible for an extension under paragraph 3c(9) of this policy.

(8) At any time, Soldiers may waive any portion of their 365-day deferment period without ending it early.

(9) Extensions. In accordance with prevailing medical guidance, Soldiers still lactating after 365 days are authorized an extension of this deferment for the purposes of deployment, mobilization, CTC rotations, or any training events where lactation accommodations cannot be provided. Extensions will be granted in 3-month increments as long as the Soldier is lactating, for up to 730 days (24 months) after the pregnancy ends. Lactation may be verified through the Soldier's profiling provider. This deferment ends at 365 days for all other duty away from home station, but lactation accommodations will be provided in accordance with paragraph 3a of this policy.

d. Convalescent leave.

(1) Soldiers will be provided convalescent leave for physical and emotional recovery after a birth event or in cases of miscarriage or stillbirth.

(2) Soldiers (including when the spouse is a Soldier, Civilian, or a member of another military service) whose spouse experiences miscarriage or stillbirth will also be provided convalescent leave for emotional recovery. Convalescent leave is in addition to any authorized parental leave and will be granted as follows:

(a) After a birth event, or in cases of miscarriage or stillbirth, convalescent leave will be authorized by the Soldiers unit commander. At a minimum, unit commanders must grant convalescent leave as prescribed in enclosure 3 to Army Directive (AD) 2022-06.

(b) Commanders are encouraged to grant additional convalescent leave when a Soldier's medical provider recommends, in writing, additional maternity convalescent leave. Convalescent leave under this paragraph may only be denied by the Soldier's general court-martial convening authority or higher commander. Recommendations for additional maternity convalescent leave must address a diagnosed medical condition and be entered as an a-Profile. The a-Profile will be processed by the Soldier's commander and the applicable profile manager for each component.

(c) Convalescent leave is non-chargeable and will begin after the confirmed conclusion of pregnancy (A pregnancy is defined as concluded after one of the following three events: (1) completion of surgical management of pregnancy, (2) medical encounter confirming completed spontaneous abortion, or (3) medical encounter

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confirming successful medical management of non-viable or viable pregnancy). In cases of miscarriage or stillbirth, to qualify for convalescent leave, the Soldier must provide documentation from a medical provider annotating the day of the perinatal loss or pregnancy termination for purposes of the command calculating and granting the convalescent leave.

(d) Soldiers electing to return to full duty or physical fitness testing earlier than prescribed in their profile may do so on their own accord, contingent on evaluation and approval, in writing, by their healthcare provider.

(e) Soldiers who have a spouse who experiences a miscarriage or stillbirth will also be granted convalescent leave. This convalescent leave will be authorized by the Soldier's unit commander as prescribed in enclosure 3 to Army Directive (AD) 2022-06. This convalescent leave is non-chargeable and will begin on the first full day after the date the Soldier's spouse is discharged or released from the hospital (or similar facility). This convalescent leave must be used in one increment or it will be forfeited. Soldiers may elect to return to full duty earlier than required but will forfeit the remainder of their convalescent leave should they do so. This convalescent leave is for emotional recovery and Family wellness. While on convalescent leave, Soldiers will not be required to physically report to their units.

4. Point of contact for this memorandum is HHBn S1 at 803-751-5053.



Encls

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Commanding