

Retention of Medical Officers in the German Armed Forces

By Gregor Richter

From Day One in the mid-1950s, the contemporary German Armed Forces (GAF) have been beset by shortages of medical officers. The problem has been less to find enough applicants for professional medical openings than to persuade existing personnel at that level to remain on duty. As early as 1958 – just one year after the founding of the Bundeswehr’s medical service –, several medical officers, especially physicians, decided to quit the GAF. Their main reasons for leaving were a lack of advancement and further education opportunities, as well as a pervasive burden of administrative and organizational tasks (Landau, 2013, pp.15-16). Since then, retention has been the medical service’s main challenge. The present article’s focus below will be on factors influencing the decision of medical officers to go for permanent career status after their initial 17-year service obligation.

Today, many Armed Forces in Europe are faced with the wider challenge of meeting manpower requirements with suitable personnel (Szvircsev Tresch & Leuprecht, 2010). In Germany, recent policy-relevant research has been looking at possible solutions in the field of military recruitment and retention (Höfig, 2014). A research project with a special focus on “Recruitment and Retention in the Medical Service of the German Armed Forces” was launched by the Federal Ministry of Defence in 2012, and carried out by the Centre for Military History and Social Sciences (ZMSBw), Potsdam. Its aim was to identify means to improve the medical service’s image as an employer and enhance the attractiveness of medical officer careers.¹ Physicians, dentists, pharmacists, and veterinarians were surveyed at four crucial points in their GAF career path : (1) at the start of basic military training, i.e. before taking up their medical studies ; (2) upon completion of the said studies and before the usual clinical phase in one of the GAF’s five hospitals; (3) at the juncture between the clinical phase and a three-year assignment in a medical centre, and (4) towards the end of their initial obligation, between their 15th and 17th year of service. In this fourth phase, a decision has to be made whether to quit the organization (and take up a position in the civilian medical sector) or to apply for permanent status.

In order to investigate the reasons that influence such a decision and to find out if and to what extent professional identities play a role in it, reference will be made here to the Image Theory of Employer Attractiveness (Ritz & Waldner, 2012) as well as to the well-known Institution/Occupation Model (Moskos, 1988 ; Sorensen, 1994). The latter still proves especially fruitful when it comes to explaining military performance and variables

¹ The research project was completed in 2015 and its results (including recommendations) were published in three issues of a GAF medical service periodical (Richter 2014a, 2014b & 2016).

such as specific as well as general military skills (Johansen, Laberg & Martinussen, 2014). The data used to test hypotheses on factors governing the propensity to remain in the GAF are derived from the latest (4th) survey wave of the research project mentioned above.

Theory

“A person’s decision to join the military is complex and it is commonly motivated by a number of intrinsic and extrinsic factors” (Taylor *et al.*, 2015, p.143). The same applies to decisions to re-enlist. While the motivations of young, non-prior service applicants for a career in the GAF’s medical service may be different from those of medical officers looking back on 15 to 17 years of Bundeswehr membership, the psychological mechanism at work in both cases can be fruitfully analyzed in terms of the image theory of employer attractiveness (Ritz & Waldner, 2012, pp.86-89). An employer image can be defined as a set of subjective perceptions which, though they are apt to vary in kind and number among individuals, all have one thing in common: they are relevant when it comes to decisions concerning organizational membership. If a perception about an organization is not relevant in this respect, it is not part of the employer image.

The multidimensional image a person develops about an employer becomes relevant to him or her if he or she evaluates their different perceptions against the backdrop of their own occupational needs and values. This dimension of a perception is called “instrumentality”. In contrast, the “valence” of the perception of a given feature in an organization being considered for continued or future membership refers to the significance of that feature in terms of its capacity to satisfy occupational needs. In what follows, an attitude, computed as the sum of the arithmetic products of instrumentalities and valences of all relevant features of an organization-as-employer, is conceived of as the “expectancy value of employment” (Ritz & Waldner, 2012, p.89, translation by the author). This variable by and large measures employer attractiveness or what military psychology studies have termed “person-organization fit” (see Holtom *et al.*, 2014, pp.399-400), i.e. values and goal congruence between the member of an organization and the organization itself. The crucial step in the research process is to identify the relevant characteristics and dimensions on which a decision to re-enlist as a career soldier is made. The present study’s approach to this problem is elucidated below.

A second theoretical reference point is the I/O thesis. In his seminal work, Charles Moskos conceptualized the theory of military identity on a continuum ranging from institutional to occupational orientations: *“An institution is legitimated in terms of values and norms, that is, a purpose transcending individual self-interest in favor of a presumed higher good. [...] An occupation is legitimated in terms of the marketplace. Supply and demand, rather than normative considerations, are paramount”* (Moskos, 1988, p.16). His original focus was to provide a theoretical framework for the analysis of changes in the US military under an all-volunteer force. Early on, the I/O thesis’s dominant level of analysis was that of the organization as a whole. At least two further developments in I/O research soon emerged: (1) research was extended to individual orientations, the process of identity

construction, and the static and dynamic aspects of military identities ; (2) the I/O thesis moved away from a theory which sought to assess the direction of change in whole military establishments to one where the focus was on the balance between the two orientations in various functional contexts: *“To characterize the armed forces as either an institution or an occupation is to do an injustice to reality. Both elements have been and always will be present in the military system”* (Moskos, 1988, p.15). Indeed, subsequent research emphasized that military identities are apt to diverge not merely as a function of national military cultures, military rank, or gender, but also of functional roles and specialties. This writer agrees with Burland and Lundquist (2013, p.83) *“that the truest I/O boundary in the military is functional rather than temporal, and thus probably permanent”*. Thus, military identities among combat and support service members differ, just as they vary between line officers and, for instance, medical officers.

The I/O framework has proved useful in several studies on enlistment and retention (Taylor *et al.*, 2015, p.144). In line with state-of-the-art research, I will assume here that an institutional military identity will positively affect the propensity to re-enlist even in the case of a special target group like medical officers. There have been several attempts to measure the I/O thesis (Segal, 1986). However, as the present retention study deals with a rather atypical group of military professionals, developing a special set of military identity measures recommends itself in much the same way as for the set of relevant perceptions of the GAF as an employer.

In the statistical models below, employer attractiveness and military identity are thus the main explanatory factors of the propensity to re-enlist. This yields the following hypotheses :

- H1: The higher the attractiveness of the GAF as an employer in the view of a medical officer, the higher his or her propensity to stay in the GAF.
- H2: The closer the military identity of a medical officer to “occupational” orientations, the lower his or her propensity to stay in the GAF.

Method and Measures

A paper and pencil questionnaire with 33 closed and 2 open questions in all was sent to all medical officers in their 15th to 17th year of service in the GAF. The vast majority held the rank of “Oberstabsarzt”, i.e. medical officers (surgeons, dentists, etc.) whose hierarchical position is comparable to that of majors or lieutenant commanders (NATO rank OF-3). The survey was administered between 15 January and 27 February 2015. It was sent to a total of 464 medical officers, of whom 239 (52 percent) returned the questionnaire. The return rate among males and females nearly perfectly mirrored the gender distribution in the reference population: 54 percent of the respondents were females (as against 53% among medical officers overall²). Some 67% of the respondents had

² The medical service is the GAF branch with the highest proportion of women compared to Army, Air Force, Navy, and Support Entities (“Streitkräftebasis”).

children, and no significant statistical differences were noted between men and women. Some 63% served in the Army, 21% in the Air Force, and 15% in the Navy.³ In round numbers, 74% had studied human medicine, 18% dentistry, 8% pharmacy, and none veterinary medicine. This also fits the same distribution in the overall population.

As can be noted in Table 1, a majority of medical officers already had participated in operations abroad since their admittance to the GAF. As is the case overall, male medical officers had deployed significantly more often than their female comrades. This discriminatory treatment, as can be seen below, has an influence on the propensity to stay in the organization beyond the first 17 years of service.

Table 1 : Participation in Operations Abroad (%)

Items	All	Gender	
		Female	Male
Have you already participated in Bundeswehr deployments abroad ?**			
Yes, with an overall length of more than 1 year.	11	8	15
Yes, with an overall length between 0.5 and 1 year.	33	27	39
Yes, with an overall length of less than 0.5 years.	33	34	31
No, not yet.	23	30	14
Will you presumably participate in an operation abroad in 2015 ?*			
Yes, for sure.	15	10	20
Yes, I suppose but I do not know definitely.	8	7	9
No, I do not suppose that.	39	34	44
No, certainly not.	33	43	21
I do not know.	6	6	6

**p<0.01 ; *p<0.05 ; Chi²-test. Source : ZMSBw Survey of Medical Officers, 2015.

The “information about career development” variable was measured by means of the question : “How well informed do you feel, all in all, about the possibilities of career development in the GAF?”. Some 3% feel “very well”, 20% “well”, 47% “partly”, 24% “poorly”, and 6% “very poorly” informed, with no statistically significant differences between male and female medical officers.

Valences and instrumentalities of characteristics of the Bundeswehr as an employer were measured along 15 different aspects ranging from “jobs/ tasks are varied and interesting” to “service and family life can be reconciled”. How many and what types of characteristics are normally relevant to employees are questions to which research hardly provides definite answers (Ritz & Waldner, 2012, p.88 ; Taylor *et al.*, 2015, p.143). Often, how the lists of organizational features and subjective reasons were generated remains unclear: this is the case, for instance, in a recent investigation on the degree of influence of

³ It may not be idle to note that medical officers wear the uniform of the service in which they serve.

reasons for joining the Royal Canadian Navy (Williams, Hachey & St-Pierre, 2014, pp.7-8). It can be assumed that both the number and quality of relevant characteristics and reasons are apt to vary among individuals and depend on the employer's main field of activity. The list of 15 characteristics utilized in the present study was developed jointly with experts from the GAF's Recruitment & Retention bureau and on the basis of two group discussions with medical officers conducted at the GAF's medical academy in Munich in 2012. The list covers some typical organizational features, supplemented by specific issues that can normally be assumed to be relevant when applying for a position in the military medical sector (see Table 2, next page).

Valences were measured on a five-point Likert scale by means of the question "How relevant are the following aspects to you when it comes to choosing an employer?" (response options : "very important", "important", "somewhat important", "not very important", "not important at all"). The question "How high do you rate the likelihood that this requirement can be fulfilled with an occupation in the GAF?" was used to measure instrumentalities (response options: "almost certain", "more likely than not", "somewhat likely", "rather unlikely", "not likely at all").

Values- and interest-based identities along the I/O model's continuum were measured with seven items encompassing the three dimensions "role identification", "reference group", and "type of remuneration", as illustrated by the item: "I chose to follow a soldier's calling to experience things like self-discipline and comradeship". The items were developed on the basis supplied by a previous qualitative study of professional military identity within the German officer corps (Leonhard, 2007). Out of these seven items an I/O index was constructed, with high values indicating high orientation towards "occupation" (M = 0.43 ; SD = 0.18 ; range : [0; 1] ; Cronbach's alpha : 0.72).

Retention is defined as the "propensity to stay in the GAF", i.e. to prolong the contract. The operationalization of retention includes attitudinal and behavioural aspects alike. Two groups were extracted from the sample : "committed" and "uncommitted" medical officers. The first group was comprised of 38 officers who had already signed on for permanent career status at the time of the survey, 25 more who had already applied for it and were awaiting the Ministry's answer, plus 49 officers who "could imagine" re-enlisting (of whom 3 mentioned that such an outcome was "almost certain", 13 who were "rather inclined to do so", while 33 officers saw it as "quite possible"). The second group included 56 officers who could "hardly" and 64 who could "not at all" imagine signing a follow-up contract with the GAF. Three officers had not made up their mind yet, and four did not answer the relevant question. These were excluded from bi- and multivariate but not from univariate analysis. In summary, 112 respondents were defined as "committed" (48%) and 120 respondents as "uncommitted" (52%). Significant differences between male and female medical officers were detected: 58% of the men were committed, in contrast to only 42 percent of the women, according to the operationalization used (Chi²-test, p<0.05).

Results

Attractiveness of the Bundeswehr as an Employer

The valences and instrumentalities of all 15 characteristics of the GAF as an employer are presented in Table 2 (below) in descending order of importance to the group under investigation. “Service and family life can be reconciled” comes first (M = 3.62). Yet, this employer characteristic was more important to medical officers in their thirties than to cadets in their twenties: the first survey, which included medical cadets, placed that dimension in 11th position with a mean of 3.17 (Richter, 2014a, p.297).

Table 2 : Valences and Instrumentalities of Characteristics of the GAF as an Employer

Characteristics	Valences (= importance of the characteristic for the choice of an employer)			Instrumentalities (= chance that this characteristic will be satisfied through duty in the German Armed Forces)		
	M	SD	Min ; Max	M	SD	Min ; Max
Service and family life can be reconciled	3.62	.693	0 ; 4	1.70	.921	0 ; 4
Jobs/tasks are varied and interesting	3.47	.627	0 ; 4	3.03	.873	0 ; 4
One can plan and decide autonomously	3.43	.631	1 ; 4	1.96	1.08	0 ; 4
You enjoy constant advanced training and further education	3.31	.713	1 ; 4	2.84	.955	0 ; 4
You can undertake responsibility	3.24	.693	1 ; 4	3.08	.803	0 ; 4
You have nice/ good superiors	3.21	.758	0 ; 4	2.02	.823	0 ; 4
You're not obliged to move house for job reasons	3.07	1.06	0 ; 4	1.05	1.02	0 ; 4
Work schedules are flexible	3.06	.879	0 ; 4	1.59	1.01	0 ; 4
You enjoy secure employment	2.95	1.06	0 ; 4	3.53	.654	1 ; 4
One can identify with the objectives of the organization	2.89	.910	0 ; 4	2.05	1.02	0 ; 4
You have nice comrades	2.83	.866	0 ; 4	2.64	.660	1 ; 4
Income is comfortable	2.82	.882	0 ; 4	2.11	1.10	0 ; 4
You will assume managerial responsibility eventually	2.80	.982	0 ; 4	2.73	.899	0 ; 4
One gets considerable employee benefits	2.56	.941	0 ; 4	2.79	.827	0 ; 4
You won't work longer than 40 hours a week	2.13	1.24	0 ; 4	1.41	1.24	0 ; 4

M=Mean; SD=Standard Deviation; Range: [0; 4]. Source: ZMSBw Survey of Medical Officers, 2015.

The next four aspects listed in Table 2, namely varied and interesting tasks, autonomy on the job, advanced training, and responsibility, can be subsumed under what Alderfer (1972) calls “growth needs”. Remarkably, the financial aspects of service in the GAF, i.e. comfortable income (12th rank) and considerable employee benefits (14th), do not seem to have much value in the view of the target group. In other words, “existence needs” are comparatively unimportant to medical professionals.

For further analysis the data are condensed, i.e. valences and instrumentalities of characteristics of the GAF as an employer are bound together. For a better interpretation valences x_{ij} and instrumentalities y_{ij} were recoded: x_{ij} [1 ; 5]; y_{ij} [-2 ; 2]. Following the procedure advanced by Ritz and Waldner (2012, pp.88-89), the attitude (A_{ij}) of a person (i) towards an object, i.e. the employer characteristic (j), is defined as the arithmetic product of their respective valence (x_{ij}) and instrumentality (y_{ij}):

$$A_{ij} = x_{ij} y_{ij} / 10$$

In Table 3, means of this new variable are computed for all 15 aspects of the GAF as an employer :

Table 3 : Attitudes to Characteristics of the GAF as an employer (A_{ij})

Characteristics	Means			Sig.
	All	Committed	Uncommitted	
Secure employment	.61			n.s.
Varied and interesting job/task	.47	.56	.40	**
Undertaking responsibility	.46	.57	.37	***
Advanced training and further education opportunities	.36	.44	.28	**
Considerable employee benefits	.29			n.s.
Future prospect of managerial responsibility	.28	.39	.19	***
Nice comrades	.26			n.s.
Comfortable income	.05			n.s.
Identify with the objectives of the organization	.04	.18	-.10	***
Good/ nice superiors	.00	.07	-.04	**
Autonomy on the job	-.01	.07	-.07	*
Reconciliation of duty and family life	-.13			n.s.
Flexible service schedule	-.15			n.s.
Work week no longer than 40 h	-.15			n.s.
No forced removals for job reasons	-.39			n.s.

M=Mean ; Range : [-1; 1] ; ***p<0.001 ; **p<0.01 ; *p<0.05 ; T-Test.

Source : ZMSBw Survey of Medical Officers, 2015.

By presenting results in this way, the strengths and weaknesses of the GAF as an employer become manifest: job security and employee benefits as well as typical growth needs like a varied and interesting job with the possibility to undertake responsibility and constant further education are ranked in the top five positions. The lowest four positions can be subsumed under the rubric “work-life balance conditions”: the Bundeswehr is associated with high mobility demands (i.e. frequent changes of posting, commuting), long working hours, inflexible service schedule, and problems in reconciling duty and family life.

Fortunately, from the perspective of personnel retention, these four weaknesses as regards work-life balance do not matter when it comes to the decision to stay or to leave the organization (there are no statistical differences between the two groups of officers). Most of the reasons that differentiate committed from uncommitted medical officers are concerned with growth needs. The largest difference concerns the possibility to “identify with the objectives of the organization”.

The data further indicate that both groups attach the same low importance to “considerable employee benefits” and “comfortable income” (again, no significant statistical difference). Making the Bundeswehr more attractive as an employer for physicians, dentists, pharmacists, and veterinarians thus requires a retention policy focusing on growth needs and on more clearly communicating organizational goals to this officer group. Advanced training and further education opportunities are also a strong incentive to re-enlist among military doctors – a result cross-validated by a study conducted at NATO level recently (Richter & Hanhart, 2012, p.14).

For the purpose of multivariate analysis (see below), the data were further condensed to what Ritz & Waldner (2012, p.89) call the “expectancy value of employment” (EVE). This new variable measures the overall attractiveness of the GAF as an employer for a person (i):

$$EVE_i = \sum_{j=1}^{15} A_{ij}$$

The characteristic values of EVE in the sample of medical officers are: $M = 0.13$; $SD = 0.19$; $Min = -0.45$; $Max = 0.57$. Statistically significant differences between male and female medical officers were not to be found.

Military Identity

In the Bundeswehr’s medical service, young cadets first undergo three-month basic training at an Army, Air Force or Navy facility. Upon completion of that initial stage, they start studying medicine at a civilian university, normally for at least six years. Whereas civilian medical students are subject to a *numerus clausus*, this does not affect medical cadets for whom about 220 places are reserved every year by the Bundeswehr at several universities with medical faculties all over Germany. To boot, medical cadets enjoy comfortable pay during the course of their university studies, which is not the case with their civilian counterparts. As a result, service as medical officers in the GAF is quite attractive, as witnessed by amply sufficient application and recruitment rates. However,

sponsored studies do not seem to be the main reason for joining up (see Table 4, first item). Moreover, occupational orientations are not in evidence: as reflected in the lowest mean score in Table 4, not many of them reported that the opportunity to study while being paid for it and the prospect of a second career in the civilian sector upon completion of their first period of service were part of their main reasons for joining the military as medical officers.

Table 4 : Items on Professional Identity

I/O Items	M	SD	Min ; Max
I enlisted into the Bundeswehr particularly to have the opportunity to study for a degree.	1.59	1.15	0; 4
I chose the vocation of a soldier to experience things like self-discipline and comradeship. (r)	1.87	1.07	0; 4
In my view, participation in missions abroad is part and parcel of course of a medical officer's vocation. (r)	2.97	1.02	0; 4
Service in the Bundeswehr is a calling to serve one's country. (r)	2.06	1.07	0; 4
The participation of the German Armed Forces in missions abroad is required and therefore I support it. (r)	2.65	.99	0; 4
Above all, I wanted to become a physician/ dentist/ pharmacist/ veterinarian, and whether in the German Armed Forces or in the civilian medical sector was not that important to me.	2.45	1.28	0; 4
I saw studying for a degree above all as the basis for a career outside the military after completion of my mandatory period of service.	1.44	1.22	0; 4

M = Mean ; SD = Standard Deviation; Range: [0; 4] ; “Does not apply at all” = 0; “hardly applies” = 1 ; “partly” = 2 ; “rather applies” = 3 ; “applies entirely” = 4.

Source : ZMSBw Survey of Medical Officers, 2015.

Medical officers are required to participate in nearly all of the Bundeswehr's missions abroad, and therefore their deployment rate is high in comparison to other specialties. Data show high support for these missions and a majority among them accept deployments as part of their natural duties. All in all, Table 4 offers a contrasted picture of the professional identity of the GAF's medical officers which can best be summarized as “pragmatic professionalism”: a mixture of institutional and occupational concerns” (Segal, 1986, p.358).

Two logistic regression models of retention (based on the dependent variable “propensity to stay in the GAF”) were computed to test the hypotheses above (see Table 5, next page). The basic model contains two demographic variables and the “experience of operations abroad” variable derived from the first question in Table 1. The explanatory value of Model 1 is rather low but it shows an interesting result: experience of missions abroad positively affects retention. This is despite the fact that during group discussions in the early stages of the survey, medical officers had instead mentioned a growing “burden of deployments” as one of the main reasons not to prolong the contract with the GAF.

Table 5 : Logistic Regression Models to Explain Retention

Variables (vocationally bound=1)	Model 1 (n=221)		Model 2 (n=193)	
	B	sig.	B	sig.
Gender (female=1)	-.520	n.s.	-.874	*
Children (yes=1)	-.018	n.s.	-.258	n.s.
Experience of operations abroad	.491	**	.427	*
Information about career possibilities			.273	n.s.
Expectancy value of employment (EVE)			2.373	*
Professional identity (high value = high "Occupation")			-3.448	***
Constant	.126	n.s.	.750	n.s.
Nagelkerke's R ²		.100		.298

***p<0.001 ; **p<0.01 ; *p<0.05. Source : ZMSBw Survey of Medical Officers, 2015.

In Model 2, the two independent variables of H1 and H2 and the “information about career prospects” variable are incorporated. A previous survey of medical officers who just had completed their studies indicated a major influence on retention of adequate information on career prospects (Richter, 2014, p.117). This seems not to be the case with medical officers in their 15th to 17th year of service. Instead, H1 and H2 are confirmed. Job attractiveness explains the propensity to re-enlist but only to a small extent. Military identity has a comparatively bigger impact on individual decision-making processes : “institutional” identity orientation increases the propensity to stay in the GAF.

Bivariate analysis indicates a lower propensity to re-enlist among female medical officers compared to their male comrades (see above). This effect persists when multivariate analysis is applied. Such a result is in conformity with findings in other armed forces and other services : *“retention of women (especially in combat occupational specialty areas) continues to lag behind retention of men. Currently in the combat specialties, more than 40% of the male officers choose to stay in the Navy past their minimum service commitment, yet less than 20% of women do”* (Smith & Rosenstein, 2016, p.2 ; also see: Steel & Landon, 2010, p.297)

To learn more about the pros and cons of staying in the GAF vs. taking up a second career in the civilian medical sector, survey participants were asked to compare the two sectors and their respective employer images (see Table 6, next page). The question was : “Certainly you have thought about the advantages and disadvantages of a career as medical officer in comparison to employment in the civilian medical sector. Please compare the two sectors along the following aspects”. The response options were : “The Bundeswehr’s medical service is advantageous in comparison to the civilian medical sector in this

respect” (= +1) ; “The Bundeswehr’s medical service and the civilian medical sector do not differ in this respect” (= 0) ; and “The Bundeswehr’s medical service is disadvantageous in comparison to the civilian medical sector in this respect” (= -1).

Table 6 : Comparison of Military and Civilian Medical Sectors

Characteristics	M			Sig.
	All	Female	Male	
Security of employment	.74			n.s.
Further training opportunities	.54	.44	.66	*
Employee benefits	.51			n.s.
Job variety	.39			n.s.
Prospect of managerial responsibility	.39			n.s.
Workload	.36			n.s.
High medical technology available	.26			n.s.
Work climate	.08			n.s.
Job autonomy	-.08			n.s.
Organization of one’s leisure time	-.17			n.s.
Fair balance between workload and compensation	-.18			n.s.
Career and promotion prospects	-.23			n.s.
Compensation	-.39			n.s.
Reconciliation of duty and family life	-.43	-.30	-.59	**
Bureaucracy	-.48			n.s.
Workplace close to residence	-.66			n.s.

M = Mean ; Range : [-1; 1] ; **p<0.01 ; *p<0.05 ; Chi²-test.

Source : ZMSBw Survey of Medical Officers, 2015.

With this comparative profile of the two sectors competing for the favours of mid-career medical officers, additional understanding of decisions for and against re-enlisting can be gained. Some aspects deserve closer attention. Military organization often is criticized as too bureaucratic, a fact that apparently applies in the medical service’s case, too. On the other hand, one of its often overlooked strengths resides in the “further education and training opportunities” it offers. This seems obvious to medical officers. The differences between male and female officers are small, but one result is salient: compared to their female counterparts, male medical officers see their current employer as significantly less amenable to reconciling duty and family life. This is reasonable in view of the fact that male medical officers are sent to missions abroad more frequently than their female comrades (see Table 1). This unequal treatment may account for the impression given by the Bundeswehr that it is an employer offering low opportunities for work-life balance.

Conclusion

In the last few years, several studies were published on the recruitment and retention of military personnel within specific functional and national contexts, notably on the US Army Corps of Engineers (Edens, 2014) and the Royal Canadian Navy (Williams, Hachey & St-Pierre, 2014). The present study adds another specific profession in another country to the list: German medical officers, in the crucial phase of their professional career development when a decision has to be made in favour or against prolonging their contract.

In accordance with studies on the influence of the person-organization fit, this study underlines the positive effect of the congruence of employees' values and occupational needs with the incentives an organization offers. Holtom and colleagues (2014) recently showed that the person-organization fit is more predictive of turnover than job satisfaction, affective commitment and on- or off-the-job embeddedness. In the case of medical officers, while they invert the perspective from turnover to propensity to stay, the ZMSBw survey's results indicate a comparable higher effect of military identity on the decision to remain in or to quit the Bundeswehr.

Johansen, Laberg and Martinussen (2014, p.523) wrote: "*Empirically, recent studies are [...] suggesting that traditional military values have been underestimated both as a motivation to serve and as potentially important predictors of military effectiveness and performance*". The results of the survey of medical officers support this assessment. Of course, "objective incentives" like a varied and interesting job/ task, the possibility to undertake responsibility, and to benefit from constant advanced training and further education certainly serve to enhance re-enlistment rates. But these factors play a negligible role in comparison to a strong identification with the military and a pronounced soldier identity grounded in the notion that the "*military [is] more than just another job*" (Moskos & Wood, 1988). To extend the scope of Johansen, Laberg and Martinussen's statement: military values play a potentially important role for retention, too.

Therefore, more attention should be paid to identity construction in armed forces. In the case of the Bundeswehr's medical officers (who are not really part of the military for their first six years of duty spent studying medicine, dentistry, pharmacy, or veterinarian medicine at a civilian university), the chances of developing an institutional military identity are rare. As is well-known, institutions like military academies play a prominent role for the socialization of military personnel (Caforio, 1998, *passim*). But where or when soldiers' education is outsourced to civilian agencies and universities, special efforts should imperatively be made in order to bind them closely to the military. One of the ZMSBw study's recommendations was indeed to work out a retention programme aiming to reinforce existing ties between medical cadets and the military, so as to encourage the former to continuously bear in mind their future role as soldiers while studying medicine at a civilian university.

References

- ALDERFER, Clayton P, *Existence, Relatedness, and Growth. Human Needs in Organizational Settings*, New York, Free Press, 1972.
- BURLAND, Daniel & Jennifer H. LUNDQUIST, “The Dynamic Lives and Static Institutions of the ‘Two Armies’ : Data from the Survey of Active Duty Personnel”, *Armed Forces & Society*, vol.39, n°1, 2013, pp.78-101.
- CAFORIO, Giuseppe (ed.), *The European Cadet : Professional Socialisation in Military Academies. A Cross-National Study*, Baden-Baden, Nomos, 1998.
- EDENS, Sharon, “US Army Engineer Enlisted Personnel : The Impact of Identity Hierarchies on Decision to Remain in the Military”, *Res Militaris*, vol.4, n°1, 2014.
- HÖFIG, Chariklia, “‘War for Talents’ – Die Attraktivitätsoffensive der Bundeswehr aus der Perspektive sozialwissenschaftlich-empirischer Untersuchungen, *Bundeswehrverwaltung. Fachzeitschrift für Administration*, vol. 58, n°11, 2014, pp. 249-252.
- HOLTOM, Brooks C., Daryl R. SMITH, Douglas R. LINDSAY & James P. BURTON, “The Relative Strength of Job Attitudes and Job Embeddedness in Predicting Turnover in a U.S. Military Academy”, *Military Psychology*, vol.26, n°5-6, 2014, pp.397-408.
- JOHANSEN, Rino B., Jon C. LABERG & Monica MARTINUSSEN, “Military Identity as Predictor of Perceived Military Competence and Skills”, *Armed Forces & Society*, vol.40, n°3, 2014, pp.521-543.
- LANDAU, Sylvia, “Der Kampf um die Ärzte”, *Militärgeschichte – Zeitschrift für historische Bildung*, 2013, n°2, pp14-17.
- LEONHARD, Nina, *Berufliche Identität von Soldaten. Eine qualitative Untersuchung von jungen männlichen Soldaten der Bundeswehr aus den neuen und alten Bundesländern*, Strausberg, Sozialwissenschaftliches Institut der Bundeswehr, 2007.
- MOSKOS, Charles C., “Institutional and Occupational Trends in Armed Forces”, pp.15-26 in Charles C. Moskos, & Frank R. Wood (eds.), *The Military: More than just a Job?*, Washington, DC, Pergamon-Brassey’s, 1988.
- RICHTER, Gregor, “Herausforderung Personalgewinnung und -bindung. Ergebnisse einer Befragung von Sanitätsoffizieren (Teil 1)”, *Wehrmedizinische Monatsschrift*, vol.58, n°4, 2014a, pp.114-119.
- RICHTER, Gregor, “Herausforderung Personalgewinnung und -bindung. Ergebnisse einer Befragung von Sanitätsoffizieren (Teil 2)”, *Wehrmedizinische Monatsschrift*, vol.58, n°8, 2014b, pp.296-300.
- RICHTER, Gregor, “Herausforderung Personalbindung. Ergebnisse einer Befragung von Sanitätsstabsoffizieren”, *Wehrmedizinische Monatsschrift*, vol.60, n°3, 2016, pp.98-105.
- RICHTER, Gregor & Norbert HANHART, *Factors Affecting Attraction, Recruitment, and Retention of NATO Military Medical Professionals*, Paris, STO Technical Report, 2012.
- RITZ, Adrian & Christian WALDNER, “Der Staat im Konkurrenzkampf um den Führungsnachwuchs: Eine Untersuchung zur Arbeitgeberattraktivität der öffentlichen Verwaltung”, pp.83-112 in Eckhardt Schröter, Patrick von Maravic & Jörg Röber (eds.), *Zukunftsfähige Verwaltung ? Herausforderungen und Lösungsstrategien in Deutschland, Österreich und der Schweiz*, Opladen, Berlin & Toronto, Verlag Barbara Budrich, 2012.
- SEGAL, David R., “Measuring the Institutional/Occupational Change Thesis”, *Armed Forces & Society*, vol.12, n°3, 1986, pp.351-375.
- SMITH, David G. & Judith E. ROSENSTEIN, “Gender and the Military Profession : Early Career Influences, Attitudes, and Intentions”, *Armed Forces & Society*, vol.42, 2016, pp.1-20, online version.
- SORENSEN, Henning, “New Perspectives on the Military Profession : The I/O Model and Esprit de Corps Reevaluated”, *Armed Forces & Society*, vol.20, n°4, 1994, pp.599-617.

STEEL, Robert P. & Timothy E. **LANDON**, “Internal Employment Opportunity and External Employment Opportunity : Independent or Interactive Retention Effects ?”, *Military Psychology*, vol.22, n°3, 2010, pp.282-300.

SZVIRCSEV TRESCH, Tibor & Christian **LEUPRECHT** (eds.), *Europe without Soldiers ? Recruitment and Retention across the Armed Forces of Europe*, Montreal & Kingston, McGill-Queen’s University Press, 2010.

TAYLOR, Jami K. *et al.*, “An Exploratory Study of Public Service Motivation and the Institutional-Occupational Model of the Military”, *Armed Forces & Society*, vol.41, n°1, 2015, pp.142-162.

WILLIAMS, Lisa, Krystal K. **HACHEY**, & Line **ST-PIERRE**, “Propensity to Join the Royal Canadian Navy”, *Res Militaris*, vol.4, n°1, 2014.