AUSA resolutions offer ‘roadmap’ for Army in an era of persistent conflict. The Association of the United States Army’s members—through their worldwide chapters—have approved AUSA’s 2009 resolutions, “a roadmap to a campaign quality expeditionary force, appropriately sized and supported so that it can be successful in an era of persistent conflict.”

With 119 of its 123 chapters voting on the resolutions, AUSA recognizes “these are difficult economic times, and with the federal deficit increasing to record heights, some may be tempted to decrease defense spending. The reality is, given the current and future challenges, defense spending must be increased.”

AUSA is calling for a defense budget that is 5 percent of the gross domestic product from the current 4 percent, and paying to increase the size of the active Army to 700,000 from 547,000; the Army National Guard to 371,000 from 365,000; and the Army Reserve to 206,000 from its authorized 205,000 end strength.

The preamble to the resolutions also calls for an increase in the Army’s share of the defense budget from 24 percent to 28 percent.

Other specific resolutions on personnel call for closing the pay gap for soldiers and Army civilians with their private sector counterparts and ensuring wounded warriors and their families “receive the finest medical care and rehabilitative support,” particularly if transitioning from the military health care system to the VA system.

On force transformation, the resolutions voice strong and continued support for the Future Combat Systems, countermeasures for improvised explosive devices and stable and sufficient funding for research, development, test and evaluation.

Major changes coming to GOP side of House Armed Services Committee. As the 111th Congress organizes itself in the coming weeks, the most noticeable changes in committees regularly covered by the Washington Update will occur on the Republican side of the House Armed Services Committee when the GOP caucus chooses a new ranking member.

Rep. Duncan Hunter, R-Calif., former ranking member and chairman, retired. The second most senior Republican on the committee, Jim Saxton of New Jersey, also retired, as did Terry Everett of Alabama, the fourth most senior member in the past Congress.

Rep. John McHugh, R-N.Y., will be the most senior member and has said he is running for the post. Also announcing their interest in the post are Reps. Roscoe Bartlett, R-Md., and Mac Thornberry, R-Texas.

Two Republicans, Robin Hayes of North Carolina and Thelma Drake of Virginia, were defeated for re-election.

On the Democratic side, Rep. Ike Skelton of Missouri will most likely remain chairman.

Mark Udall of Colorado left his House seat and was elected to the Senate on Nov. 4. Rep. Nancy Boyda of Kansas was defeated for re-election.


Sen. Joseph Lieberman, I-Conn., will continue to caucus with the Democrats and retain the chairmanship of the Homeland Security Committee.

In the 110th Congress, he voted in the Democratic caucus and chaired the airland subcommittee. But in the presidential race, he spoke for McCain at the Republican convention and campaigned for him until election day.

The leadership of the House Appropriations Committee will likely remain the same with Reps. David Obey, D-Wis., as chairman and Jerry Lewis, R-Calif., as ranking member.
Army teams with NIMH on suicide prevention. The Army is teaming with the National Institute of Mental Health (NIMH) on a five-year study that will further the understanding of suicides and develop prevention programs and practices.

In a briefing with reporters at the Pentagon on Oct. 29, Secretary of the Army Pete Geren, Dr. Thomas R. Insel, NIMH director, and S. Ward Casscells, assistant secretary of defense for health affairs, announced details of the plan that will not only look into suicide prevention to benefit the Army, but also the other armed services as well as the general public.

It will be “the most far-reaching and comprehensive research project ever undertaken on the subject of suicide and suicide prevention,” Geren said. Adding, “The Army, with the extensive knowledge we have about the lives and experiences of our soldiers and their families, offers a research opportunity unavailable anywhere else in the world.”

The study will be a “great opportunity” for NIMH to begin research “that will give us an entirely new perspective and better understanding of suicides,” Insel said.

He added, “Essentially, what the secretary asked us to think about was that this was an opportunity to work with the Army … to get a picture of what those risk factors might be in a large population.”

The research will not only provide critical information for the Army, but could provide critical information for the nation, Insel said.

“In a sense, this is a microcosm of the nation,” he said.

Historically, suicide has been a huge national problem, Insel noted. In 2006 alone, there were 32,000 suicides in the United States, more than twice the number of deaths by homicide.

While the perception is that soldiers who have seen combat are at the greatest risk, Insel said people outside the military also face traumatic events. He noted one study showing how inner-city children experienced stress beginning in the first 10 years of their lives.

“Maybe not combat level stress, but it’s an ambient level of stress and often at a much earlier age,” he said.

Casscells said the Army, the other services and Department of Defense agencies have stepped up their suicide prevention efforts in recent years, but DoD has reached a point where it needed outside help.

“This is exactly what we need to be doing now,” Casscells said. “We’ve learned a lot, and we’ve also learned that we don’t understand it all.”

Program manager: Soldiers central to final FCS design. The program manager of the Army’s largest acquisition program—the Future Combat Systems—challenged several hundred defense industry leaders to go to Fort Bliss, Texas, and White Sands Missile Range, N.M., “and ask the soldiers” about the program. “They’re the designers, we’re building it.”

Maj. Gen. Charles Cartwright, program manager for four years, speaking at an Association of the United States Army Institute of Land Warfare breakfast in Northern Virginia, said the designation of the test and evaluation task force of soldiers shows “quite a commitment by the Army to put these soldiers at Fort Bliss” as the service was fighting two wars.

The soldiers in the task force are at Bliss to “screen the designs” and they are the “heart and soul” of the Future Combat Systems.

Cartwright cited soldiers’ recommendations that should be added to small unmanned ground vehicles to communicate with other parties at a distance and streaming video from similar vehicles onto screens inside tanks, fighting vehicles and Humvees as some of their contributions to the ultimate fielding of FCS.

Instead of power point slides, he said the next two years will see the fielding of a large number of prototypes for a variety of manned and unmanned ground and aerial systems and networks that make up FCS, including 32 manned combat systems.

Cartwright cited Time Magazine’s recent listing of the Active Protective System as one of the best inventions of 2008 as an example of this change.

IAP Worldwide Services, an AUSA sustaining member company, sponsored the breakfast.
DoD terminates Armed Reconnaissance Helicopter contract. The Department of Defense notified Congress and the contractor, Bell Helicopter, that it will not certify the U.S. Army Armed Reconnaissance Helicopter (ARH) program for continuation.

John Young, under secretary of defense for acquisition, technology and logistics, in consultation with senior defense and Army officials, has determined that the fundamental cost and schedule basis underlying award of the ARH contract is no longer valid.

The ARH contract was awarded for an expected development cost of $359 million and a procurement average unit cost of $8.56 million.

Currently, DoD estimates that development will cost $942 million, and the procurement average unit cost will be $14.48 million. Delivery of ARH to the Army was originally scheduled to take place by 2009, but the current projection is for 2013.

“Rather than continue this program”, Young said in an Oct. 16 news release, “I have decided that the best course of action is to provide the Army with an opportunity to define a coherent, disciplined Kiowa Warrior helicopter replacement program, and to obtain more rigorous contract terms for its development.”

Secretary of the Army Pete Geren said, “The cost and schedule that were the focus of the decision to award the contract to Bell Helicopter are no longer valid. We have a duty to the Army and the taxpayer to move ahead with an alternative course of action to meet this critical capability for our soldiers at the best price and as soon as possible.”

Lt. Gen. James D. Thurman, Army director of operations, said in a news release, “The war-fighting capability for a manned, armed reconnaissance helicopter is crucial to supporting our ground combat commanders and remains a critical requirement for the Army.

“This decision does not, in any way, diminish the imperative for this capability. Our operational tempo, attrition and losses of six aircraft per year underscore the need to fill this requirement as quickly as possible.

“To this end, we will rapidly pursue a re-validation of the particular characteristics needed for this capability so that we can restart the process of acquiring a manned, armed reconnaissance helicopter.”

Adding, “Concurrently, we will invest significant efforts into our existing Kiowa Warrior fleet that ensures our air crews and commanders continue to have the best capability possible to perform the mission.”

Changing concepts of care save soldiers’ lives. Changing concepts of how to care for soldiers suffering from severe injuries suffered in combat has saved hundreds of lives, the Army’s chief nurse and commander of the Western Regional Medical Command said, and specifically cited the emphasis of shaving the amount of time from “the golden hour” needed to keep a soldier alive “to the platinum ten minutes” when aid first can be administered.

Maj. Gen. Patricia Horoho said that every Army platoon has a “highly trained combat medic” assigned to it and every soldier in that platoon has been trained in self aid and buddy aid for combat casualty care.

She added that there is new emphasis on keeping breathing passages open and controlling blood loss.

Brig. Gen. Rhonda Cornum, director of comprehensive soldier fitness and former commander of Landstuhl Regional Medical Center in Germany, said advances in bandages such as Combat Gauze and WoundStat granular powder, as reported on in the December 2008 issue of AUSA NEWS, have also saved lives.

The single-hand tourniquets and more extensive first aid kits and lighter collapsible litters allow treatment and movement of critically wounded soldiers from the battlefield to a care station and on to a combat support hospital in theater very quickly, both women said.

Even at the combat support hospitals, “there are lots of things you don’t have,” such as large numbers of dialysis machines that are available at large medical centers such as Landstuhl or Walter Reed and Brooke Army Medical Centers in the United States, Cornum said.

“We have absolutely flying ICUs” [intensive care units] to move the wounded from theater to Germany and onto the United States, she said. Forty-six thousand service members have been medevaced from theater since the beginning of operations in October 2001. About 36,000 of them came from Iraq since 2003.

Inside the hospitals and medical centers, many surgical lessons have been learned as well.

Cornum said, “Combat trauma cannot be treated in the same way as a car wreck in San Antonio.”

To address the needs of severely wounded or injured soldiers in their long road to recovery, the Army launched the Warrior Transition Units to help those 11,000 men and women develop an individual plan that addresses medical condition and professional and personal expectations including a transition from a military career to one in civilian life with a squad leader.
**Defense to hire specialists to aid seriously injured service members, families.** The Defense Department is hiring about 30 specialists who will map out a path to recovery for seriously injured service members and their families.

The plan will be consistent across the services, officials said.

In the past, each service put into place its own recovery plan for wounded service members, but the plans varied. This step will deliver service members and families an individualized recovery plan based on uniform standards, Lynda Davis, deputy undersecretary of defense for military community and family policy, said.

The congressionally mandated DoD recovery coordinators will not provide direct care, but rather will oversee the plan as each service delivers individual care in its respective warrior care program.

Recovery coordinators also will give the families a single point of contact for support, Davis said. The services’ warrior care programs have many experts, she explained, but they sometimes change as the person moves through the system.

“We’ll provide connectivity and those links so that an individual family is not left to try and find it out on their own,” Davis said.

“You need somebody that you can trust that has the right information that will be there and support you” so that families can concentrate on taking care of the injured service members, she said.

The recovery coordinators will be trained and in place at major military treatment facilities across the United States next month, Davis said. The recovery plans are based on a 10-step process that guides both the family and service member from recovery to rehabilitation and reintegration back to their community or back to the service.

This change is based on feedback from families, such as from those who gathered here recently for the Wounded Warriors Family Summit, Davis said.

“They wanted to make sure they understood what the path ahead was for them,” she said. “They wanted to know what came next, what to expect. It reduces their anxiety and helps them to be better engaged as decision-makers.”

Service members and families work with their recovery coordinator to develop individual plans that include personal and professional goals as they work through their educational, transportation, housing and financial needs.

**Saying ‘soldiering is all I wanted to do,’ Dunwoody becomes first female 4-star general.** As she spoke to a standing-room only crowd in the Pentagon auditorium Nov. 14, Gen. Ann E. Dunwoody said “never in my wildest dreams” did she think she would have stayed in the Army long enough and pin on her fourth star—the first woman in the history of the U.S. military to do so.

After introductions by Secretary of Defense Robert M. Gates and Gen. George W. Casey Jr., Army chief of staff, Dunwoody reflected on her time in service, which began in 1975.

Calling her initial Army commitment a “two-year detour,” deep down, she knew “soldiering is all I wanted to do.” “Even though it took you by surprise, it’s what we all knew and expected,” Casey said.

Dunwoody recalled her initial training from Sgt. 1st Class Wendell Bowen, who vowed to make her “the best second lieutenant in the United States Army.” He instilled the Army’s “standards and values—he’s the reason I stayed.”

She added, “The Army nurtured me and mentored me, and now I have the opportunity to return the favor.”

After the Pentagon ceremony, Dunwoody, who Gates called “one of the foremost logisticians of her generation,” made history again as she became the first female commander of Army Materiel Command during a change of command ceremony at Fort Belvoir, Va.

Gates noted that “olive drab runs in her veins” as the Dunwoody family has served in the Army for five generations dating back to the Revolutionary War.

Comparing the promotion ceremony to a family reunion, her father, Brig. Gen. Harold Dunwoody Sr., USA, Ret., was in the audience to see her pin on her fourth star. He is a Distinguished Service Cross recipient and veteran of Vietnam, Korea and World War II.

Her sister, Susan Schoek, the third woman in the Army to become a helicopter pilot, was also in the audience. Her brother, Harold Dunwoody Jr., is a 1970 West Point graduate.

Her husband, Col. Craig Brotchie, USAF, Ret., joined Casey on stage for the four-star pin-on ceremony. The two met 21 years ago while he was an Air Force combat controller.

“I think it’s tremendous,” Brotchie said in a news conference afterward. “The first 10 years we were married, we had separate households because we were both serving. And I’ve always known she’s a very talented officer—smart, personable—and that she cares.”