

# Global Medical Mission Training: The Department of Defense is Making Headway in Training for Global Medical Missions

Matt Pueschel

The Department of Defense (DoD) aims to improve its overall preparedness for international health missions through an ongoing effort to develop standardized training requirements in global Medical Stability Operations (MSO) for all United States (U.S.) Military Health System (MHS) personnel.

“The MHS will begin training its medical personnel to general competency in MSO, offering MSO training to both enlisted and commissioned personnel, and eventually offer more specialized training,” states Dr. Warner Anderson, Director of the International Health Division (IHD) in the U.S. DoD Office of Force Health Protection and Readiness (FHP&R). This department is leading a joint MSO working group to identify and prioritize solutions to fill gaps in MSO training within the MHS. Stated Dr. Anderson further: “We want to have evidence-based MSO practices based on lessons learned and measures of effectiveness.”

Medical Stability Operations encompass multiple DoD medical engagements overseas that contribute to global stability. These ventures range from building partnerships with civilian aid agencies and international health leaders to assisting host country militaries in the development of their health care capacities. Medical Stability Operations also provide medical relief and health sector reconstruction in conflict, post-combat, disaster, or at-risk settings. The DoD’s profile within these activities has increased in recent years, as medical personnel have deployed to assist in disaster relief missions in Latin America and the Pacific, and have worked with Iraqi, Afghan, and African forces to build their healthcare capabilities.

Furthermore, watershed DoD policies (such as DoDI 6000.16, “Military Health Support for Stability Operations,” issued in 2010) now identify MSO as integral U.S. military missions, with priorities comparable to combat operations. Medical Stability Operations must now be addressed and integrated across all MHS training, education and materiel activities to prepare personnel for planning and supporting stability operations in close coordination with other U.S. governmental entities, international leaders and militaries, and nongovernmental organizations (NGOs). Additional objectives are to restore health-sector capacities and essential services to those suffering when local or civilian aid providers are overwhelmed or incapable of meeting these goals.

“MHS capabilities will now be considered during the planning and execution of stability operations,” Dr. Anderson advised. “... We need to be able to respond quickly and proficiently throughout the world and ensure we are working closely with our host country and civilian partners, so that we understand the health infrastructure requirements in nations where we operate to support capacity-building efforts that leave positive, sustainable solutions behind when we leave and transition responsibility.”

In 2007, the International Health Division initiated a two-year effort to identify gaps in MSO capabilities across the MHS, which resulted in identifying a lack of standardized training programs that optimally prepare individuals to carry out international health missions. By utilizing assessments and pre-planning to determine host countries’ capabilities and needs, culturally appropriate, integrated and sustainable solutions are developed together with other U.S. government agencies, NGOs and global partners. In 2010, a follow-up MSO working group was co-chaired by the FHP&R and included representatives from each branch of service. The group proposed sets of DoD requirements and solutions to address these identified gaps. The working group’s Education and Training Committee has since developed a comprehensive strategy to provide MHS personnel with the knowledge to develop skills needed for stability operations.

If approved by DoD leadership and developed as planned, the strategy will establish four categories of MSO training:

1. A stand-alone baseline awareness course to familiarize MHS personnel with the basics of stability operations through distance and classroom formats.
2. A more advanced pre-deployment tactical and operational training course focused on cultural and health system issues specific to the regions to which medics deploy.
3. An in-depth four to six week graduate-level global health specialist track that offers field assignments, longer in-residence courses and potentially a Master’s degree for MHS personnel interested in developing subject-matter expertise in stability operations.
4. A course oriented to senior medical and non-medical leaders that outlines how MSO strategies fit into the MHS spectrum of operations and DoD strategic efforts overseas.

A training consortium composed of key DoD stakeholders would also be established to further develop these competencies. “The first tier was recommended to be a familiarization and awareness level training for all personnel,” advised Dr. Charles Beadling, member and former chair of the Education and Training committee, who is Director of the Center for Disaster and Humanitarian Assistance Medicine (CDHAM) at the Uniformed Services University of the Health Sciences (USUHS). “It would contain elements such as basic terminology, major participants and why stability operations are a major component of our national security. The second tier will consist of a variety of focused courses that can be provided as ‘just in time’ pre-deployment training. The third tier in the strategy is creating a group of subject matter experts in MSO to serve on headquarters’ staffs as consultants to commanders on MSO issues as they relate to the Theater Security Cooperation Plan for each Combatant Command.”

Despite these identified gaps in MSO training, there are many existing courses offered by DoD and civilian partners that could be utilized by the Services to help meet the proposed requirements in the strategy. “The Services have to agree on the core recommendation on developing tiers of training, and then how they meet them is up to them,” said Colonel Jim Fike, IHD Liaison to the Air Force International Health Specialist Program. “That way they can take advantage of educational initiatives that are already taking place in the Services on these themes, and those outside the Services.”

Existing DoD courses include the Medical Stability Operations Course (MSOC) taught through the Defense Medical Readiness Training Institute (DMRTI) with curriculum input provided by IHD and CDHAM; the Military Medical Humanitarian Assistance Course available through DMRTI and USUHS; the Humanitarian Assistance Response Training (HART) course offered through the Center of Excellence for Disaster Medicine and Humanitarian Assistance (COE); and several others. Discussion of the civil-military interface that occurs in medical stability operations is a key theme of the MSOC course, which lasts for three to four days and has been taught several times to groups of 30-40 participants in various settings across DoD since a September 2009 summit in Arlington, Virginia. This summit was convened by IHD and DMTRI, and outlined the need for a baseline course in MSO.

Students are mostly military medical personnel, and MSOC instructors include international health experts from the military, State Department and the U.S. Agency for International Development (USAID). DMRTI is developing the curriculum for the course, while IHD lends expertise on course direction and instruction. “The original hope was to develop a truly integrated course that talks about both the civilian and military sectors,” said Col Fike. “That’s one of the advantages of the course. It brings in an outside perspective. We hope that people leave with an understanding of the spectrum of MSO, whether it is an operation occurring in a disaster, conflict or peacetime outreach setting (internationally). We also try to help them understand the capabilities that exist among the civilian agencies, coalition partners and NGOs so that each can be true to their mission and we can leverage each other’s strengths in a coordinated fashion. We discuss the challenges and advantages with providing particular assistance, whether that is direct patient care or training host country providers and supporting them in developing their capabilities. We break out in small groups and run through some vignettes where students represent the different parties in a response scenario and identify who has what role. It is also important throughout MSOs to recognize the host nation’s sovereignty.”

While the DoD offers expertise in security, lifesaving trauma care, preventive medicine, and medical logistics to support requests for humanitarian assistance, NGOs often provide localized healthcare, needs assessments, and cultural expertise developed through long-term commitments around the world.

The MSOC is an introductory operational-level course that can also be modified to help prepare MHS personnel for specific health missions in particular countries. It provides students with references and materials about in-country USAID teams, interna-

tional organizations and health regulations, DoD guidance’s, and working with NGOs. While it is currently offered in a traditional classroom format, course planners are working to convert some of the key presentations and learning modules into an online course, and are looking at different avenues to fund emerging capabilities such as gaming and virtual worlds to enhance online training, reinforce learning and reach a broader audience.

With the MSOC serving as a general introductory first-category course, other available courses such as HART delve deeper into the tactical details of humanitarian operations and disaster relief efforts and could potentially meet more advanced category requirements. “It depends on how the Services choose to meet the requirement once it is approved,” Col Fike advised. “As the requirements are refined, the Services can choose to have the MSOC meet their needs or they may have another mechanism to meet that requirement. The Air Force’s current International Health Specialist program training, for example, or other courses can help the Services meet the requirements. We are still defining those requirements and looking to develop modules for training in culturally specific issues of delivering health care. The second course category will be heavily reliant on the Combatant Commands since they establish pre-deployment requirements.”

Col Fike said the main issue is that current MSO courses are optional and resource-dependent. The number of individuals who attend them is relatively few, due to costs and time away from duty. With some 120,000 medics in the U.S. military, there are many who would benefit from this type of training. “The gap is not so much in course availability; it’s the lack of a defined requirement that drives resources,” he advised. “People go to courses now (voluntarily and as funding is available) because it is a recognized need.”

Hopefully, new DoD funding resources might accompany the pending approval of standard categories of MSO courses, which could help alleviate costs. “The basic plan should be accomplished later this calendar year, but the Services may take another year to develop courses of action to meet the new requirements,” Col Fike advised.

#### LEVERAGING CURRENT COURSES

Related courses are offered by other agencies that are open to DoD personnel, such as the Joint Humanitarian Operations Course (JHOC), taught by USAID’s Office of U.S. Foreign Disaster Assistance, which is aimed at defining civilian and military roles in international disaster response missions so that agencies can work together in the most effective manner.

Other MSO courses are available for military providers through various DoD schools, conferences and events. Among them are several administered through the COE, which supports Pacific Command and other DoD commands as needed. These include the Health Emergencies in Large Populations (HELP) course, and a Regional Health Systems Strengthening workshop for mid- to senior-level public health and disaster management professionals operating in the Asia Pacific region.

The HELP course, hosted by the COE in collaboration with the International Committee of the Red Cross (ICRC), is an intensive three-week course that educates participants on the major public health issues that occur in populations affected by disasters, complex emergencies and internal displacement. “The HELP course provides U.S. DoD personnel with updated information and best practices on the integral role of health in responding to natural disasters and complex emergencies in developed and underdeveloped countries,” said Craig Jacques, of COE. “It educates military personnel on the essential international frameworks, tools, operational standards and activities for supporting a disaster-affected population, and to ensure their long-term recovery. Department of Defense personnel leave the course with a greater understanding of the international community they will be responding beside and working with in a disaster. The strength of this course is the diversity of the participants. United States DoD medical personnel are able to share and learn from their international counterparts’ perspectives in the field.”

Proper coordination of care between U.S. and international elements, local providers and NGOs is stressed throughout the course, as are measures of effectiveness that promote sustainability. “A one-day disaster management scenario is conducted where this concept, along with many others, are further entrenched in the participants’ provision of services and care for the affected population, especially as it relates to coordination of services and the hand-off of services to the host nation and accompanying international organizations and NGOs,” Jacques added.

The HELP course was offered early this year in the Washington, DC, area through Johns Hopkins University, and showed some DoD health analysts methods to assess health, nutrition, human and environmental needs in disaster settings. It provides a broad view of all the different countries involved, which is vital in helping U.S. military personnel understand the perspectives of other players in the international community.

Gregg Nakano, CDHAM’s Development Outreach Coordinator, said courses like the MSOC and those from CDHAM and COE are invaluable in establishing global networks. “I think it helps you do things more in an internationally accepted way as opposed to a strictly U.S. way,” he advised. “One of the great benefits of going to courses like that is you meet people that you are probably going to meet in a response overseas. A lot of times it takes a while to build trust and relationships with people, but in these courses because you are in close quarters working together on these tabletop exercises, when you may be in a high intensity situation later on you might be able to agree and come to solutions faster. It is also important to know where to go for information and be able to make good, sound, informed decisions and leverage all of the local expertise that is already available.”

For example, a COE HART course was held in Okinawa a month before the tsunami struck Japan in March 2011. Some of the students in the HART course were U.S. Marines who then supported Pacific Command’s disaster response to assist U.S. forces stationed in that locale. The HART course offers military planners and re-

sponse professionals a two to four day operational-level training with practical information on their roles and tools to support civilian-led humanitarian assistance operations.

Discussions in the HART course cover affected people’s rights in humanitarian crises under international law, the roles of civilian humanitarian agencies with whom the military works, areas of expertise and how the agencies plan, coordinate and execute missions using fundamental humanitarian principles, how unarmed civilian agencies conduct security and their interaction with military force protection strategies, and the medical and public health issues faced by military forces during crisis response missions. “Graduates of the HART course leave better prepared to respond to humanitarian emergencies in their respective capacities through their increased awareness and enhanced understanding of different humanitarian response environments,” said Victoria S. Hart (no connection to the course name), Humanitarian Operations Advisor for COE. “We make a conscious effort to explain not just the who and what, but most critically why humanitarian agencies, including NGOs, are particular or restrictive about how they interact with military forces. We endeavor to make sure our primarily DoD audience has a deeper understanding of how humanitarian actors operate and why, so they can better anticipate circumstances and accomplish their missions when interacting with humanitarian actors in a humanitarian assistance or disaster relief (HA/DR) operational environment. Feedback from a variety of personnel who have completed a HART course has been consistently very positive.”

The COE also partners with the United Nations Office for the Coordination of Humanitarian Affairs (UN OCHA) to facilitate a five-day course several times a year that covers guidelines and best practices in the international community on how military forces and humanitarian actors should coordinate and interact during disaster responses and humanitarian assistance in conflict zones. Each course brings together about 30 military and civilian personnel from diverse countries, and about a quarter of the participants engage in health-related work. Hart said she sees noticeable progression among NGO and military participants in understanding and communicating with one another as the course goes on. “I cannot emphasize enough the significant benefits I have seen participants reap from this course,” she said. “There are immense differences in organizational cultures, operating principles and security approaches between humanitarian actors and military actors performing HA/DR operations. This has led to considerable conflict, reducing aid effectiveness and endangering responders and beneficiaries. This course deliberately selects a mix of civilian humanitarian and military participants. They learn not only from facilitators who bring years of experience working with both humanitarian and military actors, but they also learn from other participants that hail ‘from the other side.’”

Dr. Beadling feels individual courses like the MSOC, HELP, HART, and others could contribute to meeting the proposed MSO standard training requirements. “While DoD roles in MSO continue to evolve, initiatives to prepare the MHS for these missions are progressing,” he said. “Education and training programs will continue to be developed and made available.”



Dr. Anderson also considers such training for global health missions to be an important long-term DoD investment that reflects health's unique ability to be a beneficial, neutral player that can serve to build international partnerships, mitigate regional crises and prevent costly conflicts from developing. For more information, please visit [www.fhpr.osd.mil/intlhealth](http://www.fhpr.osd.mil/intlhealth).

#### REGISTRATION AND COURSE INFORMATION

There are numerous ways Special Operations Forces (SOF) and other U.S. military medical personnel can register for courses in international health, and most do not carry exorbitant costs or stringent prerequisite requirements.

- **MSOC course background:** The MSOC is a three-day operational course designed to prepare military healthcare professionals (specific to ranks E7-E-9 and O3-O6) to effectively provide military health support for stability operations. It is open to Tri-Service active duty, Reserve and Guard, as well as other U.S. government agencies such as the Public Health Service, USAID, Coast Guard and Department of State. It familiarizes DoD health care personnel with the complexity of conducting military medical humanitarian assistance internationally, and students gain a better appreciation of MSO mission requirements across all phases of at-risk settings, disasters, pre-combat, conflict and maintenance of post-crisis stability. The course provides a baseline understanding of MSO and capacity building, insight into how to plan, carry out and transition missions, and a training foundation for future courses. Although the course is normally three days long, it is sometimes expanded, condensed, or adapted to meet the pre-deployment training requests of medical units embarking on stability missions. It is taught generally as part of larger DoD medical conferences, or hosted by specific units that are deploying to work on provincial reconstruction teams in Afghanistan, for example.
- **MSOC Registration/Cost:** Units interested in sponsoring or hosting the three-day exportable MSOC can inquire and obtain more information through DMRTI staff at ([dmrtisoc@amedd.army.mil](mailto:dmrtisoc@amedd.army.mil)) or 210-295-0128. The Web sites for the MSOC course are (<http://www.dmrti.army.mil/courses.html>), or (<http://cdham.org/programs/medical-stability-operations-curriculum-development-program>). There are no course registration fees. If an entire unit is interested in hosting a customized course, the cost would depend on the number of speakers required to deliver the desired modules, their travel and per diem costs and a contract to rent a venue for the lectures and breakout sessions. The costs would be lower if the event is held on a military installation. A smaller number of speakers can also be asked to speak for a few hours as part of a condensed course or conference panel. Unit-requested courses are typically funded by that unit. Individual active duty servicemembers or DoD civilians can inquire through DMRTI about MSOC courses that are already planned at upcoming events such as DoD health conferences, and register at no cost if space is available (they would only pay for their travel and temporary duty (TDY) costs or request to have their Service cover it). The ideal maximum number of students in the course is about 50, to allow for manageable breakout sessions, but higher

numbers have been accommodated. Several units have requested the MSOC be delivered when their operational tempo allows for training. To improve chances of securing funding and scheduling, it is encouraged that MSOC requests be submitted as early as possible in the training cycle.

- **MSOC Prerequisites:** There are no prerequisites for the MSOC, or required previous experience. The course is designed to be a basic introductory course. However, there are suggested prerequisites for the course, since it can also be adapted as a mid-level training for servicemembers who have deployment experience or who have received initial education in MSO and are looking for further pre-deployment training on this topic. Suggested prerequisites are recent deployment experience in a stability operations environment, experience with doctrine surrounding stability operations, or completion of the Health Medical Aspects of Stability Operations online course on the Joint Knowledge Online/Army Knowledge Online Web site (course J40P-US129).
- **Military Medical Humanitarian Assistance Course:** This is a two-day interactive course offered by DMRTI and USUHS to train commissioned DoD medical providers (O1-O6) to deliver optimal healthcare to civilian populations in austere humanitarian emergency settings. For more information, please go to (<http://www.dmrti.army.mil/courses.html>). To register, please contact ([DMRTIRegistrar@Amedd.army.mil](mailto:DMRTIRegistrar@Amedd.army.mil)) or call 210-221-9143.
- **USAID's JHOC course:** Servicemembers or DoD civilians/contractors should contact the U.S. Office of Foreign Disaster Assistance military liaison unit at ([mlu@usaid.gov](mailto:mlu@usaid.gov)) to obtain scheduling information and to register. A directory is also available at ([http://www.usaid.gov/our\\_work/humanitarian\\_assistance/disaster\\_assistance/directory/ops\\_new.html#MLU](http://www.usaid.gov/our_work/humanitarian_assistance/disaster_assistance/directory/ops_new.html#MLU)). The course is free. Iterations of it were held at the AMSUS conference last year and other large venues. For background information, please visit (<http://intlhealth.fhpr.osd.mil/newsID146.mil.aspx>).
- **COE Courses:** Servicemembers can inquire about attending COE courses and events by contacting the specific leads listed below for each class directly. For general information please visit (<http://www.coe-dmha.org/Courses/Default.aspx>), or contact COE Operations Division Chief Jim Welsh at ([jim.welsh@coe-dmha.org](mailto:jim.welsh@coe-dmha.org)), or COE Operations Manager Terry Tonkin at ([terry.tonkin@coe-dmha.org](mailto:terry.tonkin@coe-dmha.org)). There are no prerequisites for COE-executed courses, although there may be some requirements for more specialized classes carried out in partnership with the United Nations (U.N. Civil-Military Coordination Course) and the ICRC (HELP course). All courses and events do not carry fees, except for the HELP course, for which the ICRC charges for books and tuition since participants receive graduate-level academic credit.
- **HART course:** The HART course provides military planners and responders with two to four-day operational training and practical information and tools for use in supporting civilian-led humanitarian assistance missions, including disaster response operations. It is customizable, and available by request to U.S. military commands and units. Contact Bobby Ray Gordon at ([bobby.gordon@coe-dmha.org](mailto:bobby.gordon@coe-dmha.org)). The

HART course is further available as an Expanded International Military and Education Training (IMET) workshop course. The course is exportable on demand to all IMET recipient countries. Its Military Articles and Services List (MASL) number is P175020.

- U.N. Civil-Military Coordination course: This course works to build a network of civilian and military personnel that are trained in international civil-military coordination and response. Please contact Victoria Hart at (victoria.hart@coe-dmha.org).
- HELP course: This course is hosted by COE in collaboration with the ICRC and the University of Hawaii's John A. Burns School of Medicine Office of Public Health Studies. This is a three-week, intensive, graduate-level training course, covering major public health issues that affect pop-

ulations in natural disasters, complex emergencies, and crises. Contact Craig Jaques at (craig.jaques@coe-dmha.org) (the application is on the COE Web site); MASL number P175018; Location Code: PHIC (Hawaii Imin International Conference Center, East-West Center).

- Other COE training events, such as Pandemic Influenza and Regional Health Systems Strengthening workshops, are invitation-only because they are held for the benefit of Asia Pacific countries to enhance their pandemic and emerging infectious diseases response capabilities and international partnerships. U.S. Marine Forces Pacific engages with COE in these events, which are translated into each host country's language. Participation can be requested through COE.

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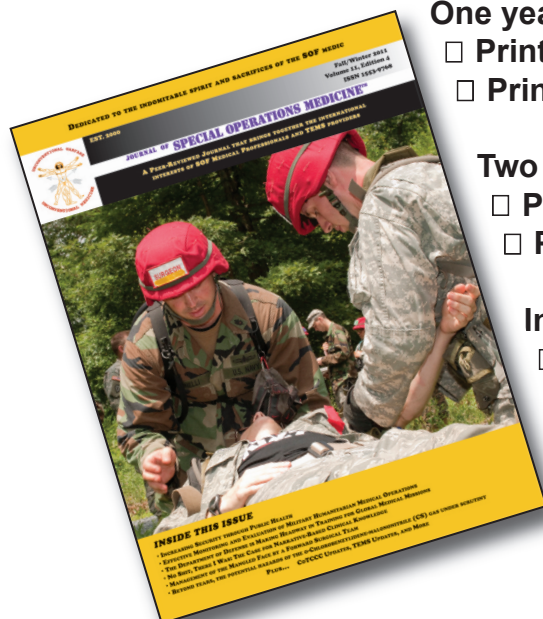
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