

DEFENSE DEPARTMENT ADVISORY COMMITTEE ON WOMEN IN THE SERVICES (DACOWITS) MEETING MINUTES

August 10, 2009

DACOWITS held a meeting August 10, 2009, at the Double Tree Hotel, Crystal City, National Airport, 300 Army-Navy Drive, Arlington, Virginia. Members and public present during the meeting are at enclosures one and two. Materials used during the meeting are at enclosure three.

Dr. Mary Nelson, Chairperson DACOWITS, opened the meeting at 8:30 a.m. She made the introductory and administrative comments to the Committee and Support Staff. The Chair discussed the issues the Committee would be accomplishing over the day. The primary purpose of the meeting was to review/discuss installation visits, consolidate facts and findings, and analyze corresponding data in preparation for annual report.

Introductory Discussion by the Military Director, Col Coulson:

- Military Director: Today is for discussing the main findings from the focus groups that you want included in the report. We will have working lunch with a led discussion. We are projecting a formal farewell in October for the current Committee members whose terms expire in Aug, and hailing the new Committee Chair and Members pending approval and appointment of the same.
- USMC Service Rep: Can you give us an update on the White House Council on Women and Girls?
- Military Director: We have submitted a report in multiple updates and are currently revising the final DoD report which will be posted online on the White House website.
- Committee Chair: What is the purpose of this Council?
- Military Director: It is actually a Council that was established in conjunction with the signing of an Executive Order 11 Mar 09 by Mr. Obama. The Administration is looking at domestic violence, wage inequality, work and family balance, and healthcare for women, and how the federal agencies can collaborate to better support women and their families.
- Committee Chair: Was every federal agency tasked with looking at what they are doing well and share them with the group?
- Military Director: Yes, and then put all of the respective organization's programs on a collaborative web site on the White House web page. The Administration is projected to review the reports later in August.

Discussion of Visit Experiences, facilitated by the Committee Chair:

- Note: Much of the day's discussions revolved around installation personnel focus group discussions which are personal in nature. Confidence is established and emphasized in all focus groups, to ensure that honest feedback may happen, with no possibility of retribution. Such information by installation, rank, gender or name will be not disclosed at this time. Installation visit locations will be published within the annual report later this year. Personnel personal feedback will remain protected. This protected information is authorized to remain closed in keeping with privacy intent of individual service members.
- The following general discussion points by the Committee are by location/Service, covering both protocols being addressed this year: (1) Wounded Warrior Care Follow Up and (2) Women's Roles in the OIF/OEF Theater of Operations. Focus groups were conducted CONUS/OCONUS, to include Theater.

Wounded Warriors (undisclosed installation):

- Committee Chair: So I just want to start by reiterating that my concern is that there's a whole lot of information that we learned that's not in the focus group. And normally we have the opportunity to include this in the report, but this year we won't all be here. I think we should take the time to talk at length about all of our visits. To talk about what did you learn in those times that you weren't in focus groups? For example, Kerri and I were at an installation and we had the family group that talked a long time after the group was over.
- LEAD RESEARCH FIRM REP (Research supporting firm): Handed out focus group summary and mini-survey interim results.
- Committee Chair: If we don't have this meeting, I don't want the more informal information gathering to be lost, such as when we went on tours and visits.
- Committee Member: The Wounded Warrior brigades and units have been a huge improvement, and every family member that I can remember feels that this has made a huge difference in the life of the Wounded Warrior. It allows them to focus on getting well and healthy again. I would say that's a really important point to make that they've so improved the system. That was one of our questions is what differences are we seeing between last year and this year.
- Committee Member: WTUs turn night into day for Wounded Warriors and their families.
- Committee Chair: I agree with you guys, and I think that the thing they've added that makes the most difference is the WTUs. I think that's an incredible effort, but I still think, even with the WTUs there is a distance to travel.

- Committee Member: I agree, but I want to make sure we include that things have improved since summer 2007 when the WTUs were implemented.
- The ongoing discussions reviewed the strengths and weaknesses of the installation WW program, and focus group input sharing, with findings and suggested recommendations to include for the annual report. The different Service cultures were addressed with respect to the different levels of treatment for both WW and the family members and care givers.
- Committee Member pinpointed the family issue discussion: How does this impact families, since that's really our focus?
- Committee Chair: We need to ensure we capture best practices.
- LEAD RESEARCH FIRM REP summarized their comments noting that there was a common thread that the members saw. Having one person who knows how to get information and make things happen is critical.
- Committee Chair: Yes, exactly. The Wounded Warrior Battalions have made things so much better, both for the Wounded Warrior and the family. That's great, but if you're looking for area for improvement to make recommendations, I think that this single care-giver is a really good one, plus not everyone knew the ombudsperson.
- Committee Member: The current leadership at the installation sees the importance of providing care for children of the Wounded Warriors.
- Committee Member: The differences in approach between the Services was something the leadership pointed out to us. One Service wants to keep the Soldiers comfortable until they're ready to move back to their units or leave the Service and they wanted all of the resources brought to the Wounded Warriors. Whereas another Service culture's approach is to get the WW out as soon as possible.
- Committee Member: We've talked all about Wounded Warriors. We also did focus groups with women in combat.

Women in Combat (undisclosed locatiion):

- Committee Chair: At one installation, we heard, that we signed on the dotted line, so send us. They were IAs as medical personnel. At another installation they said that they have a need, they send down the request, and they find someone who can do X, and the Service sends them, but by the time the person gets there, they don't need that anymore, they need something else. So when this person arrives, they

are not doing what they were called up to do; they're doing something completely different.

- Committee Member: The request for forces process makes it such that the need changes.
- Committee Member: What we also heard is that female Service members are willing to do what they need to do, but it's a matter of training. If they received three days worth of combat training, then they're not prepared. What they were concerned about is that they wanted to have the thirty day training available to them so that they knew how to use the weapon and felt more prepared.
- Committee Member: We heard that at other installations as well. They did not feel that they were prepared with training. The only person that answered that she was prepared was a former Army Soldier who was trained in the Army and therefore felt prepared.
- Committee Member: It's not the MOS training, it's the combat training.
- Committee Chair: We saw the women first, and not one of them complained about what they had to do. They said that when you're facing a one-year deployment, you don't want to add another month on to be away from your family. But boy did they wish they had that training though.
- Committee Member: Keep in mind that at one installation, the major heartburn was sending them to collocate with their sister service units
- Committee Member: It sounds like the culture of the Service, and not a gender issue.
- Committee Member: It is really, some Services are so technically specialized.
- Committee Member: They are lane-specific.
- Committee Chair: I don't think we heard one complaint from the women at all. They liked that they had the experiences.
- Committee Member: It's more that they didn't receive the training.
- Committee Member: It's not gender-specific though. There are cultural differences between the Services.

Wounded Warriors (undisclosed location)

- Committee Member: Everyone from the three star to the entry level person went out of their way to be sure we had the best possible visit. WTUs make all the

difference.. We also took a tour of the hospital to talk about the DES.(I don't know that acronym)

Women in Combat (undisclosed location):

- Committee Member: I felt that in the women in combat focus groups, they were proud to serve and happy to do what they signed up to do. The thing that I heard in a couple of different places was the whole issue of the women who either are parents or were about to be parents, and how that impacts their decisions to stay in. Again, I just think that's a huge factor, especially for women.
- Committee Member: The one group of female officers we had, several of them were helicopter pilots. They were probably the top gun fighters in their squadrons. Between three and four tours, they were really proud of being lead pilot or lead gun fighter. They gained the respect that they earned and deserved from their counterparts.
- Committee Chair: I also heard that somewhere else where one of the male leaders said that he always put this one female in the front vehicle, as she could spot an IED from a mile away. She was so good at it that he used her, even though being in the front is not ideal.
- Committee Member: We had a really large group of men for our male leaders. Phil led the group, and the men talk to a man differently than if it were a woman. They were all very talkative. That was really fruitful also. The biggest surprise that I heard there and in other focus groups and discussions with men on this topic is the sense of protectiveness that a man would have in the presence of a woman.
- Committee Member: In a lot of the groups that I talked to, it was, the message was they wanted someone who's qualified and competent to be with them, and that gender didn't matter. The places the particular SM went to, there were no female casualties. They said it may impact them more if there were female casualties. When they were in the fight, they could trust the women, and they weren't really concerned with whether it was a male or a female. They were more protective of them during other non-combat times.
- Committee Member: I think it's difficult for men to say this, because women don't allow this attitude in today's society. I think this is a hard thing. It's a hard discussion to have, and it's a hard thing to recognize and for these men to say this.
- USMC Service representative: There's a generational gap. The younger ones don't know any differently.

- Committee Member: We heard both the big brother protection thing and also the she can do what I can do thing. I don't think they're mutually exclusive. The equality thing is intellectual, whereas one is an instinct.
- Committee Chair: We heard it from the women too. If I can pass the test and qualify, I should be able to do it. But there's still this thing that I can tell that the men are looking out for me. We heard it more from the women than from the men. Maybe the men were afraid to bring it up. It's a cultural thing. American men are very protective of women.
- Committee Member: The focus group at one installation really brought out a generational issue. They said that they younger generation was brought up thinking that we can do anything, whereas the older generation had more gender inequality.
- Committee Member: The problem is not only poor training or lack of sufficient combat training, but also Service-specific training. They wanted to have training with the Service with which they were going to be collocated. They could have trained here ahead of time in order to prepare. We saw this with the Coast Guard too. If you're going to end up collocated with another Service, it would be very helpful to train together ahead of time.
- Committee Member: The training before deployment couldn't happen because this need for the Lionesses was identified in theatre.
- Committee Member: Both for male and female leaders, they used whoever was there and well qualified. There was no hesitation with whether they were male or female. Gender wasn't an issue. By and large I felt that no one could tell you what the policy was. There was no knowledge or understanding of the DoD or Army policy.
- Committee Member: I think that's a major point. It's an education thing. They don't get the difference between assignment and utilization.
- USMC Service representative: With the current conflict, everyone being deployed there are susceptible to danger and in harms way. If they're going boots on ground, they need to be trained in everything that the combat folks are being trained on, because they are in more danger otherwise.
- Committee Member: With the policy, it gets to be a distinction between semantics. The leaders knew that you couldn't have women on a permanent basis assigned in the military in certain jobs. But that they could be used by the commander on a temporary basis in all functions. They called it the law or the policy or whatever, so they basically knew what the rules were.

- Military Director Note: Training short falls for all Services and IA's that were subsequently assigned to combat jobs other than their occupational specialty was a recurring theme by all Committee members from their time with focus groups.

Break

- Committee Chair: This is my sixth year on the Committee, and this is by far the year with the most organized and well attended focus groups. I was totally amazed...
- Committee Member: It was wonderful for both topics they did such a great job.
- Committee Chair: I was pleasantly surprised at how welcomed we were, and at what a huge effort people made to fill these focus groups. The family group at one installation was huge, as was the family group at yet another installation. When we were done, they all said thank you for coming and listening to our concerns. I suspect that a lot of it had to do with our Support Staff. They were very effectively communicating with these bases and having them make such an effort to help us. Every place we went, they were so accommodating to our needs. They provided us all of the information we needed. In six years I've never seen so much cooperation and so much effort made to see that we got the information that we needed. So I wanted to thank our Support Staff! I think adding the three-star treatment to the orders made a difference, as it gives us more access and more opportunities to get the information we need.

Discussion of level of site visit coordination by installation continues:

- Committee Member: We talked to junior females and male leaders. We heard a lot of pride that they had served in that capacity. They said that gender should not make a difference if the person is qualified.
- Committee Member: My main take away is that if you can do the job, gender doesn't matter. As far as the training, it was not a gender issue as much as an MOS issue. When folks were trained for one MOS and then worked in another MOS, then that was an issue.
- Committee Chair: On this topic, not VTCs, but this topic, it was interesting, when we asked them about training, folks who had an extra thirty day training and may not end up using it, but they were still glad that they had it, because they felt safer and more prepared.
- Committee Member: I think something that was a little bit unusual from some of the others, is some of the males responses (male leaders) were a little annoyed that

we were asking some of these questions. They thought that we had moved past this. Both senior enlisted and officers were annoyed. CSM (Ret) Santiago had a similar experience.

- Committee Member: Yes, and when you're speaking with folks who have to make split second decisions on the battlefield, and they question whether their decisions are going to be on the front page of the Washington Post next week. There's definite annoyance.
- Committee Member: If women are going to serve in these combat situations, then they need to be recognized for that service, both with awards and Veterans benefits.
- Committee Member: My one take-away is that it's an education challenge or dilemma. The actual policy with assignment versus employment needs to be covered in every school house as a matter of practice. Because I had responses from E6s and O6s that didn't really have a clue, they had a general ballpark, but that lack of understanding led to a hesitation as to fully employing their assets. So it has to be covered in every single school house.
- Committee Member: In the groups, I heard that they need to change the policy, and that it's outdated. Both women and men said that the policy needs to be changed, as women are already serving in combat today.
- Committee Member: The only time that a man felt that a woman shouldn't be assigned to a particular job was going out on a sniper team, where he may be very large, and she's too small to carry him back.
- Committee Member: If that's part of the training that you have to be able to haul 200 plus pounds for a mile, then if a woman can do it, then she should be able to do it. The physical fitness standards need to be consistent. If you want women to serve in combat, then you need to have uniform standards for men and women. If you're going to open up all jobs to women, then they need to be held to the same standards as men. They didn't feel that a small woman trying to carry a large man back...it didn't have to do with their ability to fight. It had to do with the physical strength. That was the comment is that if you want to open up those fields right now that are closed to women, they had no problem with that, as long as women have the same standards as males.
- Committee Member: How do you make the standards the same and ignore biological differences?
- Committee Member: It has to do with functionality test, if you can carry the hose or whatever, you should be able to.

- LEAD RESEARCH FIRM REP: If you go with the MOS-specific standard, how do you handle that folks are utilized outside their MOS once in theatre? I'm questioning whether that trend is viable.
- Committee Member: Bottom line you're still going to have a 40 percent difference in physical strength. That person-on-person combat is still happening and it's going to continue to happen.
- Committee Member: The main issue is making sure they get the basic combat training.
- Committee Member: That's not a gender issue.
- Committee Member: Basically they reiterated that they want the best shot with them on a convoy, whether it's a man or a woman. And it's all a matter of qualification as opposed to anything else, including gender.
- Committee Member: Yes, I would say across the board we heard that. Then there's those questions concerning mission accomplishment.
- Committee Member: I didn't see much value in those questions.
- Committee Member: I think there is much value in those questions. We now know that it does not impact mission or morale, to which COL (Ret) Torres agreed.
- Committee Member: And knowing that people don't think that having women in the combat unit will put anyone in danger or decrease morale. We also heard that some guys just need someone to talk to, and they would talk to the women. They felt that they could trust the women.
- Committee Member: A lot of the leaders were talking about how they could tell by some people's behavior that they could not send them on certain missions. This was true of both men and women.

Women in Combat (location undisclosed):

- Committee Member: Did we hear anything different about combat?
- Committee Member: No, they were all in combat. Same as other installations.
- Committee Member: Appropriate practical training for all MOSs in weapons in particular.
- Committee Member: This is basic combat training. Hands on is important. Not everyone was offered the thirty day training. It all depends on where you are

going. But what happened is folks went elsewhere and did things they weren't expecting to need it.

- Committee Chair: At one installation, Service leaders, more the men, were upset that their female Service members were utilized outside their job specialty. They did not think that the Army should use their Service personnel in the way that they did.

Break for Lunch discussion: Dick Buckner (retired Army Col), Wounded Warrior Mentor Program

- Committee Member: Parents and spouses who are dealing with PTSD and TBI of their loved ones, have found that it's really tough to deal with. They have their own issues as a result, and the parents need help too.
- Committee Chair: You want to include the family in the treatment of the Wounded Warrior, and that requires the appropriate location/facility. Some installations do not provide for this need. A WW with TBI or PTSD, are the cases where it's really important that the family get involved.
- Military Directors note: The ensuing discussion is with respect to the collaboration between WTU and VA, as well as a number of best practices identification.
- Committee Member: At one installation, the command was very careful to say that this was for Wounded Warriors, not Veterans. And that corridor into that place had several banners, their chain of command, etc. It was made quite clear that this was for Active Duty. They wanted folks to know it was DoD caring for them, and not their father's VA. The perception was very important to them. All of these Active Duty people were there for them.
- Committee Chair: This is definitely a best practice that we need to capture and pass on.
- Wounded Warrior (location undisclosed):
- Committee Member: We saw the medical center that housed the WTU. They're a center for excellence for the amputee program. After the amputee has adjustments on his prosthetics, they put sensors on him and can make adjustments accordingly to make his movement as natural as possible. They were extremely proud of that, and I think they said that was the only one in the military. We talked about...the other place they showed us was the C5 unit, which goes beyond the triad of care. Comprehensive combat...It handles combat stress related PTSD, TBI, family care, administrative support, all sorts of physical serious care. It's not a primary care place. Most of the people come there after another medical facility elsewhere, and

they need ongoing care. This is primarily medical care not family support care. When we talked to the providers, it was mostly upper level director kind of folks. Something that they said were big stressors to them was it's very hard on families, and they recognize the stress on the families. And since they draw from such a large geographic area, time and money are a big stressor on families. The MEB process is also a big stressor. With the new pilot program with the MEB and VA programs, only the VA can do certain things now, and it's getting backed up, so Wounded Warriors and their families are getting backed up. They're waiving the MEB benefits often to just be able to get out and not have to deal with this. And so they are looking short term in order to get out quicker and then missing out on benefits long term. As part of this MEB process, the status of home awaiting orders is pretty much eliminated, so they don't know, they have to be someplace, but they are in limbo.

- Committee Chair: In (undisclosed unit), they're staying in housing three months. They're just stuck in the barracks for three months.
- Committee Member: What they're also doing at (a separate undisclosed unit), is a year after discharge from the WTU, bringing in the Wounded Warrior and the family for five days to see how the transition is going. They see this as a pulse check a year later. I think this is a best practice. It involves head-to-toe evaluation – medical, mental, social, everything. To see if there's any latent PTSD, to see how families are doing, etc. It doesn't matter whether they stay in uniform or not, they will be able to have this. They are just getting this started. They were looking into getting some sort of childcare to get respite care for the caregivers. The chaplain is holding weekly meetings with providers, to see if help is needed for family members and to see with Wounded Warriors if there are psychological issues that don't show up elsewhere. They recognize a need to educate spouses regarding PTSD. They are looking into how to do this, and they recognize it's a serious need. They are also setting up pediatric psychiatry clinic, as they've identified that children need care for dealing with these issues as well.
- Committee Member: What they see is working well is the nurse case managers working well with the social work case managers. That's part of the C5, and only for the most severely wounded. A multi-layered safety net is how they describe it. Assuming that this all works as they say, then the concept may be a best practice. I'm not sure we have enough data on how well this is actually working, since we only spoke with providers and not family members.
- LEAD RESEARCH FIRM REP: Stephen Cozza is doing research on the effects of deployments and injuries on children.
- Committee Member: Someone mentioned a report on this, and I haven't seen it. A study on impact of deployments on children. Have we received this yet?

- Military Director: A West Point researcher as well as someone at George Mason, are conducting related research.
- LEAD RESEARCH FIRM REP: RAND is also doing one for NMFA.
- Women in Combat (undisclosed location):
- Committee Member: The PowerPoint training on weapons stuck out in my mind at this non-ground force installation. They all thought their MOS training was great, but they would have really liked more weapons training. They would have liked more training outside their MOS. For example, how to react on convoys. They didn't feel like they had sufficient training on how to react if you're taking fire and that sort of thing, it was really learning on your own. We also had a good discussion on the policy, and all of them said that the distinction is now gone. We were all in combat, and several of them said, don't change the policy, because if you change the policy, then we're afraid that then it won't be voluntary, and we'll all have to go into regular combat situations. It was one focus group, and it was three of them that said that.
- Committee Chair: We heard that at a ground unit too, at both junior and senior levels. I asked if it would be okay with them if they got in a non-combat MOS when they first enlist, and then a few years later they were transferred into a combat MOS. It's one thing to say I want the opportunity to be in combat roles than it is to say that we are willing to be forced to be in combat if these positions are all opened and the policy is changed. A second non-ground unit seemed fine with it. That wasn't the case at one of the ground units. Some of them said that they would never want to be in the infantry.
- LEAD RESEARCH FIRM REP: Is it that they don't want to be forced to do infantry or that they don't want to be forced to be in combat?
- Committee Member : It was I don't want to go into direct combat. Also there and at a ground unit, for the last question, the pregnancy issue came up, and the impact on the unit
- Committee Member : I heard that they were having more problems with spouses getting deployed together.
- Committee Chair: I would think it would be very hard for all of those people over there by themselves if some can be there with their spouses and others can't.
- Committee Member: To look at down the road...possible issues are the impact of pregnancy, and leaving them shorthanded in the field because they don't get replacements in theatre.

- LEAD RESEARCH FIRM REP: It would be helpful to know the statistics of this.

Women in Combat (undisclosed location):

- Committee Member: Non-ground unit for this particular Service experiences are similar to those that we're hearing elsewhere. Their view on women in combat, there was unfortunately the idea that they were not really in combat since they did not see hand to hand combat. Overall gender was not an issue there. They thought as long as women can do the job they should be allowed to do it. The main issue with this unit is it is one of the only organizations in their Service, where they are mostly Reserve and only five Active Duty. They ended up in theatre being split apart even though they expected to be together. We also heard about the equipment, where there's a disconnect between the equipment leadership thought they should have versus what they actually needed. I think this comes from the Active Duty cadre taking a just-in-time visit out to the theatre to see what they need there. They don't really know what is needed. There seems to be a little bit of a disconnect between what they thought was going to happen versus how they were actually utilized. They felt the need to protect their women.
- Committee Member Chair: We heard that at a separate non-ground unit too. They were very passionate about it.
- Committee Member: All in all they all thoroughly enjoyed their experience being deployed. One of the biggest problems is that they didn't do what they expected to do, in that they were trained as a unit and then were split up once in theatre. For training, they did National Guard training.
- Committee Member: Everyone should go to Army and Marine training.

Women in Combat (undisclosed location):

- Committee Member: We saw WTU, but we spent most of our time with the ground unit.
- Committee Chair: I was blown away by how many people they had. As far as what we learned there, they were almost all truck drivers. They said that they had two hours of training on how to drive trucks and what to do in a convoy. They said that no one showed us how to circle the wagons or other stuff they needed that they had to learn on the ground. That was the one place where they actually went there and did their own job, but they weren't trained for it.
- Committee Member: It was the question of loading and unloading cargo...
- Committee Chair: And still keeping safe, and how to handle incoming fire. The guy next to her didn't duck...they really didn't have the training that they needed.

- Committee Member: Most of them just got back, and some of them are about to go back again. Some of them also said that they learned most from not training but from others who had been there before. Most of them were proud to have served in combat.
- Committee Chair: Yea, I heard that more than anything. I was proud, and I would do it again.
- Committee Member: We had a lot of enlisted folks, which was good.
- Committee Member: The hardest focus group was the one where we had all of the leaders, both men and women, in a single focus group, and there were like 22 of them. What we did is we took the focus group questions and we sat with the recorder ahead of time, and we picked the questions we were going to do for the females, and then picked the ones for the men, and then some were questions for both men and women leaders.
- Committee Member: One of the interesting things about that leadership group was that there was an older guy that was a leader, and when we asked about how women impact mission, he was not very chatty before that, but to this question he said that the most important thing you do is to treat the women the same that you treat the guys. He thought that was the best way to bring the best out in the Service members. I thought that was the wisdom of a guy who had done it for many years.
- Committee Chair: And he was saying even more than that. He was saying that if you want the woman to be treated equally by their peers, then as a leader you have to treat her the same as her peers and equally in order to set an example.
- Committee Member: There was an interesting interaction where someone said there's a lot of he-ing and she-ing. I didn't know what this meant, so I asked if sexual tension is what was meant. And the response was yes, that this is what they were talking about. And immediately the EO officer said that there will be no discussion about this. That pretty much stifled the conversation, which is a real shame. It really sent a chill through the conversation. I thought how unfortunate that this issue was seen as EO instead of important discussion to have during this focus group. It was a woman who said it. I reminded them of confidentiality at that point. I sort of... I guess it's part of why I say it's difficult to address these issues; they're difficult issues. And unless one is able to acknowledge that there are always male-female sexual issues that are there as an undercurrent and are distracting, this created poor stereotypes and reputations.

Wounded Warrior (undisclosed location):

- Committee Chair: I think the take away messages at (undisclosed location) were, well, I didn't have the strong feeling there that, well... we did the family group there, and I still think that there's this whole issue that there are these young people who don't know how to navigate these issues. I thought the really good thing we learned about there is the CBWTU (Community Based Warrior Transition Unit). They don't feel that the medical facilities where they live are adequate enough to help them get past the issues they're dealing with.
- Committee Member : Were these all medical practitioners?
- Committee Chair: They were all providers, not all medical. This one guy said that as long as someone shows him that there is adequate medical care near by, then he will release the Wounded Warrior (to a CBWTU).
- Committee Member : There was a new guy that was brought in to make things move more smoothly.
- Committee Member : This guy tried to answer and provide justification for each item. We found that in the family group too, that people began to hear about each other's stories, and there were people who have navigated the system successfully and wanted to help others do it too.
- Committee Chair: There was this one spouse who really could not navigate the system. And this one guy said that he was going to help her figure this out; that he knew how to fix her problem, and then after the group, he went right up to her to talk about it with her.
- Committee Member : Best practices – there were a couple of programs for Wounded Warriors in the VA WW unit. That was very important. We also talked about the job fair that they held.
- Committee Chair: They arranged a job fair for Wounded Warriors. They went through a list of everyone's MOS, and tried to get companies to come that matched those skill sets. They had medical and VA people there, and they had a fair with tables with employers and universities. They put forth a lot of effort and work to do this. Not only could the Wounded Warriors go, but the family members could go too. It was such a big success, that they decided to do it every six months. They said that these companies were more than willing to come in and do it for the Wounded Warriors and their families.
- Committee Member: They wanted real Wounded Warriors in the outreach. There were some complaints when they were trying to provide a service to a Wounded Warrior, they didn't want a med hold patient, they wanted a real Wounded Warrior.

- Military Director Note: This is not the sole instance of medical hold troops relegated to second class designation if not “true” Wounded Warriors.
- Committee Member: We ran into this at another installation , where a mother of a severely injured Soldier said her son was bypassed by high profile visitors such as rock stars, etc., who would only want to visit the “real” Wounded Warriors.
- Committee Member: I was trying to think of other best practices.....
- Committee Member: In the Marine Corps, the Commandant of the Marine Corps told the Wounded Warriors in person that if they want to stay in the Marines, that he will find a job for them.

Women in Combat (undisclosed location):

- Committee Member: They had an issue with older equipment and lack of good manuals for the equipment.

Wounded Warrior (undisclosed location):

- **Military Director note: Comments below include actual Wounded Warriors feedback. The focus group was not designed to accommodate Wounded Warriors, however, the Committee retained all individuals that requested participation.**
- Committee Member: The family members said that what is working well is ombudsperson.
- Committee Chair: That family group at (undisclosed installation) included one woman who thought things were kind of tough. She left the focus group saying that things are so much worse for others there that she felt better about her own problems. There were people with a bad nurse case manager, and a First Sergeant putting TBI patients on 12 hour duty, and the family members felt like they were looked down upon. We also had Wounded Warriors in the groups. And they stayed; I just couldn't send them away. We had one guy there whose friends were killed in 9-11. He was a fireman. He joined the military, and on his third deployment he fell twenty feet and messed up his ankles and wrists, and had TBI. He was told that he couldn't ever go back to his job. So he went back to his unit, and he didn't get the care he needed, so he's more messed up now. His bones fused badly during this time, and now is in really bad pain. He was there with his wife and a child. This child was approximately eight years old maybe.
- Committee Chair: From the time the people walked in the door they couldn't wait to talk to us.

- Committee Member: They knew that we would listen to them. They just wanted someone to listen. There was one tenacious wife in the group who had gone through it (navigating the system) and was willing to share with the other focus group members, which was great.
- Committee Chair: We had two men with TBI in the group.
- Committee Member: And the cadre's answer to helping the TBI patients remember their appointments, medication, etc. was a PDA, which they didn't help them figure out how to use either.
- Committee Chair: I think it's almost always the case that the people we see in family groups are the squeaky wheels.
- LEAD RESEARCH FIRM REP: I think we need to frame your findings accordingly then.
- Committee Chair: Yes, I agree.
- Committee Member: In review, (undisclosed installation) was more of a cross-section.
- Committee Chair: I would say (undisclosed installation) noticeable point is the building they're doing there.
- Committee Member: I think what you all are saying you heard at (undisclosed installation) is quite different from what I heard elsewhere. I heard that things are going really well and that things have improved a lot. If you ask me for what I saw have things gotten better since last year? I think if I were you, I'd say no, but I'd have to say yes based on what I heard.
- Committee Member: It's a mixed bag really. It's really dependent on luck of the draw with personalities of those helping you. Some had that really bad nurse case manger or first sergeant, and that made it really terrible.
- Committee Chair: Cadre, nurse case manager, and ombudsperson were the ones really helping overall.
- Committee Member: It's the case managers who have to be competent, and the first sergeants have to be caring. I think the system works if it's staffed with good people.
- Committee Chair: (Undisclosed installation) has some issues, they have limited facilities, which they are fixing. They are building all of these new facilities. They're working on getting it up and running, and they have, besides this one

problem of the two bad staff members, they can't pay enough to keep good quality medical providers there. It's so isolated. It's very rural. They said that what they end up doing is contracting for doctors. But when they contract for a doctor, what they get is a doctor, who may not be consistent. It's just a body to fill the slot. There's no continuity of care. It's whoever's coming that day. They're having a hard time filling these slots.

- Committee Member: I have just two suggestions coming out of (undisclosed installation) focus groups. One is that there be a WTU checklist for the spouses. Apparently there's one for the spouses, but would be particularly helpful for the TBI spouses, including items such as SFAC services available to them. The other one is with the MEB delays, that they have a flowchart. There's only four outcomes at the end of the MEB. So, if the outcome is X, then these will be the next steps, and if the outcome is Y, then the outcome is that, etc. Psychologically, if they were prepared for the four possible outcomes and what may come next, that would be very helpful.
- Committee Chair: Are there any other items to add?
- Committee Member: I have just one – that name of the unit at (undisclosed location) that was so unusual and that they thought would put at VA sites all around the country as a best practice. “The gold standard”.
- Committee Chair: (Undisclosed location) has a lot of challenges. Their Wounded Warriors are having to drive a long distance to their care, and they have hundreds of Wounded Warriors. The ground force unit has a unit that deployed, has been there six weeks and had lost six already. At a non-ground force unit, IAs are doing one-on-one's (meaning they're gone a year, back a year, gone a year, back a year, etc.).
- Committee Member: We did ask them about how the combat impacts career, and part of the problem is school.
- Committee Member: It's both good and bad, because it gives them the points they need to be promoted, but then they miss schooling opportunities and therefore lose points there.
- Committee Member: It's just the nature of the tempo.

Dr. Mary Nelson, Chairperson DACOWITS, closed the meeting at 5:00 p.m. She thanked the Committee for their short notice availability for the meeting, which was designed to consolidate the collective installation visit facts and findings prior to the expiration of the terms of the majority of the Committee, 22 Aug 09. The two remaining Committee Members, in collaboration with the contracted research firm who

accompanied all installation visits and focus groups, will prepare the final Annual Report for the Department.

Military Director's note: There were no discussion points or contributions requested or submitted by the general public for this meeting.



Report Submitted by
Col Emma K. Coulson, USA
Military Director, DACOWITS



Report Certified by
Dr. Mary Nelson
DACOWITS Chair

Attachments as Stated

DACOWITS Members Present

Dr. Mary Nelson
Mrs. Denise Balzano
Col Torres
Mrs. Lassus
Mrs. Santiago

DACOWITS Members Absent

Mrs. Diana Denman