Commanders Corner, April 2020

There were no April Executive Board and Post meetings due to restrictions on social gatherings related to the COVID-19 outbreak; Post and Executive Committee meetings are suspended until further notice. There appears to be some attenuation of the number of virus infections; hopefully we may be overcoming this horrible disease. Despite conflicting guidelines from local and federal leadership I encourage you to use cautious judgment in your upcoming activities. The old saying is still true: "It's better to be safe than sorry".

Victoria Glover, Vice Commander and Director of our Boys State program, advises that we completed interviews of 47 boys from local high schools. It has been decided that there will not be an event at UT this year as has been the tradition. The current planning is for an on-line event. The details of this are currently being arranged and we will know more soon.

American Legion Boys State is among the most respected and selective educational programs of government instruction for high school students. It is a participatory program where each student becomes a part of the mock operation of local, county, and state government.

This has become the favorite activity of the Post so I will provide some history:

Boys State has been a program of The American Legion since 1935, when it was organized to counter the fascist-inspired Young Pioneer Camps. The program was the idea of two Illinois Legionnaires, Hayes Kennedy and Harold Card, who organized the first Boys State at the Illinois State Fairgrounds in Springfield.

At American Legion Boys State, participants are exposed to the rights and privileges, the duties and the responsibilities, of a franchised citizen. The training is objective and practical, with city, county, and state governments operated by the students elected to the various offices.

The American Legion Auxiliary sponsors a similar program for young women called Girls State.

We conduct a ceremony in the fall of the year and invite the boys that participated and their parents to listen to what they learned at Boys State and how they see the experience impacting their lives. Many of them may choose to pursue a career in government or politics in some way. In any case, they all will have learned far more about how our government works than they knew before.

Again, although our Post meetings for 2020 are normally on the third Tuesday of every month at the South County Community Center they are suspended until further notice

One of the topics I am interested in is news about our MIAs. Below is a link to a website that documents recovery of MIAs:

https://www.dpaa.mil/News-Stories/Recent-News-Stories/

This is an impressive listing that showcases the diligence of our Defense POW/MIA Accounting Agency.

Some interesting military news:

29 Apr 2020

Military.com | By: Gina Harkins

President Donald Trump again commented on the embattled case of Capt. Brett Crozier on Wednesday, saying the ousted commanding officer and former <u>Navy</u> secretary who fired him would "be seeing me at a certain point."

Trump declined to offer his thoughts on whether Crozier should be reinstated as commanding officer of the aircraft carrier Theodore Roosevelt, saying only, "I have my feelings on it."

"I don't know him, I've never spoken with him," Trump said of the captain. "But I think he's a very good man who had a very bad day.

"And then he wanted to be Ernest Hemingway," the president added, comparing Crozier to the famous writer. "... He started writing these long memos, and you can't do that when you're the captain of a ship."

Crozier was removed from command earlier this month after a four-page letter he wrote warning Navy leaders about cases of COVID-19, the illness caused by the coronavirus, spreading among his crew. Former acting Navy Secretary Thomas Modly relieved Crozier, citing a loss in confidence over the captain's handling of the situation.

Modly later resigned from his position after flying out to Guam to address Crozier's crew, where he made divisive comments about the captain.

Trump defended both men involved in the high-profile incident, saying they were two good people who both had bad days.

"That can happen," the commander in chief said. "They were under a lot of pressure because it went very public. They'll be seeing me at a certain point."

Trump did not elaborate on why, where or when he would be seeing Crozier or Modly.

The president went on to address the health crisis on the ship, saying COVID-19 "spread like wildfire" aboard the Roosevelt.

"It started with two people, then it went to 12 people and I got a report yesterday that it went to 851 people," he said. "... It starts with a little group and in four weeks, 800 and some-odd people.

"We thought it would end at 41," Trump added, not explaining why he believed the virus would have stopped spreading among the crew at that point. By the time Crozier had been relieved of command, COVID-19 cases among the crew were already up to 114.

The new acting Navy secretary, James McPherson, on Wednesday announced that the service would be expanding its investigation into the situation that led to Crozier's firing. He and Chief of Naval Operations Adm. Mike Gilday met with Defense Secretary Mark Esper on Friday and it was recommended that Crozier be moved back into his position.

"I have unanswered questions that the preliminary inquiry has identified and that can only be answered by a deeper review," McPherson said.

27 Apr 2020 Military.com | By Joseph V. Micallef

The National Security Implications of COVID-19

The COVID-19 pandemic is far from over. While the United States may be at peak mortality from the pandemic, it is still raging in many of the other 180 countries infected -- many of which have not yet seen their mortality peaks.

COVID-19 is simply one battle in a longer and larger war that humankind has waged with coronaviruses for generations. This pandemic, however, has underscored the national security implications of such outbreaks.

Even with a COVID-19 vaccine, the enormous pool of potential pathogens, and the current patterns of world trade and travel, mean that it is likely that new pathogens may emerge in the future whose medical and economic consequences may be as devastating as COVID-19, or even worse.

The U.S. military has been on the frontline of the battle against the COVID-19 pandemic and played a major role in marshaling medical assistance and building emergency facilities to deal with the anticipated surge. In doing so, it reclaimed a role that it played extensively during the 19th century and the first half of the 20th century.

The legacy of the COVID-19 pandemic on national security will be manifold. Three aspects in particular stand out already: an expanded role for the U.S. military in providing the surge capacity in medical facilities and personnel in the event there is another pandemic; a rethinking of what procedures and policies are necessary for preserving force readiness in the face of disease outbreaks; and a new assessment of biological threats, whether deliberately weaponized or not, on national security.

The Military and Infectious Diseases: Past, Present and Future

An old 16th century adage declared, "Where armies march, plague follows." Disease outbreaks have long been associated with military campaigns and have often shaped their outcomes -- from the plague that ravaged Athens during the Peloponnesian War to Napoleon's retreat from the Russian campaign to the jungle warfare of World War II. Hence the long-standing military interest in the matter.

During the Revolutionary War, for example, smallpox took a greater toll on Washington's Continental Army than it did on the British. Many British soldiers, growing up in the crowded and unsanitary conditions of 18th-century British cities, developed an immunity, while American soldiers, having been spared those conditions, were more vulnerable.

Washington ordered the entire Continental Army, a first among military forces, to be immunized, a process then known as variolation, by intentionally exposing soldiers to a mild form of the smallpox virus. Both he and Martha Washington also got immunized. The first official smallpox vaccine was not developed by Edward Jenner until 1796.

Washington's timing may have had some interesting historical consequences. Military historians have suggested that, had the immunization occurred earlier, portions of eastern Canada might have ended up as part of the U.S. In 1776, a Continental Army advancing on Quebec was ravaged by an outbreak of smallpox. Half of the 10,000-man force were stricken, and the campaign was abandoned. According to John Adams, "The smallpox is 10 times more terrible than the British. ... This was the cause of our precipitate retreat from Quebec."

During the 18th and 19th centuries, military planners would routinely assume that fatalities from disease outbreaks during military campaigns would exceed combat fatalities by a factor of four to one. During the Mexican War, for example, the ratio of fatalities from disease was six to one. It fell to three to two during the Civil War, but rose to five to one during the Spanish-American War. During the Crimean War, it rose to 10 to one among French forces in theater; during the Sino-Japanese war of 1894, it was 12 to one.

Typhoid fever, for example, was the leading cause of fatalities during the Spanish-American War. Likewise, during the 20th century, the U.S. suffered more casualties due to malaria than bullets in malaria-endemic regions.

World War I was the first major war where battlefield deaths exceeded deaths from disease -- the result both of improved medical care and the killing efficiency of industrial warfare. The ratio was .82 to one among the U.S. forces deployed in Europe. During WWII, the ratio dropped to .07 to one. Only one out of every 15 deaths, 6.6%, was due to disease; 85 percent of hospital admissions, however, were disease related.

Not surprisingly, the U.S. military has, throughout its history, strived to preserve its fighting strength through, according to the Defense Department, "a broad program of vaccine development, therapeutics, and programs for vector controls." In addition, it has conducted

ongoing and extensive research programs "into the structure, genome, growth, pathogenicity, and virulence" of disease pathogens.

Additionally, many civilian agencies tasked with responding to disease outbreaks had military origins. The Centers for Disease Control, for example, began in 1943 as the Office of National Defense Malaria Control Activities. The National Institute of Allergy and Infectious Diseases began in 1887 as a laboratory at the Marine Hospital Service facility on Staten Island, New York to study the link between microscopic organisms and infectious diseases. The MHS cared for disabled seamen in the U.S. Merchant Marine, Coast Guard and other federal agencies.

The U.S. military played a major role in controlling Yellow Fever and other tropical diseases, a prerequisite to the successful building of the Panama Canal. During the 19th century and the first half of the 20th century, the military, especially National Guard units, would often play a major role, both medical and at times civil, in responding to disease outbreaks.

During the recent COVID-19 pandemic, the U.S. military was critical in providing the surge capacity in hospital facilities and medical personnel. The Trump administration dispatched the U.S. Navy's Mercy-class hospital ships, USNS Comfort and USNS Mercy, to New York City and Los Angeles, respectively. The Army Corps of Engineers built field hospitals in a matter of days in the five New York City boroughs, as well as Seattle, New Orleans, Philadelphia, Miami, Dallas, Denver and Detroit -- adding tens of thousands of hospital beds virtually overnight.

Future administrations will again look to the U.S. military to provide the surge capability for medical facilities in the event of future pandemics. The Trump administration has already indicated that it intends to order two additional Mercy-class hospital ships for the Navy. This is not a new role for the military, but it is a return to a historic role on a larger and more robust basis.

Force Preparedness During Disease Outbreaks

The DoD has deployments in 147 countries. There are 21 countries where U.S. deployments exceed more than 200 military personnel. Not surprisingly, the U.S. military has an active program of monitoring the incidence of infectious disease outbreaks around the world. There are more than a dozen DoD agencies -- in particular, the National Center for Medical Intelligence -- which are involved in monitoring such disease outbreaks.

In 2006, the DoD formulated the "Department of Defense Implementation Plan for Pandemic Influenza." The plan spelled out those tasks delegated to the DoD in the "National Strategy for Pandemic Influenza" plan designed by the Department of Homeland Security in 2005. Those tasks were: assisting in disease surveillance, assisting partner nations, protecting and treating U.S. forces and dependents, and providing support to civil authorities in the U.S.

During the current pandemic, the military has not figured prominently in the first two tasks and accomplished the fourth task brilliantly. Its record on protecting and treating U.S. forces and dependents, however, is mixed.

As of April 20, there were approximately 2,500 military personnel who had tested positive for COVID-19. Overall, given the size of the U.S. armed forces, that's a pretty small number. A fourth of those infections, however, were on the carrier Theodore Roosevelt.

I'm not going to delve into the controversy surrounding the Roosevelt or the firing of its captain, Brett Crozier. I don't have all the facts. I will say, however, that I visited the Roosevelt in December 2019, for several days, courtesy of the Navy. It certainly seemed like a well-run ship and Crozier, whom I met, came across as a very competent officer deeply committed to his ship and his crew.

The DoD appeared rather flat-footed in dealing with the outbreak of COVID-19 on Navy ships. Presumably, there is a protocol governing such events, if so, it certainly wasn't apparent. Notwithstanding that the DoD had formulated a plan in 2006, that the possibility of such disease outbreaks has long been recognized, as has the need for maintaining force preparedness under such circumstances, it's surprising that appropriate policies weren't immediately implemented.

Regardless of what happened on the Roosevelt and other infected Navy ships, it's likely that there will be disease outbreaks in the future, and it is essential that the U.S. military retains its ability to deploy or engage an opponent if necessary, even in the event that it is simultaneously dealing with a disease outbreak.

That point was underscored when China's People Liberation Army Navy sailed its aircraft carrier, the Liaoning, in the Taiwan Straits provocatively close to Taiwan in the middle of the pandemic.

The DoD has long gamed the ability of U.S. armed forces to simultaneously handle multiple conflicts around the world. Presumably that planning has involved doing so while also dealing with a major disease outbreak or a pandemic. If not, then some revisions are in order.

This raises a third, and even more important, issue. What does the experience with COVID-19 tell us about the nature and threat posed by biological weapons, both man-made and naturally occurring, to U.S. national security?

Biological Weapons and National Security

Biological weapons are not new. In antiquity, a range of such weapons were used, from flinging clay jars full of poisonous vipers at opposing ships to throwing disease-ridden corpses over city walls. The practice continued during the Middle Ages. In the 20th century, industrial processes came to be applied to both chemical and biological weapons.

World War I saw extensive use of poison gases. During World War II, the Japanese military conducted a large-scale research program on the development of biological weapons. Such weapons were deployed against Chinese military forces. Japan also experimented with various ways of using biological weapons against civilian populations in the U.S., but never succeeded in developing a practical weapon.

During the Cold War, both the Soviet Union and the United States conducted extensive research on developing biological weapons. The Soviet Union stockpiled large quantities of pathogens, in particular smallpox, bubonic plague and anthrax, and was rumored to have worked extensively on man-made super pathogens that combined high contagion with high lethality. China is also believed to have had an extensive biological and chemicals weapons program.

The Biological Weapons Convention (BWC) of 1972 banned both the use of biological weapons and research activity to develop such weapons. The agreement, however, did leave a loophole that permitted research for defensive purposes, including vaccines. The U.S., the USSR/Russia and China are all signatories to the BWC. Worldwide, only 15 countries have not ratified the BWC.

Modern biotechnology has opened a veritable Pandora's box of biological weapons, including man-made biological weapons that combined different characteristics of several pathogens to create super pathogens. The organisms are called chimeras, a reference to Greek mythological creatures that incorporated features of several animals.

Advances in computational power, the use of sophisticated, artificial intelligence-based algorithms, as well as breakthroughs in synthetic biology, among other things, have vastly speeded up the process of developing vaccines. But even under the best circumstances, human testing still takes 12 to 18 months -- a significant vulnerability gap.

Moreover, the distinction between offensive and defensive research is a pretty subtle one. Any pathogen can be weaponized, man-made or natural, if one side has immunized its military and the other side has not.

The emergence of the SARS-CoV-2 virus underscores the challenge that even naturally occurring pathogens pose to the national security of the U.S.

There are still a lot of questions about the origins of the virus. The prevailing view among U.S. intelligence agencies is that the virus is not man-made, but that it was a naturally occurring coronavirus endemic to certain species of bats found in China.

Some believe that, while the virus was being studied at the Wuhan Institute of Virology, the virus escaped by infecting someone at the institute. Through that person, the original patient 0, it was transmitted to the general population of Wuhan, and from there elsewhere throughout China and the world.

There are thousands of coronaviruses. The full number isn't known. Just the bat species endemic to China, for example, are known to carry hundreds of different coronaviruses. Moreover, given their simple genetic structure, these viruses are highly mutable. Coronaviruses are just one of many viral pathogens in existence that can create pandemic-scale disease outbreaks.

It does not appear that the research on the SARS-CoV-2 virus was intended for weaponization. The research was part of a broader effort, in part funded by the U.S. and Canadian governments, to study coronavirus pathogens, which involved several research institutes, including the Wuhan Institute of Virology.

The enormous human and economic damage that has been caused by the SARS-CoV-2 virus, however, has underscored just how potent a biological weapon this coronavirus and other pathogens like it can be. The U.S. can survive, albeit at an enormous economic cost, the consequences of the COVID-19 pandemic. But a succession of such pandemics, even ones separated by a few years, would devastate the American economy and end the status of the U.S. as the reigning superpower. This lesson is not lost on America's enemies.

Given the enormous trade between Asia/China and the rest of the world and, more importantly, the enormous human traffic of tourists and business executives, combined with the relentless growth of international mega trade shows and sporting events around the world, it has become possible to spread pathogens globally very quickly. It took less than 100 days for COVID-19 to spread from a local outbreak in Wuhan to more than 180 countries.

The COVID-19 epidemic showcased a deep vulnerability in the U.S., indeed the whole world, to such viral pandemics. Ultimately, the U.S. needs a strategy for dealing with the incidence of such pandemics, as they are likely, whether deliberate or otherwise, to occur again. The DoD must preserve its military force readiness while simultaneously providing care for stricken personnel. At the same time, Washington needs a bipartisan strategy to deal with the economic and human consequences in a sustainable way.

Regardless of how you feel about the current U.S. response, it's clear that multiple such responses to a succession of pandemics is not sustainable. That fact, and the realization that such disease outbreaks may happen again, will have a major impact on U.S. national security concerns and will be a significant factor in defining and shaping what the post-pandemic "new normal" will be.

30 Apr 2020

The Associated Press | By Lolita C. Baldor

Army Defends Decision to Have West Point Graduation

WASHINGTON — The Army's top leaders on Thursday defended their decision to bring 1,000 cadets back to the Military Academy at West Point for graduation, where President Donald Trump is slated to speak, saying that despite the coronavirus risk students would have had to return anyway to prepare for their next duty assignment.

The announcement has been criticized as a political move to get Trump on stage at the academy, where he hasn't yet given a graduation address. But Army officials said the students must return for final medical checks, equipment and training.

"We can't telecommute to combat," Gen. James McConville, the chief of staff of the Army, told Pentagon reporters when asked about the decision, which forces cadets spread out across the U.S. to travel, risking exposure on public transportation, and then land in New York, a coronavirus hot spot.

Cadets have been home since spring break in March, with their return to school delayed because of the outbreak. Only the seniors will return, and the graduation is set for June 13.

Lt. Gen. Darryl Williams, academy superintendent, said the students must return for medical and other required tasks that can only be done at the academy before they can be turned over as new officers to the Army.

He said the school will create a "safety bubble" around the cadets and build a staging base where they will arrive. All cadets will be screened and tested for the virus at the staging area and then separated into five groups that will eat and live separately. They will be quarantined for 14 days.

Williams said Keller Army Community Hospital at the base now has all the needed testing equipment, and was converted to be able to handle and quarantine virus patients.

Asked if cadets will face discipline if they can't or don't want to come back because of the virus, he said commanders will decide on a case-by-case basis.

U.S. Sen. Tammy Duckworth, D-Ill., a member of West Point's Board of Visitors, said she expressed her concerns about the decision to Army Secretary Ryan McCarthy in a call this week.

"Trump's reckless decision to gather 1,000 Cadets at West Point for a speech puts our future military leaders at increased risk — all to stroke his own ego," said Duckworth, a retired Army helicopter pilot, who served in the Iraq war and received a Purple Heart.

McCarthy told reporters the Army wants to have a "small, safe graduation ceremony" for the cadets to celebrate.

In contrast, the U.S. Naval Academy has announced it will hold a virtual graduation and postpone other traditional milestone events until large-scale gatherings are allowed. The academy's superintendent, Vice Adm. Sean Buck, called it a difficult decision but necessary "to safeguard the health and welfare of the entire Naval Academy family and local community."

The U.S. Air Force Academy opted to hold a scaled-down ceremony with hundreds of graduating cadets sitting in chairs eight feet apart on the school's parade field, instead of in its stadium. The ceremony was closed to visitors.

West Point's graduation ceremonies are usually held in May in a football stadium.