

# CHAPTER IV

## FOREIGN HUMANITARIAN ASSISTANCE PLANNING AND EXECUTION

*“The severity of human suffering in Somalia caused commanders to try to alleviate the situation on their own. Units were deployed to the field to provide security for the humanitarian relief agency convoys of food. Upon seeing the appalling conditions, and realizing they were not tasked to give food or provide direct support to the population, local commanders took it upon themselves to try to arrange for or speed up relief supplies. While well-intended, this activity diverted the commanders’ attention from their primary mission.”*

Center for Army Lessons Learned  
Newsletter, 93-8

### 1. Introduction

This chapter highlights aspects of joint force planning and execution related to FHA operations. Although much of the information presented is applicable for deliberate planning, crisis action considerations are emphasized. The supported JFC starts formal planning when the CJCS Warning Order is received. Joint OPLANs for the affected area may already exist to support an FHA mission. The JFC’s intent and desired mission end state are the foundations of mission planning. Planning factors found in Appendix J, “Planning Factors for Foreign Humanitarian Assistance Operations,” incorporate many of the topics discussed in this chapter.

*Procedures for both deliberate and crisis action planning are described in Chairman of the Joint Chiefs of Staff Manual (CJCSM) 3122.01, Joint Operation Planning and Execution System Vol I: (Planning Policies and Procedures).*

### 2. Situation Assessment

**Intelligence estimates, area assessments,** and **surveys** are good sources of information on the current situation in the crisis area, providing political, cultural, economic, military, geographic and topographic,

climatic, infrastructure and engineering, health, and other essential information. Other sources for an initial assessment include the US Country Team, Combatant Commander Country Books, recent OFDA situation reports, UN Secretariat Assessments, the UN’s ReliefWeb Internet site, relief organizations already operating in the area, and SOF personnel (see Figure IV-1). A combatant commander may also choose to deploy a HAST to assess the situation. **In describing the situation the joint force will encounter, the planner should address the following.**

**NOTE:** The composition of a Country Team varies widely, depending on the desires of the COM, the in-country situation, and the number and levels of US Departments and agencies present. The Ambassador is the head of the Country Team. Other members may include a defense attaché, security assistance officer, political counselor, public affairs counselor, economic counselor, representatives from USAID, and the Peace Corps. During an FHA operation, a member of the joint force may be appointed to the Country Team.

*For more detailed information on the US Country Team concept, see JP 3-07.1, Joint Tactics, Techniques, and Procedures for Foreign Internal Defense (FID).*

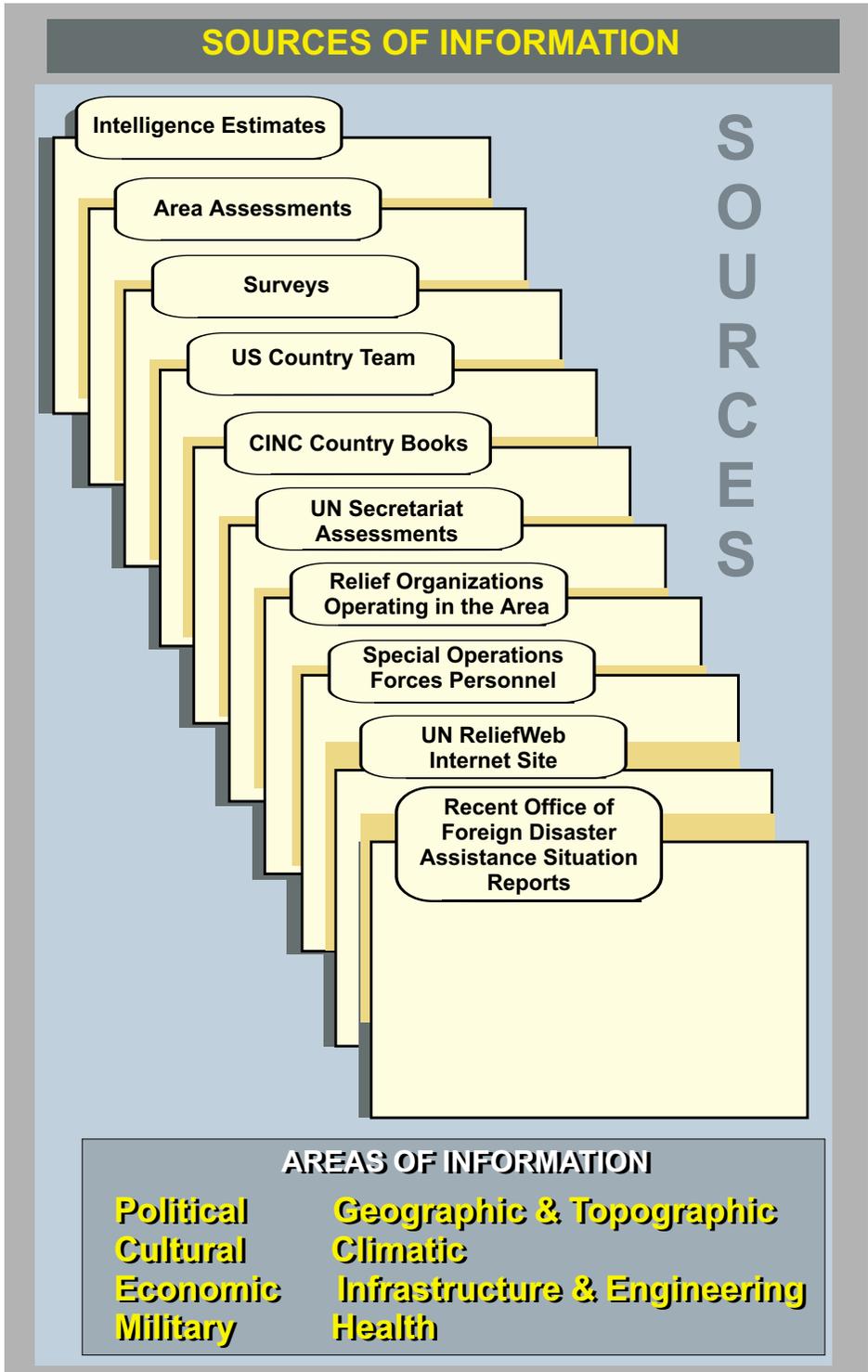


Figure IV-1. Sources of Information

a. **Threats to the Operation.** Hostile factions may use violence in an attempt to stop the FHA effort, or banditry may be expected. **Lack of an infrastructure in the crisis area**, possibly due to natural disaster, civil strife, terrorism, or combat between nations, **can impede the mission.** Disease, drought, or continuing flooding or earthquakes are examples of natural occurrences that can threaten successful mission accomplishment.

b. **Other Organizations Involved in the Operation.** An assessment of the situation should include a **description of the relief organizations** (nongovernmental, international, and indigenous), **foreign governments and military forces**, **UN agencies**, or **any other pertinent element** already involved in the FHA effort, and what relationship exists among them.

c. **Environment.** The **physical, social, and political environment** in which the operation is being planned and will be executed.

d. **The Underlying Causes for the FHA Crisis.** Even if the FHA force is not directed to assist in rectifying the underlying causes,

**understanding these causes can enhance mission accomplishment and force protection.**

e. **Assessment Factors.** Assessment factors may be found in USAID's *Field Operations Guide for Disaster Assessment and Response*, *The United Nations High Commissioner for Refugees' Handbook for Emergencies*, and *Humanitarian Assistance and Multiservice Procedures for Humanitarian Assistance Operations*. (Field Manual (FM) 100-23-1, Fleet Marine Force Reference Publication 7-16, Naval Doctrine Command Tactical Notice 3-07.6, ACCP 50-56, Pacific Air Forces Publication 50-56, and US Air Forces in Europe Publication 50-56.) **The following are examples of factors that can aid in assessing the situation.**

- What is the status of military or paramilitary forces?
- Who are the relevant governmental and nongovernmental actors in the operational area? What are their objectives? Are their objectives at odds with or compatible with the JFC's objectives?



*FHA planning takes into account not only the task required, but also the environment in which it must be carried out.*

- Who are the key communicators (persons who hold the ear of the populace, i.e., mayors, village elders, teachers) within the operational area?
- What is the status of essential public services (water, electricity, communication, sanitation, and transportation, including road, bridge, and sea- and airport conditions and capabilities)? How does the current status compare to pre-disaster status?
- What is the status of health care providers, firefighters, police, and court systems? Include availability, level of expertise (skilled laborers), equipment, and supplies.
- What relief agencies are in place, what are their roles and capabilities, and what resources do they have?
- What is the physical condition of the civilian populace?
- Where are the locations of medical facilities; are they operational, and to what level?
- What are the unique shelter, food, and security needs of the people and to what extent is support available from within the affected country?
- What facilities and support are available to FHA forces from the affected country?
- What unique social, ethnic, or religious concerns affect the conduct of the operation?
- What are the legal limitations to US assistance in this case?
- What is the local population's attitude toward who or what is causing their plight?
- What is the local population's attitude toward the presence of US forces?
- What are the force requirements to protect the force?
- What is the status of the host strategic transportation infrastructure? Are available seaports and airfields in usable condition? What is the status of materials handling equipment? Are connecting roads and railroads usable?

### 3. Force Structure

JFCs may have plans or predesignated joint forces, or both, for the conduct of FHA missions. The JFC has a number of available options, including use of a predesignated joint force or a newly designated joint force task-organized and tailored specifically to conduct FHA missions. In FHA operations, **the joint force structure must provide for the means to coordinate and communicate with the numerous organizations involved in the overall FHA effort.** Effective liaison among these organizations will help reduce organizational conflicts and redundant relief efforts. Personnel trained in **political-military skills** are valuable in establishing necessary liaison with policymakers and the diplomatic community. Additionally, personnel skilled in **multifunctional logistics** and **security assistance operations** should be part of the joint force organization, since FHA operations tend to be logistically complex. **There is a high probability that the joint force will be a multinational force,** and that some of the multinational forces may require and have received USG approval to be logistically supported with US equipment and may sustain these forces throughout the duration of the operation. It should be noted that the National Guard and Reserve Components may provide assets and personnel across the spectrum of possible requirements such as CA. A **Presidential Reserve Callup** may be required to augment

the limited number of Active Component CA personnel. Deployment times for members of the Reserve Component may be considerably longer than those of the main body of the FHA force. Joint force organization will follow established standing operating procedures and joint doctrine.

*JP 5-00.2, Joint Task Force Planning Guidance and Procedures, provides more information on organizing joint task forces.*

### 4. Mission Statement Development

A difficult but critical task for the combatant commander is developing the FHA military mission statement. **The mission statement must provide specific direction for achieving the desired end state via clear and attainable military objectives.** The combatant commander normally coordinates the mission statement with OGA through the appropriate PCC. Combatant commanders consider several factors in developing the mission statement, to include the military force's role in assisting relief agencies, the operational environment, and security considerations.

a. **JTF SUPPORT HOPE.** As an example, the mission statement for JTF SUPPORT HOPE (Rwanda) included:

- Provide immediate assistance to ongoing or planned efforts for the establishment and operation of water distribution and purification in Goma (Zaire);
- Establish an airhead and distribution capability at Entebbe, Uganda;
- Provide 24-hour airfield capabilities and support services at Goma, Kigali (Rwanda) and other airfields as required;
- Establish overall logistic management capability in support of UNHCR and other nations; and

- Protect the force.

b. **Operation RESTORE HOPE.** The US Central Command mission statement for Operation RESTORE HOPE (Somalia) is another example: "When directed by the NCA, Commander in Chief, US Central Command will conduct joint or combined military operations in Somalia to secure the major airports and seaports, key installations, and food distribution points; to provide security for convoys and relief organization operations; and to assist UN NGOs in providing humanitarian relief under UN auspices."

### 5. Concept of the Operation

a. **Deployment. Deployment planning and execution considerations for FHA missions and other military operations are fundamentally the same.** Joint force deployment is predicated on the severity of the humanitarian situation and the perception of US interests. It is important to remember that, at every level, political factors drive military decisions and planning. **The joint force deployment should be phased to allow critical force packages to deploy first.** Based on mission analysis, the JFC determines what packages are required to deploy to the humanitarian crisis area as a first priority, to perform assessments and to establish required lodgment for the remainder of the joint force.

- **Movement.** The joint force will obtain, through the supported combatant commander, **strategic lift allocations and constraints** from USTRANSCOM. The **time-phased force and deployment data** for the operations must be developed to remain within these guidelines. USTRANSCOM provides **movement schedules** for deployment requirements in the sequence, or as near as possible to that requested by the joint force. The joint force staff should continually update all subordinate



*FHA operations are often conducted in austere locations.*

commands on deployment scheduling, situation, or mission changes. Such changes may require significant shifts in force deployment. Consideration should also be given to any deployment support requested by OFDA DART and OGA, the UN, NGOs, and IOs.

- **Priority of Deployment.** Initial deployment for an FHA operation generally requires only critical **command, control, communications and computer systems; security; CMOG; and logistic capability.** Follow-on forces deploy as capabilities expand and requirements are better defined. However, US forces often conduct FHA operations in austere locations where air- and seaport facilities may be limited or inadequate. If the affected country has insufficient port offloading facilities, US personnel and equipment needed to establish or augment this capability should arrive prior to the primary force packages. In some cases, it may be necessary to expand existing facilities or construct new facilities to accommodate essential transshipment or to accommodate the flow of forces into the country.

b. **Phasing of the Operation.** To better control an FHA operation, **the JFC may decide that the operation needs to be phased.** FHA planning phases permit flexibility and ease of control. **Phases may run concurrently or sequentially,** with the majority of phases being concurrent with others. Plan phases should not be “locked into concrete” and phase timing may be shifted as the situation dictates. Phases should be used to increase operational tempo by focusing relief assets and emphasis toward the objective. If a number of operational objectives with the same general focus are to be achieved simultaneously, a distinct phase may be required. There are, however, no standard phases. The plan for Operation SUPPORT HOPE is provided here as an example of a phased FHA operation.

- **Phase I.** Stabilize the Situation in Goma. “Stop The Dying.” Support life-saving efforts (primarily water production, distribution, and sanitation) in the Goma, Zaire refugee camps. Phase I was to be declared complete when the death rate and refugee deprivation reached predesignated levels and when distribution began to function at an acceptable rate.

- **Phase II.** Move Refugees Back Toward Rwanda. Assist in establishing a waystation network from the major refugee centers toward the Rwandan interior. The objective was to assist relief agencies to develop a sustainment infrastructure and distribution system to help return refugees to their homes. Phase II completion criteria required establishment of the waystation support infrastructure and distribution network.
- **Phase III.** Stabilize the Refugee Situation and Begin Reconstruction in Rwanda. This phase supported ongoing relief efforts and established preconditions for operational transition to the UNHCR. Phase III was to be declared complete upon initial operational capability of a viable transportation, distribution, and storage infrastructure capable of meeting basic Rwandan needs.
- **Phase IV.** Turnover Operations to the UNHCR. This phase begins as UNHCR, third country forces, and various relief agencies developed adequate water production as well as food and medical distribution to sustain recovery. During this phase, joint force operations begin transition to a US liaison element to work closely with the UNHCR. Phase completion involved seamless transfer of ongoing relief operations to UNHCR and other agencies capable of sustained operations.
- **Phase V.** Redeploy the Force. The redeployment phase consists of relief operations control transfer to the UNHCR or redeployment of nonessential personnel and equipment.

c. **Sectors.** The JFC may help **organize the FHA area into sectors**, in consultation with civilian relief agencies and consideration

of sectoral organization already established by the affected country. In establishing boundaries for these sectors, planners should consider ethnic or traditional tribal boundaries, political affiliations, relief agency areas, political and cultural acceptance of other nations' forces, and contiguous sectors with forces assigned.

## 6. Logistics

a. The FHA logistic and health service support (HSS) planners should assess FHA logistic and HSS requirements as well as affected country and theater support capabilities. Attendant risks and logistic objectives should also be identified. **Emphasis must be placed upon locating logistic bases as close as possible to the relief recipients.** Should relief recipients be located within a major population center, all reasonable measures should be taken when establishing logistic bases that prevent migration of relief recipients from their economic and social areas. **All potential supply sources should be considered**, including affected country, commercial, multinational, and pre-positioned supplies. Lessons-learned indicate that logistics and the associated support facilities and infrastructure necessary to sustain an FHA and HSS operation are frequently underestimated. FHA and HSS operations are logistic intensive and will most likely include significant general engineering requirements. Therefore, **the overall logistic concept should be closely tied into the operational strategy and be mutually supporting.** This includes the following.

- Identifying time-phased material requirements, facilities, and other resources. Remote and austere locations may require deployment of materials handling equipment and pre-positioned stocks.



*In FHA operations, critical support contracting, either from within or outside the affected country, should be considered.*

- Identifying support methods and procedures required to meet air, land, and sea LOCs.
  - Establishing procedures for coordinating and controlling material movements to and within the operational area. Priorities may be established using apportionment systems, providing the commander with the flexibility to reinforce priority efforts with additional assets.
- b. For the FHA and HSS operation to succeed, the commander must be able to fulfill priorities through adequate resource control. **Critical support contracting should be considered.** Contracting support may be obtained from within or outside the affected country. Military forces should not compete

for scarce civilian resources. To avoid competition for similar support and to promote economy of contracting effort, contracts for logistic support must be coordinated through the designated joint force J-4 or lead agent for logistics. Logisticians should be thoroughly familiar with contracting options available through the **Navy's Emergency Construction Capabilities Contract Process**, the **Army's Logistics Civilian Augmentation Program**, and the **Air Force Contract Augmentation Program** contracts. When contracting for supplies, transportation, and services is possible, it can aid the economy of the affected country and facilitate responsibility transfer back to the affected country or NGOs or IOs. Logisticians must consider which equipment and supplies may be left behind at the completion of the mission. Supplies and equipment cannot be arbitrarily left behind and donated to the HN. Supplies and equipment left behind as a result of HA support operations must be in accordance with all applicable Federal laws and statutes relating to the donation or transfer of military articles and supplies. Consult legal counsel prior to any release of supplies and equipment. It should also be noted that planning for security of materials and supplies is imperative.

## 7. Command and Control

**An FHA plan must include responsibility for air and space, land, sea, and special operations.** It is especially necessary to delegate authority to establish supply or transportation priorities. **Delegation speeds decision making** and reaction to changes in life-threatening situations faced in many FHA operations. Although there is no command relationship between military forces and OGA, UN agencies, NGOs, IOs, affected country elements, and allied or coalition governments, **clearly defined relationships may foster harmony and reduce friction** between participating organizations.

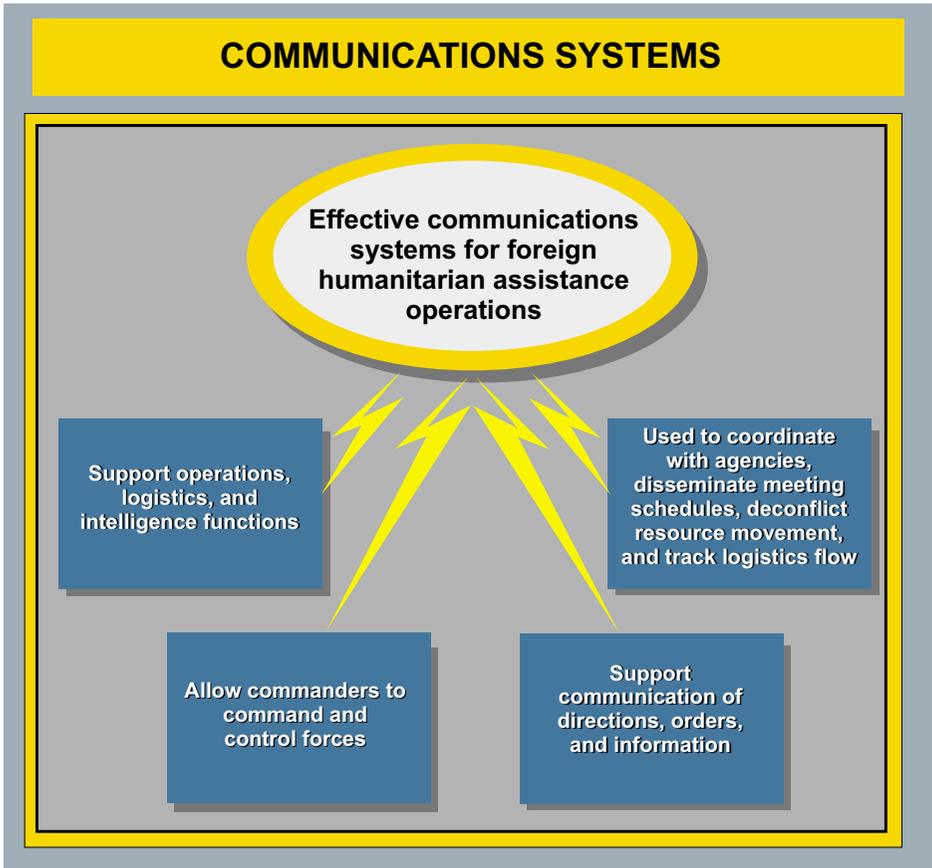


Figure IV-2. Communications Systems

## 8. Communications

As shown in Figure IV-2, **effective communications systems are vital to planning, mounting, and sustaining successful FHA operations.** Operations, logistic, and intelligence functions depend on responsive communications. **Communications is the central system that not only ties together all aspects of joint operations, but also allows commanders to command and control forces.** Therefore, the FHA plan must include procedures to provide for interoperable and compatible communications among participants. Commercial telephone networks, military satellite channels, and conventional military

C2 systems will support communication of directions, orders, and information. Commercial communications systems can be used to coordinate with other US agencies, disseminate meeting schedules, deconflict resource movement, and track logistics flow. **Direct communications between commanders and nonmilitary organizations should be established** to facilitate effective coordination and decision making. Information protection for nonsecured communications must be implemented. Additionally, communications systems planning must consider the termination or transition of US involvement and the transfer of responsibility to other agencies such as the UN or NGOs.

a. **Communications Security.** Communications may be **secured against monitoring if necessary through encryption or codes**, particularly in a hostile environment. Physical hardening, operations security (to include physical security) and redundancy reduce system failures stemming from sabotage and elements of nature. Communications security will also be complicated by the need to coordinate with other agencies (US and non-US) and multinational forces.

b. **Frequency Management.** Frequency management will **help allocate finite frequency availability**. Multinational forces and nonmilitary agency integration into the frequency management program should be deconflicted with security requirements. Telecommunications requirements and restrictions of the affected country should also be considered. The host government (if functioning) may control frequency management absolutely. FHA forces may not have exclusive use of frequencies.

c. **Interoperability. Identify communications equipment interoperability among all participants.** It is likely that non-DOD USG agencies, HN agencies, and multinational forces will have their own communications networks. These may include commercial leased circuits and satellite services as well as high frequency radio equipment. It is also critical that CMOCs are equipped with communication equipment that facilitate coordination with all participants. The need for interoperability of communications equipment in FHA operations may also necessitate using unclassified communications means during the operation.

d. **Reports.** Standardize similar communication reports to increase efficiency of operations.

e. **Lessons Learned.** These are some of the critical communications lessons learned from Operation PROVIDE COMFORT:

- Obtain adequate communications equipment to provide basic mission essential service;
- Employ additional equipment and reconfigure connectivity to provide direct routing to principal destinations;
- Add equipment to provide multiple routes to prevent site isolation;
- Have sufficient equipment to support airborne capabilities, respond to new missions, and avoid critical shortages; and
- Build in redundancy.

## 9. Reporting

The joint force staff will encounter numerous OGA, NGOs, and IOs that produce reports on the operating environment and joint force actions. The US Ambassador's cable, the USAID representative's reports, and OFDA DART reports are reviewed by the DOS and OGA. Additionally, other elements of the Country Team produce reports on the same issues about which the joint force staff reports. **The proliferation of reports may result in conflicting information, despite efforts to maintain accuracy.** One approach to deconflicting reports is to **develop a consolidated report between the joint force and the Country Team.** Such consolidated reporting will also serve to reduce administrative overhead while reducing opportunities for conflicting information to surface.

## 10. Measures of Effectiveness

The combatant commander should develop military MOEs that support the overall USG FHA mission. **MOEs should be developed for quantitative or qualitative standards as a means to evaluate operations and guide decision making.** Accurate and effective MOEs contribute to mission effectiveness in many ways. They help identify effective strategies and tactics, and indicate when to shift resources, transition to different phases, or alter or terminate the mission. MOEs should be driven by exit strategy, and are established to aid in determining when the joint force has met the criteria for transition of control and redeployment to home stations. MOEs assist the commander in determining when the situation has been returned to pre-disaster conditions.

a. **Developing MOEs.** There is no single all-encompassing checklist for MOEs for FHA operations. MOEs will vary according to the mission. However, commanders and staffs should keep certain factors in mind when developing and using MOEs in FHA operations. **Planners should ensure that MOEs possess the following characteristics.**

- **Appropriate.** MOEs should correlate to the audience objectives. If the objective is to present information to those outside the command, MOEs should be general and few in number; if the objective is to assist on-scene commanders (OSCs), then the MOEs should be more specific and detailed.
- **Mission-related.** MOEs must reflect the commander's desired end state and the specific military objectives to reach that end state. If the mission is relief, MOEs should help the commander evaluate improvements in living standards, mortality rates, and other related areas.
- **Measurable.** Quantitative MOEs reflect reality more accurately than non-quantitative MOEs, and hence are generally the measure of choice when the situation permits their use. When using non-quantitative MOEs, clear measurement criteria should be established and disseminated to prevent mismeasurement or misinterpretation.
- **Numerically Realistic.** MOEs should be limited to the minimum required to effectively portray the relief environment. Avoid establishing excessive MOEs; they become unmanageable or collection efforts outweigh the value.
- **Sensitive.** MOEs should be sensitive to force performance, and accurately reflect changes related to joint force actions. Extraneous factors should not greatly affect established MOEs.
- **Universally Understood and Accepted.** MOEs should be clear and consensus based among the various USG agencies, HN, and others to ensure that all concerned focus on efforts desired as well as the criteria for transition and termination of the military role.
- **Useful.** MOEs should detect situation changes quickly enough to enable the commander to immediately and effectively respond.
- **Valid.** MOEs should accurately measure the phenomenon intended. For example, "reports of human rights violations" might increase, but that increase could reflect a greater sense of security from retaliation, not an actual increase in attacks. Such a measure might be combined with survey results, hospital

records, etc. to ensure that the conclusions are valid.

b. **Possible MOEs.** MOEs in FHA operations could include:

- Drops in mortality rates in the affected population, below a specified level per day;
- Increase in water available to each disaster victim per day to various levels established for human consumption, to support sanitation measures, and for livestock consumption;
- Decrease the population of displaced persons in camps to a level sustainable by the affected country or non-US military organizations (Another aspect of this MOE is the increase in the number of persons per day returning to their homes);
- Decrease in incidence of disease to an acceptable or manageable level; or
- An increase in the presence and capabilities of NGOs and IOs.

c. As an example, during Operation SUPPORT HOPE, the joint force tracked several specific MOEs to ascertain when it had accomplished its assigned mission. These MOEs included:

- The refugee population in Goma dropped from 1,200,000 on 26 Jul 1994 to 575,000 on 26 Aug 1994 (Numbers of refugees were estimates only);
- The estimated mortality rate in Goma camps, based on bodies buried per day, dropped from 6,500 per day on 27 Jul 1994 to less than 500 per day on 1 Aug 1994;
- Cargo capacity at Kigali airfield increased from virtually zero on 30 Jul

1994 to 300-600 tons per day on 26 Aug 1994; and

- The number of UN agencies and NGOs, represented in Kigali grew from 6 on 22 Jul 1994 to over 60 on 26 Aug 1994. This increase represented adequate nonmilitary capability to provide FHA.

d. **USAID** has developed the following strategy for measuring results of FHA operations. The impact of HA cannot be measured only in terms of supplies shipped; the ultimate test comes from judging whether lives have been saved and communities revived. This is a complex and long-term process, and to find answers, USAID has developed the following four areas for assessing performance that must be addressed.

- **First, the structure for responding to disasters and to the needs of countries in crisis and transition must be in place.** Before crises occur, USAID — in close coordination with other agencies of the USG, multilateral agencies, and local authorities — will ascertain the following.
  - Have supplies been stockpiled and service providers identified? Are supplies secure from loss and theft? When USAID moves to deliver goods and services, will they go to the right place in the right amount with the intended effect?
  - Have the prevention, mitigation, and preparedness activities of USAID anticipated needs and are they effective? Have local communities and businesses been enlisted for planning, prevention, and response?
  - Do proposed shipments of supplies match and maximize local skills and capacities? In view of past disasters

locally and regionally, are preparations commensurate with likely needs?

- Are the partnerships and relations with the UN (including the WFP) understood by all? Are mechanisms in place to coordinate supplies, donations, and offers of skilled labor and ensure that they are delivered where and when they are needed?
- **Second, actual delivery of supplies and services must be timely and effective.** During crises, USAID and its partners will determine the following.
  - Do disaster relief supplies and services reach their intended destination in time to make a difference? Are all forms of emergency relief supplies readily available and accessible to the intended beneficiaries, including women, children, the elderly, local peoples, refugees, and members of minorities?
  - Do specific programs intended to save lives or reduce malnutrition, such as emergency feeding programs, have the intended impact?
  - Are profiteering and misuse effectively controlled? Are food and other relief supplies distributed so as not to discourage local production or distort local prices and markets?
  - Do programs of disease control and emergency medical services (including immunizations, child survival interventions, and maternal and reproductive health care) have access to necessary supplies and are they coordinated with food and nutrition interventions?
- **Third, in transitional and crisis situations, assistance must target the**

**institutions and needs critical to the resumption of sustained development, civil life, and democratic governance.** USAID and its partners will determine the following.

- Has the response to countries in crisis and transition been appropriate to their needs, political situation, and indigenous capacities?
- Have national and local political institutions been strengthened? Have key elements of the infrastructure, such as housing, communications, basic transportation, and financial services been reinforced? Are the specific needs of internally displaced persons and refugees being addressed?
- Has food security increased throughout the country? Do farmers have greater access to seed, fertilizer, and appropriate technology? Has local food production increased significantly and/or are more people able to acquire the income needed to purchase food?
- Has there been measurable progress toward national reconciliation and invigoration of the mechanisms of conflict resolution, as indicated by fair and open elections, constitutional conventions, new legal codes, reintegration of combatants, etc? Is there evidence of decreased disorder in cities and in the countryside? Is there increased respect for human rights?
- **Fourth, follow-on mechanisms, after relief and rehabilitation, must be in place to help prevent cycles of crisis and to permit countries to cope with their own natural disasters and political crises.** After the crisis stage has passed, USAID and its partners will determine the following.

- Is USAID, in conjunction with local authorities and communities, and multilateral institutions, developing and implementing long-term development programs that measurably enhance the ability of countries to anticipate and manage disasters? Are the economic, political, environmental, social, and institutional causes of manmade disasters being addressed?
- Have countries in crisis and transition made measurable progress toward a political and economic transformation?

HA activities ultimately must be measured by simple, yet profound standards; Do these activities prevent human misery that is avoidable? Do they provide relief for human

misery that is not? Does this assistance help countries that have suffered natural or manmade disasters and crises return to the path of sustainable development?

### 11. Intelligence

As shown in Figure IV-3, **intelligence and information gathering in FHA operations should be broadly focused** and include collection concerning political, military, paramilitary, ethnic, religious, economic, medical, environmental, and criminal indicators. The primary intelligence effort must focus on answering the commander's **priority intelligence requirements (PIR)** assisting in the accomplishment of the mission. While normally this will involve assessing potential threats to the FHA mission

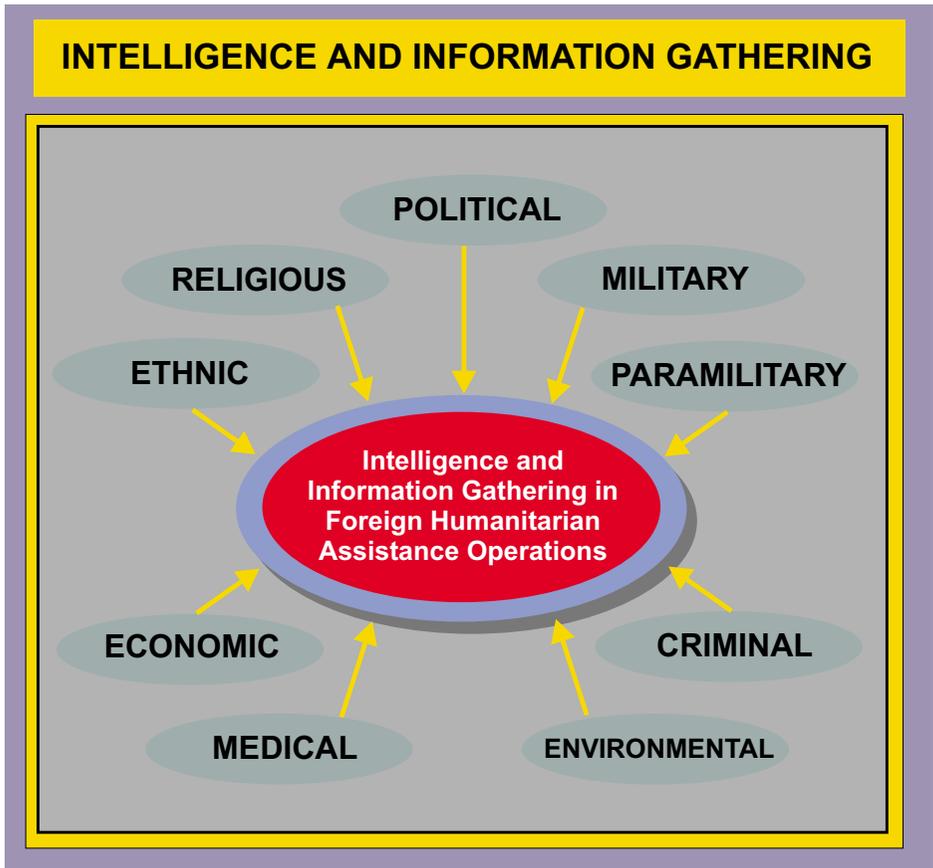


Figure IV-3. Intelligence and Information Gathering

(from forces external and/or internal to the affected population), the unique aspects of FHA operations may result in significant or even primary emphasis being placed upon logistic, medical, or political intelligence and/or intelligence support to CA and PSYOP. **Protecting the force will remain a high priority for intelligence collection.** Collection should not be equated with hostile penetration of a country's internal affairs; in fact, open sources may be an excellent source to determine agendas and patterns of operation and to identify factional territory. A comprehensive intelligence analysis can help commanders avoid hostilities during the conduct of FHA missions. Intelligence operations during FHA operations are generally conducted in the same manner as in any other military operation. **An intelligence architecture for the operation will be required** to enable the commander to fuse all-source intelligence in a timely manner, enhancing visualization of the operational space. Normal tasking and reporting channels should also be used. Provisions will have to be made for working with governments for which no previously established intelligence agreements exist and for exchanging security-related information with NGOs and IOs. Consideration must also be given to the use of, and growing dependency on, **imagery assets** in order to enhance information gathering and intelligence collection. **National, theater, and tactical collection systems** can be tasked to provide current **imagery** of the crisis area. Examples of how imagery can be used include determining the status of an area's transportation network following an earthquake or flooding and locating large groups of dislocated persons. Because of NGO and IO sensitivities regarding negative perceptions generated by working with military organizations, use of the term "information" vice "intelligence" must be used. Those organizations must not have the perception that their neutrality is

compromised by providing intelligence to the military. Finally, consideration should also be given to answering the intelligence requirements of adjacent task forces as well as theater- and national-level requirements. Classification and releasability standards for intelligence and/or sensitive information should be determined early in the planning process and reviewed as the operation proceeds.

## 12. Security

For the joint force, **force protection is a high priority.** Even in a permissive environment, the joint force can expect to encounter banditry, vandalism, and various levels of violent activities from criminals or unruly crowds. It is imperative that the joint force be trained and equipped to mitigate threats to US personnel. All deploying members should be provided with threat and/or force protection briefings prior to and throughout the duration of the operation.

a. As in any operation, **force protection in a FHA is enhanced by establishing effective** counterintelligence support and by practicing strict operations security. All available means of intelligence sourcing should be fused into tailored data useful to operational personnel for deployment planning, mission requirements, and other unforeseen taskings as they arise.

*Counterintelligence support will be conducted in accordance with JP 2-01.2, Joint Doctrine and Tactics, Techniques, and Procedures for Counterintelligence Support to Operations.*

b. In addition to force protection, **the joint force may also be tasked to provide security for other personnel and assets.** If not clearly stated in the mission, the extent of this security should be addressed in the ROE, to include protection of:

- Allied forces working jointly with the United States;
- USG, NGO, and IO personnel and equipment;
- HA recipients;
- Affected country personnel and assets;
- Humanitarian relief convoys, supplies, and main supply routes;
- Relief distribution centers;
- Stocks of FHA supplies; and
- Ports and airfields.

c. When an FHA operation occurs in an area torn by war or civil strife, **security operations may include removal of booby-traps, mine-clearing, and other ordnance disposal efforts.** For example, during Operation PROVIDE COMFORT, French forces provided explosive ordnance disposal (EOD) teams to clear mines emplaced during the Kurdish-Iraqi conflict.

**NOTE:** No member of the Armed Forces of the United States providing humanitarian and civic assistance (HCA) under title 10, USC, section 401 can engage in the physical detection, lifting, or destruction of land mines unless for the specific concurrent purpose of supporting US military operations.

d. Regardless of the environment, **security must be factored into force requirements and support capability.** In FHA operations, combat service support assets will require a substantial amount of their troops to protect unit and individual property.

### 13. Rules of Engagement

ROE are the directives issued by competent military authority that delineate the

circumstances and limitations under which US forces will initiate and/or continue combat engagement with other forces encountered.

**ROE define when and how force may be used.** CJCSI 3121.01A, *Standing Rules of Engagement for US Forces*, provides ROE that apply to US forces during all military operations, unless directed otherwise by the NCA. **For each specific operation the JFC, in conjunction with the J-3 and the legal advisor, develops ROE** (as soon as possible after notification of the deployment) **within the framework of the standing rules of engagement (SROE).** The proposed JTF ROE must be forwarded to the Joint Staff for NCA review and approval prior to promulgation. In many situations, the mission may require specific ROE measures in addition to the basic SROE. Supplemental measures in the SROE enable the commander to obtain or grant those additional authorities or restraints necessary to accomplish the mission. The JFC must submit the changes through the appropriate approving official. **When multinational forces are under US control, US commanders need to ensure that those forces interpret the ROE in the same manner as US forces.** When multinational forces are involved in the operation, but not under US control, US commanders should request that those forces adopt or agree to ROE similar to or compatible with those in effect for US forces. As a minimum, US commanders must understand the differences in the various participating countries' ROE and the impact on operations.

*Appendix A, "Legal Issues," further discusses ROE.*

### 14. Legal Considerations

Many aspects of FHA operations require scrutiny by legal experts. Key members of both the planning and operations staffs and **legal advisors should review and assist in preparing status-of-forces agreements (SOFAs), ROE, OPLANs, OPORDs, and**

**especially any agreements or memoranda of understanding** established between US forces and the affected country or nonmilitary organizations involved in FHA operations.

*Appendix A, “Legal Issues,” provides more information regarding FHA legal considerations.*

### 15. Liaison

**Direct, early liaison with UN and other humanitarian relief agencies is a valuable source of accurate, timely information on many aspects of the crisis area.** OGA, UN, NGO, or IO involvement is likely to precede that of US or multinational forces and presents an opportunity to significantly enhance early force effectiveness. A key additional benefit is an opportunity to build working relationships based upon trust and open communications among all organizations. For that reason, **ongoing liaison with other multinational forces** participating in the operation is equally important. FHA planners should ensure that an adequate number of competent linguists be available early in the operation for translation and/or interpretation services, both with other multinational forces and with the HN. Area-qualified CA personnel are well suited for liaison tasks.

*Appendix E, “Liaison Officer Procedures,” details responsibilities of a military LNO.*

### 16. Media

a. Public information presented through the media promotes national and coalition policies, aims, and objectives in humanitarian operations. Explaining what the United States intends to achieve and why it is important helps gain public understanding and support for the operation. This also helps opponents understand what the United States and its coalition partners expect. **The way to effectively orchestrate these strategic**

**communication efforts is laid out in Presidential Decision Directive (PDD) 68, *International Public Information (IPI)*.**

- The goal of this directive is to ensure that all agencies of the federal government work toward a common goal by speaking with one voice that communicates a consistent message to the international audience. It helps the United States coordinate its messages and “get out in front of a crisis,” rather than taking a reactive stance. The idea is to pro-actively provide information to the media, with one organized and orchestrated effort to get friendly messages across through all relevant USG agencies.
- The directive establishes an interagency core group (ICG) to integrate the PA activities of all government departments into an overall communication strategy to deal with a humanitarian operation. It is headed by the Under Secretary of State for Public Diplomacy and Public Affairs.
  - Participants in the ICG include assistant secretary-level representatives from the State Department, Secretary of Defense, Joint Chiefs of Staff, USAID, National Intelligence Council, NSC, and other offices or agencies as the situation requires. The ICG establishes sub-groups to address regional issues or deal with crises as they arise.
  - Information from the ICG, the Department of Defense, and various levels of command is disseminated through PA guidance. This guidance is essential to ensure consistency across the entire spectrum of the global information environment. The guidance changes weekly, daily, or hourly as the political and military situation changes. Commanders should strive for the

release of consistent information and messages at all levels of command. One effect of the global information environment is that the public can simultaneously receive information about military humanitarian operations from a variety of military units. Sources in theater and at the Pentagon are often quoted in the same media reports. Conflicting messages or information can cause skepticism and undermine public trust and support for the operation. Commanders should ensure that the JTF puts forth a consistent message through its many voices. Information and messages should be appropriately coordinated and be in compliance with official DOD, supported command, Service, and major command guidance before it is released to the public. Commanders at all levels should serve as the primary spokespersons for the humanitarian operation, using key messages developed by the ICG and PA guidance from the Department of Defense and the various levels of command.

**b. The JFC and staff should expect and prepare for extensive media coverage during FHA operations.** Visual media in particular can significantly influence public opinion. A positive image is a force multiplier; therefore, media coverage of improved conditions will help sustain public support and also build morale. Some images may have negative connotations for the media if they are not used to covering FHA operations. For example, barbed wire used to maintain a secure area to keep groups of displaced persons segregated from each other and the local population could be viewed as similar to concentration camps by media not familiar with FHA operations. Therefore, the reasons and problems associated with this should be explained to the media.

c. While negative media coverage can adversely impact FHA operations, members of the joint force should avoid giving the impression that continued access hinges upon favorable reporting. The only expectations should be that reporting is **objective**, it **subscribes to the fairness doctrine** (fair and unbiased reporting), and it **respects the rights and dignity of others**.

d. **The media should have as much access as possible throughout the operation**, necessitating a refined PA strategy. This may be achieved by **establishing a JIB** within the operational area. The information operations cell will ensure that there is centralized information dissemination and close coordination between the JIB and other participating agencies and organizations. Effective interagency channels of communication are a byproduct of this coordination. Additionally, force commanders should plan media support.

e. **PA personnel should monitor military contact with the media.** Such contact can have significant impact at all levels for the United States and its friends and allies, especially since the world image and its perception of the operation may change based on media coverage, as learned during other FHA operations.

f. Some **techniques or guidelines for dealing with the media** include the following.

- **Understand and use PA and media resources.** PA personnel should serve as advisor to and spokesperson for the JFC on media matters.
- **Remain within a defined area of expertise and recognize limits of authority and responsibility.** Overextension of either can negatively

impact the mission. Unit members should limit discussions with media to issues within their immediate knowledge and operations experience. Media queries beyond this guidance should be referred to the unit public affairs officer (PAO).

- **Know the rules.** Rules governing information treatment should be understood throughout the chain of command. Ensure that restricted information is defined and protected.
- **Don't build unrealistic expectations** of upcoming operations through comments made to the media.
- **Project humility.** Include the "team" when describing accomplishments, i.e., multinational forces, OGA, HN, UN, NGOs, and IOs.
- **Provide accurate information** (within operations security constraints) as soon as possible. Don't attempt to hide bad news. Keeping commitments made regarding media announcements is critical to favorable media reporting.

- **Refer reporters to the unit PAO or spokesperson** when receiving a request for an interview or for information going beyond published guidelines established in DOD Public Affairs Guidance for the contingency.

*Refer to JP 3-61, Doctrine for Public Affairs in Joint Operations, for additional information.*

### 17. Command Information

Commanders must fill the information needs of their personnel. **Providing effective command information is a critical element in maintaining morale and unit effectiveness.** Military personnel need information about the environment in which they are operating. They need to know that their contribution to FHA is valid, moral, and supported by the American people. The role of command information cannot be underestimated or minimized.

### 18. Dislocated Civilians

**An FHA operation will often involve dislocated civilians and refugees in**

#### OPERATION SHINING HOPE

In the spring of 1999, Serbian aggression in the Balkans forced hundreds of thousands of ethnic Albanians to flee their homes in Kosovo and seek refuge in neighboring countries. US European Command established Joint Task Force SHINING HOPE to support refugee humanitarian relief. Planning, design, and construction of three camps in southern Albania capable of supporting 60,000 refugees began almost immediately. United States Air Forces in Europe civil engineers, using contractor support through the Air Force Contract Augmentation Program and along with Navy Seabee forces, completed one 18,500-person camp in just 51 days with two additional camps well underway. Lessons learned from this experience stress the importance of early, active, and continuing involvement of the United Nations High Commissioner for Refugees, United States Agency for International Development, and the nongovernmental organizations who will eventually operate the camp. This is essential to appropriately balance and incorporate the needs of the refugee population to be supported.

VARIOUS SOURCES

**particular.** International law prohibits the forcible return of refugees to their country of origin or to any country where life or freedom would be threatened on account of race, religion, nationality, membership of a particular social group, or political opinion. The joint force role in providing for and protecting these groups will depend on the mission. In rare instances, joint forces may be called upon to establish refugee/displaced person camps in an HN. In these cases, the JTF must take into account: legal considerations regarding availability and ownership of land for camps; coordination with the HN, UN, NGOs, IOs, and OGA; logistic factors connected with shelter, food, and medical care; and possible contracting requirements for construction. If called upon to establish and operate camps, the joint force can refer to the *United Nations High Commissioner for Refugees Handbook for Emergencies* and the *United States Joint Forces Command Tactics, Techniques, and Procedures for Migrant Camp Operations* as excellent references. **The general policy of the UN is that where refugees are present, the affected country will provide security, safety, assistance, and law and order.** Additionally, military forces are not normally present in camps run by UNHCR. UNHCR will, upon government request, normally provide material assistance and protection to refugees. The ultimate goal is to return dislocated civilians to their homes. Although typically involved in the early response to a crisis involving dislocated civilians, **US forces may be tasked by the NCA to provide any portion of this assistance.**

*Appendix A, “Legal Issues,” provides additional information regarding the legal aspects of dislocated civilians.*

### 19. Medical Support

For the joint force, force health protection is a high priority. **Over 90% of casualties in**

**modern warfare scenarios have been as a result of disease and nonbattle injury (DNBI) as opposed to battle injuries.** Food, water, blood products, high levels of industrial pollution, and indigenous diseases combine to provide a high-risk environment for all assigned personnel. Medical forces are normally deployed with the joint force to provide medical care for the deploying US forces. US military medical personnel do not routinely care for refugees unless specifically authorized. If authorized, US forces may also provide health care to foreign civilian populations on an urgent or emergent basis (within resource limitations) and return them to their national health systems at the earliest opportunity or when services can be provided by other agencies and organizations (NGOs). FHA operations may place US forces in situations that may substantially increase the risk of DNBI. Exposure to foreign civilian populations potentially carrying endemic diseases as well as disease outbreaks as a result of a natural disaster are all factors increasing the DNBI risk. DODD 6490.2, *Joint Medical Surveillance*, and DODD 6490.3, *Implementation and Application of Joint Medical Surveillance for Deployments*, mandate that the Department of Defense monitor and identify both long- and short-term health effects of US forces during deployments. This requires that the JTF have robust preventive medicine assets to perform medical and environmental health risk assessments and identify effective preventive medicine measures to counter the threat to US forces. In addition, the significant roles that public health and communicable disease control play in FHA missions further support the need for robust preventive medicine assets.

*For additional considerations for providing HSS in FHA operations, see Appendix G, “Health Service Support in Foreign Humanitarian Assistance Operations.”*

## 20. Religious Ministry Support

**The structure of the joint force should include adequate religious ministry support for the deployed force.** Religious ministry support refers to the full spectrum of professional duties, to include providing for or facilitating essential religious needs, spiritual care, and programs to enhance morale, as well as the moral and personal wellbeing of deployed personnel. Some guidelines for planning **chaplain support** during FHA operations include the following.

- In multinational operations, chaplains have primary responsibility for providing **ministry** and **pastoral care** to their own nation's Services.
  - In coordination with medical personnel, chaplains may serve as a resource to the commander for the conduct of predeployment **stress management**, **"trauma debriefing"**, and **counseling** during execution of the operation.
  - Chaplains may provide the **religious rites**, consistent with their faith, for **mass burial** if required.
  - When appropriate, and in coordination with the CMOC, **chaplains may serve**
- **as liaison** with NGOs that have a religious affiliation. Additionally, chaplains can assist in the **coordination for distribution** of HA supplies arriving from churches and other religious organizations. It is recommended that chaplains document the following items to ensure accountability:
    - Who provided the donations;
    - Where they were issued; and
    - Identity of recipients.
  - In coordination with CA personnel, chaplains may provide **pastoral support to refugees and dislocated civilians** only when directed by the JFC after consultation with the Staff Judge Advocate (SJA). In such cases, it is critical to avoid any activities that can be construed as proselytizing among refugees or displaced persons for one particular faith. The chaplain pastoral mission generally is limited to US military and DOD civilian personnel and, if required by the circumstances, to fulfill any obligation the JFC may have to protected persons under international law.

### OPERATION RESTORE HOPE

During Operation RESTORE HOPE, the Somalia Joint Task Force Support Command was responsible for morale, welfare, and recreation (MWR), yet had no authorized resources to do so. Experienced units prepared and fared well through D+45, but afterwards expendables required replacing. Coordination through the Third US Army with the Army Air Force Exchange System and Armed Forces Radio and Television Service resulted in recreation equipment being replenished, establishment of a film library, and radio and television broadcasts. Most of these programs were funded with nonappropriated funds (NAFs). In some cases, NAFs are not available to fund MWR programs, leaving only mission or contingency funds for this consideration.

Various Sources

*For more detailed information on religious ministry support, refer to JP 1-05, Religious Ministry Support for Joint Operations.*

### 21. Morale, Welfare, and Recreation

Morale, welfare, and recreation (MWR) programs are essential in order to relieve stress and raise morale. Additionally, MWR programs can enhance force protection when a force is operating in a hostile environment by providing activities for the troops in a secure area. **The joint force must have the capability and mechanism to assess, plan, fund, and deliver MWR to US and if required, multinational forces as well.** The combatant command Manpower and Personnel Directorate (J-1) has the responsibility to coordinate external MWR support to a joint force, and the J-1 has responsibility within the operational area. The JFC may designate one component command as executive agent to provide external MWR operational and logistic support to a designated joint force. **MWR for FHA operations and other contingency operations should be funded by Service component commands through appropriated funds.** While nonappropriated funds (NAFs) such as unit funds may be expended in conjunction with contingency operations, use of other NAFs may not be desirable because there is currently no legal authority for reimbursement of NAF accounts.

*Additional information regarding MWR support may be found in JP 1-0, Doctrine for Personnel Support to Joint Operations.*

### 22. Change of Mission

**Periodic review of the mission statement will determine whether the force's actions still support the NCA and supported JFC's intent.** The JFC must be prepared to react to a change of mission during an FHA operation,

as directed by the chain of command. The JFC must also guard against an unintentional change of mission, sometimes referred to as "mission creep." A **clearly articulated end state** and **appropriate MOEs** help the JFC protect against this phenomenon. Other organizations involved in the operation may have differing views of the desired end state, and request support from the joint force that falls outside the stated mission. Although these requests may seem logical and within the joint force's capabilities, the JFC must be pragmatic when dealing with these organizations' attempts to change the joint force's mission without NCA direction.

### 23. Transition or Termination

**Transition or termination occur when either the mission has been accomplished or when the NCA so directs.** Criteria for termination or transition may be based on **events, MOEs, availability of resources, or a specific date.** A successful harvest or restoration of critical facilities in the crisis area are examples of events that might trigger termination of the mission. An acceptable drop in mortality rates, a certain percentage of dislocated civilians returned to their homes, or a given decrease in threat activity against the FHA operation are statistical criteria that may prompt the end of US forces' involvement. When other organizations (such as OFDA, UN, NGOs, and IOs) have marshalled the necessary capabilities to assume the mission, US forces may execute a transition plan.

a. **Transition may occur between the joint force and a variety of elements**, such as the affected country, the UN, or other nations' forces. A detailed plan addressing the various FHA functions and to whom they will transition will greatly reduce the turmoil typically associated with transition. A **comprehensive transition plan** includes specific requirements for all elements involved in the transition, summarizes

capabilities and assets, and assigns specific responsibilities. An unclassified transition plan written in easily understood terms, not loaded with military jargon, is particularly required when transitioning to nonmilitary organizations. Organizing the plan by specific FHA functions (such as provision of food, restoration of facilities, and medical care) also enhances the transition. **The joint force staff should periodically review the transition plan** with all organizations that have a part in it. This will help ensure that planning assumptions are still valid, and determine if changes in the situation require changes in the transition plan.

b. **Termination plans should cover transition to post-disaster or emergency**

**activities and conditions as well as disposition of military forces.** Operation plans and termination plans should be prepared simultaneously and in conjunction with the deployment plan, with the termination plan serving as a supporting plan to the OPLAN.

c. **Mission transition planning will be continuous and will be accorded equal priority with execution planning.** At the outset, the joint force will work in close cooperation with the supported combatant commander, HN, and other participating agencies to define the desired end state of the involvement of US military forces in these FHA and disaster relief operations. Universally understood and accepted MOEs

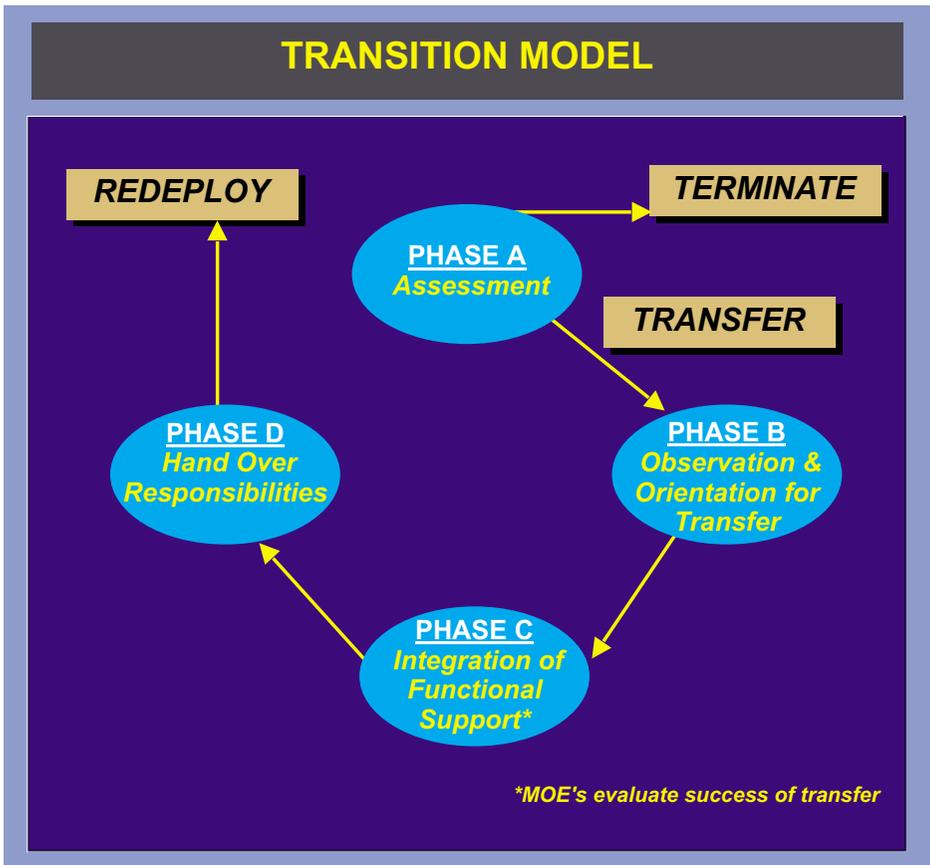


Figure IV-4. Transition Model

will be developed that indicate achievement of each element of the end state and provide the basis for timely and orderly redeployment of the joint force, while preserving continuity in the long-term relief operations.

d. **Concept of Transition.** Mission transition planning will be continuous throughout the operation. Specifically, it identifies the functions and tasks being performed by the joint force and determines which functions may be terminated when either the requirement no longer exists or is transferred to the HN or others. The transition plan consists of four phases (see Figure IV-4).

- **Phase A — Assessment:** identifies the functional tasks that require transfer or termination along with the organizations that agree to accept the transfer.
- **Phase B — Observation and Orientation:** familiarizes transfer organizations with the transfer tasks.
- **Phase C — Integration:** increases the level of HN and/or relief organization involvement while proportionally decreasing the level of involvement by the joint force. Use of mutually agreed-upon MOEs to build support for functional tasks will help expedite the integration phase.
- **Phase D — Hand Over:** consists of a complete transfer of tasks to either the HN or relief organizations. Completion of Phase D is the condition for transition to redeployment. An engagement plan for relief organizations supports all four phases of transition to encourage early commitment and participation. This plan would comprise confidence building measures, selected elements of the public affairs plan, and selected elements of military information operations. Confidence-building activities might

include such activities as training humanitarian relief workers in radiation monitoring techniques and decontamination procedures during CM of a nuclear incident or other activities specific to a particular FHA operation.

e. **Phasing the Transition**

• **Phase A — Assessment**

•• **Concept.** The assessment phase consists of a review of the functional tasks being performed by the joint force and determines whether these tasks can be terminated or transferred. This process is conducted in conjunction with, and with the concurrence of, the DOS through the US Ambassador. This phase also identifies the agencies, HN, or humanitarian relief organizations (HROs) most capable and willing to assume the functional tasks performed by the joint force. This phase is complete when all functional tasks have been identified for either transfer or termination and the HN and/or HROs have been identified and accept responsibility for performing that functional responsibility.

•• **Intent.** The purpose of this phase is to review the functional tasks performed by the joint force and determine which long-term tasks will be handled by the HN and the HROs. The method is to identify functional tasks for either transition or termination. Once determined for transition, the appropriate HN and HRO is identified to assume that functional responsibility. The end state is achieved once the long-term transfer tasks have been identified and affiliated with the agency or organization willing to accept responsibility.

• **Phase B — Observation and Orientation**

•• **Concept.** This phase builds on the analysis and agreements obtained in Phase A. The organizations identified for transfer duties will observe the functional tasks that the joint force is currently performing. The objective is to effect a seamless transfer of functional tasks from the joint force to transfer organizations without any loss of support or international commitment. This phase is complete when transfer organizations have their required assets in place in accordance with the timeliness previously agreed upon. Care should be taken during this phase to ensure that the nonmilitary audiences involved do not perceive joint force efforts as a way to impose military procedures on their own time-tested approaches. In some cases, joint force elements may be performing civilian tasks because of a lack of civilian resources rather than lack of civilian skill. In fact, many civilian FHA skills may be superior to those of military personnel.

•• **Intent.** The purpose of this phase is to orient and familiarize transfer organizations with the functional tasks being performed by the joint force. When necessary for use, the method is to educate, orient, and train or familiarize the HN and HRO's leadership on the functional tasks and methods employed by the joint force. The end state is the alignment of the HN or appropriate HRO with the component of the joint force currently performing the assigned function.

### • Phase C — Integration

•• **Concept.** Integration is defined by the HN and HROs' participation in functional tasks supporting the HN, not the HN and HROs' integration into the joint force. The integration phase initiates the direct involvement of the HN and HROs in the functional tasks

being performed by the joint force that will require long-term continuation. The objective is to increase HN and HRO levels of support (within their capabilities) until they assume full responsibility for the functional support. Progress is quantified by the percentage of functional task support provided by each agency over time. This phase incrementally increases the level of involvement by the HN and/or HROs while proportionately decreasing the level of involvement by the JTF. The use of universally understood and mutually accepted MOEs will facilitate integration of the HN and HROs by building mutual support for the functional tasks. This phase ends when all functional elements performed by the joint force are capable of being transferred to properly trained, equipped, and capable organizations.

•• **Intent.** The purpose of this phase is to initiate and progressively increase the level of support provided by the HN and HROs until they are capable of sustained operations in their assigned functional area. Critical to this integration is the continual monitoring of the MOEs to ensure no lag or loss of support to the HN. The method is to progressively increase levels of HN and HRO involvement in performing joint force-run functional tasks. The end state is realized when all functional tasks are being performed by non-joint force organizations, fully trained, equipped, and capable of performing sustained operations.

### • Phase D — Hand Over

•• **Concept.** The hand over phase culminates with the end of joint force direct involvement in humanitarian support to the HN. The objective is a seamless transfer of responsibility for

functional tasks from the joint force to the HN or HROs. These organizations must also be fully trained, equipped, and capable of assuming their functional tasks over the long term. These organizations must also be perceived by the public as being credible and capable of performing their assigned functional tasks. Progress is marked by the hand over of specified functional tasks to non-joint force organizations. This phase ends when all functional areas performed by the joint force have been successfully assumed by either the HN or HROs.

•• **Intent.** The purpose of this phase is to hand over all functional tasks performed by the joint force to either the HN or HROs. The method is to train capable HN agencies or HROs, incrementally increase their involvement, then disengage when they reach a mission-capable state. The end state is realized when all functional tasks are being performed by non-joint force organizations without the presence of the joint force.

## 24. Redeployment

**Redeployment planning should be conducted simultaneous to joint force deployment.** Redeployment considerations depend upon mission accomplishment and diminished requirements for military support. FHA functions conducted by the joint force should be transferred to humanitarian relief agencies when the capability exists for transition without support degradation. Redeployment by function is efficient and ensures that **each FHA requirement is met or responsibility is assumed by other entities** (affected country, UN, NGOs, or IOs). Commanders should continually evaluate mission requirements and redeploy unnecessary forces as soon as possible. Personnel rotation plans should also be

considered for operations conducted over extended time periods.

## 25. Consequence Management

### a. General

- DOD support to CM has much in common with disaster relief procedures, as discussed previously. DOD support to foreign CM operations is concerned primarily with specialized assistance provided in support of DOS, the LFA, or in response to the use of a CBRNE WMD against an ally, regional friend, or a vital interest of the United States. US forces may conduct operations in a designated JOA to minimize the damage stemming from incidents involving the deliberate or inadvertent release of CBRNE contaminants and/or detonations of conventional high explosives causing significant civilian casualties or damage to critical infrastructures. These are CM operations for the purpose of this publication.
- Crisis management operations may also be conducted in conjunction with or preceding CM operations.

*Tactics, techniques, and procedures for CM operations are found in JP 3-07.2, Joint Tactics, Techniques, and Procedures for Antiterrorism, CJCSI 5113.01, CJCS Counterproliferation Charter, and CJCS Counterproliferation Strategy as well as related documents and plans.*

b. **Interagency Operations.** The primary responsibility for managing and mitigating the effects of a foreign WMD incident resides with the HN government. Once the HN requests US assistance, DOS serves as the LFA for the operation. DOD support will be part of the US response and will be coordinated through the appropriate COM and the Country Team. DOD support to

foreign CM provides needed assistance until such time as other agencies can assume CM missions and tasks; then US forces can return to their warfighting posture. DOD CM support will be provided according to one of the following scenarios.

- **HN-Requested Assistance.** A sovereign government requests assistance directly from the United States through the resident COM, and the NCA directs the Department of Defense to commit assets or forces to assist, augment, and complement the HN's indigenous CM efforts. In this scenario, all DOD assets would be placed under the command of the combatant commander. All USG support would be coordinated by the resident COM and the Country Team.
- **International Relief Effort.** A sovereign government requests assistance through the UN or an internationally recognized regional alliance council and the NCA directs the Department of Defense to furnish assets as part of a multinational relief force. In this scenario, all DOD assets would be commanded by the combatant commander. The provision of USG support would be governed and coordinated by existing or special agreements or arrangements.

c. **Multinational Operations.** In most cases, the United States will not conduct these operations unilaterally, but with HN, allied, or coalition forces, or as part of a multinational relief effort. Also, multinational and bilateral agreements may exist, which may contain stipulations for providing emergency or disaster relief assistance. Multinational considerations for combatant commands include the following.

- Exact composition, disposition, and readiness state of potential allied or coalition relief personnel and equipment.

An accurate assessment of US, allied, coalition, and HN capabilities and limitations to conduct operations should indicate what additional or special personnel and equipment may be requested.

- Precise delineation of what each member of a particular multinational force has agreed to provide (e.g., personnel, equipment, supplies) under the auspices of existing bilateral agreements.
- Multinational procedures for activating, mobilizing, and deploying relief forces. In addition, individual nation member mobilization capabilities and adequacy of organic transportation assets must be understood to forecast alliance response times.
- Validating and, where necessary, establishing liaison with multinational relief agencies and military commands.
- Unique capabilities and limitations of each multinational structure. Combatant commands may find it useful to develop and maintain a readily accessible database detailing what each nation in a particular multinational structure is capable of providing in support of operations (e.g., decontamination capabilities and doctrine, level of training in decontamination operations, types of earthmoving equipment available, specialized medical expertise available, medical supply limitations).

d. **Joint Operations Area.** For deliberate planning, a combatant commander will designate the JTF JOA. It should include its land, sea, and air space. If necessary, the NCA may designate, limit, or redefine existing AOR boundaries to accommodate the JOA. The specific JOA will be coordinated with the combatant commander and designated in the CJCS Warning Order.

e. **US Force Planning.** A JTF may be activated and employed to support a joint force in response to a foreign CBRNE incident (see Chapter II, “Organization and Interagency Coordination,” paragraph 3j). A combatant command’s initial planning tasks include identification and designation of command and force structures and staffs. Combatant commanders will identify required forces and formulate force augmentation requirements to the Joint Staff for resolution. Incident-specific JTFs may be developed and comprised of force modules that can be added to or deleted from based upon incident severity and magnitude. Such a force might include, for example, a joint radiological control group comprised of expert personnel from the Defense Threat Reduction Agency, Department of Energy (DOE), Service NBC units, and the Armed Forces Radiological Research Institute. Such an organization would have capabilities for training, decontamination, aerial and ground monitoring and survey, predictive modeling, and hazards and effects planning. Factors affecting JTF force organization and allocation include the following.

- Scope of the anticipated mission.
- Anticipated threat to be encountered during deployment, employment, and redeployment.
- Forecasted reaction time.
- Geographic location, size, and nature of the management task and objective.
- Political situation in the region and nation involved.
- Special requirements, e.g., equipment and technical expertise.
- Availability and readiness of combat support and augmentation forces.

- Availability of communications support.
- Presence or absence of permanent combatant command headquarters in theater.
- Availability, deployability, and sophistication of allied, coalition, HN, and other resources.
- Availability of pre-positioned stocks (e.g., protective clothing, decontamination supplies and equipment, chemical and biological detection equipment, vaccines, et. al.)
- Anticipated augmentation from allied or coalition nations, to include an evaluation of their readiness. Multinational training programs may enhance the readiness of potential contributors and multinational interoperability.
- Anticipated support from international contracting businesses. In some cases, resources available for hire from international or regional firms may be used to reduce the commitment of resources from the United States. Combatant commands should consider the availability of such firms active in a particular AOR, establish liaison, formulate pre-arranged contracts for activation during times of crisis, and develop in-place mechanisms for acquiring contracting support prior to a crisis.

*Further examples of incident-specific JTF and functionally designed force modules are in Appendix L, “References.”*

f. **Activation and Deployment.** Requirements used in joint operations apply to these operations, but will be especially critical because of the nature of consequences involved; that is, mass destruction.

g. **Conduct of Operations**

• **Pre-positioning of CM Forces.**

Combatant commanders may consider the pre-positioning of CM forces when developing regional CM plans. The NCA may direct that CM forces be pre-positioned at the site of a potential NBC incident or to an intermediate staging location. Combatant commanders' planning should include stipulation for activation, marshalling, and movement of the JTF or selected components to a particular incident site or staging base. Pre-positioning of CM assets facilitates immediate assistance to the HN forces in the event the incident cannot be prevented through other means.

• **Phases of Operations and Planning Tasks.** CM operations may be designed around the following phases.

•• **Phase I. Situation Assessment and Preparation.**

When authorized by the NCA, each combatant commander will provide the Department of Defense's initial response to any foreign WMD incident. This initial response may be limited to deployment of a headquarters element capable of conducting a situation assessment or evaluation. This headquarters element will form the nucleus for subsequent DOD support and may assume C2 of DOD assets committed to help resolve a CBRNE incident. This phase might typically involve the following actions: (1) Determine incident type; (2) Conduct mission analysis and activation of C2 structure or CM forces for immediate response; (3) Determine availability of combatant command theater and continental United States (CONUS)-based assets; (4) Determine adequacy of existing HN plans to resolve CM incidents and status of HN, allied,

international, and nongovernmental assets responding to the incident; (5) Determine status and availability of required movement assets; (6) Conduct necessary medical preparation of US forces; (7) Prepare initial PA guidance and plan formulation; (8) Identify deficiencies in SOFAs that provide for protection of US personnel; (9) Identify and prepare required forces for deployment; (10) Establish liaison with USG, HN, and other agencies and organizations assisting the HN; and (11) Establish liaison and coordination mechanisms with technical organizations within the interagency or nongovernmental arena who may deploy concurrently with the initial foreign emergency support team or other immediate response (such as the consequence management response team (CMRT), or the International Atomic Energy Agency). (12) Begin planning transition of responsibilities and redeployment of US forces by establishing measurable conditions for termination of military support and identifying civilian agencies to assume those responsibilities.

•• **Phase II. Deployment.** Phase II begins with the CJCS Deployment Order designating command relationships and forces to deploy and ends with arrival of forces at incident and supporting locations. The level and type of subsequent DOD assistance will be determined by the type, severity, and location of the incident, by indigenous HN capabilities and requirements for assistance, and by the availability, readiness, and warfighting posture of military forces. Depending upon NCA guidance, the affected combatant commander must be prepared to push assigned and available assets to the incident site to provide immediate

assistance and continue support to deploying forces in theater until all required forces arrive.

**•• Phase III. Assistance to Civil Authorities.** During this phase, the following tasks would most likely be performed: (1) Be prepared to assume responsibility for the transportation of recovered WMD; (2) Conduct NEO; (3) Assist in isolating the incident area; (4) Validate sampling efforts; (5) Determine downwind or fallout hazard; (6) Assist in the evacuation of civilians from the incident site and surrounding area; (7) Provide security for relief personnel and facilities involved in incident response; (8) Provide advice and assistance to local medical authorities; (9) Assist in conducting triage and providing emergency medical treatment for initial casualties; (10) Assist in providing mortuary support; (11) Assist in search and rescue operations; (12) Assist in decontaminating personnel, equipment, and facilities involved in initial response operations; (13) Assist in initiating a public information campaign to provide necessary information to affected civilians as well as to global and regional media; (14) Coordinate military operations with the civilian response effort; and (15) Assist through CA activities and identify other specialized support requirements. As the operation continues, US forces may: (16) Continue to assist in isolating the incident area; (17) On NCA direction, be prepared to receive additional forces based upon incident severity; (18) Assist in establishing displaced civilian centers; (19) Assist with mortuary affairs and casualty recovery, classification, and processing; (20) Assist in removal and disposal of contaminated debris; (21) Assist in infrastructure repair to facilitate CM operations; (22) Assist in reconstruction

efforts to minimize long-term disruption to civil society; (23) Assist in decontaminating personnel and equipment engaged in CM operations; (24) Continue to assist with PA and CA activities; and (25) Establish and monitor conditions for termination of US military support and transition of tasks to US, HN, or other agencies.

**•• Phase IV. Transition to Civilian Agencies.** Based on NCA guidance, hand off CM operations to HN, allied, UN, or other personnel to complete CM mission.

**•• Phase V. Redeployment.** Redeploy CM forces in accordance with NCA guidance.

h. **DOD CM Resources.** Commanders responsible for planning and executing CM operations can request support or augmentation from a variety of organizations that provide military technical expertise for specific incidents. Examples of some of these include the following.

- **Joint Technical Augmentation Cell (JTAC).** Commander in Chief, United States Joint Forces Command coordinates a cadre of deployable experts designed to advise and assist combatant commanders tasked to conduct foreign CM operations. The JTAC integrates personnel with specialized areas of CM expertise from combatant commander-assigned, Service, and defense agency organizations into a single, on-call, CM planning cell to support combatant commanders. The JTAC possesses organic WMD CM technical expertise in agent analysis and mitigation, contamination reconnaissance, decontamination, and specialized medical advice. The JTAC also possesses access to additional expertise resident in

CONUS-based facilities through a communications network with “reach-back” capability.

- **US Army Technical Escort Unit (TEU)**

- The TEU provides a worldwide, no-notice capability to conduct field sampling, identification and verification as well as monitoring, recovery, decontamination, escort, and mitigation of hazards associated with chemical-biological (CB) materials in compliance with international, Federal, state, and local laws. The capabilities of the TEU are multifaceted to include: technical escort of CB agents, material, and munitions; technical escort of suspected CB agents specimens and samples for laboratory analysis to identify and confirm the use of these agents; render safe and/or dispose of weaponized CB munitions and material; conduct technical intelligence exploitation of foreign CB munitions and material; provide CB response teams to government agencies as required to support national and/or international counterproliferation policy; and operate in hazardous environments.

- TEU’s basic operational element is the chemical-biological response team (CBRT). The unit can deploy CBRTs from Aberdeen Proving Ground, Maryland; Dugway Proving Ground, Utah; and Pine Bluff Arsenal, Arkansas. In general, each CBRT is comprised of 12 CB and EOD specialists, but the team composition can be tailored to the mission. The CBRT can be deployed to suspect or actual incidents involving CB agents, munitions, and other hazardous materials. The TEU’s CBRTs maintain a rapid response capability in detection, decontamination (neutralization), containment (packaging), dismantlement

(render safe), and disposal (transport and escort only) of WMD containing CB agents or related materials. The CBRT also maintains an information “reach-back” capability to TEU’s emergency operations center for communications with CB agent, explosive ordnance, and disaster response subject matter experts. The TEU’s CBRT teams maintain specialized equipment to accomplish their assigned mission.

- **US Army Medical Research Institute of Infectious Diseases (USAMRIID)**

- This organization conducts research to develop strategies, products, information, procedures and training programs for medical defense against biological warfare (BW) threats and infectious diseases. It develops products such as vaccines, drugs, diagnostic tests, and medical management procedures to protect military personnel against biological attack or against endemic infectious diseases and provides medical and scientific subject matter experts (SMEs), and their technical expertise and guidance concerning prevention and treatment of hazardous diseases and management of biological casualties. The USAMRIID serves as the DOD and NCA reference center for identification of biological agents from clinical specimens and other sources.

- USAMRIID has many capabilities that can be employed for assessing and evaluating a biological terrorist incident, from initial communication of the threat through incident resolution. The primary capabilities provided by USAMRIID are intellectual capability (consulting), extensive fixed confirmatory and reference laboratory facilities, and the Aeromedical Isolation Team (AIT).

• • USAMRIID can provide two personnel — a medical doctor with expertise in management of casualties caused by BW agents, and a scientist with laboratory and scientific expertise on BW agents — to participate in the initial response to a potential or known biological incident. The intent of providing the SMEs is to aid in evaluating the threat, aid in characterizing BW agents, assessing impacts resulting from dissemination, identifying protection and treatment strategies, and formulating medical and operational plans for CM and diagnostic support. USAMRIID's extensive laboratory facilities offer confirmatory and reference capabilities for use by Naval Medical Research Institute's mobile laboratory and any other agency requiring such services. In addition to the laboratory and BW agent expertise, a limited capability exists to transport one or two biological casualties requiring specialized containment to a medical containment care facility located at USAMRIID with the support of the AIT. The facility has a 16-bed ward with a capability of isolating up to biocontainment level (BL) 3 infectious diseases in a contingency situation. The facility also has a special BL 4 containment care facility with a maximum capacity of two beds and offers additional specialized care capabilities, to include limited intensive care.

- **Aeromedical Isolation Team.** The AIT's mission is to maintain the personnel, skills, and equipment necessary to transport and provide patient care under high containment for a limited number of individuals exposed to or infected with highly contagious and dangerous diseases that are a result of naturally occurring organisms, BW agents, terrorism, and possibly exposure of field researchers. The AIT is a rapid

response unit that can deploy to any area of the world to transport and provide patient care under high containment. Currently, there are no personnel assigned directly to the AIT. The AIT possesses a limited capability, equipment, and staff, which is not feasible for use in a mass casualty situation. The AIT is comprised of two teams, each capable of transporting a single patient. The AIT maintains specialized equipment and required medical supplies to accomplish its assigned mission.

- **US Army Medical Research Institute for Chemical Defense (USAMRICD) Medical Chemical Biological Advisory Team (MCBAT).** This organization provides input in the development of operating procedures and training in the management of chemical agent casualties. The MCBAT also provides clinical advice and consultation in matters related to the initial and long-term management of chemical casualties at the incident site. The experts on this team are from the USAMRICD and the USAMRIID. They provide essential medical information during the recovery phase of the operation for the safe return to normal activities. The MCBAT also provides on-site training to medical professionals on the management of CB casualties. The MCBAT is the primary source of medical information dealing with the management of chemical warfare agent casualties for the Federal Government. Through the Federal Bureau of Investigation or agencies within the Department of Health and Human Services, the MCBAT may provide consultation to state or local agencies. The MCBAT will provide requisite consulting information to the OSC by identifying the medical implications to applicable military and civilians. As necessitated, the MCBAT

supervises the collection of biological samples (bodily fluids) for subsequent verification of chemical agent exposure that can be used to facilitate the confirmation, diagnosis, and treatment.

- **US Air Force Radiological Control Team (AFRAT).** This is a deployable team of health physicists, technicians, and equipment. AFRAT provides bioenvironmental support, radioisotope analysis, radiation protection, and consulting support. Located at Brooks Air Force Base (AFB), Texas, AFRAT is deployable within 5 hours of notification.
- **US Marine Corps Chemical Biological Incident Response Force (CBIRF).**
  - CBIRF provides a highly trained, rapid response force capable of providing CM (threat identification, casualty extraction, personnel decontamination and medical triage, treatment, and/or stabilization) for terrorist initiated CB attacks in order to mitigate the effects of multiple or mass casualty incidents. As a CM response force, the CBIRF is tailored for short-notice response to CB incidents. It also maintains an information “reach-back” capability to a cadre of CB matter and disaster response experts for consulting purposes.
  - The CBIRF provides a self-contained response in six areas: command headquarters; CB detection and/or identification and decontamination; medical; security; service support; and EOD. It is structured in two parts: the rapid response force that is capable of providing initial incident assessment and limited CM, and a follow-on force. The rapid response force can be tailored to the threat or mission however it deploys with part of the total CBIRF capability of external and internal communications,

protective equipment, detection and identification equipment, personal decontamination equipment, medical treatment, mobile laboratory, and casualty airway protection. The remaining CM equipment is transported with the follow-on force. The rapid response force service support element provides contracting support and is capable of procuring logistic support from government and nongovernment sources within the local community near the affected site.

- **52d Ordnance Group.** This organization provides military EOD units in order to defeat or mitigate the hazards from conventional, nuclear, or chemical and biological explosive ordnance and improvised explosive devices, to include WMD. The group routinely provides military support and assistance to civil authorities in CONUS and, on order, provides forces for FHA planning and execution.
  - The capabilities of the 52d Group are multifaceted to include: identification and render safe of foreign and US military munitions (chemical, conventional, and nuclear); disposal of munitions encountered; response and render safe of terrorist improvised explosive devices (IED) (i.e., pipe bombs, booby traps); response for WMD incidents; conduct training in military munitions and IED to law enforcement agencies; and provide continuous support to the US Secret Service and State Department for very important person protection details. Each unit has a variety of bomb disposal tools and detailed classified procedures for handling US, foreign, and terrorist munitions. Their procedures are often classified and not releasable outside of the DOD EOD channels. Included in their equipment are robots for remote

operations, special disrupters and explosive shape charges, and a variety of EOD tool sets for specific explosive ordnance and improvised explosive devices.

- Existing agreements with the Army TEU outline interoperational support between the 52d Group and TEU for missions involving nonstockpile US chemical munitions and for terrorist WMD devices with chemical or biological fillers. Agreements between the Department of Defense and DOE outline roles for the 52d Group for responding to a US or foreign nuclear military weapon incident or to a terrorist WMD with nuclear or radiological components.

- The 52d Ordnance Group has four battalions and 40 companies stationed throughout CONUS. Additionally, forces from the 111th Ordnance Group (US Army National Guard) may be available for FHA planning and execution.

- **Naval Medical Research Center (NMRC).** The NMRC has multiple missions in the areas of infectious diseases, combat casualty care, and military operational medicine. This section will focus on the mission of the Biological Defense Research Program (BDRP) one of the five infectious diseases research divisions.

- This organization's mission is to defend against a biological threat in a theater of operations; rapid biological detection methods are essential for prompt medical intervention and successful mission accomplishment. To provide for such needs, the NMRC BDRP has formed a scientific research program for the development of rapid

detection and identification methods for BW agents.

- The BDRP has developed a capability that consists of a transportable biological field laboratory expressly for identification of BW agents. The field laboratory can process approximately 50 samples (four to five samples a day for a period of approximately 2 weeks) before replenishment of supplies is required. However, if enough advance notice is given, additional supplies can be deployed. In addition to the capabilities of the NMRC field laboratory, the USAMRIID laboratories provide a confirmatory and reference capability. This support would be required if the results from the NMRC field laboratory assays were all negative and a suspicion of BW agent contamination still existed.

- **US Navy Radiological Control Team (RADCON).** The Navy RADCON team can provide expert health physics (radiation control and safety) assistance to a JTF. The team is deployable from Norfolk, Virginia within several hours.

- **Air Force Technical Applications Center (AFTAC).** AFTAC, located at Patrick AFB, Florida, provides post-detonation plume trajectory prediction, meteorological modeling, complete plume analysis and characterization, and leading edge technology development for monitoring of CB activities. AFTAC deploys a dedicated C-135 collection platform aircraft stationed at Omaha, Nebraska.

- **Defense Threat Reduction Agency (DTRA)**

- DTRA's mission is to reduce the threat to the United States from NBC, conventional, and special weapons

through the execution of technology security activities, cooperative threat reduction programs, arms control treaty monitoring and on-site inspection, force protection, NBC defense, and counterproliferation; to support the US nuclear deterrent; and to provide technical support on WMD matters to the DOD components. DTRA consolidates a variety of DOD functions to deal more effectively with threats posed by NBC weapons. DTRA is designed to ensure US readiness and ability to respond to WMD threats.

- DTRA maintains a deployable advisory team called the defense nuclear advisory team (DNAT). The DNAT can assist OSCs through the JTF or JSOTF commanders in the management of nuclear-related issues. The DNAT can advise on the DOD assets best suited to meet the requirements of the incident. The medical radiobiology advisory team (MRAT) may be included in the DNAT. The MRAT can assist medical personnel by providing the most current medical guidance regarding the treatment of radiation casualties.

- DTRA maintains a detailed database on military assets capable of responding to support a CM operation. This database information is available to commanders at all levels who may have the responsibility to plan and conduct CM operations.

### i. Other CM Resources

- **Department of State, Consequence Management Response Team.** The CMRT is an interagency team under the leadership of the DOS Bureau of Political Military Affairs. It is designed to assist a US Embassy in preparing for and assisting an HN in a response to an

emergency where concern for mass casualties due to exposure to NBC agents exists. An advisory body, the CMRT may provide the following.

- Technical assistance to the COM.
- Liaison with the foreign emergency support team, COM, appropriate combatant commander, USG agencies, and others.
- An assessment of HN emergency needs.
- Advice regarding the development of USG options for a coordinated CM response.
- Recommendations for appropriate USG response.
- Technical assistance to USG agencies and authorities.
- The establishment of relationships among international relief agencies and organizations.
- The CMRT will be task-organized from any USG agencies to meet specific needs. However, the following organizations are normally members.
  - **USAID OFDA** is the LFA for FHA.
  - **Public Health Service physicians** assist with on-site diagnosis, treatment, outbreak control, prevention, decontamination, and isolation.
  - **DOD Liaison.** This typically consists of a representative from the Joint Staff J-3, who advises the senior USG official on DOD capabilities and responsibilities for foreign CM.

- **Department of Energy, Office of Emergency Response** provides technical specialists that can advise on dispersal pattern of NBC contaminants, short- and long-term health effects, and preventive actions.

- **Department of Energy.** The DOE possesses several agencies and teams that may be called upon to provide expertise and advice during a CM operation.

- **Consequence Management Planning Team (CMPT).** The CMPT provides technical advice and supports the development of a CM plan that addresses radiological hazards, medical impacts, mitigation of consequences, and the deployment and use of other DOE assets. Additionally, they coordinate and direct the in-field deployment and use of other deployed DOE teams. The team consists of a team leader, two effects prediction personnel, two health physics and data assessment personnel, two communications and logistic specialists, and one medical advisor.

- **Consequence Management Home Team (CMHT).** The CMHT is activated immediately following the deployment of a DOE asset. They are the exclusive source for coordinating effects predictions, modeling, and data assessment for field operations until the CMPT is operational.

- **Radiological Assistance Program (RAP).** The RAP provides the initial DOE radiological emergency response. Under the RAP, there are several radiological assistance teams to assist in identifying the presence of radioactive contamination on personnel, equipment, and property at the accident or incident scene. These teams

also provide advice on personnel monitoring, decontamination, and material recovery.

- **Nuclear Emergency Search Team (NEST).** A NEST provides technical response to resolution of incidents involving improvised nuclear and radiological dispersal devices. The team is able to search, locate, and identify devices or material.

- **Joint Technical Operations Team.** This team is a combined DOD and DOE team that provides technical advice and assistance to Department of Defense.

- **Aerial Measuring System.** Provides helicopters and fixed-wing aircraft to respond to radiological emergencies. Its capabilities include aerial radiation surveys and search (gamma spectroscopy), real-time radiological aerial sampling, aerial photography survey, and aerial multi-spectra scanning surveys.

- **Atmospheric Release Advisory Capability.** Provides real-time computer predictions of the atmospheric transport of radioactivity from a nuclear accident or incident.

- **Federal Radiological Monitoring and Assessment Center.** Coordinates Federal off-site radiological monitoring and assessment activities for a nuclear incident.

## 26. Conclusion

FHA has its own set of unique planning and execution considerations. These factors place greater emphasis on human care and survival than do most other military operations. Combining this greater emphasis with other more traditional military tasks makes FHA operations a challenge for US military forces.