



GLOBAL HEALTH ENGAGEMENT QUARTERLY

United States Air Force Global Health Engagement Newsletter

FROM THE EDITOR'S DESK

As we publish this first newsletter of 2022, I am deeply saddened by the ongoing Russian invasion of Ukraine. In my last assignment at U.S. European Command I had the privilege of being involved in U.S. Department of Defense (DoD) Global Health Engagement (GHE) with Ukraine. Over the last eight years the Armed Forces of Ukraine have significantly increased military medical capabilities and readiness, with support from the U.S. and other partners. Ukrainian and U.S. Army medical forces were training on point of injury care in the image above. I have no doubt that capabilities like their Combat Medics are saving lives on the battlefield.

In this issue, our feature story covers a unique partnership in the United Kingdom that supports U.S. Air Force medical force readiness and increases medical interoperability between Allies. Current events highlight the importance of continually strengthening the North Atlantic Treaty Alliance (NATO) alliance through this type of long-term partnership. This issue also spotlights the Defense Institute for Medical Operations (DIMO) as it celebrates its 20th anniversary this year. DIMO, home to one of our International Health Specialist (IHS) teams, supports full-spectrum security cooperation by delivering jointly-executed military medical training and education around the world. DIMO's training programs and the U.K. clinical currency program are examples of the broad range of DoD GHE activities executed across the Air Force Medical Service and the Military Health System.

I'm thrilled to share that Lieutenant Colonel (select) Ryan Jung has been selected for the 2021 Paul K. Carlton Outstanding IHS Award. His work at both U.S. Pacific Air Forces (PACAF) and U.S. Indo-Pacific Command has advanced GHE strategic planning in the Indo-Asia-Pacific region. In the words of PACAF Command Surgeon, Colonel Susan Moran, "He is amazing!" I couldn't agree more.

Elizabeth A. Erickson, Colonel, USAF, MC
Director, International Health Specialist Program



US, UK MILITARY CLINICAL CURRENCY PROGRAM REACHES MILESTONE, STRENGTHENS PARTNERSHIP

The 48th Medical Group at Royal Air Force Lakenheath surpassed two decades of partnership with the United Kingdom's National Health Service where Air Force medics integrate within U.K. hospitals.

Partnerships with civilian hospitals are vital to Air Force medics maintaining both clinical currency and deployed medical skills. Most military treatment facilities have relatively healthy populations and medics do not often get the same types of cases encountered during combat, humanitarian assistance and disaster relief missions.

In 2001, the program included only Air Force surgeons. Now the program includes 15 enlisted and officer medical specialties, with more opportunities and growth to come.

Currently, six U.K. hospitals participate in the program, including a leading trauma hospital in London and an emergency surgery hospital in Birmingham. Air Force participation

includes surgeons, obstetrics and gynecology providers, registered nurses, histopathology technicians, and physical therapy technicians.

As one of the few Air Force medical training agreements outside of the United States, the program provides unique value to forces in Europe. While English is a shared language in the partnership, working in a foreign environment offers Air Force medics exposure to different practices and fosters greater interoperability.

"Working with U.K. surgeons provides a different perspective and approach to medical practice," said U.S. Air Force Col. Jacob Stephenson, National Health Service Program Medical Director. "Operating in a foreign institution requires a certain amount of flexibility and adaptability. These are important traits for engaging with partner nations during security cooperation activities or contingency operations." [...] [Read full article.](#)



SPOTLIGHT: DEFENSE INSTITUTE FOR MEDICAL OPERATIONS (DIMO)

This year marks the 20th anniversary of DIMO. It was created in 2002 as a jointly executed military medical capability that permits and builds strong, resilient, comprehensive international partnerships. DIMO delivers medical courses, either as Mobile Training Teams (MTT) or in-residence, that support full-spectrum security cooperation. DIMO's courses are a tool to support U.S. embassy and combatant command strategic objectives.

DIMO is part of the U.S. Air Force School of Aerospace Medicine (USAFSAM), but located at Joint Base San Antonio-Lackland, Texas. Beyond a small full-time staff of active duty Air Force officers and NCOs, civilians and contractors, DIMO executes its mission by using a network of more than 800 volunteer instructors. That subject matter expert pool includes Total Force Army, Navy and Air Force personnel, as well as experts from the U.S. Government interagency. Each DIMO mission delivers a medical training course, tailored to the needs of the partner nation. DIMO maintains 35 different course offerings spanning four broad categories: force health protection; humanitarian assistance and disaster relief; chemical, biological, radiological, nuclear, and explosives (CBRNE); and building partner capacity.

Recent DIMO missions include Tactical Combat Casualty Care training with Bosnia and Herzegovina, Fundamentals of Military and Disaster Mental Health with Mexico, and Medical Planning in Peacekeeping Operations with Kazakhstan. DIMO provides annual in-residence courses in San Antonio on Gender Based Violence and Women's Health, HIV/AIDS Planning and Policy Development, and Executive Healthcare Resource Management.

Have you seen DIMO's course catalogue? Check it out [here](#). Are you interested in becoming a DIMO instructor? Learn how to [volunteer here](#). GHE personnel at combatant commands and service component commands can maintain awareness of DIMO's "battle rhythm" via the DIMO database; request access by contacting Anthony Marroquin anthony.marroquin.ctr@us.af.mil. DIMO's program managers are always available for coordination and collaboration: Mr. Jerome "JJ" Johnson jerome.johnson.9.ctr@us.af.mil (EUCOM, INDOPACOM, AFRICOM) or Ms. Kathleen "KJ" Duke kathleen.duke.1@us.af.mil (NORTHCOM, SOUTHCOM, CENTCOM).



2021 LT GEN PAUL K. CARLTON OUTSTANDING IHS AWARD



Congratulations to Lt Col (select) Ryan Jung who received the 2021 Lt Gen Paul K. Carlton Outstanding IHS Award! His contributions to the U.S. Indo-Pacific Command and Pacific Air Forces IHS teams included advancing GHE strategic planning by developing a database that significantly improved the coordination across service components supporting U.S. Indo-Pacific Command. "Maj Jung successfully planned and executed numerous medical security cooperation projects, but more importantly, he is committed to ensuring our team's success by mentoring new members and creating products for process improvement," said Lt Col Cherielyne Gabriel, U.S. Pacific Air Forces IHS Team Chief.

2022 Q1 IHS SPECIAL EXPERIENCE IDENTIFIER (SEI) AWARDEES

Familiarized

- TSgt Mcthobert Carreon
- TSgt Francis Tampol
- Capt Nathan Jones
- Capt Carrie Redpath
- Maj Vasant Dabhi
- Maj Czar Joseph Roda
- Lt Col Aaron Goodrich

Enabled

- Maj Elena Amspacher
- Maj Alexis Beauvais

Senior Global

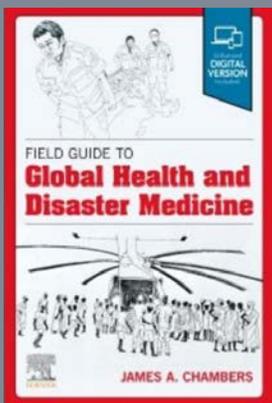
- Lt Col Chelsea Payne

APPLY FOR THE IHS SEI

The next IHS SEI application due date is 6 May 2022. Download the most recent version of the application from the IHS Program Kx page: (CAC login required) go.usa.gov/xs8aX. You can also reference frequently asked questions on the Kx page for more information about the IHS SEI.



THOUGHT LEADERSHIP



Field Guide to Global Health and Disaster Medicine

A resource for military medics written by former IHS Program Director, Col James Chambers (james.a.chambers2.mil@mail.mil) who requests feedback for second edition.

International Trauma Capacity Building Programs: Modernizing Capabilities, Enhancing Lethality, Supporting Alliances, Building Partnerships, and Implementing Reform Derek Licina, (US), DrPH, MPH, Jackson Taylor, (US), MD, US Navy

[On Protection of U.S. Forces From Global Health Threats: The Role of Health Security Advisors](#) Will Chu, SFS, USAF, MC, Scott Wallace, FS/FMF, MC, USN, Derek Licina, DrPH, MPH, MSC, USA (Ret.), Elizabeth Erickson, MPH, USAF, MC

[On the Provision of Health Services and Protection of Health Workers in War: A Review of Leonard Rubenstein's *Perilous Medicine*](#) Bradley Boetig, USAF, MC

IN THE NEWS

[Australia, Japan, US converge on Guam for Cope North 22 \[PACAF\]](#)

[Navy Medicine FDPMU Deploys to Support Refugees in Poland \[DVIDS\]](#)

[USINDOPACOM co-hosts the Indo-Pacific Military Health Exchange 2021-22 \[DVIDS\]](#)

[Women's History Month: DOD Works to Increase Meaningful Participation of Women in Security, Defense Institutions \[INDOPACOM\]](#)

[The language of medicine: Coalition partners tour the 405th EAES \[CENTCOM\]](#)

[Djibouti, US strengthen partnership through medical knowledge exchange \[AFRICOM\]](#)

IHS CORE COMPETENCY CORNER

This is one of ten competencies that International Health Specialists must master and maintain to be fully capable. Read about the others [here](#).

Joint Operational Planning

IHS personnel must have working knowledge of joint operational planning processes in order to integrate global health engagement planning with strategic and operational requirements. IHS personnel apply joint operational planning principles to the development of GHE activities and programs. This competency also includes coordination and integration with U.S. government interagency planning processes and programs.

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Engage with Air Force Medical Service:



Engage with the IHS program and learn how to apply:



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