

By Lanessa Hill, USAG Public Affairs

Congressman David Trone (MD-06), member of the U.S. House of Representatives Committee on Foreign Affairs, visited Fort Detrick March 15 and met with leaders across the Installation to learn about the unique work that contributes to global security and the health and well-being of our Nation.

As a first-time visitor to Fort Detrick, Trone expressed interest in learning more about the Installation's contributions and impact to our community and the congressional district he represents.

"Fort Detrick is doing such important work to protect our national security and to conduct life-altering medical research," said Trone. "Because it is such a large part of the Frederick community and so important to our Nation, I wanted to meet with leaders at Fort Detrick and see the facilities firsthand." of Congress so they know how important Fort Detrick's work is to the safety of our Nation," said Trone. "Fort Detrick is conducting research that is key to protecting future generations and making the world a safer place from harmful diseases. We should all support these efforts."

"Every Army installation says they are unique, but Fort Detrick really is. The daily missions performed here and the men and women who come to work every day are truly remarkable. I'm glad I was able to represent them and tell their story," said U.S. Army Garrison Commander, Col. Scott Halter.

Trone was elected to the House of Representatives in November 2018 to serve the 6th District of Maryland, which includes all or part of Montgomery, Frederick, Washington, Allegany, and Garrett Counties. Trone serves on the Education and Labor, Foreign Affairs, and Joint Economic Committees, where he is fighting to make progress on issues that matter to Marylanders, including the opioid epidemic, criminal justice reform, and funding for medical research.

Trone met with leaders from the U.S. Army Medical Research and Materiel Command, the U.S. Army Garrison, the National Biodefense Analysis and Countermeasures Center, the National Cancer Institute of Frederick, the 21st Signal Brigade, the Navy Medical Logistics Center, the U.S. Department of Agriculture, the *4th* Light Armored Reconnaissance Battalion, and the Air Force Medical Evaluation Support Activity.

At the conclusion of the visit Trone was impressed and proud to have Fort Detrick in his district, affording him the opportunity to advocate for the important work that is done on the Installation.

"We have to continue to work with members



Congressman David Trone (MD-06) visits Fort Detrick March 15, 2019 to meet with leaders across the Installation and learn about the unique work that contributes to global security and the health and well-being of our Nation.

Photo By Lanessa Hill, USAG Public Affairs

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Alcohol-Free Weekend April 5-7

The National Council on Alcoholism and Drug Dependence, Inc. (NCADD) and the Army Substance Abuse Program (ASAP) ask parents and other adults to abstain from drinking alcoholic beverages for a 72hour period to demonstrate that alcoholisn't necessary to have a good time.

ALCOHOL AWARENESS MONTH 2019 "Help for Today, Hope for Tomorrow"

By The Fort Detrick ASAP Office

Alcohol Awareness Month 2019 KICKS OFF with an

Alcohol Free Weekend!

April marks the start of Alcohol Awareness Month, and it's a perfect time to explore the benefits of sobriety. The National Council on Alcoholism and Drug Dependence established this awareness month in 1987 to encourage communities to learn more about alcoholism and <u>recovery</u>.

Annually in United States, an estimated 88,000 people die from alcohol-related causes. This makes alcohol the fourth -leading preventable cause of death in the country. No matter your gender, race or socio-economic background, alcoholism does not discriminate.

For those working to overcome an alcohol use disorder, long-term sobriety can be achieved with <u>treatment and</u> <u>support</u>.

To kick off Alcohol Awareness Month, the first weekend of April is aimed at inspiring people to enjoy three days without an alcoholic drink. From April 5-7, see how the use of alcohol affects you and those around you by participating in the Alcohol-Free Weekend. People who find discomfort or challenges in remaining sober throughout the weekend are encouraged to learn more about <u>alcohol abuse and</u> <u>alcoholism</u>.

For 72 hours, try enjoying some fun, engaging activities that promote a sober lifestyle:

Exercise

Want to improve your mood and boost your energy throughout the weekend? Instead of consuming calories from an alcoholic beverage, burn them off through exercise. Physical activities as simple as walking could reduce your stress and improve your self-esteem.

If at some point you're feeling irritable and want to put your mind at ease, try yoga. This practice focuses on breathing and body postures that promote mindfulness and control. It could also reduce the stress and anxiety you may feel while striving to remain sober.

You don't have to work out alone. Invite a friend to join you in a fitness class, or challenge them to see who can hold a plank the longest. Exercising with someone can keep you focused on your workout and prevent feelings of boredom. If you don't have a routine already in place, consider joining a gym or finding a workout plan that fits your schedule.

Travel

Enjoy the weather and explore new places during Alcohol-Free Weekend. Take the money you might have spent on drinks and put it toward memorable experiences. You can visit a new place in town or travel to a new city. Wherever you decide to go, enjoy it sober.

Exploring new areas can benefit your health. Rather than drinking to escape life's stressors, eliminate stress by visiting a new environment. Even if it's just for a few days, recharging your batteries can prevent burnout and help you feel refreshed after a long week.

Volunteer

If you think you're going to get bored without alcohol, take the weekend to improve your life and the lives of others. Volunteering for an organization can help you learn something new and connect you with people in the area. All it takes is your time. Make a difference by looking up charities in your community and attending an event this weekend.

Not only will volunteering keep you busy and help the community, but it could also make you a better candidate for new opportunities in the future. Adding to your volunteer experience can be an excellent way to upgrade your resume if you're looking for a new job.

Relax

Welcome to the weekend! Be sure to sit back, relax and enjoy life without alcohol. You can pick up a new book,

hang out around the house or do nothing at all. It is entire- Health Services at (301) 619-0345. ly up to you.

Keep in mind that people relax in different ways. While some prefer sitting outside and getting some fresh air, others may want to revisit an old hobby that helps them relax.

As you focus on you this weekend, consider unplugging and staying off social media. Seeing photos of people at tailgate parties, clubs or happy hours could make you think you are missing out. It may also be stressful to see others having a drink without you. Throughout Alcohol-Free Weekend, remember why you wanted to spend three days without drinking.

For the next 72 hours, reflect on all you have accomplished in life, and stay positive. If you feel like remaining alcoholfree this weekend will be challenging, examine the relationship you have with alcohol and learn more about alcohol abuse and alcoholism.

You can contact your local Army Substance Abuse Program at (301) 619-1751, to learn more about alcohol abuse and resources for finding help. For confidential help, civilians may contact the Employee Assistance Program at (800) 222-0364 and Service Members may contact Behavioral

Also consider participating in the "Take the Keys Tour", drunk driving simulator event, on April 9, anytime between 10:30 a.m. - 2:30 p.m. at Building 1520, Classroom 5B. Come try for yourself, in a safe environment, one of our computerized driving simulators. This 15 minute experience will prove you cannot drink and then drive, and counts towards the FY19 Personal Readiness training requirements! Contact the ASAP office for more information at (301) 619-1751.

View Sources

National Council on Alcoholism and Drug Dependence. (2017, January) Alcohol Awareness Month. Retrieved from https://www.ncadd.org/about-ncadd/events-awards/ alcohol-awareness-month

National Institute on Alcohol Abuse and Alcoholism. (2017, February) Alcohol Facts and Statistics. Retrieved from https://pubs.niaaa.nih.gov/publications/ alcoholfacts&stats/AlcoholFacts&Stats.pdf

The National Council on Alcoholism and Drug **Alcohol-Free Weekend** Dependence, Inc. (NCADD) and the Army Substance Abuse Program (ASAP) ask parents and other adults to abstain from drinking alcoholic beverages for a 72hour period to demonstrate that alcoholisn't necessary to have a good time. BETTER **REDUCE RISK REDUCE CALORIE** SAVE CLEARER MOOD **OF DISEASE** INTAKE MONEY!! SKIN BETTER participants find it difficult to ge without alcohol during this period, we urge them to call ASAP at 301-\$19-1751 or the Help for Today, Hope for Tomorrow 800-222-0364 for information about substance use disorders. Service Members Alcohol Awareness Month are encouraged to call Barquist Behavioral Health at 301-619-8105.

Take The Keys Tour.com Drunk Driving Simulator

It Is Time To Realize That You Cannot Drink And Drive.

Try for yourself in a safe environment by driving one of our computerized simulators. We will prove that you cannot drink then drive.

Sponsored by

The Army Substance Abuse Program Building 1520, Classroom 5B

9 April 2019 *1030-1430

Satisfies requirement for FY19 ASAP Personal Readiness Training POC: 301-619-1751

SIMPLIFIED ENTERTAINMENT INC. Call 888-658-0515



SEMPLIFIED ENTERTAIRMENT INC. Call 888-658-0515

ARMY HOUSING RESOURCES

As part of an ongoing effort to evaluate and resolve unsatisfactory conditions in our family housing, Fort Detrick Leadership wants to reemphasize the housing work order process and explain how to, if necessary, escalate your concerns.

LEVEL 1

Submit your work order by phone, online or in-person to Detrick Homes: Fort Detrick residents: Call the 24-Hour Emergency Maintenance Line at: (240) 379-6518. Go to the Detrick Homes website at: https://detrickhomes.securecafe.com.

Glen Haven Apartments residents:

Call the 24-Hour Emergency Maintenance Line at: (301) 649-9700. Go to the Glen Haven Apartments website at: <u>https://glenhavenapartments.securecafe.com</u>.

LEVEL 2

Speak with Detrick Housing Community Director, Kimberly Howell, Management Office, at: (240) 379-6410. Speak with the Glen Haven Apartments Community Manager Jaime Gonzalez at: (301) 649-9700. Contact your Chain of Command.

LEVEL 3

Call the Garrison Commander's Housing Hotline at: (301) 619-7114. Submit your concerns to the Interactive Customer Evaluation (ICE) system: <u>http://ice.disa.mil/index.cfm?fa=site&site_id=438&dep=DoD</u>.

Contact the Fort Detrick Inspector General at: usarmy.detrick.medcom-usamrmc.other.mrmc-ig@mail.mil.

For residents who believe they're having health issues regarding mold or other environmental concerns related to housing conditions, see your health care provider.

Who to Contact To Report Home Repairs

Detrick Homes Residents During business hours: Call the Maintenance team at (240) 379-6410.

Glen Haven Apartments Residents During business hours: Call the Maintenance team at (301) 649-9700.

24-Hour Emergency Maintenance Line: Call the Maintenance team at (240) 379-6518. 24-Hour Emergency Maintenance Line: Call the Maintenance team at (301) 649-9700.

https://detrickhomes.securecafe.com

Barracks Residents Directorate of Public Works (DPW) 301-619-HELP (4357)

Your Building Manger

Your Unit Commander/ Senior Enlisted Leader

To submit concerns or issues with home repair timeliness or satisfaction of completed repair work please use the Interactive Customer Evaluation (ICE) by visiting the ICE link found on our home page www.detrick.army.mil and click on the red box titled "Housing/Barracks Hotline. The Installation Hotline Number is (301) 619-7114







As of March 1, 2019, the RCI Energy Conservation Program (RECP) will be suspended until further notice. Residents should not be billed, receive rebate payouts, be charged administrative fees or receive delinquent utility charges.

RCI partners will continue to monitor usage and will provide residents with mock billing statements, i.e., consumption reports, while the Army reviews the current data collection and billing methodology.

Residents with utility billing questions should contact their local housing office for more information.



IMCOM Transitions to Army Materiel Command

By Susan A. Merkner, IMCOM Public Affairs

Installation Management Command was formally acknowledged as a major subordinate command of Army Materiel Command during an assumption of authority ceremony at Joint Base San Antonio-Fort Sam Houston, Texas March 8.

The transition establishes unity of command and effort on installations, improves the readiness of Soldiers and formations, and strengthens the well-being of Soldiers, civilians and families.

The move, part of the Army's aggressive ongoing reforms, was effective March 1 to free up resources for readiness and modernization efforts and to improve overall efficiency.

Gen. Gus Perna is commanding general of Army Materiel Command, based at Redstone Arsenal, Alabama.



Lt. Gen. Bradley A. Becker, IMCOM commanding general, continues to serve from Fort Sam Houston, Texas.

No military or civilian personnel moves are expected at this time due to the realignment. IMCOM has 50,000 employees worldwide.

Perna said Army installations play a vital role in establishing military might and sustaining troops, and praised IMCOM professionals for their work.

"The realm of responsibility you have is incredible," Perna said. "We are very grateful for what you have done."

Becker thanked AMC leaders for their recent support.

"There is real value in having a higher headquarters," Becker said. "We think alike, and we share a culture of service."

IMCOM is the 10th command aligned under AMC. Its realignment reinforces the Army's priority of readiness, ensuring all installations are postured to provide the best support, services and facilities.

AMC performs installation support and service functions, from management of installation powerprojection platforms to installation contracting services.

This realignment consolidates base operations and other similar support functions under one command and leverages the Army's existing expertise in logistics, sustainment and services.

This effort is one of the ongoing reforms of management and headquarters to make the Army as efficient as possible and ensure the prioritization of resources to readiness and modernization.

The Army continues to focus on reform to modernize the force and increase lethality in support of multidomain operations.

Gen. Gus Perna (left), commanding general of Army Materiel Command, assists in unfurling the AMC flag, along with Installation Management Command Command Sgt. Maj. Melissa A. Judkins and Lt. Gen. Bradley A. Becker, IMCOM commanding general. An assumption of authority ceremony was held March 8, 2019 at Joint Base San Antonio - Fort Sam Houston, Texas, to commemorate IMCOM becoming a major subordinate command of AMC.

Photo by Neal Snyder, IMCOM Public Affairs

Spring Research Festival 1-2 May 2019

Registration is now open March 5 through April 5

Please register at : springresearchfestival.amedd.army.mil Participation in the following events require registration: Poster Display Poster Blitz Lecture Post Bac/Post Doc Lecture

> *participation in Poster Display is required to participate in a lecture event *Registration is not required for spectator attendance

IRS: Be Vigilant Against Phone Scams; Annual 'Dirty Dozen' List Continues

By Internal Revenue Service

As the April filing deadline approaches, the Internal Revenue Service warns taxpayers to be alert to tax time phone scams where aggressive criminals pose as IRS agents in hopes of stealing money or personal information.

Phone scams or "vishing" (voice phishing) continue to pose a major threat. The scam has cost thousands of people millions of dollars in recent years, and the IRS continues to see variations on these aggressive calling schemes.

Phone scams again made the IRS' Dirty Dozen list, an annual compilation of some of the schemes that threaten taxpayers not only during filing season but throughout the year.

The IRS is highlighting each of these scams to help raise awareness and protect taxpayers. The IRS also urges taxpayers to help protect themselves against phone scams and identity theft by reviewing safety tips prepared by the <u>Security Summit</u>, a collaborative effort between the IRS, states and the private-sector tax community.

"Taxpayers should be on the lookout for unexpected and aggressive phone calls purportedly coming from the IRS," said IRS Commissioner Chuck Rettig. "These calls can feature scam artists aggressively ordering immediate payment and making threats against a person. Don't fall for these."

Beginning early in the filing season, the IRS generally sees an upswing in scam phone calls threatening arrest, deportation or license revocation if the victim doesn't pay a bogus tax bill. These calls most often take the form of a "robo-call" (a text-to-speech recorded voicemail with instructions to call back a specific telephone number), but in some cases may be made by a real person. These con artists may have some of the taxpayer's information, including their address, the last four digits of their Social Security number or other personal details.

The Treasury Inspector General for Tax Administration, the federal agency that investigates tax-related phone scams, says these types of scams have cost 14,700 victims a total of more than \$72 million since October 2013.

How do the scams work?

Criminals make unsolicited calls and leave voicemails with urgent callback requests claiming to be IRS officials. They demand that the victim pay a bogus tax bill by sending cash through a wire transfer, prepaid debit card or gift card.

Many phone scammers use threats to intimidate and

bully a victim into paying. The phone scammers may alter or "spoof" their caller ID to make it look like the IRS or another agency is calling. The callers may use IRS employee titles and fake badge numbers to appear legitimate.

The IRS also reminds taxpayers that scammers often change tactics. Variations of the IRS impersonation scam continue year-round and tend to peak when scammers find prime opportunities to strike. Tax scams can be more believable during the tax filing season when people are thinking about their taxes.

Here are some things the scammers often do, but the IRS will not do. Taxpayers should remember that any one of these is a tell-tale sign of a scam.

The IRS will never:

• Call to demand immediate payment using a specific payment method such as a prepaid debit card, gift card or wire transfer. Generally, the IRS will first mail a bill to any taxpayer who owes taxes.

• Threaten to immediately bring in local police or other law-enforcement groups to have the taxpayer arrested for not paying.

• Demand that taxes be paid without giving taxpayers the opportunity to question or appeal the amount owed.

- Ask for credit or debit card numbers over the phone.
- Call about an unexpected refund.

For taxpayers who don't owe taxes or don't think they do:

Please report IRS or Treasury-related fraudulent calls to <u>phishing@irs.gov</u> (Subject: IRS Phone Scam).

• If you suspect you have received a fraudulent call, hang up immediately. Do not give out any information. The longer the con artist is engaged, the more opportunity he/she believes exists, potentially prompting more calls.

• Contact TIGTA to report the call. Use their <u>IRS Impersonation Scam Reporting</u> web page. Alternatively, call (800) 366-4484.

• Report it to the Federal Trade Commission. Use the "FTC Complaint Assistant" on FTC.gov. Please add "IRS Telephone Scam" in the notes.

For those who owe taxes or think they do:

Call the IRS at (800) 829-1040. IRS workers can help. View your <u>tax account online</u>. Taxpayers can see their past 24 months of payment history, payoff amount and balance of each tax year owed.

Medical Logistics Internship Delivers Steady Supply of Leaders

By Ellen Crown, USAMMA Public Affairs

How long does it take to develop a medical logistics expert?

Many medical logisticians tell you that it takes years or decades, if not a whole career of continual education.

For many, a key part of that development process is completion of the Medical Logistics Management Internship Program, organized by the U.S. Army Medical Materiel Agency.

The program, commonly known as the "USAMMA internship," has been growing the Army's top medical logisticians for more than half a century. A look around the program's main classroom, located within the Defense Medical Logistics Center at Fort Detrick, Maryland, reveals dozens of class photos with the younger faces of many of today's top medical logistics leaders, including USAMMA's current commander Col. Timothy Walsh.

"The 'USAMMA Course' has continued to evolve and grow over the years since my time in the course in 2003, much like the mission-load of our Army. This must continue if we are going to stay relevant. During my course, we were supporting Operation Enduring Freedom and Operation Iraqi Freedom, which had just kicked off. Today, we are still in Afghanistan (Freedom's Sentinel) and have returned to Iraq and expanded to Syria (Inherent Resolve)," Walsh said. "The requirements of the current fight, coupled with our focus on Korea and Europe, make it imperative that our course develops leaders who understand the Medical Logistics Enterprise from the tactical to the strategic level. Most importantly, they must leverage this knowledge and experience in key billets coming out of the program."

Since the MLMIP's inception in 1967, nearly 650 USAMMA interns have completed the program. The program's mission is to provide mid-career medical logistics Department of Defense Service Members and civilians with advanced medical logistics and acquisition training in medical maintenance, facilities, logistics processes, shelf-life extension, automation systems, optical fabrication, foreign military sales, supply chain management, acquisition logistics, civilian health care business practices and program management principles.

While MLMIP is best known throughout the Army medical logistics community, the program is open to all branches of service. MLMIP continues to strengthen its focus on operational and strategic logistics in a

joint and inter-agency environment because that is how today's military operates.

In the past two years, the program has evolved from six months to nearly one full year. MLMIP students now complete six months of didactic training followed by five months of on-the-job training. The idea, which was originally proposed by a MLMIP student, allows interns to immediately use classroom-gained skills in a real-world environment.

"In 2016, during my first class as the MLMIP program manager, the class leader Capt. Nicholeus Harris provided a detailed problem statement and solution for the innovation and growth of the MLMIP," said La-Trish Jones, USAMMA's MLMIP program manager. "His recommendations to change the internship from six months to one year, to include extended on-thejob training and more diverse training, set the tone for where we are today."

The current MLMIP class consists of eight interns and will be the first group to complete the program under the new year-long format. While each of the interns applied to MLMIP for different reasons, they agree that the program provides diverse and unique training experiences.

"I fully understand equipment management and logistics within a Military Treatment Facility, but this is only a small view of the entire logistics enterprise. My reason for applying to the USAMMA MLMIP was to receive a strategic view of the entire medical logistics enterprise from a military and industry view. In addition, I wanted to also receive exposure and awareness to key Department of Defense logistics program sites and world-wide enterprise logistics operations," said Chief Warrant Officer 3 Charles Judd, who is currently enrolled in the MLMIP.

"The strategic exposure to the [medical logistics] enterprise was also a key interest for me," added program intern Capt. Sam Weber. "I researched the program and found it melded together civilian and military industries which focused on medical logistics, supply chain, cold chain, medical maintenance, automated logistics systems, and acquisitions."

The current class' upcoming graduation in June is bittersweet for Jones, who is currently away from USAMMA on a developmental assignment. In her absence, Lt. Col. Stephen Spulick and Maj. Gary Freeman are managing the program. Freeman, who graduated top of his class at MLMIP in 2017, said he is keenly aware of the program's benefits and potential.

MILMIP continued from page 10.

"The course continues to develop and we are working Fort Detrick location is set up inside a headquarters to standardize the curriculum without diminishing the unique, customized experience that each class receives," said Freeman. "The vision is to build MLMIP into a program that has reputation of delivering the best, so that when senior leaders see MLMIP on a Service Member's record or civilian's resume, they know they are getting a highly trained, strategic-level thinker."

Historically, one of the biggest draws to MLMIP has been its variety of site visits, which include various DOD and civilian hospitals and logistics depots, private industry distribution centers and Fortune 500 organizations. The program's combination of training, site visits and experiences provide a level of organizational cross-pollination that is not typically offered in traditional military schools.

"The Defense Logistics Agency trip to Philadelphia was the most eye opening. DLA organized a two-day briefing on all aspects of medical logistics from the joint perspective. Additionally, they provided briefings from some of the other commodity managers and how they support the Department of Defense," said Maj. Jonathan Spiegel, a current MILMIP student. "It made me realize that the execution of logistics across the board has several similarities."

Many of the interns also praised a recent trip to Intermountain Healthcare in Utah, where they toured a centralized medical supply distribution hub that serves hundreds of clinics and hospital within a 100mile radius. Center employees leverage a variety of technology to perform their jobs more efficiently and reduce errors. For example, instead of using paper lists to pull stock from the shelves, they wear head phones with virtual assistants that direct them to the correct location and product. Then they sort and package the items based on simple photos or symbols instead of serial numbers that are easy to misread and slow the process down.

"That makes sense to me, as a medical logistics specialist. If I can cut out the waste, the extra steps or activities that are not necessary, I can focus on the mission," said Staff Sgt. Edwin Figueroa, who is currently enrolled in MLMIP.

Another benefit of MLMIP for many of the students was the opportunity to better understand the medical logistics enterprise, including USAMMA. Some of the students admitted that for most of their Army careers, they had envisioned USAMMA as a large supply distribution center, not unlike some of the hubs they toured that are filled from floor to ceiling with boxes of medical equipment and supplies. In fact, USAMMA's

office building that includes the Army, Navy, Air Force, Defense Health Agency medical logistics, and Defense Logistics Agency. USAMMA also oversees operations at site locations worldwide, including medical maintenance shops and centrally managed medical stocks.

"I feel that one of the best parts of this program remains the ability to network and put faces to names," said Sgt. 1st Class Marlon Derecho, a current MLMIP student. "As a non-commissioned officer. I don't have another venue where I can really do this. But through this program, I now have a better understanding of the key medical logistics leaders and resources available to me in the future."

"The MLMIP is the best opportunity to understand how medical logistics is critical to the delivery of medical care," added MLMIP intern Maj. Fernando Negron-Lopez, who has served in the Army for more than 20 years. "As a logistician, we must anticipate user needs. We can't just rely on historical data. We must consider the environment, provider, and the medical condition of the patient among other factors to calculate the demand of the Class VIII (medical materiel) requirement."

Reinforcing that point, Spiegel added, "Health care delivery doesn't happen without medical logistics."

To learn more about the MLMIP program, visit https:// www.usamma.amedd.army.mil/Pages/MLMIP.aspx



Students from the Medical Logistics Management Internship Program, organized by the U.S. Army Medical Materiel Agency, receive a tour and facility overview from Sterile Surgical Systems President Gregory Gicewicz. Located in Washington, Sterile Surgical Systems processes six million pounds of laundry annually across 33 acute care hospitals and medical clinics. As part of their advanced medical logistics internship, MLMIP students tour a variety of facilities and organizations to learn about logistics best business practices that they can apply to their Army mission.

Courtesy Army Photo – Released



United States Army

Criminal Investigation Command

Army CID Warns of Internet Sextortion Scams

By Army CID Public Affairs

As part of a continuing campaign to help prevent Soldiers and other members of the Army community from becoming victims of crime, Special Agents from the U.S. Army Criminal Investigation Command, commonly known as Army CID, are once again cautioning the Army community about ongoing Internet based "sextortion" scams.

Sexual extortion, or "sextortion," is a cybercrime perpetrated against unwitting victims who are often approached in casual conversation via social media platforms and then seduced into engaging in online sexual activities. After participating in the sexual request, which are most often recorded without the victim's knowledge or consent, the victim is then threatened by the criminals with public exposure and embarrassment if the victim does not pay money to the extortionist.

According to military officials, more than 450 known military members from all services have fallen victim to the scam and have been blackmailed for more than \$560,000, and those numbers do not include the number of victims who have not come forward.

With the criminals threatening to send compromising video or photographs to the victim's commanders or families, victimized military members often pay out of fear that their careers will be jeopardized by the false claims. In another concerning version of the scam, the criminals will contact the victim and pose as police or parents of who they claim is an "underage victim" and threaten to ruin the Service Member's career or have them arrested if they do not pay the ransom.

Another method the criminals use to attempt to extort money is to claim that they are a lawyer working on behalf of the alleged victim. The scammer will request payments for things such as counseling for the alleged victim or to replace electronic devices that now contain alleged "child pornography." If these demands are not met, the person claiming to be the lawyer threatens to report the incident to law enforcement.

"Legitimate organizations will not contact you and ask for money in lieu of reporting you to law enforcement," said Special Agent Edward LaBarge, the head of Army CID's highly specialized Computer Crime Investigative Unit. "Typically law enforcement will not attempt to make contact with you over the phone. If you are contacted via telephone, always request validating information such as an agency email address and offer to meet in person at a law enforcement facility before proceeding with giving out your personal information."

Army CID officials stress that if an individual is being blackmailed and comes forward, they want to help that individual.

"We encourage victims to contact us so we can help. If law enforcement gets involved early on, there are investigative steps that may help identify the perpetrators responsible for victimizing Army personnel," LaBarge said.

Additionally, CID officials warn that if you do not seek help, victims are often at risk for further exploitation. Once the blackmail begins, the criminals can continue to demand additional payments, more sexual images, sensitive military information, or access to U.S. Army systems and facilities, so early notification to law enforcement is very important according to CID Special Agents.

"To avoid falling prey to a sextortion scam, never send compromising photos or videos of yourself to anyone, whether you know them or think you know them," said LaBarge. "You are also advised to turn off your electronic devices and physically block web cameras when you are not using them."

For more information on how these scams unfold and how to identify sextortion red flags, see the <u>Joint Service Sextortion brochure</u>.

If you have been the victim of sextortion, adhere to the following:

- Do preserve whatever information you have from the scammer(s), such as social networking profile, email accounts used, where money was directed to be sent, etc.
- Do notify CCIU at <u>usarmy.cciuintel@mail.mil</u> to report being a victim if you are a Service Member or an Army civilian employee. If you are not associated with the military, report the crime to your local police department, DHS Homeland Security Investigations at <u>Assitance.Victim@ice.dhs.gov</u>,or the FBI's Internet Crime Complaint Center at <u>www.ic3.gov</u>.

Victims can seek information on rights and assistance from:

 Army Victim/Witness Liaison Program - VWL will assist the victim in contacting agencies or individuals responsible for providing necessary services and relief.

- Command Chaplains
- Family Advocacy Center/Army Community Service
- If victims are not eligible for military services, or where military services are not available, the VWL can provide liaison assistance in seeking any available nonmilitary services within the civilian community.

For more information about computer security, other computer-related scams and to review previous cyber -crime alert notices and cyber-crime prevention flyers visit the Army CID CCIU website at <u>https://www.cid.army.mil/cciu-advisories.html</u>. To report a crime to CID, visit www.cid.army.mil.



Congratulations to the Fort Detrick Fire Department



The Fort Detrick Fire Department in Frederick, Maryland receives Accredited Agency status with the Commission on Fire Accreditation International for meeting the criteria established through the CFAI's voluntary selfassessment and accreditation program.

The Fort Detrick Fire Department is one of more than 250 agencies to achieve Internationally Accredited Agency status with the CFAI and the Center for Public Safety Excellence, Inc.

The Fort Detrick Fire Department is the seventh Army installation to achieve this level of fire service excellence out of 107 Army installations; placing them in the 7th percentile and 65th DOD-wide to reach this accomplishment.

"We are very fortunate to have the most professional and dedicated group of men and women that made this a reality for the Fort Detrick/Forest Glen Fire and Emergency Services Division," said Ray Wharton, Fort Detrick director of operations.

Courtesy Photo

Experts Meet to Discuss Blast-Injury Limb Salvage Options

By Leticia Hopkins, USAMRMC Public Affairs

To amputate or salvage a limb is a dilemma physicians and surgeons can face after their patients suffer a blast-related injury. Either decision can lead to its own risks and benefits, but which decision answers the question: what's the best thing for the patient, in the moment and in the long term?

The U.S. Army Medical Research and Materiel Command's Department of Defense Blast Injury Research Program Coordinating Office partnered with the RAND Corporation to hold the eighth DOD State-of-the-Science Meeting March 5-7 in Arlington, Virginia.

"The purpose is to address a very specific blast injury problem and to identify what's known and what's unknown about that problem," said Michael Leggieri, director, DOD Blast Injury Research Program Coordinating Office, USAMRMC.

"We're trying to identify knowledge gaps and then recommend either research or policy

changes or other things that can be done to close these knowledge gaps," added Leggieri, "and ultimately deliver better prevention and treatment to Service Members."

Leggieri continued, adding that these valuable meetings bring together experts from very diverse communities and disciplines to help solve difficult problems and recommend solutions to better protect and care for those who serve this Nation.

More than 80 people listened to speakers and participated in working groups that were designed to help find solutions and identify gaps in research associated with "Limb Salvage and Recovery After Blast-Related Injury."

"The level of expertise and knowledge in the room was astonishing," said Akua Roach, Ph.D., program manager for the Peer Reviewed Orthopaedic Research Program. "Researchers, surgeons, clinicians, funders, and policy makers provided perspective that could not be captured by even the most comprehensive of literature reviews."

"Having a chance to listen to presentations about advances in surgical research, technologies, and rehabilitative care followed by scientific presentations by researchers in this space, allowed us all to have a deeper understanding of the state of the science, and the state of the problem,"



Lt. Col. Joseph Alderete Jr., chief of Orthopaedic Oncology and the medical director for the Center for the Intrepid, Brooke Army Medical Center, participates in a panel Q&A session at the eighth State-of-the-Science Meeting in Arlington, Virginia, March 5, 2019. The meeting was held from March 5-7 and focused on its theme "Limb Salvage and Recovery After Blast-related Injury."

Photo by Leticia Hopkins, USAMRMC Public Affairs

added Roach, who considers knowledge and technology gaps associated with the care of Service Members, veterans and civilians that sustain orthopedic injuries to help guide the program's investment strategies.

The three-day meeting consisted of speaker presentations on the first two days and working group presentations on the third day. There were also panel and poster sessions along with presentations on blast injuries, limb salvage, which included resuscitation and repair, nerve injuries and treatment, wound infections, ossification, and outcomes.

"Perhaps, one of the biggest challenges is actually being able to standardize outcomes and so doing randomized controlled studies in some settings is next to impossible," said Col. David Saunders during his "Using Regenerative Medicine to Repair Wounded Limbs" presentation.

Later, Saunders added, "I think another important point is the idea of failing early and inexpensively.

"Better to fail in an early pivotal trial that is designed to kill the product than to make it through to Phase 3 clinical trials and find that you've wasted several hundred millions in dollars."

BLAST continued from page 14

Saunders also informed attendees that simple and elegant products are more likely to make it to and restore function in patients due to a shorter regulatory pathway than super products that try to combine multiple functions in one product.

"There's clearly no single solution to some of these complex injuries, so our focus for now is trying to develop a toolkit ...," said Saunders.

When attendees broke out into their working groups, they were asked to answer five groups of questions:

Question 1: How big is the problem of severe blastrelated limb injury? What research is needed to better characterize the magnitude of this problem?

Question 2: What factors figure into the immediate and ongoing decision to salvage versus amputate a limb after severe blast-related limb injury? What research is needed to better guide this decision? What are the promising strategies for preventing potential neurological effects of repeated military occupational blast exposure?

Question 3: What are the most promising innovations for restoring and reconstructing a salvaged limb after severeblast related limb injury? What research is needed to understand their effectiveness and limitations? What outcomes should be studied?

Question 4: What are the most promising rehabilitative innovations after limb salvage for severe blast-related limb injury? What research is needed to understand their effectiveness and limitations? What outcomes should be stud-

ied?

Question 5: What are the most important research, technology and policy opportunities and gaps pertaining to limb salvage after severe blast-related limb injury?

Participants presented their group consensus on the third day. After the presentations concluded the open portion of the meeting adjourned. A closed meeting was held to compile the information and input gained. The RAND Corporation will take the findings from the session and create a report that will help the Blast Injury Research Program Office identify scientific gaps and areas of research to focus on.

The report is scheduled to be available on the DOD Blast Injury Research Program's Website by the last quarter of 2019. For information about the DOD's blast injury research or to see what findings were discovered, go to: https://blastinjuryresearch.amedd.army.mil/.

"My biggest take away from this meeting is that we still have a lot of work to do in addressing limb salvage capability gaps," said Roach. "The breadth of the unknowns may seem overwhelming but, after attending this meeting, I believe that we can harness what we do know, provide researchers the resources to address what we don't know, and close some of these capability gaps in the near future."

Fort Detrick Prepares for Cyber Inspection

By Charles Collins, Network Enterprise Center

In preparation for a Command Cyber Readiness Inspection, our local Network Enterprise Center wants you to know what the inspection entails.

There are three categories at which the inspectors will take a closer look: Technology Area; Computer Network Defense and Contributing Factors.

The Technology Area component is comprised of 16 sections that will be inspected which will make up 60 percent of the grading. This area encompasses all the working parts of the network (both technical and written SOPs). The grading is mostly dependent on the Security Technical Implementation Guide.

The second area is Computer Network Defense which makes up 30 percent of the grading. Computer Network Defense

Directives include, but are not limited to, communications tasking orders, warning orders, task orders, operations orders, and fragmentary orders. CCRI inspectors will validate compliance with specified CND directives as part of a Command Cyber Readiness Inspection.

The last area of concentration is Contributing Factors. This area will make up 10 percent of the grade. Contributing Factors are designed to assist in evaluating the command's emphasis on compliance of the Information Assurance Controls that are in place at a site during a CCRI. The inspection items and questions are linked to one or more of the IA Controls as found in NIST SP 800-53. The Contributing Factors evaluate three overall IA areas: Culture, Capability, and Conduct.

Next month: What are the Contributing Factor areas?

USAMMDA Team Spotlight: Neurotrauma and Psychological Health Project Management Office

By Jeffrey Soares and Ashley Force, USAMMDA Public Affairs

The mission of the U.S. Army Medical Materiel Development Activity's Neurotrauma and Psychological Health Project Management Office is to rapidly develop and field, across the continuum of care, U.S. Food and Drug Administration-approved medical solutions that aid in the detection, protection, prevention and treatment of neurotrauma and psychological health conditions, such as traumatic brain injury, post -traumatic stress disorder, and suicide. The NPH PMO currently supports the development of biomarkers for TBI, non-invasive assessment devices for TBI, clinical drugs and therapies to treat TBI, and novel markers and treatments for PTSD and other psychological health conditions.

Most recently, the NPH PMO, in conjunction with its commercial partner, received FDA approval to market the first-ever blood test, the Banyan BTITM (Brain Trauma Indicator), used for the evaluation of instances of mild TBI. This revolutionary product/device will help to eliminate unnecessary computed tomography scans and potentially harmful radiation exposure, as well as the associated risks and costs of the procedure.

In this final installment of our spotlight series, USAMMDA's public affairs team met with Army Lt. Col. Kara Schmid, NPH PMO project manager, to discuss the current and future efforts of her team. Schmid has been with USAMMDA since 2015, and has been working on brain injury products since 2006. Her deep grasp of the field has been instrumental in the advancement of products in the NPH PMO portfolio, which has helped to advance the USAMMDA mission of developing and delivering important medical capabilities to protect, treat and sustain the health of our Nation's Warfighters.

PAO: What are some types of brain-related injuries that the NPH PMO investigates?

KS: Warfighters sustain brain injuries in the garrison environment and in the deployed environment. So, in a deployed setting, they can get a brain injury from an improvised explosive device going off, hitting To view the USAMMDA PAO interview with Lt. Col. Kara Schmid, click on the following link: NPH PMO Interview with Lt. Col. Kara Schmid

their vehicle; they can get a brain injury from being shot in the head, if their helmet doesn't work to protect them. They can also get an injury in the deployed environment from training exercises.

On the garrison side, there are many types of training accidents that can cause brain injuries, like sporting events, and the occasional issues that come on the weekends (perhaps alcohol-related), where someone may get into a car accident. So, brain injury is really not specific to being deployed.

PAO: What about psychological health issues?

KS: Those tend to happen more frequently in the deployed environment. As you can imagine, our Warfighters are asked to do something that no one else wants to do - they're asked to potentially injure other human beings, and that can be psychologically devastating. It's a high operational tempo, and so the brain deals with those unique situations, when you're in the deployed environment, by compensating and allowing Warfighters to do their mission. The psychological reactions you have in your brain during that time are actually healthy and necessary. However, this becomes an issue when the Warfighter returns to the United States, back home, and it's still happening. Your brain hasn't "shut off," and returned to normal mode, and you continue to be hyper-aroused hyper-aware of everything and hyper-vigilant.

If you spend time in an environment where you're under fire, and you're constantly engaged in combat, then you can develop a constant fear of explosives going off. For instance, in combat, vehicles are often used by the enemy as explosive devices. If that's something you're exposed to for a year while you're deployed, and you've been constantly watching for vehicles or dangerous-looking persons that could have placed a suspicious package somewhere, this remains in your mind. So, imagine that Warfighter

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coming back home, trying to reintegrate into a normal home life, and they have to go into the parking lot of a store where there may be a hundred vehicles — this could be something that triggers an overwhelming level of distress, a stress signal in the brain. So, it can create an environment where you're just continuously re-living the psychological trauma you went through in combat.

PAO: Can everyday tasks then become more difficult?

KS: They can be, but not for everyone. And this is something that we're trying to figure out. Why are some people able to turn off the response while others cannot? That's one of the PTSD problems that we're trying to research and solve.

PAO: What are some other psychological health issues you're working on, and how does the NPH PMO fit into solving these for the Warfighter?

KS: Well, it's a bit difficult, because we're looking at brain injury, which is a physical injury to the brain, and psychological health trauma, which still may be a "physical" thing that's occurring in the brain, but not as easy to detect. The problem with the brain is that it's very unique — it's in charge of everything the body does, and it's made up of lots of different cell types. In comparison, the liver is made up of liver cells, which all pretty much do the same thing, but the brain is composed of many different types of cells, all of which have many different jobs and functions. So, in some injuries of the brain, for example a gunshot wound, this would leave tissue damage that is visible and can be treated with surgery. But the psychological injuries are much harder to see.

I believe within the total spectrum of brain injury and psychological health problems, we're trying to figure out the whole gamut of treating these issues so we can help our Warfighters. We are looking to identify the injury when it happens, or as quickly as it becomes a problem, and find out how to diagnose it as soon as possible. On the battlefield, we're trying to provide solutions for triage — when there are numerous injuries, how can we determine what needs to be treated first?

Sometimes, brain injuries can be more silent, so if someone experiences an IED explosion inside a vehi-

cle, they can have multiple injuries — they can be bleeding from a limb, or have a head injury and be unconscious. And it's difficult to tell if they have an internal head injury if it's a closed-head situation, so the medic may just focus on the bleeding limb, not knowing the patient also has a head injury. We're trying to provide effective medical solutions for those medical providers in the field. How can they identify and triage those patients, and get them to more definitive care? And then on the back end, how do we help them to restore function if function is lost? As you can see, the NPH PMO is responsible for providing medical solutions across the entire spectrum of brain injury and psychological health.

PAO: Can you talk more about the types of injuries you see on both sides of brain trauma, the physical and psychological aspects?

KS: On the physical brain injury side, these types of wounds can cause significant problems for the patient. One issue is, if someone experiences a brain injury on the more "mild" side, like a concussion, there is a window of time during which if they are not given treatment or rest, and they go back out and experience a second concussion, then the injury can be more devastating, and this could compound the results of the first concussion. When it comes to more significant brain injuries, the brain controls everything in the body, so the Warfighter could have considerable loss of function that impairs readiness and the ability to go back out and fight.

On the psychological health side, these types of problems have been around for many years, and they have been called different things at different times. When a Soldier starts to experience these problems on the battlefield, however, the goal is to treat them as far forward as possible — to get the person help in dealing with what we call "combat stress." We try to help them immediately, to keep them deployed and able to fight. But when these Soldiers come back home, in "reset" mode, having these psychological health concerns affects their ability to do their jobs overall. They could experience lack of sleep, nightmares, things that keep them awake, headaches, which impacts their ability to function properly.

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PAO: Can you describe your personal involvement with brain injury research over the past decade?

KS: I've had the opportunity to be involved with TBI products from all different aspects. On the science and technology research side, from a portfolio aspect, to the lab side working at the Walter Reed Army Institute of Research, and now on the product development side — so I've been able to see it from all different angles. To see the LATBI project go from an idea that two researchers had, which was, can we create an assay to detect brain injury like we can for some of the cancer diagnostics, and go through animal research to see if these proteins exist — then take that through clinical trials in humans to validate it, and then go to biotech device companies to create actual solutions and products that the Warfighters can use. It's been a tremendous effort from all aspects of our higher headquarters, the U.S. Army Medical Research and Materiel Command, in working together to get that over the goal line. I believe that developing a product takes significant time and money, and the Department of Defense has done a tremendous job to see the product through to completion in the last 18 years.

PAO: What sets the NPH PMO apart from other PMOs within USAMMDA?

KS: I believe the brain is the most important organ we have, because it's responsible for everything. The NPH PMO is looking at ways to protect, treat and restore brain function as a whole. So, it's the "brain health" PMO of USAMMDA Our goal is to get solutions fielded to the Warfighter.

One of our programs, the Laboratory Assay for Traumatic Brain Injury, is the first blood test for detecting brain injury. To me, that's very exciting for the NPH PMO to be involved in the first-ever development of a solution. It's also exciting in the area of brain health. A great deal of research funding has been focused in this area over the past decade, and I think over the next decade, we'll see solutions coming from this field. I really think it's going to be an exciting time for the NPH PMO over the next ten years, to discover what those solutions may be.

PAO: Can you tell us about some other recent

success stories?

KS: We just started two new efforts regarding drug treatments for both brain injury and psychological health, PTSD specifically. The exciting thing about these projects are that they are group-type awards, where we're really trying to make a difference. I think the topic of drug treatments has been a difficult one for both areas, and we're trying to find ways to improve what we call the "Phase 2 clinical trial time." We are hoping to understand the mechanisms of drug action and getting the data necessary to move a product into Phase 3. Both efforts are large and intergovernmental, with private industry, academia and the government working together to find ways to get drugs that we think will be successful, into the Phase 3 world. So many drugs have been failing to show promise in their final clinical trial, which means that a lot of money has been invested in something that did not work in the end. Our goal is to form successful partnerships, so we can start to enhance the quality of the Phase 2 trial portion. I think that the small companies can benefit from this, because many companies have stepped back from PTSD and brain injury research in the last 20 years due to poor return on investment, as the drugs have not been working effectively for quite a while. We are working with small biotech companies lately, and often these are funded with venture capital, so they need to see things work quickly in order to push the projects into later stages of development. They take more risks in the early development phase, and move on to large clinical trials more quickly. With the help of the NPH PMO, and the funding of the DOD behind it, we can help to do what is necessary in the Phase 2 period, to de-risk the program going into Phase 3. We can answer the questions necessary to design a Phase 3 trial that we believe will work.

And both groups are pursuing the adaptive clinical trial design, which is a new effort that the FDA supports. It involves how clinical trials are designed, and the statistical evaluation. Although both projects are going to employ these new methods, they have just gotten started, so it will be a few years before we really see how it will impact the field. But it's very exciting! **PAO**: What does it mean for you to be a part of the NPH PMO, with regard to product impact?

KS: My responsibly as the project manager is to make sure that all of the product managers can do their jobs effectively, and get things done. Although I may be the one in charge, I see it as a position of service, to help them do their jobs well. The product managers are really the ones who work with the companies, develop the timelines, and brief products to senior leaders to get the approval to move the products through development. They're the ones doing all of the work; as the project manager, you try to make their lives easier, to make sure they can do their important tasks.

Now, on the acquisition side of things, it's exciting to be involved in problem-solving We know what the end goal is, but sometimes you must deliver capabilities one piece at a time so you can get to that end goal. Our job is to figure out how we can get the 80 percent solution to the requestor while we're still working on the 100 percent solution. But often, 80 percent is better than nothing, if they have nothing to use to treat patients.

PAO: Do you have any final thoughts?

KS: As a product manager in the DOD, the use of government funds and congressional funds is regulated by the Federal Acquisition Regulation guidelines, and so we must know what all the rules are, and how we can use these to get a product developed. Our job here at USAMMDA, and in the NPH PMO, is to make sure all of the pieces are in line. Not only are we to produce the product and get it ready for use, but we also have to understand the training that goes along with the product, the cybersecurity issues, how will we field the product, who will get it first, what medical personnel will use it — and we have to understand all of this in the deployed setting So there are many logistical considerations that we must work through with all of our counterparts to ensure that a product we're making is going to be something that the requestor wants and can use, and that it won't impact the logistical considerations for our deployed environment. These are very specific things to consider, and I think that we are uniquely poised here at USAMMDA and USAMRMC, to understand all of the difficulties that go into fielding a product for our Warfighters.



Army Cpt. Sarah Sanjakdar, presenter for the Neurotrauma and Psychological Health Project Management Office at the U.S. Army Medical Materiel Development Activity, discusses the Laboratory Assay for Traumatic Brain Injury program with Army Gen. John M. Murray, commander of the Army Futures Command, during a VIP Medical Lanes visit hosted by the U.S. Army Medical Research and Materiel Command, Fort Detrick, Maryland.

Photo by Ashley Force, USAMMDA Public Affairs

FMWR Holds 3rd Annual Functional Fitness Competition



Spring Weather Preparedness Starts with You

By Garth Phoebus, Directorate of Operations

Some of us are sad to see the beautiful winter snow disappear for the year. The season of allergies and watery skies are upon us. Spring weather is unpredictable at best. This is a time to prepare for storms, flash floods, flooding and possibly tornadoes.

Temperatures are bound to fluctuate for a few weeks from cold evenings to warm days. Spring thunderstorms can be severe. Whenever warm, moist air collides with cool, dry air, thunderstorms may occur.

For the most part, the items you need in your preparedness kit are the same for all hazards. There are resources available on the <u>Ready Army</u> website to help you prepare.

Flooding is the most common natural disaster. Floods can develop over a period of days; however, flash floods can develop in a matter of minutes. While Fort Detrick did not experience a vast amount of snow this past winter, the installation sits just outside of the mountains; therefore, flooding is still a concern. Depending on temperatures in the region, the ground could soften allowing the ground to absorb the rain, but if the temperatures remain low, the ground will remain hardened and could cause flooding.

Fort Detrick asks the community, no matter where you reside, to prepare for the transition to spring weather. We recommend the following preparedness tips:

 Consider purchasing a flood insurance policy if you do not have one already.

2) Review your current insurance policy and become familiar with what it covers.

3) Make a flood plan, plan evacuation routes, and keep important papers in a safe, waterproof place.

4) Take photos of possessions for potential claims.

To learn more about flood insurance, visit the National Flood Insurance Program online

https://www.floodsmart.gov/.

Fort Detrick also wants to remind the community to have the following items reviewed and updated regularly:

1) A family communication plan. All members of the family should review and familiarize themselves with the plan.

2) Have all family members' and other important phone numbers written down or memorized.

3) Have an emergency kit in your car and at least three days of food and water at home.

4) Know how to shut off utilities.

If you see flooding on roadways, "Turn Around, Don't Drown!" Be informed, make a plan, build a kit, and get involved. Failure to prepare can put yourself, your family, and your property in jeopardy.

Preparedness starts with you! Prepare Strong!

'Military Kids Can!' Art and Essay Contest Runs April 1 to 30

By Susan A. Merkner, U.S. Army Installation Management Command

Entries may be submitted April 1 through April 30 for the 2019 "Young Lives, BIG Stories" contest sponsored by the U.S. Army Installation Management Command G9 Family and Morale, Welfare and Recreation.

The essay and artwork contest is open to active-duty Army, Army National Guard, Army Reserve, Army spouse or U.S. Army retiree children in preschool through grade 12.

The annual contest coincides with the April observance of Month of the Military Child. This year's contest theme is, "Military Kids Can!"

Children are encouraged to answer the question: "What does it mean to you to be a military child?"

Drawings may be submitted by children ages three through third grade. Written submissions may be entered by children in grades four through 12.

Entries are judged for content, form, presentation of the main idea and creativity. Prizes are given for the winners of each of the age categories and one overall winner.

Month of the Military Child is observed to recognize and honor military children for their contributions and support to Soldiers and the Army mission. The observance reiterates the Army's commitment to Soldier and Family readiness and resilience, to excellence in Child and Youth Services, and to a supportive environment where children can thrive. MOMC was established in 1986.

Submissions, which must be accompanied by an entry form completed and signed by a parent, legal guardian or sponsor, will be accepted online and by mail from April 1 to 30.

Find guidelines and more information at <u>https://</u><u>www.armymwr.com/programs-and-services/family-assist/month-military-child/young-lives-big-stories/ylbs</u>-fag.



Artwork by Margaret Gacutan of USAG Bavaria Grafenwoehr was among the winners in the 2018 "Young Lives, BIG Stories" contest.

For more information about Month of the Military Child, visit the U.S. Army Family and Morale, Welfare and Recreation website at:

https://www.armymwr.com/programs-and-services/family-assist/month-military-child.



Aboona Becomes 'Skipper' of Naval Medical Logistics Command

By Julius L. Evans, NMLC Public Affairs

Cmdr. Steve Aboona assumed command of the Naval Medical Logistics Command, relieving Capt. Tim Richardson in a ceremony held March 15 at Fort Detrick, Maryland.

Well attended by family members, friends and coworkers from current and previous commands of both participants, Richardson thanked the NMLC staff for the unprecedented amount of success the command achieved during his tenure in his remarks to relinquish command.

Since August 2017, the command earned recognition and awards that included the Logistician of the Year Award, the Surgeon General's Blue 'H' Award for Retention, successfully completing the Medical Inspector General inspection and successfully completing the Naval Supply Systems Command's Procurement Performance Measurement and Assessment Program inspection.

Rear Adm. Tina Davidson, commander, Navy Medicine Education Training, and Logistics Command, expressed her pleasure in having Richardson as her deputy commander when he reports to his next duty station in April 2019.

Davidson, who served as the ceremony's presiding officer, also praised Aboona as he prepared to take command of NMLC. "After having served as the deputy commander, you already know your outstanding team and you have had the opportunity to wear the shoes as the acting commander at various times," she said. "We are witness to your talent, your expertise and your leadership. With you in the lead, Navy Medicine will continue to ensure that you are well equipped to meet the forces afloat and the Warfighters' needs each and every time. I wish you all the best and I look forward to working with you."

Richardson departed NMLC after one tour of duty, knowing he left the command in good hands. "We've been able to pull together a great team of leaders, managers, contracting professionals and special assistants to address and resolve the evolving worldwide medical crises," Richardson said in an interview with a local newspaper reporter.

He thanked his upper echelon chain of command and praised the support they provided that allowed him to engage the largest transformation in Navy Medicine in decades, as administrative control of all Military Treatment Facilities was transferred from the military

services to the Defense Health Agency.

He then turned his attention to the staff, describing them with passion and affection. "I led an incredible team. Not just NMLC, but Navy Expeditionary Medical Support Command, Naval Ophthalmic Support and Training Activity and NMLC Detachment Pirmasens, Germany. You have helped me express a shared understanding of our primary mission of becoming a ready medical force. I feel honored to have served as your commanding officer and as your commander," he said with pride. "I am extremely proud to have had this opportunity. You are what makes the tour a success. Be proud of what you have accomplished. You are truly a winning team. No commanding officer earns success in all the achievement we have earned together, without a solid team."

At the conclusion of Richardson's remarks, NMLC's Deputy Commander and Master of Ceremonies Cmdr. Matthew Marcinkiewicz invited Principal Deputy Assistant Secretary of the Navy, Joe Marshall Jr., to offer his comments.

Marshall thanked the Richardson and the Aboona families for their support throughout the careers of their loved



Joe Marshall Jr., principal deputy assistant secretary of the Navy (Financial Management and Comptroller) and Rear Adm. Tina Davidson, commander, Navy Medicine Education, Training and Logistics Command, stand by as Cmdr. Steve Aboona takes command of the Naval Medical Logistics Command March 15, 2019 at Fort Detrick, Maryland.

Photo by Julius L. Evans, NMLC Public Affairs

Continued on page 23

ones and he thanked them for being present at the ceremony.

He shared with the audience two separate, personal work-related stories, demonstrating the long history each man has shared with Marshall at different commands. Then, as the time-honored Navy tradition of passing the rungs of leadership from one shipmate to another commenced, he said, "Cmdr. Aboona, you are probably feeling a little overwhelmed right now, but go forward, be focused and we know you are going to do a great job."

After receiving a warm welcome, Aboona took a moment to recognize Michael Meadows, retired naval medical service corps officer and a long-time personal friend and mentor who influenced Aboona throughout their 21-year friendship dating back to their time at Middle Tennessee State University. Coincidentally, Richardson also knew Meadows when they were in the United States Air Force stationed together in Arizona.

Silence fell over the room as the audience's attention was captured by the most sentimental moment of the ceremony.

"To my wife Maria, you are the source of my strength,

my life and my rock. Thank you for your patience and support, during the constant changes in military life and the demands of executive medicine. On top of your career as a family nurse practitioner, having spent countless hours sometimes in the middle of the night with no sleep, caring for patients, some who are veterans, I know it's not easy," Aboona said. "Thank you for your generosity helping those around us with such grace and compassion. You may not wear the uniform, but you wear the fabric of the Nation in my eyes."

The audience erupted in applause after Aboona's heartfelt tribute to his wife. He ended with a quote that has inspired him over the years and is the reason why he serves.

"Above all, we must realize that no arsenal, or no weapon in the arsenals of the world, is so formidable as the will and moral courage of free men and women. It's a weapon our adversaries in today's world do not have," Aboona said, quoting President Ronald Reagan.

With this, the official ceremony began. As each man approached the presiding officer and rendered crisp hand salutes, Aboona turned to Richardson and said, "Sir, you stand relieved," signifying authority had changed hands.



Cmdr. Steve Aboona (left) assumes command of the Naval Medical Logistics Command, relieving Capt. Tim Richardson (right) in a ceremony held March 15, 2019 at Fort Detrick, Maryland. At the reception, they shared their final duty together - cutting the cake.

Photos by Julius Evans, NMLC Public Affairs



Rear Adm. Tina Davidson, commander, Navy Medicine Education, Training and Logistics Command, pins the Legion of Merit medal on Capt. Tim Richardson at the Naval Medical Logistics Command ceremony where Cmdr. Steve Aboona assumes the position of commander, March 15, 2019 at Fort Detrick, Maryland. Photos by Julius Evans, NMLC Public Affairs

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The Fort Detrick Diamondbacks Take First in County Championship



The Fort Detrick Diamondbacks, a fifth and sixth grade girls' team, won their first winter basketball championship through the Monocacy Youth Basketball Association League. The MYBA is one of the largest basketball leagues in Frederick County, Maryland. The championship game was held March 10, 2019 at New Market Middle School in New Market, Maryland.

This was Head Coach Shanise Swanson's third season coaching the Diamondbacks. The team took the title as the number one fifth and sixth grade team out of almost 40 teams, ending the season with a 10-1 record. The Diamondbacks will wrap up their winter season by volunteering their time at the Special Olympics of Frederick basketball tournament March 30, 2019. They will each spend eight hours giving their time to basketball players with various disabilities. Coach Shanise teaches the girls to stay humble and eager to help one another on and off the court.



Photos by Assistant Sports Director Frederick Hill, FMWR-CYS

Linden Gate at Forest Glen Annex Closing

- Effective April 1, 2019, Linden Gate at Forest Glen Annex will close.
- The closure is a result of manpower shortages.
- Brookville Gate remains open and employees and visitors must enter through this gate.
- Brookville Gate is open 24hrs.
- Questions? Call Physical Security at 301-619-3726.



ATTENTION MOTORCYCLISTS!!!!

302d Signal Battalion Season Opening Ride All Fort Detrick riders are welcome! Tuesday, April 02, 2019: 08:00 – 16:00 (ish) HRS KSU (Kick Stands UP) from Bldg 1668 parking lot Porter Street, Fort Detrick

> Every year before we ride, every Soldier must have refresher training IAW BN policy and AR 385-10





RIDE INFORMATION:

- TRAINING BEGINS AT 08:00 IN THE GATEWAY TELECOMMUNICATIONS CENTER CONFERENCE ROOM (BUILDING 1668).
- 2. KSU AT 11:00 TO THE PARKING LOT FOR PRACTICE DRILLS, THEN FOR A NICE 75 MILE (APPROX.) RIDE AROUND THE REGION.
- 3. THE MORE THE MERRIER SO SPREAD THE WORD! BIKE MAKE/MODEL IS IRRELEVANT.
- 4. PLEASE REPORT WITH A FULL TANK OF GASOLINE..
- 5. LUNCH WILL BE ON THE ECONOMY, SO PLEASE BRING \$\$\$.
- 6. PLEASE BRING INSURANCE/LICENSE/REGISTRATION PAPERWORK, BRC COURSE CARD, AND PPE.

RSVP preferred. POC: Tom Downey (301) 619-8282 thomas.a.downey2.civ@mail.mil

ATTENTION MOTORCYCLISTS!!!!

302d Signal Battalion Memorial Day Ride ROLLING THUNDER XXXII Balling Thunder's Filled supping ofter 22 w

Rolling Thunder's FINAL running after 32 years. Sunday, 26 May 2019 at 07:00 – 16:00 (ish) HRS KSU (Kick Stands UP) from PX parking lot



RIDE INFORMATION:

THIS IS THE FINAL RUNNING OF ROLLING THUNDER. LAST CHANCE!!!!!!!!!

- ARRIVE AT 07:00, FT DETRICK PX. WE WILL PIGGY-BACK HARLEY OF FREDERICK'S RIDE TO THE PENTAGON. PARADE STARTS AT NOON AND TAKES 15-20 MINUTES.
- THE TOTAL RIDE WILL BE A MINIMUM OF 112 MILES. IF YOU HAVE NEVER PARTICIPATED, YOU OWE IT TO YOURSELF. LAST CHANCE FOR MEMORIES OF A LIFETIME.
- THE MORE THE MERRIER SO SPREAD THE WORD! BIKE MAKE/MODEL IS IRRELEVANT. PASSENGERS WELCOME.
- PLEASE REPORT WITH A FULL TANK OF GASOLINE..
- LUNCH WILL BE FOOD TRUCKS, SO PLEASE BRING \$\$\$.
 - FOR MORE INFORMATION: HTTPS://WWW.ROLLINGTHUNDERRUN.COM/2019-RUN-INFO/

RSVP preferred. POC: Tom Downey (301)-619-8282 Thomas.a.downey2.civ@mail.mil





Army Senior Leaders Send – Don't be a Bystander

As members of the United States Army, each of us has an obligation to promote a climate of trust—our profession's bedrock—throughout our organization. The way we do this is by living the Army Values: <u>loyalty</u>, <u>duty</u>, <u>respect</u>, <u>selfless service</u>, <u>honor</u>, <u>integrity</u>, and <u>personal courage</u>. From the newest Soldiers in basic training, to our most senior leaders, the Army Values bind us together as a profession. While much is changing for the Army right now, our Values will not. They are enduring and remain as relevant today as they were when first created. When it comes to living the Army Values, there can be no bystanders.

Across the Total Army, we continue to focus on eradicating sexual harassment and sexual assault from our ranks. We must do everything within our power to rid the Army of these crimes. This is a readiness issue that affects our ability to accomplish our mission. Over the past several years, we have placed a high priority on our prevention efforts, and although we are on the right trajectory, we still have significant room to improve. In all components, sexual assault reporting is increasing, which is an indication that our Soldiers trust their leaders to address the situation in a professional manner. We all have a responsibility to look out for one another – there can be no bystanders. Stay alert when the warning signs become present, and if you see something, ACT! Leaders and Soldiers have an ethical obligation to intervene to stop sexual harassment and sexual assault from happening. Those who do not, violate the Nation's trust and the trust of their peers.

The Army will continue to improve the effectiveness of our prevention efforts moving forward. In April, we will co-lead a Joint SHARP Conference hosted by the Military Service Academies that will bring together college and university leaders from across the country to share best practices. As our society wrestles with this difficult problem, the Army will continue to take a leading role in developing solutions. This starts by ensuring that the perpetrators of sexual harassment and sexual assault are held accountable and that the victims are protected without fear of retribution.

Throughout the force, we must also continue to focus on preventing suicides. Although suicides fell by 1.3 percent across the Total Army in 2018, Regular Army suicides increased by a troubling 18 percent. Our most vulnerable population consists of our junior Soldiers. Leaders and teammates must watch attentively for indicators of suicides and inform their chain of command when they know trouble is on the horizon. Every loss of life from suicide is a tragedy that could have been prevented. Our NCOs are the first line of defense – we expect you to know your Soldiers, visit them in the barracks, and provide them the care and assistance they need and deserve.

We're counting on each of you to help solve these problems. Every instance of sexual assault or suicide has a moment when someone could have intervened to change the outcome. Have the courage to stand up and act when you see something wrong. Seize the opportunity to get your teammate help or to remove your battle buddy from the environment when warning signs become present. We need everyone on this team to be ready to fight when called upon, which can only happen if we look out for one another. Let us all reaffirm our commitment to our values and to one another. In doing so, we will remain the strongest army on the face of the earth.

Mark A. Millev

Mark A. Milley General, United States Army Chief of Staff

Mark T. Esper Secretary of the Army

In and Around Fort Detrick

USAG Fort Detrick on Social Media

You can follow USAG Fort Detrick on social media for daily updates and information. On Facebook go to: <u>www.facebook.com/</u> <u>DetrickUSAG</u> and "Like" us or follow us on Twitter: @DetrickUSAG.

As a reminder, all social media sites must be registered with Army. For more information, contact the Public Affairs Office. The Fort Detrick Weeklies can now be found on the Fort Detrick homepage <u>www.detrick.army.mil</u> under "Weeklies" and "Announcements."

The Tax Center is now Open

Located in the Office of Staff Judge Advocate, 521 Fraim Street

The Tax Assistance Office will be available to assist Soldiers and retirees with completing their 2018 Tax Forms, Jan. 28 - April 15, 2019.

Hours of Operation:

Mon. – Wed. and Fri. from 9-12 a.m., 1-4 p.m.

Thursday from 1-4 p.m.

Closed on federal holidays and days scheduled as a DONSA.

Deadline to file taxes is April 15.

Visit: http://www.detrick.army.mil/ taxAssistance/index.cfm to download necessary intake forms and documents needed for tax assistance.

For additional information or to make an appointment call (301) 619-1040.

ACE Civilian Suicide Prevention Training (registration not required) April 24, 10-11 a.m. July 17, 10-11 a.m. Building 1520 – Classroom 6

For those who believe attending suicide prevention training will be offensive or emotionally stressful, they are encouraged to contact their supervisor to discuss an alternative to the training (AR 600-63) and contact 301-619-2120 with any questions.

Upcoming 2019 Personal Readiness Trainings

IAW AR350-1 this training meets the one hour Personal Readiness Requirement, formally ASAP and ACE Suicide Prevention. POC is the Army Substance Abuse Program (301) 619-1751. April 10/June 12/July 11/August 21/

September 10 1520 Building, Classroom 6

Auto Skills Center

Did you know we offer full service auto repair and lift bay rental for selfhelp? Open Tuesday through Saturday 9 a.m. -5 p.m. For more information or to schedule an appointment, call (301) 619-2759.

The Society of American Military Engineers (SAME) Mid-Maryland Post is proud to announce its 14th annual scholarship competition. High school seniors and full-time undergraduate students (freshman through junior) pursuing a degree in engineering, architecture, or related science, planning, and construction fields are eligible to apply. Completed scholarship applications, available at www.same.org/Get-Connected/Find-a- event. Post/Mid-Maryland/Outreach/ Scholarships, are due April 19. Multiple awards of at least \$1,000 each will be announced in May.

Upcoming Barquist and Pharmacy Closures

Friday, April 19 - (Mandatory Training) from 11:30 a.m. – 4:30 p.m.

Father Daughter Dance

Saturday, April 6 Fathers and Daughters will enjoy dinner, dancing and more! \$50 per couple, \$20 each additional child. For tickets, please call (301) 619-4079 or (301) 619-2892

Spring Research Festival May 1-2

Registration is open – March 5 – April 5, 2019 SRF Dates: May 1-2, 2019 To learn more about or to register for the Spring Research Festival, please visit: <u>https://springresearchfesti-</u> val.amedd.army.mil/.

Participation in the following events require registration: Poster Display Poster Blitz Lecture Post Bac/Post Doc Lecture

*Participation in Poster Display is required to participate in a lecture event.

**Registration is not required for spectator attendance.