DEPARTMENT OF DEFENSE BLOGGERS ROUNDTABLE SUBJECT: THE 25TH ANNIVERSARY OF THE ARMY FAMILY ACTION PLAN BRIEFERS: SECRETARY OF THE ARMY PETE GEREN; COLONEL CRAIG BROTCHIE, SPOUSE OF GENERAL ANN DUNWOODY, THE FIRST FEMALE FOUR STAR GENERAL; GENERAL JOHN MACDONALD, COMMANDER OF FAMILY, MORALE, WELFARE AND RECREATION COMMAND; BECKY PILLSBURY, SPOUSE OF GENERAL JAMES PILLSBURY, DEPUTY CHIEF OF STAFF FOR LOGISTICS AND OPERATIONS, ARMY MATERIEL COMMAND TIME: 10:00 A.M. EDT DATE: THURSDAY, SEPTEMBER 4, 2008

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LINDY KYZER (Army Public Affairs): Again, this is Lindy Kyzer with Army Public Affairs. Thank you so much for joining us for today's Army Bloggers Roundtable.

We're pleased to have the Secretary of Army, the Honorable Pete Geren here to speak with you today. He's here to discuss the 25th anniversary of the Army Family Action Plan, an anniversary we marked on August 15th. He'll be joined by a panel of experts on Army Family Action Plan, and I'll let them introduce themselves in just a moment. Following a few minutes of remarks from Mr. Geren and the panelists, we will take your questions. We do have just 45 minutes for today's Roundtable, so please keep your questions brief. Ask just one question so we have time to get to everyone. And please keep that mute button on when you're not asking questions, so we don't get that background noise.

Now I am very thrilled to introduce the Secretary of the Army, Pete Geren. Thank you so much.

SEC. GEREN: Well, thank you and all the folks on the -- at the other end of the telephone, thank you for joining us today. And I certainly want to thank the family members who are here today on this end of the phone, and thank them for their service as part of the Army team. And we even have a Air Force officer, who's a part of the Army team as a -- (audio break) -- Army spouse.

But this is an important opportunity for us to look back on 25 years of the Army Family Action Plan. General Wickham initiated this with a -- with a very prescient white paper that he wrote 25 years ago, and did an extraordinary job of looking into the future and laying out for us the challenges we would face, as an Army, as we moved further into this century.

And the Army, over the last several years, has been stepping up to this challenge, making -- doing everything we can to provide Army families a quality of life that's comparable to the quality of their service. But we recognize there's more to do, and the great folks that are with us today are some of those

that are helping us respond to the needs of families and helping us understand the needs of families.

So, thank you all for being here, and we look forward to the -- to the questions and conversation.

COL. BROTCHIE: Well, good morning. It's a -- it's a pleasure to be with you all this morning. My name is Craig Brotchie, and as the secretary mentioned, I'm a retired Air Force officer, and my wife is Lieutenant General Ann Dunwoody. And we spent 10 years, lived in -- together, both in the military; five of those years we were in the same house, five of those years we were serving in different places in the world.

So, for the last eight years, I have been an Army spouse, and served in a variety of capacities. I've enjoyed the AFAP program and experience. A lot of great issues out there, and in this current conflict we're involved in, the interaction with family members critically important. And it's a -- it's a pleasure to be with you all this morning.

MS. PILLSBURY: Good morning, I'm Becky Pillsbury. My husband is Major General Jim Pillsbury. I've been involved with AFAP since its inception. The first one I went to was at Fort Campbell, Kentucky, and I've stuck with it ever since -- through six different trips. This is our 19th move. I've retired from 11 school systems, and I have stacks of curtains that would cover every window in every house, because no two Army houses have the same size windows.

So, AFAP has helped me -- (inaudible) -- my sanity through all these different times, and it's a very visible way of making changes. It's a very positive way to make changes. And it's -- it empowers the family members. It's wonderful to realize that the Army recognizes the importance of the families, and they certainly do.

MS. : (Name inaudible) -- director of Family Programs with the --(inaudible) -- MWR, Morale, Welfare and Recreation Command, which is responsible for providing -- (inaudible) -- support across a broad spectrum of services, to include services to soldiers and families.

I started with the Army just before the -- (inaudible) -- Army could attract kind of the growth and the progress of Army Family Action Plan. I married a soldier in 1980. We left Washington, D.C. to go to Fort Bliss. At that point we thought, as a young couple, that -- (background noise). But it was a wonderful experience.

And in 1984 I joined the Army as a Department of Army civilian, and have had a -- I think, a tremendous career in an organization that I personally believe meets every challenge in, kind of, superb fashion. Though we may start out slow, once we understand and assess where we're going, we kind of overcome all those obstacles.

And as you look at the kinds of successes that AFAP has had, almost every Army program that has been developed to support families has been -- had its beginning in the AFAP. Almost every medical or dental benefit that was not congressionally legislated had its origin in the Army Family Action Plan. And, to be most proud, is the Army that has led the way for the rest of the services, in terms of transferring those benefits across the entire Department of Defense. So for TRICARE and dental services and child care and installation volunteer programs and a host of military benefits that also find its origin in AFAP, it's certainly a process to be tremendously proud of.

MS. CAFFIE: Good morning, I'm Sylvia Caffie. My husband is Command Sergeant Major Leon Caffie of the Army Reserve. And I've been a spouse for -ever since 1969.

And the only thing that I can tell you right now, this program should have been around then, during the time that the Vietnam War -- I can only talk to you about past issues, and right now -- (inaudible) -- my husband went off to Vietnam and then came back, I or either he did, knew nothing about AFAP and what it had to offer families or event myself. So -- (inaudible) -- I did not take part in that, but over the last few years I have gotten a chance to be a part of AFAP and go listen in on some of the panels and discussions during those time. And I can truly tell you that it has really worked on solving issues with families -- soldiers and families, and I think it's great.

MS. : My name is -- (name inaudible). I'm married to First Sergeant -- (name inaudible) --. I've been married just shy of six years, and I too am now at the breakeven point where I have gotten to live in the same house with my husband through two combat deployments to Iraq out of Fort Lewis, Washington. I'm very active in the FRG.

For me, it was my sanity. They were my family, and so I hope to be able to bring some of my experience from being recently, what I call a "married single person" with the family of the Army being there -- (audio break).

MS. KYZER: Thank you so much, everyone, for those opening introductions. And now we'll go to your questions. Actually, we'll go in order of those who called. Major (Carroll ?), did you have a question?

Q Yes, Lindy, I'll hop in. Thank you, to all of you, for taking the time to do this today -- greatly appreciate it. And good morning to you, sir, greatly appreciate you being here also.

The first question I have is, there's been a lot of great work done with both PTSD and our wounded soldier programs. In the last year and a half -two years, it has just been absolutely phenomenal with a lot of the actions that the Army has been taking to reach out to both our soldiers that are around military bases, but also those that aren't so much around military bases.

I was wondering if you could talk a little bit about the programs that I know are being initiated to really focus on those guys that are geographically separated from units, from military hospitals, from military support type systems, to get at those guys so that there aren't instances where a soldier may demobilize, and he's out there in the civilian world, miles and miles away from any sort of military support system?

I think it's absolutely essential, and I think the work that we're doing is great, but just wondering if you can talk a little bit about that, sir?

MS. PILLSBURY: This is Becky Pillsbury. This is one of my favorite things to talk about. We have started a non-profit, grassroots program called

"Still Serving Veterans." It's based in Huntsville, Alabama, but we reach out to any and every soldier who is 30 percent or greater disabled.

When people think "disabled," they think the loss of a limb. But only 3 percent of the people who come back injured have a loss of limb. The majority of them are PTSD and TBI -- traumatic brain injury. So what we do is we find out about these, and so many of them are National Guard and Reservists, as you say. And all they want to do is sign the paperwork saying they understand everything, get out of the hospital, and go back home.

And back home maybe in -- (inaudible) -- Alabama, where there is no VA. And they just sit there, they don't have any benefits. (Inaudible) -- signed the paperwork stating, "yes, I understand my benefits," but they really don't.

So, we find out about them. We travel to them. We don't make them travel to us because many of them can't even cross bridges, because it reminds them of where they were injured. So we travel to them. We wrap our arms around the entire family. We provide counseling. We have gotten them into the VA system. And it used to be six months, we now have it less than a month for contacts.

We work with them as far as getting their home handicapped accessible, their car handicapped accessible. We have programs where they can even have counseling -- I'm sorry, have college programs beamed into their home so if -and colleges that will give them Life Skills credits so that if they wish to pursue a career, and are able to do so, we then will be able to get them the Life Skills credits -- they may end up with two years of college credits, even without having attended, and then be able to get the rest of the credits in their homes.

Huntsville is a huge area, as far as being patriotic, and as far as employing. So we work at getting them employed or helping them start their own business. One young man we worked with wanted to start a dog farm where he would raise dogs. So we helped him get a few dogs and get started.

They each have individual needs. But you're so right. It's what we call the "One-sies and Two-sies" who are out there, that we need to know about. The ones who are closer to the military facilities know about it, have access to it, and even have sponsors that will make sure that they remember appointments, that they will get where they need to go, and that they will take care of themselves -- they will take their medication when they need to.

You really need a crusty old command sergeant major to adopt each one of these, to make sure that they get what they need, because many of them are not married. Many of them are rely on their mothers or their grandparents or a brought or sister to help them. And it's a -- it's a very strong responsibility that a lot of people are having great difficulties with.

So, I think we're going to have to go to the grassroots efforts, such as ours, and with all -- we've started one in Kansas City, as a matter of fact, to take care of those who are out and need our help.

SEC. GEREN: Let me add just briefly, there's no substitute for neighbors helping neighbors in these grassroots initiatives. And the geographically dispersed do pose special challenges for us as an Army. And with the demand that's now on the Reserve Component, the Guard and Reserve, moving more and more towards an operational -- full operational part of our Army and less and less a strategic Reserve, so that the issue that you raised is going to become greater for us every year that goes by. But we do have a program with, specifically, TBI and PTSD within the services -- chain teach. And our goal is to chain teach literally every soldier in the Army, Active Guard and Reserve how to spot the symptoms of PTSD; what to do about them; how to spot them in your -- in your buddies. And this program is also offered to families.

So, this is an awareness and education program that is -- we're pushing throughout the Army, and in the Army family, and we believe that, long term, that this would make a great contribution because it will make soldiers better at diagnosing their problems and know how to address them.

We also have developed -- trying to create a virtual headquarters. And we've got a website called "Army One Source" that we we're building and using it to make the resources available, drawing on Active Guard and Reserve and through this website in being able to match up needs and resources around the country.

But this will be a challenge we'll never fully meet. And as we draw more and more on the Guard and Reserve to meet our demands overseas, their needs are going to grow and their geographical dispersion is not going to change. We're going to have to do a better job.

And just -- in closing, tell you that the TRICARE system is a system that we rely on very heavily to meet many of these needs. And in the mental health care area, there are parts of the country where it is not sufficiently robust, and we're having to work to try to address some of those shortfalls.

MS. : This is -- (inaudible). And I'd like to add a few other resources to the conversation that we just heard. (Inaudible) -- primary role that we have, the Army -- (inaudible) -- program that is operated by our G-1, that provides case managers, regionally located close to where the soldiers live, and eventually work.

We also have community-based health organizations that are located in communities so that those Reservists and Guard who return to their home station have a resource that they can go to to ensure that they make their appointments, and coordinate those appointments. Each wounded warrior is provided a case manager who is -- who is located in the -- we call it the "-- (inaudible) --Unit," that provides consistent care to them as they move through the system whether they are PTSD, or have a very serious injury.

The Veterans Administration has also placed federal recovery --(inaudible) -- an example of the safety net that soldiers who have --(inaudible) -- issues, that -- (inaudible) -- we understand how they can be connected. And Congress also just recently passed legislation to implement for the Guard and Reserve what's called the Yellow Ribbon Reintegration Program that allows staff to be out in the community. So there's a tremendous amount of effort, as you've heard, both inside the DOD and Army structure, as well as nonprofit organizations providing support. I think the key is to make sure that we don't overwhelm in that those case managers really are able to connect and explain the resources and support that's available.

MS. PILLSBURY: This is Becky Pillsbury, and there's a program that's really saving lives, and it's the Military One Source, because you can get six counseling sessions and nothing goes in your military records. So, people who still worried that there may be some record of them seeking help can go to Military One Source, and it's completely free, completely anonymous.

MS. KYZER: Thank you so much.

Terry (sp) with a spouse call. Did you have a question?

Q Yes. I am -- excuse me, I'm kind of piggybacking on this -- on this same subject, although I'm -- and introduce myself a little bit, I'm Terri Barnes, and I write for Stars and Stripes, a column that's specifically for military spouses. And I get letters from spouses, and I would say the largest subject -- the one subject that I get the most questions about is PTSD, from spouses who are dealing with their formerly active duty, or currently active duty, spouses usually have -- those who have PTSD.

And I guess my question would be where do the spouses go for help? They see their husbands possibly getting care, possibly not getting care. And I know that help is available, and I usually tell them Military One Source counseling. I direct them toward that because I'm aware of that. But they still feel disconnected. What's a good answer for them? What can they do?

MS. : I think two things I would say to them -- this is Delores Johnson -- and I think there are two things I would say to them. One is that the medical treatment facility that is located -- (inaudible) -- across Army installations, and -- (inaudible) -- It's a great place to -- (inaudible) -actually have a -- (inaudible) -- to talk with them.

There are lots of people who really want that personal interaction, so that they can eyeball people and confirm that what they're telling them is actually what is going to be available there. So, (to see local ?) social worker, the Surgeon General has been adding staff to their (rolls ?) so that we are able to build some additional support within our own system, so that people can walk across and have those folks' support Military One Source.

The second thing I would tell them is that through their FRG, we can provide information and training on what the -- (inaudible) -- has developed, in terms of "Battlemind." So, I think the first strategy is to, is to be able to take some of those courses that are offered through (family ?) -- (inaudible) -groups, so they understand -- so the staff would understand a little bit more about what kind of injuries are the result of the war -- whether that's mild brain injury or PTSD, because these are conditions that we've not -- at least this generation of spouses, have not had to face in the kind of volume that we're facing it now.

And so it's very important to understand what's going to happen, to understand what mild brain injury is; to understand that there's a lot of forgetfulness; there's a lot of time that that spouse will have to invest in helping that soldier kind of do things that they might think is repeating the same activity.

And in terms of PTSD, we believe that the spouses, while not responsible for providing the mental health, is certainly one of the key people who can suggest that the soldier get help, in addition to their chain of commands.

And it's very important for them to hear that, and to hear that -seeking help is really a sign of strength and not going to negatively impact their career, because I think that is uppermost in their minds as they try to reach out for help. Again, we have -- (inaudible) -- changing the policies that we have developed to mitigate against, that perception that everything's going to go down the tube if you actually ask someone for help. And one of the things that we have really changed is the question on the Behavioral Health Questionnaire that asks that -- (inaudible) -- have you ever been referred for mental health? -- (inaudible) -- The one thing that we need to do, that will kind of turn around the perception -- (inaudible) -- because -- (inaudible) --

Q Can I ask a follow-up to that?

MS. KYZER: Go ahead, yes.

Q Something that I hear from spouses who write, or who come onto the blog, is they're looking for other spouses who are in the same position. Are there any efforts to put together support groups of spouses of PTSD sufferers?

MS. : Well, I think those efforts are there. I think that probably we would want to get with the social workers (in those areas ?) and make sure that we advertise that a lot more.

Q Yes.

MS. : Advertise it in non-traditional ways, because we know that this generation of soldiers are very -- (inaudible) -, very much want to stay connected and are active.

Q Mm-hmm. Thank you.

MS. : This is (name inaudible). I just wanted to add, from my personal experience at Fort Lewis, Washington, that through our FRG --(inaudible) -- need a concerted effort to really address what to expect prior to the soldiers coming home. Just so that it didn't blindside us if there were any additional issues such as PTSD, or just natural behaviors that occur just from -- (inaudible) -- and in being separated from you pals. For me, that was extremely helpful. But, touching back on some of the points that were brought up previously, we also had counselors that were not for the soldiers, (they were for the family ?). And there were no records of, you know, depression, or any of the issues in our TRICARE records that would affect our insurance, or what have you.

But, you know, there are about four ladies that I know of at Fort Lewis that did offer counseling at any time -- over the phone or in person. They would come to you. And I would really encourage that any spouses that were having any issues to, first and foremost, go to their FRG leaders and see if there is a resource like that available to them, because I'm sure that you can relate that -- although my family was wonderful and extremely sympathetic whenever I was having a bad day, they still do not understand -- (inaudible) -gone through it, through the same experience.

So, -- (inaudible) -- very obvious answer, but something (I?) know a lot about -- (inaudible) --.

MS. : -- (inaudible) -- talking about -- (inaudible) -- consultant -- (inaudible) -- and particularly at predeployment events, and reunion events, and to (after deployment ?) -- (inaudible) -- That's -- that's kind of a wonderful resource that we've put out in (communities ?). -- (inaudible) -- Fort Riley soldiers came back during the reset period. We provide an additional 20 military family -- (inaudible) -- to invite (individual support ?).

And one of the things that we've heard the soldiers -- (inaudible) -is that soldiers -- (inaudible) -- (that 600-person briefing ?) They really want the smaller (active groups ?). They want to facilitate the groups among themselves. So we are actually asking all of our counselors to do much more --(inaudible) -- support, and just helping the soldier facilitate kind of interaction with -- (inaudible) -- (who they want to ?) talk to, other soldiers are experiencing as well -- the great resources that we've actually put out there, because this is a -- (inaudible) -- for all of us.

And many of these were a result of the Army Family Action Plan issues that were brought forth.

MS. : Just to briefly follow up what everybody else said, (as an ?) FRG, we also invited those (ladies ?) to come to each and every one of our meetings or events, even if it was a pot luck, because you never knew when somebody needed just to step aside and have an unbiased ear to -- just even listen to what they had to say.

And, again, I would highly encourage that if those resources are available at the individual facilities I think -- (inaudible) -- to reach out to the ladies, the counselors to be able to come to the events and be more visible.

MS. : (This is ?) (Dea ?) -- (inaudible), and I have to give her special accolades because she is overcoming a severe sore throat -- MS. : -- (inaudible) --

(Cross talk)

MS. : She still wants to communicate with you all, so I really thank her for struggling through that.

MS. : Well, this is Carla Muller (ph). I have a son who is in the Army and I still write on Army issues for parents at -- on my blog which is --(inaudible) -- soldiers -- (inaudible) -- parent -- (inaudible). So now I've listened to what the -- (inaudible) -- and what everybody is doing for spouses in that and so now can someone tell me what the Army does for the other 50 percent of the soldiers that don't have spouses?

MS. JOHNSON: Yes. The first thing we've done -- this is Dolores Johnson again -- we've recognized that our definition of who is -- (inaudible) -- a soldier had to change and so change that definition. A parent can sign up to be a part of the virtual FRG so that they don't have to drive to a (location that ?) and if they have difficulty actually using the Web or accessing the virtual FRG which keeps them connected to the soldier down range but it also connects them to that whole unit of spouses that are available and other family members.

I think that one of the big stories of this war is that we have had to really refocus a lot of our services -- (inaudible) -- single soldiers and the - (inaudible) -- of the single soldiers and those needs -- I don't think it was

that we forgot those before. It was just that by saying and focusing on the family we sent a message that put them in a different place.

And so I think involving the parents in the programs -- to tell you the truth, most of the FRGs that are in the Reserve component, the acting -- the Guard and Reserve -- are run by parents, and those parents have tremendous insight. They have a lot that they have told us about what needs to happen because they're the ones closest to the soldier that's deployed, and so we make a special effort to involve all of them as we do girlfriends and boyfriends and others who have a vested stake in that soldier's well being.

MS. : Just from a -- I'm sorry, this is -- (inaudible) -- again. From a wife's perspective that was heavily involved in the FRG, many times on the nights that we had FRG meetings -- I know it was mandatory for the married soldiers to come but we always reached out to the single soldiers as well to, you know, encourage them to come and many times their response was well, I'm not married -- I don't need to come to the FRG meeting.

What they don't realize (many times ?) is that the Family Readiness Group is not just for the married side and I think just reiterating that at every meeting and really trying to reach out to the single soldiers and draw them in so that they're also participating. Many times -- I think this is funny but we would get together and the wives would come up with a Mexican fiesta night and we would all go home, decide what we were going to cook, and then we would go to the barracks and bring the food and make the soldiers come down, and (let us love them ?) just a little bit so they remember that they were part of our focus. And at first I know they were like oh, gosh, you know -- (inaudible) -- crazy girls coming at me again -- she's trying to get me to be involved. But I know that they appreciated it because they always came back and just thanked us for making them feel a part of our focus and making sure that they understood that we were there for our husbands and our girlfriends -- (inaudible) -- that we were -- (inaudible).

MS. : I had another question -- (inaudible) -- and I don't know if -- (inaudible) -- can address that. I can -- I can try to answer a question about -- (inaudible). But I just wanted to know what the participation rate of the single soldiers in the block (ph) program was.

MS. : Actually, it's very good because it was a soldier-led program and so the single soldiers are the presidents and the participants in the program. We just concluded the annual conference. It's usually held in August or September of every year and we are now because part of the -- part of -- one of our challenges -- (inaudible) -- is having consistent leadership across the board and ensuring that information gets out to the single soldiers and that website information is maintained and that the infrastructure and service is available. A lot of the single soldiers are very altruistic. They really want to have projects, really give back to the community. They want to be involved in the community that's around them. So they've been engaged in some very phenomenal kinds of activities, and I think over the next year or so we will be funding paid coordinators to help those -- (inaudible) -- presidents that are there, understanding that they have other jobs as well -- that this has become so important to the Army, and wanting to send a strong signal that we want those soldiers to be able to have a consistent program from Fort Lewis to Fort Bragg to the Guard and Reserve as well.

MS. KYZER: Great. And Leah (ph), did you have a question?

MS. : I do. This is primarily for Mr. Geren but I guess it's kind of open to everybody. I was looking for a little bit of insight into how the Army strikes a balance between funding the Family Life programs versus funding actual military needs because I know -- (inaudible) -- the family programs are wonderful but my overriding concern is always the safety of my husband and making sure that he's got everything he needs to do his job. And so I was just wondering about that balance.

SEC. GEREN: Anytime you have to live within a budget you have to make hard choices. There's no doubt about it. Always the first priority of our Army are the men and women in harm's way. We can never take our eye off of that ball. That's got to be where every day you wake up, what can we do for the men and women that are in harm's way and do everything we can. Now, that doesn't mean that you can ignore other important aspects of the life of the Army and family support is a huge part of that, and over the last couple years we've more than doubled support for families. We've worked hard to move those family support programs from the supplemental -- (inaudible) -- into a -- to the regular budget and into our five-year budgeting cycle and have been successful because we recognize how important that is.

But I can assure you that we never take our focus off the men and women who are in harm's way. That is our top priority. But an important part of supporting those men and women in harm's way is making sure the families have the support that they need, and General Wickham 25 years ago wrote that the family support is a readiness issue. If you are in harm's way and you're having to worry about whether or not your children are in good schools or the housing (they're in that it be safe ?), their neighborhoods are safe, it's going to impact readiness. So just from a readiness standpoint family support is critical. But our commitment to family goes beyond that. We believe we've got a moral commitment to the families. They're volunteers just like the soldiers are and they're carrying a big part of our nation's burden particularly during these very challenging times. But your point is well taken. We can never take our eye off the ball of the men and women whose lives are on the line for us. We've got 250,000 soldiers in 80 countries around the world today (varying ?) threatening environments and we -- that is our obsession.

MS. JOHNSON: This is Delores Johnson again and I'd like to add to what the secretary said. The ASAP (ph) actually is a process that allows us to vet some of those key soldier and family readiness issues so that as issues come forward there's a process by which what we call the voice of the people gets to help the Army prioritize what's important and to put those priorities in some kind of rank order, and the ASAP helps us do that.

There are a number of issues that have come forward that the voice of the people have determined that it's too costly. For instance, we had an issue that came forward about relocation of pets from overseas. While we recognize that pets are important, that's costly and doesn't strike that balance, I think, that the secretary is talking about, you know, and other kinds of allowances. So I think that over the years that the ASAP process has really proven itself to kind of create an additional vetting process for a number of the issues that have come forward because it is soldiers and civilians and spouses and retirees all speaking with one voice for the Army so that, you know, the chief and the secretary aren't just kind of (shooting in the dark ?) about what's important.

MS. KYZER: Okay. We do have a couple of folks with us -- (inaudible) -- and I don't want to neglect them. Gordon, do you have a question here?

MR. : Sure. I -- (inaudible) -- ask another -- (inaudible) -- for questions I guess I do is -- (inaudible) -- secretary in particular but anyway -- (inaudible) -- the was has obviously created this kind of new generation of combat veterans and we begin to see the possibility that -- (inaudible) -- years thousands could begin to come home -- (inaudible) -- create a bubble for the Army -- (inaudible) -- question -- (inaudible) -- that -- (inaudible) -- you have to be kind of -- (inaudible) -- in a more -- (inaudible) -- way than you have had -- (inaudible).

SEC. GEREN: I've heard of that -- (think of it ?) as a bubble that's on the horizon. It's a bubble that we've been working through the system over the last several years. We've had 750,000 people deploy, some multiple times, and so these -- (inaudible) -- they've been working their way from theater and back through the system -- some staying in the Army and preparing and deploying again, some with health needs, some going on into the civilian sector. We do need to do a better job in our cooperation and coordination with the VA and that's an area of great emphasis. A lot of work between the secretary of defense and the services and General Peake, who's the head of the VA, as you know, and we are constantly improving the coordination between the services and the VA and making the transition from the military into a civilian life with the support of the VA more seamless than it is. That's an area that needs work.

But the system has been under a lot of stress over the last seven years. This is a -- deployment has involved hundreds of thousands of soldiers so we are already contending with the issue that you raise. If the war were to end tomorrow and all of a sudden 150,000 soldiers, sailors, airmen, and Marines came home there's no doubt it would stress the system in a number of ways. But we're -- the system is being tested now and we're shaping the system to meet the needs. We're looking at the next 20 years as an era of persistent engagement, persistent deployment, and persistent conflict so we're trying to shape the Army to meet the needs of an army that is consistently deployed and accepting that what we have today is the new normal.

We're not going to go back to the 1990s and a garrison-based army. We're going to continue to be a deployment army -- an expeditionary army -- and that's causing transformation of the entire Army in how we educate our soldiers -- how you fit (the kind of ?) education in around deployment so that they can continue to grow and advance as leaders and be in position to be promoted. How do you handle healthcare needs when you have more integration of an active -- I mean, the Guard and Reserve in the geographic dispersion that people -- that the first caller asked about. Those are challenges that we're having to address as well. So the Army -- we're working that bubble a bite at a time, to mix metaphors, I guess.

But this is the new normal for us. We're -- we believe at least for the next couple decades going to remain an expeditionary army and are going to have to shape our support systems to meet the need -- (inaudible) -- new type of army.

MR. : (Inaudible) -- you know, where the Army is trying to make that -- (inaudible) -- tradition and the VA all the more -- (inaudible) -- the VA -- (inaudible).

SEC. GEREN: We kind of -- (inaudible) -- some specifics but we -starting about 18 months ago I guess now Secretary England, the deputy secretary of defense, and Secretary Mansfield, the deputy secretary of VA -- we started a SOC -- a Senior Oversight Council -- and for an extended period of time we met every single week. Now they're meeting three times a month and that had all the service secretaries.

Now, it's -- they had -- the under secretaries are doing most of the meetings for that (but leadership across the department ?) and just raising issues and working through them. Many of them have to do with soldiers that do have some ongoing medical needs and how you make the transition from the Army medical system to the VA medical system -- if the records -- have seamless transfer of the records, and have somebody that is assigned to that soldier to stay with that soldier as long as he or she needs it, literally until that soldier says, I'm done -- I don't want you anymore. The Wounded Warrior program that Delores mentioned is a program that follows a soldier, again, as long as he or she needs the support. So it's very personalized. The SOC created a new position called the family -- (inaudible) -- know the acronym but I'm trying to -- the --

MS. : Federal recovery coordinator.

SEN. GEREN: Yeah. The federal recovery coordinator that's kind of a AWACS that hovers over the top and makes sure that the services are continuing to work with them. But it's very personalized. It's directed at the individual needs of those soldiers. The disability system is an area where we still have a tremendous amount of work -- the disability rating system. We've made some progress in that area. We've got a pilot out at Walter Reed and we're moving that pilot to several other military institutions. But it's a work in progress but an area where there's been tremendous amount of progress. MS. KYZER: I know that we have limited time and that we're about to get off but I really -- I need to -- I cannot stress enough how much correspondence and e-mails and how many groups I'm involved in that are parents, and the Army, if they're going to continue to deploy soldiers -- (inaudible) -- and those soldiers are coming out of the service and into the VA but their parents and their immediate families, those that aren't married, are going to be responsible for identifying TBIs and PTSDs there needs to be a greater emphasis and focus on getting information to parents. I don't know how that gets done but seriously, it is a huge gap in the Army system. I will testify to that personally.

SEC. GEREN: Thank you for emphasizing that point. I -- we -- we're aware of it but we need to be constantly reminded, and I'll add another very challenging piece of the puzzle and you see it all the time. You got so many young soldiers today that don't have families that are intact, and that's a real struggle for us as well. So you have the soldier that -- he or she is -- has the support of a spouse. You have the soldier that may or may not have the support of a mother and father, and then with the society as it is today we've got a good number of soldiers that come into the medical care and leave the Army that don't have that family support network at all, and with the (ways families are today ?) it's a real challenge there. And so there is not a social safety net out there that's family-based for a lot of these young soldiers and you see at the hospitals it's also another challenge for us.

But thank you for emphasizing the importance of this -- of working with the parents. But I just want to lay that other challenge on the table -- those kids who don't have parents that are in a position to support them, many of which the families are split up. The parents may or may not have any ability at all to support those young soldiers. So it's a real challenge for us.

MS. : Well, we'll help you reduce it because those -- I know probably 50 percent of the single soldiers have at least one parent who is truly -- (inaudible) -- involved and maybe (I could stress a notification ?) or mailings or an involvement of who they've designated as their next of kin. It might be an older brother or an older sister or a very close friend in their family. They have someone who's NOK so, you know, at least it's a link into the community and these guys are dropped -- you know, they've, you know, had their strings cut completely. SEC. GEREN: Thank you for emphasizing that. I really take that to heart, I can assure you.

MS. : Thank you.

MS. KYZER: (Inaudible) -- impressions. Okay. I think we have time for about one more question out there so I will offer that up. Any follow-ups? Okay. SEC. GEREN: Let me just close again (by thank very much ?) for the work that you do here -- your blogs. It's such an important part of the communication world we have today and particularly more and more of the younger soldiers. They all (due respects ?) toward the traditional media they more and more depend on the services that you all provide. You all are an important part of the network that helps us as a nation to support our men and women in uniform, their spouses, and their parents, and thank you for devoting the time you do to that effort. And I want to thank the spouses who are here today and thank them for participating and thank them for being a part of this extraordinary effort that our military is carrying on on behalf of all of us.

MS. KYZER: Okay. Thank you. Again, thank everyone for participating in today's round table. Thank you, Secretary Geren, everyone else here with us today. We really do appreciate the conversation that we had. You can find the transcript and audio file at Defenselink.mil/blogger and this concludes today's round table. Have a wonderful day. Thank you, everyone.

MR. : Thank you. Have a great day.

END.