



Building a Bridge to Peace and Stability Through Health

Remarks by Ellen P. Embrey, Deputy Assistant Secretary of Defense for Force Health Protection and Readiness, at the Africa Command Health Symposium, January 9, 2009, Washington, D.C.

Thank you, Dr. Geller, for that kind introduction, and for traveling all the way from Stuttgart to be with us this week in Washington. We so appreciate it.

I would also like to thank all of our U.S. and global partners, not just for coming, but for all of the work you have done, and will continue to do, to help us realize our hopes for a stable, healthy, and prosperous African continent.

And to all of our many friends in the audience from academia and the private sector, good morning, and thank you for coming.

New Era of U.S. Support for Africa

Two years ago, the continent of Africa was still an area of the world addressed by no less than three Combatant Commands.

European Command, headquartered in Central Europe, oversaw North, and much of Sub-Saharan, Africa. Central Command, which is responsible for the troubled Middle East, oversaw the Horn of Africa, and Pacific Command was responsible for the islands off Africa's western coast.

Practically speaking that meant that, for each of those commands, with large areas of other responsibilities, Africa was a third or fourth priority. Today, thanks to the vision of the President and the Secretary of Defense, there is now a new unified command dedicated solely to Africa.

AFRICOM is an acknowledgement not only of the growing strategic importance of Africa to U.S. defense and foreign policy but of the fact that peace and stability there impacts peace and stability everywhere – in America, and around the world.

A Different Kind of Combatant Command

Unlike other combatant commands, however, AFRICOM's mission emphasizes diplomacy and development as important paths to stability and security, particularly in the areas of humanitarian assistance, civic action, security and military-to-military cooperation, and disaster response.

And, rather than a traditional military command structure, AFRICOM's management and staff will include significant representation from our friends here – the Department of State, the Agency for International Development, other U.S. agencies involved in Africa, and even non-government organizations.

Of course, there is a solid precedent for these kinds of DoD partnerships in Africa. For example, a U.S. Naval Medical Research Unit, established in Cairo in 1942, remains there to this day, working closely with the Egyptian Ministry of Health and Population, USAID, the National Institutes of Health, the Centers for Disease Control, and many other organizations. A U.S. Army Medical Research Unit, activated in 1969, is still conducting research on a variety of diseases, including malaria and HIV/AIDS; and there has been an Army research unit in Kenya for more than 30 years.

The difference is AFRICOM takes it a step further, recognizing not just the importance of assistance in the areas of health care and research, but the intricate relationships between health and development, and stability and prosperity.

AFRICOM Goals and Objectives

Some of the Command's primary objectives, as Dr. Geller noted yesterday, are to: Develop a DoD medical strategy for the continent, and a common operational plan that combines the previously disparate elements of the other Commands; help our military partners build the medical capabilities they need to support force health protection issues, and to respond to regional disasters; strengthen relationships and support other US Government programs; and of course protect the U.S. population from deadly contagions emanating from Africa.

Above and beyond all of that, however, AFRICOM in general, and the work of the Command Surgeon in particular, is the realization of America's commitment to focus not on Africa's problems, but on its potential.

At a recent dinner honoring Bishop John T. Walker, the former Episcopal Bishop of Washington, President Bush talked about the Bishop's travels throughout Uganda in the 1960s.

"That experience," the President said, "convinced Bishop Walker that Africa's greatest treasure is not its spectacular scenery nor its natural resources, but the determined spirit of its people.

"I've had a lot of uplifting experiences as President," he told the audience, "but one of the most uplifting has been to witness a new and more hopeful era dawning on the continent ... "It's been moving to watch courageous Africans, the President said, "root out corruption, open up their economies, and invest in the prosperity of their people."

It is in Our Interest to Care About Africa

While some might ask, 'why should I care about Africa?' President Bush answered that question. Because, he said, It is in our national security interest to defeat hopelessness. It is in our economic interest to help other economies grow. And it is in our moral interest, when we find hunger and suffering, to respond in a robust and effective way.

I think that is a pretty good description of AFRICOM's mission.

So I welcome Dr. Chinua Akukwe, Chairman of the African Union; Mr. Shahul Ebrahim, the U.S. Health Attaché to the African Union; Dr. Lynn Lawry; Senior Health, Stability and Humanitarian Assistance Specialist in the Office of the Assistant Secretary of Defense for Health Affairs, and Mr. Bryan Schaaf of the State Department's Office of Initiatives in Africa.

Our diplomatic friends have traveled far to give us their thoughts on the health challenges – and opportunities – we face in this important area of the world, and how – together – we can build a bridge to peace and stability through health. We look forward to all of today's presentations. ■