

JBSA

LEGACY

WWW.JBSA.MIL

JOINT BASE SAN ANTONIO

OCTOBER 1, 2021



AGNES KOTERBA

A Basic Military Training trainee receives feedback during practice and qualification as Combat Arms Training and Maintenance instructor Ladelious Little rates her marksmanship at Joint Base San Antonio-Chapman Training Annex Aug. 10.

37th TRSS CATM instructors guide students with skill, precision

Page 11



First Army combat medics to receive advanced training graduate

Page 6



In-service recruiters help active duty Airmen continue service in Reserve

Page 13

Myths and facts: Debunking common COVID-19 vaccine myths

Air Force Surgeon General Congressional and Public Affairs

The COVID-19 vaccine has been mandated across the Department of Defense and despite its demonstrated effectiveness and safety, a host of myths have left some Airmen and Guardians hesitant to receive it. While social media posts and some news outlets may make it harder to keep up with what is fact or fiction, the science is clear ... approved COVID-19 vaccines work.

Here is a breakdown of the most common myths surrounding COVID-19 vaccines, and the facts behind each myth:

Myth: COMIRNATY is not the same as the PFIZER-BioNTech COVID-19 vaccine.

Truth: It is common for vaccine names to change after receiving full Food and Drug Administration approval for branding purposes. COMIRNATY and Pfizer-BioNTech are biologically and chemically the same vaccine. The FDA approved Pfizer-BioNTech for licensing and branding as COMIRNATY Aug. 23 for people 16 years and older. Critically, the Emergency Use Authorization for Pfizer-BioNTech COVID-19 vaccine continues and covers the 12- to 15-year-old population.

In accordance with FDA guidance, COMIRNATY has the same formulation and can be used interchangeably with the FDA-authorized Pfizer-BioNTech COVID-19 vaccine. Providers can use doses distributed under the EUA, to administer the vaccination series as if the doses were the licensed vaccine.

Myth: There were no people of color involved or represented in the research or development of the vaccine.

Truth: COVID-19 has taken a heavy and disproportionate toll on people of color, particularly Black adults. Historically, people of color have been underrepresented in clinical trials. Therefore, ensuring racial and ethnic diversity in clinical trials for the development of COVID-19 vaccines has been particularly important. Diversity within clinical trials for a COVID-19 vaccine also ensures safety and effectiveness across populations. Findings show that Pfizer-BioNTech vaccine safety and efficacy were similar for people of color and white participants.

The FDA offered nonbinding recommendations that strongly encouraged the enrollment of populations most affected by COVID-19, specifically racial and ethnic minorities. Both Pfizer and Moderna worked to ensure that

people of color were included in their trials, with Moderna even slowing down enrollment to enroll more racial and ethnic minorities. There have also been efforts on the community side. Historically Black Colleges and universities participated in COVID-19 vaccine trials and encouraged participation among their communities. The purposeful encouragement to increase racial and ethnic groups in these trials have achieved greater diversity than many previous trials for other drugs.

Myth: The COVID-19 vaccine can cause problems with breast tissue and lead to breast cancer.

Truth: There is no evidence that COVID-19 vaccines cause problems with breast tissue or would lead to breast cancer. The mRNA vaccines are processed by your body near the injection site and activate immune system cells that then travel through the lymph system to nearby lymph nodes. In this manner, an individual may experience swelling under the arm where the vaccine was administered due to swelling of the lymph node. The vaccines are not affecting hormone levels, nor are they traveling throughout the body or affecting other body organs, such as breast tissue. Swollen lymph nodes can show up in a mammogram even if women can't feel them. Hence, the Society of Breast Imaging recommends women delay any routine mammography scheduled within four weeks after their most recent COVID-19 vaccination.

Myth: If I take COMIRNATY while breastfeeding, my baby will be infected with COVID-19.

Truth: COVID-19 vaccines cannot cause infection in anyone. Vaccines are effective at preventing COVID-19 in people who are breastfeeding. Additionally, breastfeeding people who have received mRNA COVID-19 vaccines have antibodies in their breast milk, which could help protect their babies. The Centers for Disease Control and Prevention and the Academy of Breastfeeding Medicine recommend that lactating women receive the vaccine and that breastfeeding should not be stopped around the period of vaccination.

Myth: COVID-19 causes infertility.

Truth: There is no evidence that COVID-19 vaccines cause fertility problems in women or men. The mRNA vaccines are processed by your body near the injection site and activate immune system cells that then travel through the lymph system to nearby lymph nodes. In this manner, they are not affecting

hormone levels, nor are they traveling throughout the body or affecting other body organs.

Myth: The Vaccine Adverse Event Reporting System proves that COVID-19 vaccination causes too many side effects and deaths.

Truth: VAERS data alone cannot determine if an adverse event was caused by a COVID-19 vaccination. Anyone can report individual events to VAERS, even if it is not clear whether a vaccine caused the problem. These events are studied by vaccine safety experts who track for trends, then validate significant adverse concerns. Recently, the number of deaths reported in VAERS has been misinterpreted and misreported as if this number means deaths were proven to be caused by the COVID-19 vaccination.

Myth: COMIRNATY vaccine contains fetal cells.

Truth: None of the COVID-19 vaccines contain fetal cells. Specifically, COMIRNATY and Moderna COVID-19 vaccines did not use a fetal cell line to manufacture their vaccine. However, a fetal cell line was used in the early research efficacy of these vaccines.

The use of these fetal cell lines in research and/or production of vaccines and medication is not new. Some over-the-counter medications for which a historic fetal cell line was utilized in research and/or production and manufacturing include Tylenol, Pepto Bismol, Aspirin, Tums, Senokot, Motrin, Maalox, Ex-Lax, Benadryl, Sudafed, Preparation H, Claritin, and others.

Myth: Researchers rushed the development of the COVID-19 vaccine, so its effectiveness and safety cannot be trusted.

Truth: The COVID-19 vaccines in the U.S. have gone through the typical FDA approval process — no steps were skipped — but some steps were conducted on an overlapping schedule to gather data faster.

First, the COVID-19 vaccines from Pfizer-BioNTech and Moderna were created with a method that has been in development for years, so the companies could start the vaccine development process early in the pandemic. Second, vaccine projects received large resources. Governments invested in research and/or paid for vaccines in advance, which enabled a faster approach. Third, some types of COVID-19 vaccines were created using messenger RNA (mRNA), which allows a faster approach than the traditional way that vaccines are made.

VACCINE MYTHS continues on 3

JBSA LEGACY

Joint Base San Antonio Editorial Staff

502nd Air Base Wing and JBSA Commander

BRIG. GEN.

CAROLINE M. MILLER

502nd ABW/JBSA Public Affairs Director

MAJ. GINA "FLASH" McKEEN

Editor STEVE ELLIOTT

Staff

LORI BULTMAN

SABRINA FINE

DAVID DEKUNDER

SARAYUTH PINTHONG

SENIOR AIRMAN

TYLER MCQUISTON

JBSA LEGACY
ADVERTISEMENT OFFICE
EN COMMUNITIES
P.O. BOX 2171
SAN ANTONIO, TEXAS 78297
210-250-2052

This Department of Defense newspaper is an authorized publication for members of the DoD. Contents of the JBSA Legacy are not necessarily the official views of, or endorsed by, the U.S. Government, the DoD, or the U.S. Air Force.

Published by EN Communities a private firm in no way connected with the U.S. Air Force under exclusive written contract with the 502d Air Base Wing and Joint Base San Antonio. The editorial content of this publication is the responsibility of the 502d Air Base Wing Public Affairs Office.

Everything advertised in this publication will be made available for purchase, use, or patronage without regard to race, color, religion, sex, national origin, age, marital status, physical handicap, political affiliation or any non-merit factor of the purchaser, user, or patron.

Feedback Fridays

Brig. Gen. Caroline M. Miller
502D AIR BASE WING AND JOINT BASE
SAN ANTONIO COMMANDER

Feedback Fridays is a weekly forum that aims to connect the 502D Air Base Wing with members of the Joint Base San Antonio community. Questions are collected during commander's calls, town hall meetings and throughout the week.

If you have a question or concern, please send an email to jbsapublicaffairs@gmail.com using the subject line "Feedback Fridays."

Questions will be further researched and published as information becomes available.

Q: This question is regarding COVID-19 booster vaccinations.

I have tried to find out if there is any sort of schedule when these shots will be administered at JBSA and so far I haven't been successful with finding out this information.

The installations have done an excellent job of providing COVID-19 shots to authorized recipients. The program was professionally accomplished at JBSA-Fort Sam Houston using Brooke Army Medical Center personnel and others.

I understand COVID-19 has been an obstacle in this process and the boosters are a new element. Any information you can provide is much appreciated.

A: Thank you for your question!

The Food and Drug Administration and the Centers for Disease Control and Prevention continue to assess the efficacy and safety of a COVID-19 booster dose for the general population.

Initial reports indicate the FDA will recommend emergency use authorization of a booster dose for individuals 65 and older and those at high risk of severe illness six months after they get their first two shots. We will provide updates as we receive them. As a reminder, the San Antonio Market is currently offering an additional dose of the Pfizer-BioNTech COVID-19 vaccine for immunocompromised beneficiaries and immunocompromised staff members at the vaccination site at main post JBSA-Fort Sam Houston (site details below). For CDC additional dose criteria, please visit <https://www.cdc.gov/coronavirus/2019-cov/vaccines/recommendations/immuno.html>. If you have additional questions or feel you meet the criteria, but your condition is not listed, please contact your provider team.

People who are moderately to severely immunocompromised may not build enough (or any) protection when they first get a vaccination. When this happens, an additional dose of the vaccine can sometimes help them build more protection against the disease.

That's why the CDC recommends moderately to severely immunocompromised people consider receiving an additional

(third) dose of an mRNA COVID-19 vaccine (Pfizer-BioNTech or Moderna) at least 28 days after the completion of the initial 2-dose mRNA COVID-19 vaccine series. In contrast, a booster dose refers to another dose of a vaccine that is given to someone who built enough protection after vaccination, but then that protection decreases over time. Beneficiaries can make a same-day appointment on TRICARE Online or by calling the appointment line (210-916-9900), or stop by without an appointment during weekly walk-in hours.

► **JBSA-FORT SAM HOUSTON VACCINE SITE:** Open Monday through Friday; weekly walk-in hours: Tuesday from 10 a.m. to 5:30 p.m. and Wednesday from 8 a.m. to 3 p.m. BAMC team members without military healthcare are welcome to stop by during the designated walk-in hours. BAMC's COVID-19 vaccination site is located in the Training Support Center on main post JBSA-Fort Sam Houston, building 410, 2536 Garden Avenue.

► **WILFORD HALL AMBULATORY SURGICAL CENTER VACCINE SITE:** Vaccination hours are Thursdays and Fridays from 8 a.m. to 4 p.m.; walk-in hours are Thursdays and Fridays from 9 a.m. to 3 p.m. WHASC's COVID-19 vaccination site is located at 100 Wilford Hall Loop, JBSA-Lackland in the atrium at the C entrance.

Q: As a service member, I wanted to know how I can go about getting

reimbursed for having to relicense and all the certifications that my wife had to be complete to work as a nurse in the state of Texas.

What is the eligibility requirement for this program?

A: Great question!

This is a Total Force program so any Regular Air Force, AF Reserve or Air National Guard Airmen on Title 10 orders may be eligible, providing the situation meets the criteria established in the policy. Any order authenticated on or after 20 December 2019 qualifies for reimbursement re-licensure /re-certification up to \$1000 threshold.

Your orders must authorize the movement of the Airman's dependents at the government's expense. Also if you are PCSing/PCAing from a duty station in another state including, Hawaii, Alaska, Washington D.C., and the U.S. territories, then you would be eligible.

Reach out to your installations Airman & Family Readiness Center, the Department of Labor website at <https://www.vertans.gov/milspuces>, and the DoD Spouse Education and Career Opportunities Program at <https://myseco.militaryonesource.mil> to learn more about licensing and certifications and how requirements vary by state.

You can also visit www.jbsa.mil/Resources/Finance/Air-Force-Financial-Services/ for more information on Spouse Licensure reimbursement.

VACCINE MYTHS

From page 2

Fourth, the capabilities of social media reaching numerous people enabled companies to find and engage study volunteers at a faster than typical pace. Finally, COVID-19 is so contagious and widespread, therefore it did not take long to see if the vaccine worked for the study volunteers who were vaccinated.

Myth: If I get the COVID-19 vaccine, it will make me sick with COVID-19.

Truth: You cannot get COVID-19 disease from the COVID-19 vaccine. COVID-19 vaccines teach our immune systems how to recognize and fight the virus that causes COVID-19. Sometimes

this process can cause symptoms, such as fever. These symptoms are normal and are signs that the body is building protection against the virus that causes COVID-19. If you do not have side effects, that does not mean your body's immune system is not responding.

Myth: COVID-19 vaccines shed or release their components and are harmful.

Truth: Vaccine shedding is the term used to describe the release or discharge of any of the vaccine components in or outside of the body. Vaccine shedding can only occur when a vaccine contains a weakened live version of the virus. None of the COVID-19 vaccines authorized for use in the U.S. contain a live virus.

Myth: COVID-19 vaccine will alter my DNA.

Truth: COVID-19 vaccines do not change or interact with DNA in any way. Both mRNA and viral vector COVID-19 vaccines deliver instructions (genetic material) to our cells to start building protection against the virus that causes COVID-19. However, the material never enters the nucleus of the cell, which is where our DNA resides.

Myth: Receiving the COVID-19 vaccine will make me magnetic.

Truth: All COVID-19 vaccines are free from metals and will not make anyone magnetic. None of the COVID-19 vaccines contain eggs, gelatin, latex, or preservatives.

Myth: The COVID-19 vaccine

contains microchips.

Truth: COVID-19 vaccines do not contain manufactured electronic or microchips. Vaccines are developed to fight against disease and are not administered to track your movement. Vaccines work by stimulating your immune system to produce antibodies. After getting vaccinated, you develop immunity to that disease, without having to get the disease first.

Airmen, Guardians and family members who still have questions and concerns are encouraged to reach out to their primary care provider. Additional information, including the DOD mandate, can be found at www.defense.gov/Explore/Spotlight/Coronavirus-DOD-Response/.

DOD outlines strategy to thwart sexual assault

By Terri Moon Cronk
DOD NEWS

The Department of Defense announced its strategy as approved by the secretary of defense to act on the recommendations of the 90-day Independent Review Commission on Sexual Assault and Sexual Harassment in the Military, said Deputy Secretary of Defense Kathleen H. Hicks.

In DOD's implementation roadmap, the deputy secretary said DOD will make foundational investments to support sexual assault accountability, prevention programs, healthy command climates and quality victim care.

"To date, sexual harassment and sexual assault have been serious problems in our force with lethal consequences for service members and harmful effects on our combat readiness," Hicks said.

"This administration has placed an unprecedentedly high priority on this challenge and, in fact, in his first day in office, Secretary of Defense Lloyd J. Austin III issued a memorandum to department leadership tasking them with reporting data pertaining to sexual assault and sexual harassment. On Feb. 26, at the direction of President Biden, Secretary Austin established the 90-day independent review commission," she told reporters at the Pentagon.

When the IRC provided its findings and recommendations to Austin on June 21, 82 recommendations spanned four lines of effort in accountability, prevention, climate and culture and victim care, Hicks said.

On July 2, fewer than six months after stating his intent to lead DOD in countering sexual assault and sexual harassment, Austin directed an implementation way ahead.

"We have now created that way ahead called the implementation roadmap, and



COURTESY GRAPHIC

Secretary Austin has approved it in its entirety," she said.

DOD constructed the roadmap by creating specialized teams comprising experts across the department. After reviewing the IRC's recommendations, experts identified sequencing issues, estimated resource requirements and characterized the risks and benefits associated with different implementation paths, Hicks noted.

Built in consultation with DOD's civilian and uniformed leadership, the roadmap represents a best-in-practice sexual assault and harassment prevention and response program that ensures rapid action and early and enduring results, she added.

Based on Austin's guidance, DOD's approach is holistic, addressing all of the IRC's recommendations across his four lines of effort it's implementing in four tiers of

action, the deputy secretary said.

"Our goal is to implement [the strategy] as rapidly as possible while ensuring we can deliver durable and meaningful outcomes," she said, noting the first tier, or foundation, is already being put in place.

"[Tier 1] consists of the most important elements in preventing sexual assault and sexual harassment and holding offenders accountable," Hicks said. "The preponderance of initiatives and resources are focused in our first tier. For instance, it contains three of our highest-priority recommendations, including the establishment of the offices of special-victim prosecutors, the creation of a full-time and specialized prevention workforce, and the implementation of full-time sexual assault response coordinators and sexual assault prevention and response victim advocate positions."

Follow-on tiers, Hicks noted, build on and expand the foundation. Yet the tiered approach is not rigidly constructed, she said, adding that it has been devised in a way to be dynamic and it's expected to evolve over time as more expedient pathways or best practices are identified.

"Make no mistake, the department is committed to completing implementation on as fast a timeline as possible, while ensuring our efforts take deep root throughout all levels of leadership down to the unit and individual level," the deputy secretary said.

"To that end, we are taking necessary steps in the department to ensure expedient implementation of recommendations that the administration has already proposed in legislation," Hicks said.

In the memorandum Austin released today, he includes four specific actions to ensure DOD

begins to swiftly and deliberately move from the recommendations contained in the roadmap to implementation, she said.

► First, he has directed the undersecretary of defense for personnel and readiness to issue enterprise-wide guidance for implementing all recommendations this fall, beginning with guidance on Tier 1 recommendations by Oct. 13, 2021.

► Second, each service and relevant component is directed to develop implementation plans and resource mapping by Nov. 12, 2021, for Tier 1 recommendations, and by the end of January 2022 for all actions.

► Third, the undersecretary for personnel and readiness will develop an outcome metrics evaluation report by May 1, 2022, which will track the effectiveness and progress on implementation.

► Fourth, in consultation with the services and relevant components, the undersecretary for personnel and readiness will formally assess the roadmap no fewer than two times a year, and make recommendations to Hicks through the Deputies Workforce Council.

The DWC in turn will meet quarterly to monitor implementation progress and accelerate timelines wherever possible, she added.

"Countering sexual assault and sexual harassment in the military remains a priority for Secretary Austin, for President Biden and for me. We continue to move quickly and deliberately and [we] are committed to the path that I have outlined," Hicks said.

"Our changes are comprehensive and they provide us an opportunity to deal a fundamental blow to this problem," the deputy secretary said. "[Our] service members deserve no less. And our combat effectiveness depends on our success."

FORT SAM HOUSTON

First Army combat medics to receive advanced training graduate

By David DeKunder

502ND AIR BASE WING
PUBLIC AFFAIRS

In August, 275 students attending the Army Combat Medic Specialist Training Program at Joint Base San Antonio-Fort Sam Houston were the first graduates to receive 18 hours of training in Prolonged Casualty Care, which provided the new combat medics with skills to treat complex casualties over a prolonged period of time.

Prolonged Casualty Care training was first introduced to students in the 68 Whiskey Combat Medic Specialist Training Program, or CMSTP, in May 2021, and by the August class, this advanced training program of instruction was validated.

The introduction of Prolonged Casualty Care in the CMSTP is the bridge to the future of combat medic training, as medics will be expected to be able to treat casualties for longer periods of time in future conflicts.

The CMSTP is the 16-week initial entry training program that trains Soldiers to become Army Combat Medic Specialists. Students who attend the program graduate with an emergency medical technician, or EMT, certification and are trained at a tier III qualification in tactical combat casualty care.

Students in the program are assigned to the U.S. Army Medical Center of Excellence, or MEDCoE, at JBSA-Fort Sam Houston, with training conducted at the Medical Education and Training

“Basically, we were building off what they have learned over the past 14 weeks and then implementing things like nursing care and advanced procedures. They were starting to see all of it come together.”

Capt. Michael Bryant, Field Training Exercise branch chief of CMSTP at Joint Base San Antonio-Camp Bullis



COURTESY PHOTO

Staff Sgt. Steven Flores (left center), U.S. Army Medical Center of Excellence, 232nd Medical Battalion instructor/writer, provides instruction on advanced airway management on a simulated trauma patient to 68 Whiskey Combat Medics assigned to MEDCoE at the Medical Education and Training Campus Soldier Medic Training Site at Joint Base San Antonio-Camp Bullis in August.

U.S. Army North military hospital support to FEMA begins in Tennessee, continues in five states

By Col. Martin O'Donnell
U.S. ARMY NORTH PUBLIC AFFAIRS

At the request of the Federal Emergency Management Agency, approximately 20 military medical personnel recently deployed to Tennessee to support civilian healthcare workers treating COVID-19 patients in local hospitals.

This team joins nine other teams currently working in nine hospitals — three in Louisiana, two in Mississippi, two in Alabama, one in Arkansas, and one in Idaho. U.S. Army North, under U.S. Northern Command's oversight, will provide operational command of the active-duty military COVID-19 response in support of federal efforts and the states.

"Defending the nation remains my number one priority," said Lt. Gen. John R. Evans Jr., then-ARNORTH commander. "This includes defeating COVID-19, which the Secretary of Defense describes as the greatest proximate challenge to our nation's security."

The military medical personnel include nurses, respiratory therapists and medical doctors.

The team, which is from the U.S. Army, will support The University of Tennessee Medical Center in Knoxville.

ARNORTH is the joint force land component command of USNORTHCOM.



U.S. Navy Lt. Natashja Mortam, a nurse assigned to the Navy Medicine Readiness and Training Command from Twentynine Palms, California, dons her personal protective equipment to provide care to a COVID-19 patient at Dale Medical Center in Ozark, Alabama, Sept. 19.

SPC. JAMES ALEGRIA



PFC. JOSHUA TAECKENS

ARMY SOUTH CONTINGENCY COMMAND POST CONDUCTS DEPLOYMENT READINESS EXERCISE

Army South personnel receive a lesson in pallet loading and securing at Joint Base San Antonio-Kelly Field Annex Sept. 14 as part of the Army South Contingency Command Post during a level II deployment readiness exercise. At any time, an incident could occur in the U.S. Southern Command area of responsibility, which requires the deployment of the ARSOUTH CCP to provide a command and control node or to form the nucleus of a joint task force when directed. Readiness is Army South's first priority — ensuring our Soldiers have the tools and training they need to be lethal and ready to fight and win when called upon in support of global operations.



JOHNNY SALDIVAR

Joint Base San Antonio-Lackland military and civilian members hold positive messages of support at base gates during the morning inbound commute as part of their new initiative, “We Care,” at JBSA-Lackland Sept. 17.

Joint Base San Antonio shows ‘We Care’

502nd Air Base Wing Public Affairs

Joint Base San Antonio military and civilian members held positive messages of support at installation entrances during the Sept. 17 morning inbound commute as part of their new initiative titled “We Care” and to show support as part of National Suicide Prevention and Awareness Month, which takes place each September.

Various teams throughout JBSA, took the time this morning to remind employees and visitors to our installations of just how

important they are.

They spent the morning at various gates letting each person know that the simple, yet powerful display allows for everyone to stand together in support of those struggling with depression and thoughts of suicide.

If you are struggling with thoughts of suicide, please go directly to the Mental Health Clinic or to your closest Emergency Room. You can also reach the National Suicide Prevention Lifeline at 1-800-273-8255.



Joint Base San Antonio military and civilian members lined the gates at Joint Base San Antonio-Fort Sam Houston Sept. 17 in support of National Suicide Prevention and Awareness Month, which takes place each September.

TRISTIN ENGLISH



Joint Base San Antonio military and civilian members offered positive messages at Joint Base San Antonio-Randolph Sept. 17 in a show of support as part of National Suicide Prevention and Awareness Month, which takes place each September.

STAFF SGT.
PRESTON CHERRY

MEDICS

From page 6

Campus, or METC, also at JBSA-Fort Sam Houston.

Typically, combat medics receive Prolonged Casualty Care training later in their career, as they gain experience and continue in their service. This newly developed bridge program is intended to introduce these skills to initial entry medics as a new CMSTP program of instruction is being developed.

“Prolonged Casualty Care training focuses on management of complex casualties over extended periods of time,” said Col. Johnny Paul, Chief of the CMSTP at MEDCoE and CMSTP Department Chair at METC.

“The potential life-saving skills and methods combat medics are now training on include introducing students in the use of whole blood, operating a walking blood bank, telemedicine, bladder catheterization, ventilator management, supraglottic airway management and prolonged casualty monitoring to include nutrition and nursing care.”

Also, Paul said the addition of Prolonged Casualty Care puts a different focus on the advanced knowledge and skill sets students will need to learn in class, in contrast to previous combat medic courses which focused on the treatment of casualties at the point of injury, with the assumption a patient would be evacuated from the battlefield in a short period of time.

He said adding skillsets of Prolonged Casualty Care training to the CMSTP is a revolution in military medicine based on the emerging doctrine of large-scale combat operations and providing these skills now will give medics the tools needed to fight and win on the battlefield of the future.

Large-scale combat operations take into account that the U.S. military may likely be in future conflicts with an adversary that is a near-peer threat. The challenge to air superiority limiting medical evacuation as well as limited logistical support could result in a large number of casualties that require complex treatment and holding at every echelon of care.

Capt. Michael Bryant, Field Training Exercise branch chief of CMSTP at JBSA-Camp Bullis, said the trainees in the class were able to apply what they learned about Prolonged Casualty Care training in field training exercises at JBSA-Camp Bullis.

The field training exercise includes a 72-hour continuous combat operation where students are expected to fight opposing forces utilizing the tenants of tactical combat casualty care, and treat complex simulated combat casualties at the point of injury, in a forward and main aid station, as well as in a prolonged care environment.

During the field training exercises, the students exceeded the expectations of the class instructors in incorporating the new skills they learned from their Prolonged Casualty Care training.

“They were so excited to be applying what they’ve learned and also building on that concept of combat medicine,” Bryant said. “Basically, we were building off what they have learned over the past 14 weeks and then implementing things like nursing care and



68 Whiskey Combat Medics assigned to the U.S. Army Medical Center of Excellence, or MEDCoE, conduct Prolonged Casualty Care on a simulated trauma patient during their culminating field training exercise at the Medical Education and Training Campus Soldier Medic Training Site at Joint Base San Antonio-Camp Bullis in August.

COURTESY PHOTO

advanced procedures. They were starting to see all of it come together.”

Command Sgt. Major Clark Charpentier, MEDCoE command sergeant major, said getting trained in Prolonged Casualty Care at the beginning of their service will provide a benefit to both the combat medic and service members in the field.

“For an introductory 68 Whiskey combat medical specialist, having some sort of exposure to this at the most basic level starts to build the foundation on which all other future training will add to and increase their efficiency,” Charpentier said. “Ultimately any additional skills we can provide to our combat medic trainees is a bridging strategy towards the future combat medic and someone who has increased capabilities and increased knowledge to be able to be more effective on the battlefield.”

Paul said the goal is to redesign, develop and pilot the new combat medic course incorporating the skills of Prolonged Casualty Care in 2023. It is also anticipated that this additional training will result in a higher level EMT certification for graduates, which will directly translate to more advanced medical credentials for combat medics.

MEDCoE's Army Trauma Training Detachment marks 20 years

By Tish Williamson

U.S. ARMY MEDICAL CENTER OF EXCELLENCE
PUBLIC AFFAIRS

The Army Trauma Training Detachment, or ATTD, is a satellite of the U.S. Army Medical Center of Excellence based in Miami, Florida.

ATTD, which was officially established Sept. 10, 2001, marks 20 years of a collaborative and successful relationship between ATTD and Ryder Trauma Center at Jackson Memorial, where they are colocated, as they train the Army's Forward Resuscitative Surgical Teams, or FRSTs, prior to deployment.

Army medical personnel spend the first week of pre-deployment training using patient simulators at the Michael S. Gordon Center for Research in Medical Education. They spend the second week treating human patients, who have been brought through the Ryder Trauma Center, at Jackson Memorial Hospital. The training includes gunshot wounds, stabbings, burns, motor vehicle accidents and other types of injuries that may occur in combat deployments.

ATTD has two main missions: teaching the Army Trauma Training



COURTESY PHOTO

Instructors assigned to the U.S. Army Medical Center of Excellence Army Trauma Training Course, Miami, Florida, demonstrate trauma scenario training for surgical teams during pre-deployment training in August.

Course, which is geared toward pre-deployment readiness for surgical teams, and fostering a military-civilian partnership by working as medical providers at Ryder Trauma Center Jackson Memorial Hospital.

"We do a lot of team building and basic training for medical providers, and this particular training is also geared to support the COVID-19 response," said Army Lt. Col. Mark Buzzelli, ATTD Program Director. "This is a unique

experience; we are working with a tremendous group, and we have come together for a common goal."

Buzzelli says the collaboration, which annually trains at least 11 FRSTs and over 260 personnel, has likely saved hundreds, if not thousands, of lives in the last 20 years.

ATTD is one of dozens of specialized programs and courses under the purview of 187th Medical Battalion, 32nd Medical Brigade, at the MEDCoE, which is located at Joint Base San Antonio-Fort Sam Houston.

"The special relationship between the Army Trauma Training Detachment, Gordon Center, Jackson Memorial, and Ryder Trauma Center is well recognized throughout the branches of the military and is used as a model of excellence for military-civilian partnerships in medical training care," said Lt. Col. Dennison Segui, the 187th Medical Battalion commander.

ATTD, through its collaboration with the Ryder Trauma Center, has led over 14,300 trauma cases that trained 220 FRSTs and 5,280 personnel since 2001.

For more information about MEDCoE programs and initiatives, visit <https://medcoe.army.mil/32d-medbde>.

Army Chief of Chaplains visits IMCOM HQ

By Brittany Nelson

U.S. ARMY INSTALLATION MANAGEMENT
COMMAND PUBLIC AFFAIRS

Chaplain (Maj. Gen) Thomas Solhjøm, the Army's Chief of Chaplains, visited the Installation Management Command headquarters at Joint Base San Antonio-Fort Sam Houston Sept. 8 to meet with IMCOM Chaplain (Col.) Michael Zell. Solhjøm was in San Antonio for the Senior Enlisted Advisory Group.

The IMCOM chaplain and Solhjøm spoke about overall religious support throughout the command.

Solhjøm also met with Randy Robinson, IMCOM executive deputy to the commanding general, about the Spiritual Readiness Initiative in support of the "Life Worth Living" campaign, an Army Vice Chief of Staff initiative intended to prevent suicide in the ranks.

"The general visits garrisons to talk to them about spirituality and the impact that it has on those most in need," Zell said. "It builds resilience for

Soldiers, helps with readiness and is preventative for harmful behaviors."

Zell mentioned that IMCOM is the tip of the spear for support of Soldiers and families because of their widespread chapel facilities and services. Across the IMCOM enterprise, there are 600 personnel, 343 facilities, 14,000 volunteers, and 28 family life centers.

"I love seeing how our collaboration and work with the Chief of Chaplains and IMCOM supports the broader vision of religious support across the Army and the integrative factors," Zell said.

Religious services also help with the emotional aspect of holistic health by offering counseling services. There are more than 40 family life chaplains across IMCOM.

"These chaplains have masters in counseling from accredited institutions," said Zell, who is a licensed professional counselor himself. "Many are certified marriage and family therapists. They work in parallel with mental health."



CHAP. (CAPT) PATRICK STEFAN

Chaplain (Maj. Gen) Thomas Solhjøm (center), the Army's Chief of Chaplains, visited the Installation Management Command headquarters Sept. 8 to meet with Chaplain (Col.) Michael Zell, IMCOM chief of chaplains.

There are 38 family life chaplains and about 135,000 counseling sessions held a year.

Moving forward, IMCOM religious services plans to continue their base support of facilities, pastoral care, and services.

"The future of IMCOM is going to be

more closely aligned with units delivering iterative religious support in coordination with chapel communities and other helping agencies," Zell said.

To learn more about the religious services available at your garrison, visit <https://home.army.mil/imcom/index.php/customers/chaplains>.

LACKLAND

37th TRSS CATM instructors guide students with skill, precision

By Agnes Koterba
37TH TRAINING WING
PUBLIC AFFAIRS

Headlights illuminate a winding, dark road against the backdrop of what resembles the Texas countryside. With no building or person in sight, this single road leads to a wide-open space with one building and one purpose.

When others are just getting ready for the workday, 37th Training Support Squadron Combat Weapons Flight security forces specialists are already prepped for the day.

Early mornings and late nights are the norms for Combat Arms Training and Maintenance instructors who qualify at least 3,500 Basic Military Training trainees a month.

"They think you just go to the range and shoot all day and that's definitely not the case," said Tech. Sgt. Austin Lane Montgomery, 37th TRSS CATM instructor.

Serving JBSA as the largest CATM agency Air Force-wide, instructors train and evaluate everyone from beginners to expert shooters.

"We are the heart of the Air Force," Montgomery said. "We do the best we can to push out the best product we can."

More than half the week is reserved for BMT trainees who must qualify with a score ranging from 12 to 24 rounds out of a total of 76 rounds. A score ranging from 22 to 24 rounds qualifies them as expert shooters.

Trainees must be able to shoot from the following positions to qualify: prone supported, prone unsupported, kneeling supported, and over barricade.

There are students new to shooting and those who have



PHOTOS BY AGNES KOTERBA

Basic Military Training trainees participate in classroom instruction with unloaded M4 carbines as an instructor reviews clearing procedures at Joint Base San Antonio-Chapman Training Annex Aug. 10.

used a gun before, but still need added guidance to use a weapon proficiently and safely. Careful consideration for individual ability levels — along with alert eyes and ears — are a must for instructors.

"You have to adjust how to teach consistently," said Carol Francis, 37th TRSS CATM Instructor.

Whether or not there's a learning curve, Francis said, "It makes you feel good as an instructor that you helped."

Regardless of experience, each trainee must participate in both classrooms and live firing instruction and qualification. Completing the M-4 Rifle Initial Skills Course of Fire is one of seven BMT graduation core requirements.

BMT students begin the day

receiving previously inspected weapons for classroom study.

From there, trainees form up to march to the firing range where they practice and then test for marksmanship.

One cannot ignore the loud and steady pops that echo in the morning throughout the firing range.

"It takes a lot more skill than raising your hand and saying fire," explained Staff Sgt. Richard Rosa, 37th TRSS CATM instructor.

Shortly after qualification, BMT trainees bring in their weapons for disassembly and cleaning.

Though BMT trainees train throughout the week, two days are reserved for base-wide instruction and evaluation, including time for security forces training.

Instructors adjust from one learning style to another, accommodating to the needs of those being taught or evaluated. With processes in place and the day broken down into different areas of instruction, the utmost safety of every individual is always top of mind.

"I'm a people person and teaching people about weapons is second nature," Rosa said.

In addition to training, instructors also conduct weapons inspections, safety checks, maintain range operations, and ensure smooth transitions between the armory and supply.

As trainees line in formation for the march back to BEAST they leave equipped with new knowledge for the battlefield. They may not realize it, but they've just exemplified the CATM instructors' unofficial creed: "We train in peace, to prepare for war."



A Basic Military Training trainee receives feedback during practice and qualification as Combat Arms Training and Maintenance instructor Ladelious Little rates her marksmanship at Joint Base San Antonio-Chapman Training Annex Aug. 10.

In-service recruiters help active duty Airmen continue service in Reserve

By Andrew C. Patterson

502ND AIR BASE WING PUBLIC AFFAIRS

The Air Force Reserve has an office whose primary purpose is to provide Airmen valuable information about extending career opportunities after active duty service. The professionals working in these offices are known as in-service recruiters.

The In-Service Recruiting office at Joint Base San Antonio-Lackland is run by two recruiters, Master Sgt. Tyrone Graham and Master Sgt. Zachary Nusbaum. Both members are Active Guard Reserve, or AGR, assigned to the Air Force Recruiting Service, which is located at Joint Base San Antonio-Randolph.

Here are these recruiter's answers to some important questions about in-service recruiting:

Q: Why does the In-Service Recruiting office exist?

NUSBAUM: I like to think of it as we have two different purposes. The first purpose is to help members who are transitioning off active duty to become knowledgeable of the options within the Air Force Reserve. We help guide members through the process of getting out of their contract early and coming over to the Air Force Reserve.

Secondly, we have a duty to our active members to bring awareness of the different programs available by meeting with the first sergeants, chiefs and commanders across the base. These meetings are where we inform all levels of the leadership of the options available to the members that are approaching their expiration – term of service or ETS.

Q: For those who say, "Yes, I want to move over to the Reserve," what is the process?

NUSBAUM: The process is relatively simple. The service member would:

- » Confirm eligibility for Reserve duty;
- » Find a position by contacting the Air Force Personnel Center;
- » Contact the gaining unit to confirm position availability;



ANDREW C. PATTERSON

1st Lt. Alaura Holt, 802nd Force Support Squadron personnel officer, gives the Oath of Enlistment Sept. 21 to Tech. Sgt. Shaun Harvey, an active duty service member who is transferring over to the Air Force Reserve.

- » Complete medical documentation; and
- » Complete other personnel office requirements.

Once approved by all parties involved, we reenlist the member if their military service obligation, or MSO, is less than 90 days, after which, they begin reporting to their new unit.

Q: When does the process start?

GRAHAM: Twelve to 18 months before their ETS, the members receive notification that they need to go to the informational briefing hosted by the Education Office. This briefing brings awareness of the different opportunities available to members. In addition to our portion of the briefing, Skillbridge, the Veterans Administration, and a few other organizations brief on their programs and provide more in-depth information. Usually, this is the first time that we get in front of a service member.

Q: What are the specific programs and guidelines?

NUSBAUM: The programs available are Palace Front and Palace Chase. Palace

Chase is for members with a remaining military service obligation and who have completed half of their service contract. First-term Airmen must have served a certain minimum commitment. The Palace Front program is for members who have completed their MSO. All of those looking to use either program must send the paperwork through their chain of command for approval.

Q: What do you feel is the return on investment for these programs and how do you gauge when active duty members who transferred over have been a success in the Reserve?

GRAHAM: The biggest return on investment is for the Reserve Command, where, on average, we are saving hundreds of thousands of dollars per person due to not having to expend basic training or technical training dollars. Often, we are bringing over seasoned non-commissioned officers and officers that can come in and fill deficits in a unit. We're able to bring them in as a fully qualified asset, ready to go from the start.

NUSBAUM: Our primary goal is to keep someone in the same skill code,

however, we do allow members to cross-train. Usually, those are unique situations where we are trying to fill the needs of the Air Force Reserve and still save money. For example, the cyber career fields have a huge deficit. If someone has a top-secret clearance, NSA clearance, and everything like that, those members are desired. The gaining unit is not having to spend the time or money on a security clearance or basic training. Those members can immediately go to technical training to cross-train into their new skillset.

Q: How does a member benefit from not separating from the military and continuing to serve in the Air Force Reserve?

GRAHAM: This is a hard question to answer quickly. There are many benefits across the board for all members who transfer to the Air Force Reserve. We cater each engagement to each member's need and help them figure out the benefits that specifically align with their goals.

NUSBAUM: I always talk to applicants about what it is like being a part of the Air Force Reserve family, the networking ability within the Reserve, the camaraderie of being in the military, esprit de corps, and being part of a family. Secondly, I talk about having the Reserve job to fall back on during the member's transition to civilian life, whether it is for a short period or until earning a full military retirement.

GRAHAM: We [recruiters] all volunteer to be here to help people. When people meet with us, whether in our office or around the base, out in the community, or via Zoom, they see that we do care about them. We enjoy what we do and are here to help, whether a member is trying to separate and join the Reserve or not. We are here to help give them the resources they need.

The best way for a service member to contact the In-Service Recruiting office is by calling 210-671-9282 or 210-389-8922. Members are also encouraged to speak with the first sergeant in their unit.

'My biggest strength': IAAFA instructor celebrates Hispanic heritage

By Erinn Burgess

502ND AIR BASE WING PUBLIC AFFAIRS

From Sept. 15 to Oct. 15, the Department of Defense celebrates National Hispanic Heritage Month and the theme "Esperanza: A Celebration of Hispanic Heritage and Hope."

The month pays tribute to the generations of Hispanic Americans whose ancestors came from Spain, Mexico, the Caribbean, and Central and South America, who have positively influenced and enriched our nation and society, including our military.

Staff Sgt. Carlos Alberto Zapata Gonzalez is one such Hispanic American Airman at Joint Base San Antonio.

Born in Nuevo Laredo, Mexico, Zapata Gonzalez said the military was a dream job for him when he was a kid. Today, he is an international force protection instructor for the Inter-American Air Force Academy's 837th Training Squadron at JBAS-Lackland.

"I saw my first opportunity to make my dream a goal when I got my [U.S.]

"Diversity is one of the most powerful weapons that our military has, it can't be replicated by other nations and it's a reflection of our country."

**Staff Sgt. Carlos Alberto Zapata Gonzalez,
International force protection instructor, Inter-American Air Force Academy**

citizenship at the age of 17," he said. "I applied myself to learn the language and prepare physically. It took a couple of years before making the decision to join because I didn't want to leave my entire family behind, but with their support, I made the best decision of my life."

At the beginning of his military career, Zapata Gonzalez recalled seeing his Hispanic culture and accent as a weakness, but "through passion and perseverance it has become my biggest strength," he explained.

"My Spanish capacity is essential for my job and besides the communication aspect, my heritage makes me able to relate to our Latin American students so we can create trust and partnership

on another level that no other person or country can replicate," he said.

"Also," he added, "working at the Inter-American Air Forces Academy made me realize the importance of the Hispanics in the military and the impact that different cultures have on our military."

Those who claim to be Latino or Hispanic make up 17.6% of the active duty force, numbering 235,972 as of July 2021, according to the Defense Manpower Data Center.

As of June 2021, 15.9% of active duty Airmen claim Latino or Hispanic as their ethnicity, according to the Air Force Personnel Center.

"Diversity is one of the most powerful weapons that our military

has, it can't be replicated by other nations and it's a reflection of our country," Zapata Gonzalez said.

"I am blessed to be able to support Mexico, my country of birth, as an international instructor while representing the United States, the country that gave me a second chance and the opportunity of making my family proud," he concluded.

Hispanics have a profound and positive influence on our country through their strong commitment to family, faith, hard work and service, added Maria Rodriguez, JBAS affirmative employment program manager. "They have enhanced and shaped our national character with centuries-old traditions that reflect the multi-ethnic and multicultural customs of their community."

In celebration of National Hispanic Heritage Month, JBAS displayed posters across its installations, including all JBAS libraries and Military and Family Readiness Centers.

For more information on NHHM, call 210-221-1408 or email usaf.jbsa.502-abw.mbx.jbsa-fsh-cps@mail.mil.

Impact of Senior Enlisted Leader International Summit far-reaching, strategic

By Annette Crawford

37TH TRAINING WING
PUBLIC AFFAIRS

After nearly three years in the planning and several delays due to COVID-19, the Senior Enlisted Leader International Summit finally became a reality Aug. 9-13. The event, co-hosted by Chief Master Sgt. of the Air Force JoAnne S. Bass and the Inter-American Air Forces Academy, brought together approximately 120 top enlisted leaders from the U.S. and 44 partner nations.

"I believe this year's SELIS theme of 'Building an Airman' couldn't have been more appropriate," said Senior Master Sgt. Gary Woo, a SELIS planning committee lead. Woo is the Air Force International Enlisted Engagements Manager, Deputy Under Secretary of the Air Force International Affairs.

More than 120 volunteers came together to make that one week in August a memorable one. Now, more than a month after the summit, some of the organizers reflected on the teamwork and planning it took to make SELIS a success.

Those volunteers represented Air Education and Training Command; Deputy Under Secretary of the Air Force International Affairs; 37th Training Wing; IAAFA; 37th Training Group; Defense Language Institute English Language Center; 502nd Air Base Wing; 59th Medical Wing; 558th Flying Training Squadron; Special Warfare Training Wing; and more. There were also 13 translators who specialized in Spanish, Russian, Portuguese, Mongolian, Arabic, and French languages.

"As we crosstalk and share with each other on what it means to be a professional

Airman, we are able to gain valuable perspective on how best to 'build' that individual, to better overcome next-generation challenges," Woo said, adding that the "relationships and connections that were built among senior enlisted leaders from around the globe reinforced the shared goal of winning the fight ... together."

SELIS is normally held every two years for international senior enlisted counterparts to the chief master sergeant of the Air Force to discuss issues affecting the international community of enlisted Airmen and to further build relationships. It was last held at Maxwell Air Force Base, Alabama, in 2018.

Even without COVID-19, a gathering of this magnitude requires global cooperation and communication. Woo estimated that it took 40 work

hours per principal attendee to ensure a successful and meaningful summit.

To get an attendee from their country to San Antonio meant "constantly working and communicating with the International Enlisted Engagement Managers, U.S. Embassies, processing Foreign Visitor Requests (clearances), COVID-19 testing, and funding," said Senior Master Sgt. Kelli Jackson, 37th Training Group Superintendent of Military Training and one of the SELIS planning committee leads.

The regions represented at the conference were Air Forces Southern and Northern, Pacific Air Forces, U.S. Air Forces in Europe and Air Forces Africa, and Air Force Central Command. Approximately 100 countries were invited from around the globe. PACAF was underrepresented due to the

Pacific Air Chiefs 2021 Conference which was held just two weeks later.

"The main challenge was COVID-19. It limited our capabilities globally, within the local area, and throughout Joint Base San Antonio. The second biggest challenge was competing with summer leave, primary duties, and TDYs. Despite SELIS feeling like a full-time job, it wasn't anyone's full-time job and we had to keep pushing with our ordinary duties and lives. Lastly, keeping the team motivated. The more we pushed the date back, the more volunteers we lost due to PCSs, TDYs, or other requirements," Jackson said.

"Bringing in 44 CMSAF/CMSAF equivalents from around the globe presents a number of logistical challenges even without COVID-19," Woo added. "A host of Department of Defense

and Department of State personnel are required to ensure that we are one, making sure that everyone is in the right place at the right time and two, with COVID, that we are overcoming those challenges in a manner that is safe, smart, and in line with both U.S. and international protocols to mitigate that risk."

Jackson said patience was a key factor.

"As much as we wanted to hold this conference on the original dates, we had to make hard calls at the right times in order for it to pay off later. The more COVID-19 pushed us back, the stronger we became as a team. We were determined to make this the best conference we could, and based on the feedback, I'd say we made that happen," she said.

SUMMIT continues on 16



THOMAS A. CONEY

Attendees of the Senior Enlisted Leader International Summit tour the Inter-American Air Forces Academy at Joint Base San Antonio-Lackland Aug. 12.

SUMMIT

From page 15

Selecting IAAFA as the co-host proved to be the right decision.

“In the Security Cooperation battlespace, IAAFA made sense,” said Chief Master Sgt. Emilio Avila, IAAFA senior enlisted leader. “We have intimate know-how on hosting events of this magnitude and strategic importance. We understand funding lines, logistics, etc.”

Avila added that maintaining and ensuring the narrative both inside and outside the team was crucial.

“When we pushed the May event to August, we stuck with that until the very end — a huge credit to Senior Master Sgts. Jackson’s and Woo’s leadership,” the chief said. “We minimized the rumors and stayed consistent, which I truly believe gave the senior enlisted leaders the faith and trust that we were going to execute while keeping everyone safe. May I add, zero COVID-19 cases as all the SELs flew back to their countries!”

Organizers felt that SELIS also helped them grow on a personal level.

“As the IAAFA Protocol and TCA

coordinator I am more focused and knowledgeable on the SOUTHCOM Western Hemisphere AOR, but after SELIS I have learned that professionalism in ‘Building an Airman’ is a global goal for all,” said Francisco Hernandez, a member of the SELIS planning team.

Col. Jose Jimenez, the IAAFA commandant, said he was proud — but not surprised — of his team’s commitment to making SELIS a success.

“This was a real triumph for us on many levels. Despite COVID-19, we had the most attendees of the last several summits. We were able to show all the attendees where the journey begins for all Airmen, and how the entire 37th Training Wing contributes to that mission,” Jimenez said. “IAAFA Airmen are experts in hosting and engaging with partner nation personnel. With SELIS, we just turned it up a notch.”

For more on SELIS, read International enlisted leaders focus on “Building an Airman.”

RANDOLPH

Air Force refines pilot candidate selection process

Air Education & Training Command Public Affairs

Several Air Education and Training Command initiatives to remove barriers for qualified candidates in the pilot candidate selection process were highlighted in the Air Force's six-month assessment of its initial Racial Disparity Report Sept. 9.

Pilot candidates may now:

- ▶ Use their highest composite scores from any Air Force Officer Qualifying Test (AFOQT) rather than the most current score.

- ▶ Complete the Test of Basic Aviation Skills (TBAS) up to three times, with the third requiring a waiver from the applicant's wing commander or equivalent.

- ▶ Re-take the AFOQT and TBAS after 90 days compared to the previous 150-day requirement for the AFOQT and 180 days for the TBAS.

- ▶ Participate in study sessions with other individuals who have not yet taken the test if the examinee has also never taken the AFOQT.

These changes came after extensive research conducted by the pilot selection process working group responsible for identifying potential barriers while upholding the standards of excellence in the Pilot Candidate Selection Method (PCSM) used since 1993.

"Our studies concluded that these changes will result in more qualified candidates of underrepresented groups being selected for training," said Lt. Col. Brandi King, the working group's Air Education and Training Command lead.

Prior flying experience a barrier to qualification

Prior flying experience, the second-largest component of an

improving rated diversity.

AETC IMPLEMENTS CHANGES TO REMOVE BARRIERS WHILE UPHOLDING STANDARDS OF EXCELLENCE

READ MORE AT
WWW.AETC.AF.MIL



COURTESY GRAPHIC

Several Air Education and Training Command initiatives to remove barriers for qualified candidates in the pilot candidate selection process were highlighted in the Air Force's six-month assessment of its initial Racial Disparity Report Sept. 9.

applicant's PCSM score, particularly poses a socioeconomic barrier to candidates without access to financial means to pay for flying lessons. To address this barrier, the Air Force now considers only a candidate's initial 60 flight hours when scoring a candidate.

"There is no evidence that more than 61 hours of flight experience poses a significant benefit to pilot training success," said Dr. Katie Gunther, chief of strategic research and assessment at the Air Force Personnel Center. "The probability of success in

flight training increases substantially from 0 hours to 60 hours, then relatively plateaus."

The working group also found that removing the higher ranges of flight hours as part of the PCSM score would result in a more diverse applicant pool.

According to the Validation of the Pilot Candidate Selection Method 2020 report prepared by the AFPC Strategic Research and Assessment branch, removing the four highest ranges of flight hour codes would have resulted in 69 more Hispanic, 47 more female, and 26 more Black/African-American qualified applicants

over a 12-year period.

"Flying lessons are expensive and could potentially exclude qualified candidates from becoming pilots in the Air Force due to limited income or lack of opportunities," said Brig. Gen. Brenda Cartier, AETC's Director of Operations and Communications and the pilot selection process working group's overall lead. "In order to ensure we do not eliminate otherwise qualified candidates, flight programs have been implemented at both The United States Air Force Academy and the Air Force Reserve Officer Training Corps.

"Our studies concluded that these changes will result in more qualified candidates of underrepresented groups being selected for training."

Lt. Col. Brandi King,
Air Education and Training
Command working group lead

Cadets receive free ground and flight training, and an opportunity to gain critical skills and directly improve their competitiveness for pilot selection boards."

Pilot selection process

A PCSM score quantifies a pilot candidate's predicted aptitude for success at undergraduate pilot training. This score is comprised of the AFOQT and TBAS scores, previous flying experience, and other "whole-person concept" merits such as grade point average, physical fitness assessment scores and class ranking.

"Data supports that the PCSM is the best single predictor of pilot training completion. However, it is imperative that we continue re-evaluating our selection methods and remove barriers that hinder rated diversity without compromising test integrity or lowering standards," King said.

New 'foundational competencies' include digital literacy

By Air Education & Training
Command Public Affairs

The Air Force has identified 24 Air Force foundational competencies for all Airmen, as part of a systematic, competency-based approach to develop the force. These competencies are universally applicable to all Airmen and are categorized into four groups: Developing Self, Developing Others, Developing Ideas and Developing Organizations.

One of those 24 foundational competencies is digital literacy, which was added this year.

Digital literacy defines a person who "uses technology to identify, critically evaluate and synthesize data and information; explore, create and manage digital content; and appropriately interact in a virtual environment," according to Dr. Laura Barron, Industrial/Organizational Psychologist.

"The Air Force's foundational competencies are applicable across all ranks, grades and career fields and provide Total Force members a pathway to success in their respective careers," said Lt. Col. Sandra Coble, Chief Competency Division. "Air Force competencies lay the foundation for developing the Airmen we need, who can out-think and out-perform any adversary in air, space and cyberspace."

Digital literacy is demonstrated when Airmen use technology to identify, critically evaluate, and synthesize data and information; when Airmen explore, create, and manage digital content; and when Airmen appropriately interact in a virtual environment.

As citizens of the digital age, we can access information



COURTESY GRAPHIC

freely at all times through different types of platforms. But, knowing how to use technology is more than sending a text with emojis or getting around on your favorite social media site. It is about using the internet for learning, communicating, and most of all, being responsible while using technology.

"Our Airmen today have access to valuable resources to help them develop, and grow into the future Airmen we need to help accelerate change in our Air Force," said Jamal Qiyyim, Training Pipeline Manager. "The modernization of the learning services environment will enhance overall development for Airmen and ensure they are able to reach their full

potential, quickly adapting to changes in the strategic and tactical environment."

Communicating in the digital age using digital tools like email, texting, video chat and social media is very different than interacting in person. Understanding the purpose of communication is key to making messages clear.

Asking yourself questions like, who is your audience? Is this a one-on-one conversation or a team meeting? Is it professional or personal? How urgent is the message? Do you need a quick reply? Answers to these questions assist a communicator when determining the method of communication.

Understanding each digital tool will aid in the approach to

engaging with an audience. Sending a text or giving a phone call may be faster than sending an email because most people have phones readily accessible and may respond more quickly.

When communicating to a team, using platforms like Microsoft Teams or Skype ensures everyone gets the information at the same time. The team meeting reduces miscommunication between teammates due to second-hand information.

Communicating and learning from digital environments does not come without responsibility. Digital citizenship is how one interacts safely in this digital age. Everyone has to be diligent about how

information is used. Verify that information is from credible sources. Know what information to avoid when it infringes on copyrights.

Do not pass along information if it's not been verified. As a leader, one must not share information that is not credible. Most importantly, before posting, think about how it will affect other people and understand individual responsibility when posting.

"It's every Airman's responsibility to understand proper etiquette when operating in the digital environment," said Isabel Hodges. "Operational security, credible sources and getting a second set of eyes on posting or sharing are ways to ensure safe use of the digital environment."

MyVector, myvector.us.af.mil provides access to a Digital Literacy Self-Assessment. Using this self-assessment tool, Airmen will receive instant feedback on distinct aspects of digital literacy, such as Information Literacy, Social Media Awareness, and Digital Communication.

Airmen also have free access to 5,500+ Udeemy courses through the Digital University (<https://digitalu.af.mil/>) and can use MyVector to identify online resources that help align with personal goals.

Airmen can also elect to complete the Pathfinder 2021 assessment for feedback on other foundational competencies like resilience, teamwork and analytical thinking.

The pathfinder tool allows the option to request feedback to gain valuable insight from peers, subordinates and higher-ranking members. These tools can be used by Airmen at all levels.