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A vulnerability and threat assessment study of South Carolina was done by the South Carolina State Guard (SCSG) in 2002 and found that the state was particularly vulnerable to external threats because of a high ratio of nuclear facilities to population, a major port with several smaller sea ports, several major dams near population centers, rapidly developing coastal areas and four interstate highways. These concerns were reviewed for Homeland Defense impact. A report was prepared containing specific recommendations that were identified as a requirement for the Governor’s initiatives in the area of Homeland Defense in response to the events of September 11, 2001.

As a direct result of the report, a Federal AmeriCorps multi-year grant for one-million dollars was submitted to address these compelling community needs. The grant was designed to enhance capability in the areas of Public Safety, Public Health and Emergency Preparedness.

A Homeland Defense Brigade consisting of volunteers was established from within the existing SCSG. These volunteers are used as a force multiplier to assist more readily the Emergency Management Division, the SCSG and other components of the Adjutant General’s Office to deal with the new threats posed by the asymmetrical conflict in which our country is now engaged.

The major component of the grant was to establish and maintain a central database of volunteers. The web-based database was designed so that police chiefs, sheriffs and emergency preparedness directors could be given access to the information on volunteers in their area. The database contains a skill set for each volunteer and real time accounting of his or her availability. A massive recruiting effort has resulted in several thousand uniformed volunteers available to city, county and state public safety, public health and emergency preparedness organizations. The end result of the AmeriCorps Homeland Defense Brigade’s effort has been to successfully meet the need to establish and maintain a database of volunteers and to check child and adult care facilities.

Extensive on-line and residential training is offered these volunteers. Most communications with volunteers is through e-mail. Two written reports each month are required from all 5th (Homeland Defense) Brigade members who have committed to recruit and to work with volunteers.

An additional private grant of several thousand dollars was received last year for securing supplies and equipment to respond to such natural disasters as hurricanes, tornados, floods and fires.

TRAINING AND CERTIFICATION RECEIVED

- Twenty-one (21) members and volunteers have been trained and certified as reserve law enforcement officers and have given literally thousands of hours of volunteer service with police and sheriffs departments.

- A group of 157 members and volunteers have been trained in basic crowd control and large group security. These individuals have provided security and or crowd control for twenty-one
festivals in SC. (This is especially important when a town has two or three police officers and more than 20,000 attend the festival.)

- Members have completed numerous Federal Emergency Management Agency (FEMA) courses, Citizen Emergency Response Team (CERT) training and tactical communications classes in an effort to better prepare for emergencies.

- Eighteen (18) members and many volunteers have taken Cardio-Pulmonary Resuscitation (CPR) courses that were taught by SCSG members through the grant.

- Four (4) members received training as volunteer firemen and donated hundreds of hours answering fire alarms. Other members installed smoke detectors, furnished by the fire departments, in numerous homes after inspecting the homes.

- Seventeen (17) members and volunteers have been trained and volunteered hundreds of hours in scene control for homicides (crime scene preservation), drownings, fires, downed power lines, flooding and airplane crashes.

**INSTRUCTOR TRAINING AND CERTIFICATION**

- Nine (9) members were certified as instructors for the “Refuse to be a Victim” course. After certification they taught the four (4) hour class to numerous community groups, schools and businesses throughout the state.

- Members bought two (2) dogs and have trained the dogs to detect explosives. Certification of both the dogs and handlers is complete and they have been deployed.

- Six (6) members, certified to teach “Weapons of Mass Destruction (WMD),” taught five WMD classes to volunteers.

- Two (2) members certified in search and rescue (S&R) operations taught S&R classes to volunteers and scouts.

- Two (2) members were certified to teach CPR and First Aid for the Red Cross.

**PUBLIC SERVICE AND ANALYSIS**

- Several public service projects were completed ranging from helping to restore an historic public building to cleaning state parks.

- Members trained in surveillance detection have made a security analysis of airports from which the state’s constitutional officers fly, as well as other sensitive areas.

- Classes in "Refuse to be a Victim" were taught to community groups, private industry and schools.
Thirty-eight (38) members and volunteers have participated in numerous Search and Rescue operations.

Twenty-three (23) members assisted National Guard units that were deployed. They maintained vacated armories, assisted families members, and assembled and mailed material to the deployed Guardsmen.

One (1) member, a trained counselor, assisted in counseling in prisons, shelters and at wrecks.

Several members have developed a plan for large animal rescue. They have coordinated this with the SC Veterinary Association and made several animal shelter inspections. They have also recruited volunteers to assist during emergencies and are conducting training for the volunteers.

Five (5) members assisted the SC Department Health and Environmental Control during the distribution of flu shots.

Eleven (11) members have assisted the SC Highway Patrol with traffic control at more than 100 wrecks. This allows only one patrolman to be at the accident to prepare the report while an AmeriCorps member directs traffic.


One (1) member developed a patriotic web site. He recruited volunteers and coordinated with the SC Department of Education for the volunteers to go into schools to talk with classes about patriotism and the price of freedom. The program was very successful and is continuing.

One (1) member, a Registered Nurse, assisted with blood drives and in emergency shelter inspections.

Five (5) members established and/or coordinated neighborhood watches.

Three (3) members, all practicing attorneys, gave legal advice and represented the SC Military Department on several occasions pro bono.

Seventeen (17) members and volunteers formed a uniformed funeral detail and performed more than one hundred (100) military funerals for veterans. This freed active duty military to continue their other duties in homeland security.

Nine (9) of the members have worked with youth in a variety of ways: as mentors to high school students, teaching classes to both cub and boy scouts, working with those attending Boys’ State, gang activity intervention, drug free programs and assisting with developing emergency procedures for schools.

Work has been done with the elderly and handicapped through Meals on Wheels to ensure that there is a plan for care of these individuals in times of emergency evacuation.
One (1) member assisted the coroner in investigating the cause of deaths and talking with families of the deceased.

**HOMELAND SECURITY AND DISASTER MITIGATION**

Members and volunteers are working with more than half of the Emergency Preparedness offices in the state in preparing for and responding to emergencies. This included preparation for and participation in both tabletop and full-scale exercises, evaluating exercises and responding to actual emergencies.

Two (2) members published a periodic AmeriCorps Homeland Defense newsletter that went to all members and volunteers via email.

Several members provided security or were briefed on security at high visibility areas such as the State building and nuclear station.

More than 200 talks on homeland security and emergency preparedness were given to business, civic (Lions, Rotary, Civitan and Sertoma), veterans (VFW, American Legion, National Guard, Coast Guard Auxiliary and Marine Corps League), faith based (Baptist, Lutheran, Methodist, Presbyterian, Catholic and Salvation Army), professional clubs (computer and electric cooperatives) and governmental organizations.

Several members assisted with hurricane preparation at Veterans Administration (VA) hospitals, the South Carolina (SC) Department of Public Safety (lane reversal), emergency preparedness offices and repair of emergency generators for three (3) hurricane alerts.

Four (4) members worked with the American Red Cross in their emergency response section.

Four (4) members and volunteers assisted for six (6) days with the SC Emergency Communication van during a massive chemical spill.

Two (2) members worked with college and university students in both the classroom and dormitories to make them aware of the importance of being prepared for both natural and man made emergencies.

These are some of the activities that saved the tax payer thousands of dollars and helped ensure that many of the citizens of this state are better prepared for emergencies.

**DEVELOPED WORKING RELATIONSHIPS**

The entire SCSG has developed an excellent working relationship with many of the state’s law enforcement agencies and most of the emergency preparedness offices (EPD). The relationship is so good with some of the law enforcement agencies that they have assigned radios and equipment to the SCSG unit in their area of responsibility. When an automobile accident happens in the area, the local Homeland Defense Brigade unit is alerted and they assist with direct traffic at the accident, while the public safety officer investigates and prepares the accident reporting.
The excellent relationships with emergency preparedness offices are evident by the fact that equipment is purchased by EPD for the SCSG. One of these units has been given more than $100,000 worth of communications equipment. In return the unit is responsible for that office’s emergency communication. Such close working relationships have not always been like this. It has been a concerted effort over the past five years that has resulted in a partnership that saves taxpayer dollars by involved citizens in the homeland defense process.

FUTURE PLANS

Although this grant will end this year, our homeland defense projects will continue. One of the new programs that we plan to expand in the Fall 2006 is to work with schools and pharmacies to prevent abusing prescription drugs. We plan to call it “Meth-Watch.” Another continuing effort is to further expand the emergency operations communications unit’s capability.
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The largest single natural disaster in U.S. history began on August 29, 2005, when Hurricane Katrina came ashore, striking three Gulf Coast states. Americans were both stunned and eager to help the storm’s victims. Fortunately, the Maryland Defense Force (MDDF), and its Medical Reserve Corps, was ready to respond. Its motto: *Officio vocante parati* (“Ready when called”).

Governor Robert Ehrlich was notified through the Emergency Management Assistance Compact (EMAC) (www.emacweb.org) that Aaron Broussard, the president of Jefferson Parish in Louisiana, had put out a call for help in meeting the medical needs of the area’s 452,000 residents. Governor Ehrlich activated the MDDF, a volunteer organization within a military structure, comprising health care professionals willing to go to the site of a natural or manmade disaster to provide medical, psychological, and legal resources for the affected population. Deployment to Louisiana in response to Hurricane Katrina marked the first time the MDDF had been called to service outside the state during its 88-year history. (The MDDF was created by the Maryland legislature in 1917 [http://www.mddefenseforce.org/history.htm].)

As part of this mobilization of resources in Maryland, medical relief efforts were coordinated by the Maryland Department of Health and Mental Hygiene (DHMH) and the Maryland Institute for Emergency Medical Services Systems (MIEMSS), with oversight provided by the Maryland Emergency Management Agency as chief coordinating body. DHMH solicited volunteer help by sending e-mail to departments of medical-, nursing-, and emergency-preparedness institutions. The Baltimore City Medical Society, led by its president, Dr. Tyler Cymet, was extremely effective in coordinating the communication and logistics for many of the responders from Baltimore. Interested doctors, nurses, and emergency medical services (EMS) personnel responded by phone or via the Internet with their availability, license, and contact information.

On September 5, 2005, an initial team of 80 volunteers convened at Martin State Airport, in preparation for takeoff in two C130 cargo planes operated by the Maryland National Guard. Prior to departure, each volunteer was inducted into the Guard by Brigadier General Fred Smalkin. Governor Ehrlich, in his role as Commander-in-Chief, attended the ceremony. Induction into the MDDF conferred eligibility for workers’ compensation and liability protection under Maryland law, eligibility

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1 Published herein with permission from MedChi, the Maryland State Medical Society, where it appeared in *Maryland Medicine*, Summer 2005, pp. 26-28. The version herein is the final version submitted for final publication; hence, there may be a few very slight modifications for printing purposes. Two photographs from the MedChi version were unobtainable and have been replaced by two other photographs from the photographer’s collection.
for military airlift and logistical support, as well as the benefits of an administrative structure. The mission of the operation was defined as follows: “The people of the State of Maryland, in response to the catastrophic damage of Hurricane Katrina, will use all available resources to provide effective humanitarian, medical and disaster relief to the citizens of Jefferson Parish, Louisiana.”

After landing at the New Orleans Naval Air Station, our convoy traveled to West Jefferson Hospital in Jefferson Parish under the protection of Maryland National Guards, militia, and police forces. West Jefferson Hospital was one of only three hospitals of the original 18 in the New Orleans area that remained operational after the storm. Our initial mission was to staff this county hospital, whose staff had been working nonstop for more than a week. Upon arrival, we learned that local physicians and nurses had begun returning to the area and were resuming medical care for the community. Therefore, within 12 hours, we were redeployed to serve another mission. In an unprecedented move, Meadowcrest Community Hospital, which had been evacuated, was taken over under the mandate of martial law and converted to a command center for the MDDF.

Housed in this 4-story hospital were more than 130 physicians, nurses, paramedics, emergency medical technicians, pharmacists, health officers, and militia from agencies and organizations throughout the State of Maryland. Hours after arrival, the MDDF was met by a convoy of 40 vehicles from almost every county in Maryland. The Anne Arundel County Fire Department Mobile Command & Communications Unit, a one million dollar command center purchased with homeland security funding for the state, served as the intelligence headquarters for this endeavor, named Operation Lifeline.

On the first day of our operation, physicians and other health professionals readied the facility to receive patients: we mopped floors, cleaned bathrooms, and begin securing necessary supplies. The abandoned hospital provided most of the needed items we had not been able to bring along. The hospital was filled with evidence of a hurried exit prior to the full impact of Katrina—food was rotting in walk-in freezers, party platters of chicken sat in the physical therapy suite, and alarms were going off in the laboratory, the floors of which were now covered with an unknown liquid. The newspaper box in front of the hospital displayed its most recent publication, with a headline that read, “Katrina is Coming.” Although we had electricity and tepid water for showering, the kitchen was not operational, and our sleeping quarters were in need of a thorough cleaning—by us. Many of us had never slept in a hospital bed before. We brought one day’s worth of food with us and later ate meals ready to eat (MREs) or boxed lunches delivered to us from a local restaurant that had survived the storm.

Within 24 hours after our command center was established at Meadowcrest Hospital (on Day 3 of the mission), our operations were expanded to six outreach clinics in diverse locations throughout Jefferson Parish. Four of them did not have running water or electricity. Many were in dangerous areas.
Each site had two to four armed national guardsmen for protection. Each clinic was staffed by a team of 10 or more physicians, nurses, pharmacists, and ancillary medical personnel.

The two major academic institutions in Baltimore had pivotal roles in Operation Lifeline. The University of Maryland School of Medicine sent 14 physicians, and the University of Maryland Medical Center sent a pediatric nurse as well as $6000 worth of pharmaceuticals. Johns Hopkins Medicine sent an organized team of physicians, nurses, mental health professionals, pharmacists, and a sign language interpreter.

Operation Lifeline began seeing patients on Wednesday, September 7. Fifty-six patients were treated that first day. The numbers of patients increased steadily during the next 12 days, peaking at 872 on Monday, September 19. The influx came as community residents spread the word about our presence and the services we were offering. For many residents, we were their only contact with the world beyond their neighborhood. Some of them had no idea of the extent of the devastation in the region.

The types of patients seen represented a primary care practitioner’s typical day, with one exception: the large number of patients seen solely because they had run out of medication. On the first day of service at Herbert Wallace Fire Station, the clinic base for Team Charlie, Ms. Mildred, an 82-year-old woman cautiously sought our attention, complaining of fatigue. She was the self-described community watchdog, so we suspected she really was here to check us out. Several days later, she returned with a true need, having run out of her blood pressure medicine. Other cases included incision and drainage of abscesses, acute red eye, lacerations, and respiratory ailments. We administered many tetanus vaccines and dispensed food, water, and ice.

When we were not seeing patients, we walked rescue supplies to cars lined up around the block. Residents had quickly learned by word of mouth that our six sites were resource stations for more than medical care. The American Red Cross was there as well, serving hot meals from a specially equipped van.

Trauma care was also rendered on site, though not planned. One evening a man drove up to our operations site at Meadowcrest with a shotgun wound inflicted by his wife, who thought he was an intruder. He was quickly loaded into one of 20 parked ambulances and transported to one of only three hospitals open and able to receive trauma cases.
On September 11, 2005, we assembled in front of Meadowcrest Hospital, as the first wave of the MDDF response prepared to head back to Baltimore after a one-week tour of duty, having been replaced by a new cadre of medical volunteers. We were moved by the call for all personnel to gather around the American, Maryland, and Louisiana flags (flying at half mast), as we stood in remembrance of those who lost their lives in an unnatural disaster four years earlier.

The MDDF deployment ultimately involved 250 sworn volunteers, who treated 6300 patients. The operation ended after 18 days for two reasons. First, the parish government, while deeply appreciative of our presence, was ready to begin reestablishing medical services provided by local practitioners using local resources. Parish President Broussard felt that our continued presence might delay the process of true recovery. Second, Hurricane Rita was possibly aiming for Louisiana, so the military instructed us to leave that area, now at risk of further damage.

Previous disasters and mass casualty incidents have shown that, when well-intentioned responders, including health care providers and mental health professionals, rush to an affected area, they can easily become part of the problem rather part of the solution. These Good Samaritans must be organized into effective response strategies and must be fed, housed, and protected. In many scenarios, the resources to provide those basic necessities simply are not available. The Maryland Defense Force, with its integral military command and control structure, allows a streamlined, efficient, and well-informed disaster response. We encourage other state and local governments to examine our process and establish similar collaborations among government agencies, military forces, and civilian professional resources, so that response systems are in place throughout the country and ready to be deployed in times of public need.²

² The authors thank Jakub Simon, MD, and Casey Jason, MD, from the University of Maryland School of Medicine, for their contributions to this report. They gratefully acknowledge the thoughtful reviews provided by Brigadier General Fred Smalkin and Colonel Wayne Nelson, from Maryland Defense Force. And they thank Linda J. Kesselring, MS, ELS, from the Division of Emergency Medicine at the University of Maryland, for copyediting the manuscript.
National concerns over terrorism and homeland security notwithstanding, recurring natural disasters are presenting a serious drain on state resources normally available to treat with and mitigate them. Recent hurricanes Katrina and Rita are just two terrible examples of catastrophic natural disasters; recent years have seen other disastrous hurricanes, major floods and snow and ice storms.

Normally, the state can rely on its National Guard (NG) and civilian “first responder” infrastructure. Unfortunately, international terrorism, foreign combat and homeland security needs are impacting these resources. According to Associate Press writer Liz Sideri, 10 September 2005, “About 41,000 Guard members are scattered across Alabama, Mississippi and Louisiana ... (and) About 30,000 Guard members are serving in Iraq, with smaller numbers in Afghanistan, Kosovo and elsewhere overseas.” Thus, drastically reducing their National Guard’s potential effectiveness in this emergency. And this will continue to be the case as long as the Department of Defense continues to view the Reserve Forces as a component of overall military operations.

In past years, most State Adjutants General considered their Title 32, USC, authorized State Defense Force [(SDF), State Guard, State Military Reserve or other similar authorized organization title] of little or no value in disaster mitigation or homeland security. Hurricanes Katrina and Rita, as a cap on earlier disasters in South Carolina and Georgia, to name a few, demonstrated the error of this belief.

Hurricanes Katrina and Rita ushered in a new era of natural disaster mitigation by the SDF; Governors and Adjutants General across the nation answered the call. They agreed to permit SDF units from other states to function in damaged areas and SDF units were deployed in very short order, often before the NG units were deployed; in other words, they rewrote the perceived rule book. The results were comments of appreciation and praise from the hurricane impacted areas.

An overview of deployments follow:

- **FEDERAL** – Captain John Stone reported the following Active Duty and Reserve Forces deployments in response to the hurricanes:
  - 13,000 Active Duty personnel;
  - 67,500 NG personnel;
  - 6 Navy ships;
  - 4 Coast Guard ships;
  - 19 fixed wing aircraft; and
  - 8 helicopters.

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1 Information contained in this summary report were obtained from deployed State Defense Force Brigade After Action Reports submitted to the State Guard Association of the United States and provided for this purpose.
- NATIONAL GUARD BUREAU –

  - Lieutenant General H. Steven Blum, Director, National Guard Bureau stated that early numbers indicated that nearly 1,700 SDF personnel were assisting on Katrina needs and pledged to build stronger relationships with responders.

- SDF DEPLOYMENT NUMBERS – Captain John Stone reported later counts to be in excess of 2,274, as follows:

  - ASDF – 600;
  - GASG – 138;
  - LASG – 117;
  - MDDF – 126 in two deployments,
  - MSG – 111;
  - TXSG – 1,000+;
  - TNSG – 150;
  - VADF – 32;

  - CASMR – 153 (reporting independently);

  - (Final figures are still unavailable as some states have not updated their initial deployment numbers and some others have not reported these numbers to the State Guard Association of the United States or other central reporting point.)

- ALABAMA – Colonel William A. Morris, ASDF, reported:

  - All four Brigades activated personnel involved in State operations centers,

  - Personnel were involved in the operation of shelters, distribution stations and warehousing;

  - Personnel were working to meet needs in Alabama, Louisiana and Mississippi.

- CALIFORNIA – Colonel Martin Ledwitz, CASMR, reported:

  - Deployed 152 members, one of which (Lieutenant Colonel Knight) was called up by the NG Bureau for duty in Mississippi and Louisiana in support of the NG;

  - Other activities included the Joint Operations Center, communications and electronics, medical, public relations, air operations, and Judge Advocate General.

- MARYLAND – Colonel Jack McNiff, (MDDF-Ret), Captain John Stone and the Globe Newspaper company reported:

  - Governor Robert L. Ehrlich addressed the volunteers, designated Operation Lifeline.” Also present were Major General Tuxill, The Adjutant General, Brigadier General Frederic N. Smolkin, MDDF Commanding General, and senior military and civilian
officials from MDARNG, MDDF, emergency management, health and mental hygiene, and homeland security;

- Since Maryland physicians and first responders who wished to volunteer were not certified or insured to practice in the disaster areas and were unable to obtain air or ground transportation there, they were sworn into the MDDF as military medical personnel, thus permitting them to practice there and to utilize military air and ground transportation (a modern day coup for the better, undertaken as a convenience to the Maryland Emergency Management Agency, the Maryland Emergency Responders and the Maryland Military Department);

- Brigadier General James Flynn, MDDF, was the overall Medical Commander, Lieutenant Colonel Patrick Shanahan, MDDF, was the Medical Commander of Operation Lifeline and Major Michael Millin, MDDF, was the Chief of the Medical Clinic (all three are physician specialists from the Johns Hopkins School of Medicine;

- Services provided included initial trauma care, standard internal medicine treatment and food.

o TENNESSEE – Brigadier General John T. Frame, Commanding General, TNSG, reported:

- In excess of 150 personnel were deployed;

- Services performed included housing displaced persons, uniformed facilitation at military installations housing disaster victims and uniformed escorts for buses transporting displaced persons.

o TEXAS – Command Chief Master Sergeant Norman King reported:

- 594 personnel were deployed;

- 50 Texas State Guardsmen were assigned unarmed to assist the Dallas policing effort;

- Sergeant First Class Delaney, TXSG, reported unarmed assistance to the San Antonio Police Department in removal of some undesirables and resolving one domestic squabble;

- Lieutenant Colonel Steve Baczewski, TXSG, commented “the amount of support provided the refugees was amazing”;

- Lieutenant Colonel Jim Miles, TXSG, stated the shelter management was good experience for the State Guard, commenting that this “was our foxhole”;

- Lieutenant Colonel Joeanna Mastracchio, TXSG, reported that the troops were on duty around the clock on 12-hour shifts;
- Master Sergeant Kate Callahan, TXSG, and Senior Airman Renee Runningdeer, TXSG, both trained medics, provided immediate emergency medical attention to a refugee with life threatening injuries, releasing the injured person for hospital transport when the on-scene aid was no longer needed;

- Colonel Paul Watkins related an incident where a person stranded on a rooftop in New Orleans cell-phoned a cousin who reported it to a state guardsman, who in turn contacted a team resulting in the person’s rescue;

- Colonel Paul Watkins further stated that the refugees were more likely to talk to a state guardsman than to a police officer;

- Colonel Victor Ortiz, TXSG, stated our mission is now to support the NG;

- Command Sergeant Major Richard Vasquez, emphasizing the importance of the NG and the State Guard within the Texas Military Forces, commented “We are a team”;

- When state guardsmen who were out of water refused to use the water supply for the refugees, Command Sergeant Major Vasquez immediately corrected the shortage saying “Just let us know what you need, I don’t take NO for an answer”;

- Sergeant David Cauble, TXSG, provided many of the above anecdotes;

- State guardsmen performed support activities for Red Cross shelters, state refugee facilities, police health and safety services, the Information Services Communications System, religious services and comfort to guardsmen, medical provision, and facilitating family reunion.

**VIRGINIA** – Captain John Stone, VADF, reported:

- 32 Virginia State Guard personnel were deployed;

- State guardsmen provided mobilization assistance for the NG deploying to the Gulf Coast;

- Several Defense Force personnel provided communications assistance to the Virginia Operations Center;

- Chief Warrant Officer (5) James B. Spencer, VADF, reported that they were working on seven (7) day rotating shifts.

Several other State Defense Force Brigades or Units were said to have deployed in support of hurricane disaster mitigation efforts; however, since they did not publicize their deployment experience, they could not be included herein.

The effort put forth by the SDF Brigades or Units, the joint effort between them and the deployed NG units, the humane services provided to the Hurricane Katrina and Rita victims all speak
to the fact that the SDF is on the cusp of a new era. Their service within their respective states and while deployed to other states have impressed their Adjutants General and NG leadership; their Governors are beginning to recognize their value within and across state boundaries.

It is incumbent on the SDF leadership to capitalize on this “political bank account” in order to ensure a proactive future.
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COMMUNICATION SYSTEMS FOR EMERGENCY OPERATIONS

Captain Kenneth Price, SCSG

The recent hurricanes, and in particular, Hurricane Katrina, have demonstrated a basic weakness in many communications systems depended upon by public service organizations. Most systems were primarily designed for "normal" conditions, meaning that it was assumed that electrical power would be available, that radio towers would be operational, and that the volume of radio traffic would be within the design limits. Unfortunately, like a chain, such systems fail completely when any one of the needed links ceases to function as intended. When such systems fail, “Command & Control” become difficult, if not impossible.

In the South Carolina State Guard we have a Division Communications Section, and each Brigade has a Communications Section. Division operates a communications “bus,” with 800 MHz radios and other equipment primarily designed for interface with statewide Public Service communications. At First Brigade we decided to concentrate our efforts on a more localized theater of operations, including Battalion and Company level, but expandable when required to cover state-wide, and even world-wide communications. This has been done by our choice of equipment, and by demonstrating to different authorities that we have the capability in both training and equipment to fulfill the missions we have undertaken.

The key to reliable communications is the ability to anticipate “worst case” situations. We have to assume that “Murphy” is always part of any operation, and that “if anything can go wrong, it will go wrong.”

Modern radio communications systems, including cellular telephones, depend on a complex system of multiple radio towers with computer control over the total system. A breakdown in any part of the systems risks the loss of the total system. These systems are also extremely expensive, with each portable radio in the range of $1,000.00 and the central control station costing as much as 100 times as much.

The 1st Brigade, South Carolina State Guard, has begun planning for communications needs after an event that could involve the loss of any or all of the systems currently used by Public Safety in the state. We are planning for a “disaster” at least as severe as Hurricane Katrina, involving the loss of commercial electrical power, the loss of most, if not all, functioning radio systems, and impassable roads making deployment of heavy equipment difficult or impossible.

Based on these assumptions we began by looking at what communications would be needed, what equipment was economically available, and what would be expected from such equipment, and operators. With no commercial power available, all radios would have to be battery operated, and use both rechargeable and disposable batteries, preferably “AA” or similar, easily and cheaply available on the local market. These radios would also have to be easy to operate, and the operators not required to have licenses requiring a demonstrated technical ability. We selected radios operating in the GMRS (General Mobile Radio Service) 450 MHz band, for which the Federal Communications Commission
GMRS radios normally operate “point to point,” so there are no problems with the loss of infrastructure. However it soon became apparent that there were cases where longer range would be required, and we began looking into finding a “repeater” that could be man portable, inexpensive and easy to install and maintain. We were able to find a small, self-contained repeater that weighed less than five pounds, would operate on 12 volts and would operate for several days on a small motorcycle battery. Depending on the height we place the repeater and antenna, we can extend the range of the hand-held radios out to as much as 30 miles.

While the GMRS radios and repeater system solved the short and medium range communications problem it soon became obvious that we might require longer range communications. To solve this problem we adopted a double strategy; the first was to contact amateur radio clubs in the state and ask for their assistance, either as “associates” of the South Carolina State Guard (SCSG) or, in a few cases, by recruitment of individuals into the SCSG. We also found several current Guard members who hold amateur radio operators licenses, and using these individuals we were able to establish a South Carolina State Guard Amateur Radio club and apply to the Federal Communications Commission for a “Club License.” We were granted the license with the call sign K4SCG and now use that call for our operations.  

While GMRS radios are readily available at such stores as Radio Shack and K-Mart, we felt that such equipment would not stand up to the use to which we intended to subject it. We also felt that the inexpensive equipment lacked the reliability our possible missions would require. We decided on radios manufactured by ICOM, as these radios are “Mil-Spec,” yet relatively inexpensive, at $150 each, and one of the few radios able to work with a repeater. We also had the assistance of a supplier in San Antonio, Texas (K-Com, Inc.) in developing the specifications for both the radios and the repeater, as well as supplying and modifying the amateur radios equipment we are using. This equipment will now operate on all amateur frequencies, as well as Military Affiliate Radio Service (MARS) frequencies. We currently have 20 of the ICOM radios, and plan to purchase at least 10 additional units. Our amateur radio equipment consists of two Kenwood VHF/UHF radios with digital capabilities, and one Yaesu 897 radio that can operate on HF, VHF and UHF frequencies. All equipment can be powered by 12-volt batteries. In addition, members of the Communications Section have personally owned equipment that they bring to deployments, effectively doubling the amount of amateur radio equipment available to the SCSG.

While this program is still very much a “work in progress,” it has been used successfully during several deployments, including training operations with the State Office of Emergency Management.

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1 A full explanation of repeaters and how they operate can be found at [http://www.arrl.org/FandES/field/regulations/faq-aux.html](http://www.arrl.org/FandES/field/regulations/faq-aux.html), which also includes the applicable Federal Communications Commission regulations and licenses required. Some knowledge of the subject matter is required to properly search the article.

2 The “bible” on all aspects of the operation and use of amateur radios, including how the amateur radio functions and all the information needed for licensing can be found at [http://wireless.fcc.gov/services/index.htm?job=licensing&id=amateur](http://wireless.fcc.gov/services/index.htm?job=licensing&id=amateur).

3 Information and forms for owning and operating personal amateur radio equipment can be found at [http://www.fcc.gov/Forms/Form605/605.html](http://www.fcc.gov/Forms/Form605/605.html).
We also received considerable financial support from the City of Columbia, South Carolina, which enabled us to purchase a 17 foot, air conditioned trailer with an 8-Kw gasoline generator. This is being converted into a mobile Command Post and when completed will have a 60 foot telescoping radio tower on which we will mount our GMRS repeater as well as some of the amateur radio antennas. All equipment in the trailer can operate on internal battery power, and can be taken out of the trailer and hand carried into an Operational Area should we be unable to get the trailer to the scene of operations. The trailer also will be equipped with several large gel-cel, 12-volt rechargeable batteries so as to provide power during periods when the generator cannot operate. All equipment in the trailer is designed to operate on 12-volt power, other than the air conditioning system.

As an example of our capabilities, the 1st Brigade was recently called upon to support a training exercise with two county Offices of Emergency Management. We provided over 60 troops to sites in Aiken and Barnwell counties, in Tactical Operations Centers (TOCs) located about 30 miles apart. Using 20 of our GMRS radios we coordinated troop movements at each location, and utilizing an amateur radio 2-meter repeater located in Augusta, Georgia we linked the two TOCs and allowed the Commanding General to exercise overall Command and Control of the operation. The Emergency Operations Center (EOC) Supervisor was extremely complementary about our efforts, and in particular, our ability to maintain communications with our troops, and between the two operational offices.

Future planning in 1st Brigade Communications include the development of satellite communications utilizing amateur radio satellites already in orbit, development of Global Positioning System (GPS) satellites to locate the position of different SCSG teams in the field, and the linking of Communications Section laptop computers via amateur radio to convert GPS information to allow State Guard commanders to have a overall operational “picture” of the current situation.

While still very much a “work in progress,” we feel that we are developing a solid foundation upon which to build our communications system, both for normal operations, and a system that will work reliably in the event of an emergency.4

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4 The author invites inquiries on the structure and use of this emergency communication system to his E-mail address “CPT Kenneth Price, SCSG” <kenprice@att.biz>.
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Ecclesiastical certification and endorsement as a Jewish lay leader is conducted by the Jewish Chaplains Council and includes selection, application, training and confirmation of Jewish military personnel by chaplains of all faiths as well as from the Jewish Chaplains Council.

When I received my ecclesiastical certification in 1991 as a Jewish Lay Leader, my very first official duty was to fly to Germany to organize and help conduct memorial services for a deceased American World War Two veteran. I was also tasked to coordinate the movement of the body back to California for burial which necessitated coordination between the Army, numerous American and German governmental agencies, and several Jewish organizations across two continents.

This was quite a challenge and complicated task for a newly minted lay leader who had just received his silver 1LT bars. But the real challenge was that the deceased World War Two veteran was my own father - he had been battling cancer for over eight years and had gone to Germany for treatment.

In a way coordinating my father’s funeral across two continents helped me in my initial grieving process. I kept busy and did not have much time to mourn. However, I remember, sitting alone in the U.S. Military Chapel in Munich, Germany waiting for the Jewish Chaplain to arrive to help me conduct the memorial service the next day. As I was sitting in the dimly lit chapel I started feeling overwhelmed and very lonely. After a while I noticed a military officer in Class A’s enter the chapel. I approached the officer and saw that he was wearing Master Jump Wings on his chest. Only then I made out the silver crosses of a Christian Chaplain on his jacket. He was a local US Army chaplain who heard that a memorial service was being planned in the chapel and wanted to come and help. Something very remarkable happened to me when I met this chaplain.

I felt an immediate connection with him. It was not necessarily that he was a chaplain. But rather an instantaneous recognition that this chaplain went through training and experiences that made us brothers. Now, I have never jumped out of a “perfectly safe airplane” - but I knew he had. He was part of the “brotherhood” and he had endured rigorous training and just like me, had served with others in situations that can only be experienced within the military family and brotherhood. Instantaneously I knew that I was able to confide and trust in him.

For the first time I was able to talk to someone about MY grief, MY experiences of losing a father, and ME being heard. Yes, he was a chaplain and was trained to listen to me and to counsel me. But more importantly because of that little silver badge he wore on his chest, I was able to RELATE to him, to regard him as one of my BROTHERS. Sometimes when I met other chaplains, I was more in deference to them. They seemed to be not really part of the brotherhood of soldiers. You know, they were CHAPLAINS…

I don’t even remember the name of this Christian Chaplain I met that afternoon in the chapel. But he had a lasting impression on me. I was able to relate to him because of what I could “read” on his uniform about his experiences in the military. It made me feel connected to him, it made me feel at ease. Isn’t that one of the goals every chaplain or lay leader would want to achieve? Connect with the soldiers that we serve and break down the barriers so we can minister better to our fellow soldiers?

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1 Ecclesiastical certification and endorsement as a Jewish lay leader is conducted by the Jewish Chaplains Council and includes selection, application, training and confirmation of Jewish military personnel by chaplains of all faiths as well as from the Jewish Chaplains Council.
One way that can be accomplished is to undergo the same training and experiences the “regular” soldiers go through. Now, I don’t recommend that chaplains should go out and earn as many badges and patches as they can to “fit in.” However, if chaplains could go through the same experiences as the rest of the soldiers and acquire skills and competencies, it will and can further their own ministry.

State Guard Chaplains may not have the opportunity to go and become Green Berets or jump out of airplanes every day, but there are many other opportunities to earn skills and competencies that will further one’s ministries. Each State Guard has great training opportunities that chaplains should contemplate. Earning these skills and competencies will help in creating that special “bond of brotherhood” and break down those barriers between chaplain, lay leader and soldier. Not only will chaplains and lay leaders create these bonds but they will also learn needed skills and abilities to truly function as one of the team.

One such training program that can accomplish all this and is open to all State Guard soldiers who belong to the State Guard Association of the United States (SGAUS) is the Military Emergency Management Specialist - or for short the “MEMS” Academy program. This training and qualification program was established by the SGAUS Board of Directors to promote and advance the emergency management profession and training among the ranks of State Guard soldiers. SGAUS members who have completed prescribed professional emergency management training and meet other requirements are eligible to apply for the MEMS badge qualifications.

Individuals who complete the required training receive qualification credentials issued through SGAUS and, if approved by their respective state military authorities, may wear the official SGAUS MEMS badges and patches on their military uniforms. In the basic program, all courses are taken through the FEMA Emergency Management Institute Independent Study Program. The courses teach vital emergency management and terrorism response skills that are essential for a first responder, such as a chaplain, when responding to natural or man-made disasters. There is generally no cost to the student and all courses can be taken online.

This is a unique opportunity for chaplains to earn some extremely valuable skills that are very much needed, especially as more and more State Guards shift to homeland security missions. The MEMS Academy program offers a Basic, Senior and Master Qualification. Over 750 SGAUS members have qualified so far. Most are State Guard members but we also have members from active duty, reserve and National Guard units who have complete the MEMS qualification. We get inquiries daily, even as far away as from deployed troops in Iraq and Afghanistan.

When I meet a chaplain today, I purposely look for certain “accouterments” on their uniforms to see if they are part of that unique “bond of brotherhood” of soldiers. I want to make sure for myself they have gone through the training and experiences that help me to connect with them. I want to know they profess the skills and abilities that not only make them superior chaplains, but also professionals and experts among us “brothers in arms!”

A chaplain or lay leader can make, will make, and should make a big difference in other soldier’s lives. A chaplain should be and must be approachable by every soldier regardless of faith or religious affiliation. Since 9-11 and just recently the Hurricane Katrina disaster, a State Guard chaplain must be especially skilled and accomplished in emergency management and terrorism response skills. This all can be accomplished by earning the MEMS qualification and earn the right to wear the SGAUS MEMS...
badge! This simple badge can and will make a state guard chaplain part of the “bond of brotherhood” among State Guard soldiers. State Guardsmen will know that you have taken the time and effort to acquire skills and competencies that make you part of the team – part of the “bond.”

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2 The author invites individuals and units interested in the MEMS Academy qualification program to go to www.sgaus.org and click on “MEMS Academy” or to contact him directly at memsacademy@msn.com.
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THE MILITARY EMERGENCY MANAGEMENT SPECIALIST (MEMS) QUALIFICATION AND THE MEDICAL UNITS OF THE STATE DEFENSE FORCE: IT JUST MAKES SENSE

Colonel James L. Greenstone, EdD, MSC, TXSG

It makes a lot of sense when you think about it. Sponsored by the State Guard Association of the United States and the Military Emergency Management Specialist (MEMS) Academy, the Military Emergency Management Specialist is a qualification that is individually earned, and that recognizes personal effort and skills development. As with many who are reading this, this author has the privilege of wearing the military's Expert Field Medical Badge (EFMB) as well as the Military Emergency Management Specialist Badge (MEMS). Both represent some of the same things, and each represents important distinctions.

During the early and formative days of the Texas Medical Rangers of the Texas State Guard, it seemed a logical step to encourage relevant and ongoing training. Additionally, this training should be both medically-related and also provide the military bases necessary for a Uniformed Medical Reserve Corps. At first look, the Expert Field Medical Badge (EFMB) qualification requirements seemed to fit the bill. While this author has had experience staging an EFMB qualification course, there were some problems that had to be considered. The EFMB skills could be developed into a training schedule that, upon completion, would result in soldiers being prepared to undergo the qualification course. While many of the EFMB skills are useful for field medical units, many of the military requirements go beyond what is needed or even expected in the Texas Medical Rangers, Texas State Guard, and probably most other SDF Brigades.

Finally, the authority to award the badge to those who might complete the qualification course successfully was in some doubt. What would have to be done to get this approved? As good as the course of study would be, the likelihood of having it all come together in a timely and meaningful way seemed doubtful. In addition, was all of this really necessary for a State Defense Force as currently organized?

Enter the Military Emergency Management Specialist Qualification Badge. The skills required, along with the individual nature of the qualification process, makes this the badge of choice for the SDF. Suited for medical and non-medical line units, the Texas Medical Rangers strongly encourages all of its soldiers to earn at least the Basic Badge.1 Because this qualification is based on individual achievement, regular unit training schedules can remain intact. Coaching and assistance can be offered to MEMS candidates though the current MEMS Academy organization, but most of the work is left to the individual.

Not only is this qualification exactly “what the doctor ordered,” so to speak, for the Texas Medical Rangers and for all SDF Brigades and Units, but its very nature makes it well suited for all military and military-related units throughout the United States. There is nothing else like it out there anywhere. To this writer’s knowledge, it is a one-of-a-kind qualification that is relevant to the world.

1For detailed information about the three levels of the MEMS Qualification Badge see the MEMS Academy Handbook at http://www.sgaus.org/MEMShandbook.htm.
in which we live today, and to the actual circumstances under which State Defense Forces will most likely find themselves.

For the medical side of the house, MEMS is the “EFMB” of the Uniformed Medical Reserve Corps. Those earning it demonstrate a willingness and an ability to respond to the disasters, both man-made and natural, that will certainly demand their attention and expertise. It should be embraced by all SDF Brigades or Units, medical, and non-medical as a way of demonstrating the strong commitment to readiness, preparedness and response. The United States military, both active duty and reserve, will find much to be gained by the time spent in preparing and qualifying. Those in the Civil Air Patrol, especially health service personnel, the Coast Guard Auxiliary, and the other related groups at all levels will find an invaluable addition to their current training and preparation.

In the final analysis, the MEMS Badge may be a unifying force for all of us who are ready to go where we are needed, when we are needed; in essence, a Badge of Brotherhood. The uniforms may be somewhat different, but the missions are often essentially the same. The inclusiveness of the MEMS Academy and of the MEMS qualification courses may well set the standard in our country for ongoing cooperation in the face of disaster and terrorism.

It is this author’s experience that one of the chief problems between separate groups working in disaster response situations is the unwillingness of each group to share information with other responders, and the lack of acceptance of another group’s training and credentials as equal to their own. The MEMS Qualification may help to correct or to avert these issues in the field. ²

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² The author invites discussion on the topics of the Military Emergency Management Specialist program and the Texas Medical Rangers, and may be contacted for additional information through drjlg1@charter.net or by telephone at 817-882-9415.
EXPANDING THE USE OF STATE DEFENSE FORCES
IN HOMELAND DEFENSE MISSIONS

Lieutenant Colonel Brent C. Bankus (AUS-Ret)

The expanded use of State Defense Forces in homeland defense missions is emerging as an important, viable option in the current Global War on Terrorism. The current high operational tempo of the U.S. Army and mobilized National Guard forces underscores the need to examine all resources available to U.S. planners, including the previously underused State Defense Forces (SDFs).

SDFs were created early in the 20th century as replacements for the National Guard when those forces were federalized and sent into combat overseas. They were used as replacement units when the National Guard was mobilized for the Mexican Border Campaign of 1916-17, then for World Wars I and II and the Korean War. Upon the National Guard’s departure, state governors were ill-prepared to cope with the eventualities of natural and manmade disasters and directed that replacement units be formed. Referred to as State Guards or Home Guards, many of these replacement soldiers had credible and even distinguished prior military experience and ably filled the void.

Currently, SDF units are recognized under Title 32 US Code, and are under direct control of each state Adjutant General. SDF units currently exist in 22 states and Puerto Rico. These units continue to do the important work originating in the early 1900s such as critical infrastructure security. In addition, they augment the National Guard in areas such as information technology, search and rescue, legal, medical and religious support and trained Emergency Operations Center desk officers.

A reexamination of the role of SDFs seems overdue. The U.S. Army and National Guard are currently experiencing increased mission requirements with deployments to Iraq, Afghanistan, and the Philippines. These deployments are in addition to current U.S. force requirements in Korea, Bosnia, Kosovo, and the Sinai with a high probability of future like missions. Given this situation, SDFs are a resource that should not be neglected for several key reasons.

The relative costs associated with maintaining SDFs are minimal, since weekend and annual training is done on a volunteer basis in a non-pay status. As with their training, most SDF missions are done on a voluntary basis. SDF personnel are paid only while on state active duty. In the immediate aftermath of the 9/11 attacks for example, activated State Defense Forces of both Alaska and New York were paid only for the few weeks they were on state active duty to augment the federalized National Guard forces. Moreover, SDFs possess minimal equipment, so maintenance and related logistical costs are low.

Despite their clear virtues, the Federal Government seems split on its support for SDFs. Both the Department of Defense and National Guard Bureau are supportive on the development and employment of SDFs, viewing them as a logical choice to fulfill their state duties during their absence. However, there is a lack of other federal support and funding to make this happen. Congress has passed the necessary legislation for SDFs to exist, but Congressional leaders are equally quick to emphasize

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1 This article first appeared as an Op-Ed piece published by the Strategic Studies Institute, U.S. Army War College.
that internal security is a state problem.\(^2\) This argument now appears invalid as 9/11 proved that local or state catastrophes can quickly turn into federal ones.

Historically, strategic direction, scope of missions as well as questions regarding training and personnel standards and soldier liability has plagued SDFs and need to be addressed. Since SDF organizations are ostensibly replacements for the National Guard, there is also a lack of consensus on what model they should follow. Most military planners and state leaders regard SDF missions as the provision of emergency support to civil authority in the preservation of life, protection of property, and the maintenance of law and order. Yet, similar to World War II, there are also those who favor a combat role for SDFs, despite their clear relevance to homeland defense.

This system needs to change. Homeland security planners face the requirement to establish viable missions and personnel policies for the SDFs. Training and personnel policies need to be standardized, and the legal status of the SDF members and missions needs to be clarified. Once this occurs the volunteer spirit that motivates SDF soldiers can be energized and placed in the service of the American people. The SDFs can be a viable integral force in fighting terrorism, only if they become part of the integrated U.S. Total Force Structure effort for homeland defense. History has shown SDF forces have been called upon in a harried last minute fashion, when there are no other alternatives and have been effective. This paradigm requires adjustment before another catastrophe occurs.

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Bankus, Lieutenant Colonel Brent C., (Cavalry, AUS- Ret)  
Brent C. Bankus served in the active Army, U.S. Army Reserve and the U.S. Army National Guard Active Guard Reserve Program with a combined service of over twenty five years, retiring on 1 January 2005. During that time he enjoyed assignments in the United States, Germany, Bosnia, Kosovo, Albania, Sinai, Eritrea, Guam and Hawaii. As an Armor/Cavalry officer Lieutenant Colonel Bankus has held command and staff positions from the platoon through the battalion level. He has a MS in Information Management, a MS in Strategic Studies from the U.S. Army War College, and is a graduate of the U.S. Army and U.S. Marine Corps Command and General Staff Colleges and the U.S. Army War College. Colonel Bankus is currently a defense consultant with SERCO, North America; Blackwater USA; Jane’s Information Group; and Metro Productions.

Barish, Colonel Robert, MD, MDDF  
Robert Barish is Commander of the 10th Medical Regiment of the Maryland Defense Force. He is one of the founders of the Maryland Emergency Medicine Program. Colonel Barish served as an A-20 “Warthog” Flight Surgeon and later was accepted as a finalist for the U.S. Astronaut Program. He served in 1979 at the Khoa I Dang refugee camp and later at a refugee camp in Somalia. In 1991 he was one of 38 medical professionals sent to Kuwait by the Governor of Maryland. Under Colonel Barish’s command the 10th Med Rgt of the MDDF performed its first ever mission outside of the state by deploying to Louisiana during the Hurricane Katrina catastrophe. Today, he is the Vice Dean for Clinical Affairs at the University of Maryland School of Medicine.
Colgan, Lieutenant Colonel  Richard, MD, MDDF
Richard Colgan serves in the 10th Medical Regiment of the Maryland Defense Force. He is a physician and Associate Professor at the University of Maryland School of Medicine, and Director of Undergraduate Education for the Department of Family Medicine at the University of Maryland, Baltimore, MD. Dr. Colgan practiced family medicine in Annapolis, MD, where he helped to establish the first outreach medical clinic for Annapolis’ underserved population. He is a Past President of the Maryland Academy of Family Physicians and current Editor-in-Chief of Maryland Family Doctor. Dr. Colgan speaks throughout the United States on outpatient antimicrobial therapy and other topics related to primary care medicine.

Captain Davis, Kisha, MD, MDDF
Kisha Davis, MD is a second year resident in family medicine at the University of Maryland School of Medicine. She serves as a physician in the 10th Medical Regiment of the Maryland Defense Force (MDDF). CPT Davis responded to Governor Robert Ehrlich’s call for volunteers and participated in the MDDF’s first deployment to Louisiana, Operation Lifeline, during the aftermath of Hurricane Katrina. She served in Jefferson Parish and, as a member of Charlie Group, she helped set up and served at one of the six clinical sites.

Greenstone, Colonel James L., EdD, TXSG/MSC
James Greenstone is Deputy Commander of the Texas State Guard Medical Reserve Corps. He is responsible for the Texas Medical Ranger Groups in the Northern part of the State of Texas. Colonel Greenstone is also the Military Emergency Management Specialist (MEMS) Academy National Medical Services Officer and the Associate Editor for Medical Support for the State Defense Forces Publication Center. Dr. Greenstone has been in practice for forty years, and served as the Police Psychologist and Director of Psychological Services for the Fort Worth, Texas Police Department. His newest book, The Elements of Disaster Psychology: Managing Psychosocial Trauma will be released by Charles C. Thomas Publishers in 2007. Dr. Greenstone is Editor-in-Chief of the Journal for Police Crises Negotiations published by The Haworth Press, Inc.
Heart, Lieutenant Colonel George, WASG

George Heart is the Public Information Officer for the Washington State Guard. He proposed, developed and directs the Military Emergency Management Specialist (MEMS) Academy program for the State Guard Association of the United States (SGAUS) in 1999 and currently serves as the MEMS Academy Commandant. Colonel Heart is also an ecclesiastically certified military Jewish Lay Leader and is a founding member of the SGAUS National Chaplain Staff College.

Hershkowitz, Colonel Martin (MDDF-Ret)

Martin Hershkowitz, OCP, served in the Maryland Defense Force, with assignment as Special Advisor to the Commanding General. He is currently the Editor of the State Defense Force (SDF) Publication Center, producing both the SDF Journal and the SDF Monograph Series, and is a member of the Executive Council of the Military Emergency Management Specialist (MEMS) Academy sponsored by the State Guard Association of the United States. Within and for the U.S. Government, Colonel Hershkowitz has served as a Senior Security Officer for Nonproliferation and National Security concerned with the safeguards and security of nuclear weapons and the mitigation of the “insider threat”; and in military weapons analysis, educational research and evaluation, and management improvement. He is also Executive Consultant for Hershkowitz Associates and Executive Advisor to the Managing Partner and Senior Homeland Security Advisor for the Greenville Group, LLC. Colonel Hershkowitz has published extensively on State Defense Force Missions, critical site security and training. He served as Ad Hoc Advisor to the Delaware National Guard Command Coordinator for establishing a Delaware State Defense Force.
Price, Captain Kenneth, SCSG

Security and a Certified Instructor for the South Carolina Community Emergency Management Team (CERT) Program. He is also the South Carolina CPT Kenneth M. Price, is the Executive Officer of the Communications Section, 1st Brigade, South Carolina State Guard (SCSG). He holds amateur radio licenses in the USA and Mexico, and was responsible for the design and implementation of the 1st Brigade communications program. CPT Price teaches at the SCSG Schools Department, is a Certified Instructor in Weapons of Mass Destruction (WMD) Awareness for the Department of Homeland State Director for the Military Emergency Management (MEMS) Academy. Mr. Price is an international consultant for agricultural packaging and paper companies in their Latin American operations.

Sieg, Kent G., PhD

Kent G. Sieg received his doctorate in history from the University of Colorado in 1993. He is currently an historian with the Center for Cryptologic History, U.S. Department of Defense and previously served in positions with the U.S. Departments of State, Transportation, and Homeland Security. Lt Kent currently serves in the U.S. Coast Guard Reserve. His areas of specialization include topics in water resources, emergency response, and homeland security. Dr. Sieg has written widely on topics in national defense and foreign relations.
Wishart, Major General Eli, CG/SCSG
Eli Wishart is Commanding General of the South Carolina State Guard and is Director of the South Carolina Military Department’s Homeland Defense Program. He graduated from The Citadel, University of South Carolina and Midlands Technical College. General Wishart’s military education includes the Air War College, Command and General Staff College, Infantry Officer Advanced Course, Unconventional Warfare School and The Defense Language Institute. He is a Ranger and Jumpmaster. General Wishart’s military awards and decorations include the Legion of Merit, Bronze Star Medal, Meritorious Service Medal, Air Medal, Army Commendation Medal with V Device (2nd OLC), National Defense Service Medal, Vietnam Service Medal, Vietnam Cross of Gallantry with Silver Star, Polish Virtuti Militari, Combat Infantryman's Badge, Expert Infantryman's Badge, Parachute Badge and Vietnam Campaign Medal, and his South Carolina State Guard awards include the Medal of Merit and Commendation Medal. He has served in numerous command and staff positions with the 82nd Airborne Division, Vietnam Military Assistance Advisory Group, Special Forces, 2nd and 3rd U.S. Armies, as well as others. General Wishart is also serves on the Boards of several national and international business, civic, military and faith based organizations.