ENHANCING DOMESTIC RESPONSE: THE IMPLEMENTATION OF THE HOMELAND RESPONSE FORCE

BY

LIEUTENANT COLONEL PAUL T. GAULT
United States Army Reserve

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14. ABSTRACT
The Department of Defense, in collaboration with ten designated States will each establish a Homeland Response Force (HRF). These organizations will be regionally located within the ten Federal Emergency Management Agency regions. National Guard forces from the States within each region will be assigned, equipped, and trained for the ten HRFs. The primary roll of the response force will be reacting to a possible Chemical, Biological, Radiological, Nuclear, or High-Yield Explosives (CBRNE) event when state and local resources are exhausted. This document will examine the requirements to man, train, certify, and maintain readiness of the HRFs so it can efficiently respond to regional domestic incidents.
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Lieutenant Colonel Paul T. Gault
United States Army Reserve

Colonel Michael S. Chesney
Project Adviser

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U.S. Army War College
CARLISLE BARRACKS, PENNSYLVANIA 17013
The Department of Defense, in collaboration with ten designated States will each establish a Homeland Response Force (HRF). These organizations will be regionally located within the ten Federal Emergency Management Agency regions. National Guard forces from the States within each region will be assigned, equipped, and trained for the ten HRFs. The primary role of the response force will be reacting to a possible Chemical, Biological, Radiological, Nuclear, or High-Yield Explosives (CBRNE) event when state and local resources are exhausted. This document will examine the requirements to man, train, certify, and maintain readiness of the HRFs so it can efficiently respond to regional domestic incidents.
History and the Imminent Threat of a CBRNE Incident

Throughout history, mankind has waged war by the use of chemical and biological means. During ancient times poisons were placed in water supplies. An example is Solon of Athens putting roots of hellebore in the drinking water of Kirrha. Hellebore is a strong narcotic or toxin which in large enough dosage causes death.¹ During the Peloponnesian War, Spartan forces used noxious smoke against Athenian cities.² The Carthaginians used mandrake root in wine attempting to sedate their enemies. The use of fire is also an ancient weapon of mass destruction. Greek fire was an incendiary formula first used by the Byzantine Empire, weaponized by propelling the mixture through a pressurized siphon, similar to a modern day flamethrower. The formula was a state secret and its ingredients are lost to us today.³

During the modern era advances in chemical technology have enabled mankind to develop and concentrate powerful chemical compounds that are highly toxic. During the First World War Germany weaponized several chemical compounds. Chlorine was the first, used in 1915 at the battle of Ypres. Germany exploded canisters filled with chlorine over the French lines killing 5,000 and injuring 15,000. As the war progressed, both sides proliferated the use of chemical weapons. An estimated 91,000 deaths and 1.2 million injuries were caused by mustard gas.⁴

Pre World War II saw the development of highly effective chemical weapons. The Germans developed the first nerve gas, tabun in 1936. Sarin, soman, and VX soon followed.⁵ In the European Theater only limited use of chemical weapons occurred.
However, in the Pacific Asian Theater, Japan used chemical weapons in China on the civilian population.

Post World War II the major powers continued the development of chemical weapons. It is estimated that more than 20 countries in the Middle East, Asia, Europe, and North America possess chemical weapon technology. During the 1981-1988 Iran-Iraq War, mustard gas and nerve agents were used extensively primarily by Iraq.

Terrorists deployed chemical weapons against civilian populations for the first time in 1994, when the extremist Aum Shinrikyo cult released sarin gas in Matsumoto, Japan, leaving 7 dead and 280 injured. The following year, the cult released sarin vapor in the Tokyo subway system, killing 12 commuters and hospitalizing nearly 1,000. In our current environment the reality is, not if a terrorist organization will use chemical weapons against the United States but when.

Notwithstanding the potential use of chemical weapons as for a terror attack the amount of toxic chemical that are transported daily along the road and rail ways of the United States have a potential for large scale accidents that could require an extensive mitigation and clean-up.

Biological agents as weapons also have a long history of use. In the Medieval Era the practice of exposing fortifications to rotting and infected human and animal remains with the intent of infecting the fortification's population was a tactic. There is little evidence of the effectiveness of this tactic with the possible exception of a 14th Century siege by the Tarters of Kaffa. The invaders were reported to have catapulted plague-infected bodies into the city. The spread of plague resulted in the fall of the city, however no conclusive evidence directly link the attack with the results.
In the 18th century, the British used smallpox as a biological weapon against the Delaware Indians. During a peace making parley, infected blankets and handkerchiefs were given to the Indians causing outbreak within the tribe. This practice was repeated during the French and Indian War again focused on the American Indians.\textsuperscript{10}

In the modern era where microbiology has become a powerful medical science, the nature of biowarfare has greatly advanced. Gaining the ability to isolate disease causing microbes and produce them on a large scale has propelled the ability to efficiently and effectively weaponize biological agents.

During World War I, the Germans used the science of microbiology to infect live stock with anthrax and glanders, and then shipped the live stock through neutral countries to the Allied nations. The plan was to disrupt food supplies and adversely affect transportation. The attack met with very limited success.\textsuperscript{11}

Post First World War an effort was made to limit the use of both chemical and biological weapons, the 1925 Geneva Protocol prohibited the use of both but allowed research and development on the agents. The United States signed the protocol, but Congress failed to ratify it for more than 50 years.\textsuperscript{12}

The Japanese prior to and during World War II were heavily involved in developing bioweapons. They conducted several large scale field tests in China where cities were exposed to anthrax, cholera, and the plague. They contaminated food and water supplies and on at least one occasion released plague contaminated fleas from aircraft. The Japanese troops were themselves unprepared for their use of bioweapons. On one occasion an attack on the Chinese resulted in the illness of up to 10,000 of their own troops and resulted in 1,700 deaths due to cholera.\textsuperscript{13}
During the early years of the Cold War bioweapon technology flourished both in the East and West. Many improvements of both agents and delivery system technology were developed. However, accidents did happen, one example, a production facility in Terre Haute, Indiana lacked necessary safety features. Tests of the fermentation and storage process revealed contamination of the plant and nearby area. These discoveries led to limitations and restrictions on the production of bioweapons in the United States.

The dismantling of bioweapons programs started in the late 1960. President Nixon ordered the dismantling of the program in the United States. The United States currently only works in the field of bioweapons defense, improving capabilities to detect, design personal protection equipment, vaccines, diagnostics and therapies. The former Soviet Union had an extensive bioweapons program that was exposed after the break-up. The challenge lies in after the break-up accountability for bioweapons. Accountability was poorly controlled and some of these weapons today remain a concern with the lack of accountability.

As recent as 2001, the United States experienced an attack with anthrax via the Postal Service. The perpetrators of this attack have yet to be identified, though an extensive investigation was conducted. Five Americans were killed and 17 were sickened in what became the worst modern era biological attacks in U.S. history.14

Radiological, Nuclear, or High-Yield Explosives are perhaps the gravest concern. Since the development of the Atomic bomb and its first use in World War II, the world has lived under the threat of a weapon that can cause mass destruction. The danger of a non-state actor gaining access to a nuclear device is a possibility; however, this is not
as likely as the same actor gaining access to both the material necessary and the technology to build a device.

The amount of fissionable materials unaccounted for seems to be a mystery. After the breakup of the Soviet Union, the possibility of unaccounted for material and the loose mechanisms of control continue to be a concern today. More recently this material is more secure in Russia than directly after the breakup; but how much is still unaccounted for?

What about the motivation of terrorists that have attacked the American homeland? Al-Qaeda spokesman Suleiman Abu Gheith has stated al-Qaeda’s objective: “to kill 4 million Americans—2 million of them children—and to exile twice as many and wound and cripple hundreds of thousands.” As he explains, this is what justice requires to balance the scales for casualties supposedly inflicted on Muslims by the United States and Israel. Michael Levi argues, correctly, that such a tally could be reached in a series of smaller installments, and our national security would benefit from insights into how to prevent such events. But ask yourself how many 9/11s it would take to reach that goal. Answer: 1,334, or one nuclear weapon.

—Graham T. Allison, director of Harvard’s Belfer Center for Science and International Affairs

Though the motivation for such an attack exists and is the most catastrophic, the likelihood is relatively low compared to an attack with what is called a “dirty bomb”. Such a device is a conventional explosive that is designed to spread radioactive material over an area, contaminating that area. The dirty bomb if detonated during a large crowded event, considerable causalities would result and cause substantial risk for first responders.

The other aspects of radiation emergencies are not necessarily terrorist related, but accident related. Nuclear accidents have occurred in the United States and the Former Soviet Union. The Three Mile Island accident on March 28, 1979, near
Middletown, Pennsylvania was contained to the plant, but there were some traces of radioactive contamination in the surrounding area. As a precaution, an evacuation advisory was issued for pregnant women and young children within a five mile radius of the site.\textsuperscript{15}

In 1986, the former Soviet Union the Chernobyl Nuclear Power Plant had a reactor explosion leaking massive amounts of radiation into the environment. This accident caused 30 deaths within the first four months, forced evacuation of about 116,000 within an eighteen mile radius of the site and another 230,000 people in subsequent years. The extent of delayed health problems is uncertain. The chances of an event on the scale of Chernobyl occurring in the United States is minimal with the stringent oversight of the Nuclear Regulatory Commission. Although unlikely, if the worse were to happen in the U.S., the scale of this magnitude with the extent of the radioactive fallout would quickly overwhelm first responders and any follow on responders.\textsuperscript{16}

It is clearly evident that chemical, biological and radiological weapons have been utilized long in our past history through the present. There is a distinct possibility that weapons such as these will be used in the future. The capabilities of first responders across our country are adequate for response to small incidents of release of toxic chemicals or other hazardous materials. However, when an event of medium or large scale happens, our first responders will quickly become overwhelmed. The U. S. must maintain a capable and reliable force, which can deploy rapidly at the request of a state authority to an incident site supporting our first responders. The Department of Defense
CBRNE Enterprise is that force, providing a full range of scalable capabilities in response to any CBRNE threat.

**Composition, Organization, Mission for the CBRNE Enterprise**

Understanding the complex nature of the CBRNE Enterprise is the first step for achieving complete operational readiness. Figure 1, shows how the enterprise is divided between the National Guard, Title 32, and the Title 10 Active duty response forces. The response is proportional in a range of capabilities, beginning with small local augmentation to large scale catastrophic incidents. Note that figure 1 shows each level of response forces commitment. Starting with National Guard Civil Support Teams through the National Guard Homeland Response Force, (HRF). This article will focus principally on the National Guard response, and particularly on the HRF.

![Fig 1: The DoD CBRNE Enterprise for 2012](image)

Examination of the Title 32 response package reveals three main players, they are the Weapons of Mass Destruction Civil Support Teams (WMD CST), the CBRNE
Enhanced Response Force Packages (CERFP), and the newly organizing Homeland Response Force (HRF). Currently both the CSTs and the CERFPs are fully operationally capable and respond at the request from their Governor. Two of the ten HRFs are in the development and training cycle and stand mission ready at the end of the year. The remaining eight are in early development with a fully operational date by the end of 2012.

The CST has the mission of supporting civil authorities during a domestic CBRNE incident. The unit has capability to identify and assess a wide range of hazards, provide advice to civil authorities, and facilitate the arrival of additional military forces during a wide range of emergencies and incidents of WMD terrorism, or accidents that may be chemical or radiological in nature.

The States Joint Force Headquarters either employs the CST to support a state response or to support another state’s response under a supported Governor through the Emergency Management Assistance Compact (EMAC). This process allows National Guard assets to operate in another state with the consent of both state Governors, and provides for reimbursement of services rendered.

The CST is manned by 22 full-time, Title 32 Active Guard Reserve, (AGR), Army and Air National Guard personnel. The structure of the unit is divided into six sections: command, operations, communications, administration/logistics, medical/analytical, and survey.

Each CST is available for deployment, within 3 hours of notification to an incident site using its organic assigned vehicles that includes a command vehicle, operations trailer, the Unified Command Suite full range communications platform, an Analytical
Laboratory System vehicle, containing a full suite of analysis equipment to identify the characteristics of the hazard, and additional general purpose vehicles. The CST can also be transported by air, rail, commercial line haul or ship. Each CST has limited ability to conduct decontamination, primarily only self-decontamination can be accomplished.

The CERFP’s mission is to provide rapid response capability to the state including, urban search and rescue, decontamination operations, and the ability to perform medical triage and initial treatment to stabilize patients for transport to medical facilities.

The CERFP is comprised of four elements staffed by personnel from National Guard units. Elements include, search and extraction, decontamination, medical, and a command and control element. The command and control team directs the overall activities of the CERFP, and coordinates with a State Joint Task Force and the on-scene incident commander. The search and extraction element is assigned to an Army National Guard Engineering Company, the decontamination element is assigned to an Army National Guard Chemical Company, and the medical element is assigned to an Air National Guard Medical Group. Security duties for the incident site and the four CERFP elements are performed by the state National Guard Response Force. Figure 2 identifies the states where the 17 CERFPs are located around the country.
The construct of the Homeland Response Force will be composed of a 566 personnel unit, to include a medical element of 45 doctors, nurses, and other medical professionals, 50 Soldiers trained and equipped for search and extraction, a 75 member decontamination team, 200 security troops, and 196 command and control specialists.\textsuperscript{19}

Medical teams have the protective posture to accompany search and extraction teams into disaster areas, find survivors and provide immediate care. The unit is equipped to provide a full range of care to include surgery. Search and extraction troops are trained and equipped to enter collapsed buildings to rescue survivors. They deploy with special gear for bracing and shoring up buckled walls and caved in ceilings, and to excavate debris to remove trapped victims. The decontamination units can deploy and establish CBRNE response decontamination sites in order to conduct ambulatory and non-ambulatory decontamination of victims and first responders. Security troops are responsible for the safety of the scene in order to quickly allow for egress and digress of survivors, first responders and military personnel in the area of operations. The command-and-control element is designed to provide command of the military assets
assigned to the mission in addition to arriving troops depending upon the required level of response in the area of operations to include additional CBRNE response elements.

Each of the ten Homeland Response Force packages will be assigned within the respective Federal Emergency Management Agency (FEMA) region, and manpower for each package will be sourced either from a combination of states within the region or single sourced by a particular state in the region. Figure 3 illustrates the FEMA regions and the host state for each of the Homeland Response Force Packages. At the request of the FEMA region, the HRFs will be required to deploy within 12 hours of notification and are expected to arrive at the scene in order to save lives and mitigate further human suffering.20
Structure and Personnel Resourcing of the HRFs

The fundamental imperative for the CBRNE Enterprise is a ready deployable force that can react within published timeframes and meet the expectations of State Governors and the citizens of the United States. By not resourcing and providing a permanent structure these expectations are at risk. First and foremost the enterprise must be fully mission capable 100% of the time. The HRFs do not have existing structure or an authorization document such as a Modified Table of Organization & Equipment, (MTOE), or a Table of Distribution and Allowances, (TDA), but a structure known as a Directed Manning Document, (DMD), which gives the unit an ad hoc arrangement. Manning will be provided from organizations that already exist in the force structure. The dual nature of serving concurrently in a MTOE or TDA unit and a DMD is challenging in meeting demands for both wartime and homeland defense requirements. It is essential that the requirements of the homeland be the first priority.

Examples of how the DMD requires dual participation is demonstrated in the case of New York, the region II HRF. The command and control element has been tasked to the 42nd Infantry Division HQs. The State's Joint Force Headquarters is sourcing from within the division headquarters MTOE slots, 180 Soldiers for the HRF. These Soldiers will have dual responsibilities, primarily to the HRF, but for contingency mobilization their responsibility will be to the division as well. In the case of Georgia, the HRF for region IV, the command and control was tasked to a Troop Command TDA unit. There is no single answer or standard because each state has a different force structure available in their respective state or region, and are building the HRF manning from any available structure. Some states are using Brigade HQ's, some using TDA structured HQ's, and others using Division HQ's.21
The unique capabilities of the HRF require a joint effort consisting of both Army and Air Guard. The Joint nature of the HRF adds complexity due to funding, which is primarily Army National Guard and due to cross service issues, the Air Guard is having challenges by not being able to follow the Army funding stream. This is a clear result of not having a permanent Joint Manning Document (JMD).

The concept of making a DMD structure joint involves dual-slotting Air Guard personnel which are proving to be problematic. The Air Guard can be mission of supporting because the HRF is difficult to balance with their requirements to support in the ,it interferes with the Air Force operational wartime cycle which is different from the Army force generation model. The permanent structure must be a JMD, making it possible for both Army and Air Guard to be assigned and while participating exempt from contingency operations.

The personnel issue for the Air National guard is their demand for the highly qualified occupations for duty positions that are also in need for their Federal mission. The constant demand of deploying individuals as well as units going to Iraq or Afghanistan more frequently but less lengthy tours, makes Manning a greater challenge than the Army Guard.

Another key factor in the make-up of the organization are the highly qualified, low density enlisted and officer skill sets, such as communication specialists, intelligence specialists, Doctors, Physician Assistants, Nurses, and other medical specialists. Across the reserve components, shortages for these highly trained individuals are prevalent and they are in high demand throughout all the components.
The HRF structure calls for a medical unit of 45 personnel. Because of the unique challenges in the training and certification of medical professionals, this unit will be an Air Guard medical element created as a new unit within the Air National Guard Medical Service. These units will not be dual slotted, but have their own Air Force Unit Manning Document (UMD) and Unit Identification Code (UIC). Currently, all the 10 new states entering the CBRNE enterprise have received their Air Guard UMDs. Cross leveling and re-alignment of Air Force Medical Services (AFMS) is required. The reason for this decision was due to the Medical professionals now had 2 different sets of training requirements and retention was becoming an issue. Additionally, to be a true CBRNE medical certified responder requires specific training to operate in a CBRNE environment coupled with unique triage procedures for the affected casualties.

Another significant challenge for the medical community is medical credentialing for health care professionals. Medical credentialing is required for a healthcare professional to practice. All military medical providers are credentialed in the DOD mandated Centralized Credentials & Quality Assurance System, (CCQAS), used by all services. Furthermore, in the event of activation, the tasked unit must undergo the credentialing process completed by the State Air Surgeon.

Additionally, when activated medical personnel must be deployed in the right status. If activated in Title 32 or Title 10 status, Federal Tort Claims Act (FTCA) will apply. Under State Active Duty (SAD) depending on state laws and professional code/laws the FTCA does not apply. Additionally, not all professions are granted the same level of autonomy or even recognized in certain states or territories. For example, physician assistants are not recognized in the territory of Puerto Rico. Medical planning
is essential at the HRF brigade level to ensure the appropriate professionals are deployed or have acceptable EMAC agreements established.\textsuperscript{25}

Personnel sourcing is the primary test over the long haul for the enterprise. Maintaining available qualified personnel to meet the requirements of upcoming rotations of the HRF coupled with contingency mobilizations will prove difficult. There is no additional end strength programmed or authorized to support the HRF construct. There are no considerations of using additional manpower (AGR, Technician, or Military), authorized to accomplish HRF mission requirements. There is also no authority to permanently move existing manpower authorizations to fulfill HRF requirements.\textsuperscript{26}

It is apparent that each HRF host state needs additional structure in their inventory to properly maintain personnel manning for the enterprise. By adding structure making the HRF a Joint MTOE or TDA unit will allow personnel to be permanently assigned to the unit in a valid authorized slot thus doing two things; allowing National Guard units to recruit against vacancies created in donor units and eliminating the requirement to meet contingency deployment needs from HRF personnel.

To gain and maintain capabilities the unit must have a fulltime cadre to meet these requirements. Full-time manning is linked to funding and budget. With current and future budget constraints funding will most likely become tighter soon and will effect the HRFs being fully established for the foreseeable future. The problem is that the full-time manning requirements are not currently tied to capability requirements; they are tied more directly to available funding. The number of full-time positions, anywhere from 22-30 will be required but not funded if the budget allocations decrease in the future.\textsuperscript{27}
Available regional Soldiers and Airmen to meet the organization personnel requirement is the single greatest challenge with sustaining the force. The ability to rotate traditional National Guard Soldiers and Airmen through the pattern of training, equipping, certifying and becoming operational would require twice the manpower in the current three year cycle. This coupled with other operational requirements both state and federal will place a greater demand on the set manpower pool; not only for single state HRFs that generally have a robust guard, but particularly on multi-state HRFs due to the smaller size of each respective state guard.

With the potential of continued contingency operations, state missions, and an increasing demand for National Guard participation in programs such as the State Partnership Program. The National Guard structure may become taxed to the point where manpower can no longer support the mission. This cannot happen, and it would be a failure to meet the expectation for a ready and capable force to protect the citizens of the United States.

The other reserve component may be a pool of manpower and expertise to fill the void. If for example shortfalls exist in a region for critical position vacancies a remedy may be to fill the requirement with Title 10 reserve Soldiers and Airmen. This poses a dilemma in current law between Title 10 and Title 32. How can the Title 10 reserve Soldiers and Airmen serve at the pleasure of a particular State Governor? A change in the way business is conducted across the Department of Defense and the Federal and State Governments is in order. This may take legislative reform, but may be a good solution to allow Title 10 forces to be designated Title 32 at the pleasure of the President as is the case with Title 32 to Title 10. Current switching between the two
components can be done but it requires complete separation from the losing component, except when Title 32 personnel are federalized by the President. The proposal is that the Title 10 member is on loan for a specific time to meet the requirements of the CBRNE Enterprise, and placed in a dual status for the mission. Dual Status 10/32 has been granted for command and control authority. There may be some precedence with that decision.

This would provide a larger force pool to fill requirements in the HRF structure and possibly be the way ahead for other force generation requirements at the strategic and operational level.

Training and Certification of the Homeland Response Force

Another argument for a permanent standing organization is the related cost to train a complete organization every three years. It would be more cost effective to train individuals upon reassignment to the enterprise. Some risk to readiness must be taken because the replacement is not fully qualified for deployment until his or her training is complete. This risk can be mitigated in most cases by programming training completion for each replacement prior to the incumbent leaving the organization.

Training for the HRF mission is quite extensive including basic Military Occupational Skill Qualification for Enlisted and Non-Commissioned Officer and Branch Qualification and Functional Area Qualification for Officers. Beyond basic military qualification, Soldiers and Airmen must be further trained in an extensive list of consequence management core and advanced courses, Hazardous Material training, and CBRNE specific training. The training regiment also includes mission specific related training for the command and control units both at the brigade and battalion
level, the medical unit, the search and extraction unit, the decontamination unit, and the security element.

The training period for the first two HRFs will take approximately six months to accomplish the individual training and another 4 months for completion of collective training. Collective training will culminate with an external evaluation designed as a Field Training Exercise (FTX). Once successfully completing of the FTX, the unit is validated, certified, and the HRF becomes fully operational.

Challenges exist not only from the training methodology but as mentioned above the ad hoc nature of the unit organization may cause difficulty in maintaining timelines and continuity for the unit. Borrowing the force structure from other MTOE units, Soldiers and in some cases Airmen will have a dual training requirements for proficiency in both their HRF and wartime mission. In the case of TDA units who are not in the normal deployment cycle this is not as much of a concern, however, in many cases deploying MTOE units requires augmentation from TDA units upon mobilization.

Another factor especially with multi-state HRFs is the travel to and from the duty site for training. Traditionally, reserve component Soldiers and Airmen live within reasonable commuting distance to their reserve unit. Unless funding for travel while in an inactive duty training status is made available a hardship for the service member would result. This hardship over time could affect the member’s desires of continuing to serve in the HRF.

As a training strategy the current plan meets the requirement to initially establish a trained and ready HRF. The only question is can it be sustained?
Sustainability of the HRF

With the current operational tempo, rotation cycles are designed to account for the commitment of the reserve components in contingency operations at a lesser rate than that of the active duty. The increasing demand on particularly Army and Air National Guard member to provide for Homeland Security, Homeland Defense, and Defense Support to Civil Authorities has dramatically increased their commitment. One must remember that those who serve in the National Guard and Reserves manage two careers and both are equally important.

The construct of the CBRNE Enterprise relays heavily on the National Guard. Dual mission responsibility of being in the contingency deployment cycle and in the CBRNE Enterprise cycle will begin to take a toll, and may cause a sustainability challenge for the CBRNE Enterprise.

The cycle for performing duty in the HRF is one year of training and two years of operational performance, while still being inside the contingency operational cycle. Remember if an Army Guard Soldier is in a MTOE unit he or she must maintain proficiency in the position assigned to in the parent unit while still serving in the enterprise. The net result of maintaining a rotational force in a three year cycle for the HRF will be a commitment of not only 566 Soldiers and Airmen but an additional cycle on the first year and the third year. Total force commitment for the three year cycle will be 1,698 individuals who are willing to commit to an additional cycle. Taking into account for the low density, highly qualified Soldiers and Airmen required for the CBRNE Enterprise as a whole, within a short time period sustainability of future rotations will become problematic.
Interagency expectation would be that once the enterprise is fully established there will not be time or operational gaps when these units are requested. It is imperative that the DoD remains fully committed in providing our local, state, and federal partners these unique capabilities that are trained, ready, and certified.

**Conclusion and Recommendations**

The primary purpose for our military is to protect the interests of the United States of America. This means to protect the homeland first, provide for the security of our citizens, and assist in the mitigation of great suffering and loss our citizens may encounter in a catastrophic event. As an organization, the Department of Defense cannot fail in this mission. The trust of civilian leadership and citizens must never be lost, and expectations not diminished.

The way ahead is to craft, not just for the HRF, but all aspects of the CBRNE enterprise into a permanent structure design reflected on an authorization document. It must be fully funded, fully manned, and always ready to perform its mission. Leadership must emphasize the primary mission of the enterprise, and providing unique, initiative solutions to challenging problems of funding and potential laws that restrict this endeavor.

Creative ways to mitigate future personnel shortages must be explored such as temporary cross leveling of Title 10 to 32 from Army Reserve and Air Reserve organizations, or recruiting directly into permanent positions within the organization.

This venture must be successful, recent events in Japan provide example of the need to have immediate capability to react across a wide spectrum of catastrophic events that our world faces.
Endnotes


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