

5th Anniversary Report
2004-2009



Report Documentation Page				Form Approved OMB No. 0704-0188	
Public reporting burden for the collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Washington Headquarters Services, Directorate for Information Operations and Reports, 1215 Jefferson Davis Highway, Suite 1204, Arlington VA 22202-4302. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to a penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number.					
1. REPORT DATE 2009		2. REPORT TYPE		3. DATES COVERED 00-00-2009 to 00-00-2009	
4. TITLE AND SUBTITLE 5th Anniversary Report 2004-2009				5a. CONTRACT NUMBER	
				5b. GRANT NUMBER	
				5c. PROGRAM ELEMENT NUMBER	
6. AUTHOR(S)				5d. PROJECT NUMBER	
				5e. TASK NUMBER	
				5f. WORK UNIT NUMBER	
7. PERFORMING ORGANIZATION NAME(S) AND ADDRESS(ES) U.S. Army Wounded Warrior Program (AW2),200 Stovall Street, 6N07,Alexandria,VA,22332				8. PERFORMING ORGANIZATION REPORT NUMBER	
9. SPONSORING/MONITORING AGENCY NAME(S) AND ADDRESS(ES)				10. SPONSOR/MONITOR'S ACRONYM(S)	
				11. SPONSOR/MONITOR'S REPORT NUMBER(S)	
12. DISTRIBUTION/AVAILABILITY STATEMENT Approved for public release; distribution unlimited					
13. SUPPLEMENTARY NOTES					
14. ABSTRACT					
15. SUBJECT TERMS					
16. SECURITY CLASSIFICATION OF:			17. LIMITATION OF ABSTRACT Same as Report (SAR)	18. NUMBER OF PAGES 20	19a. NAME OF RESPONSIBLE PERSON
a. REPORT unclassified	b. ABSTRACT unclassified	c. THIS PAGE unclassified			

"The success of our organization is rooted in our ability to provide AW2 Soldiers and Families with the best personalized support possible—for as long as it takes."

*—COL Jim Rice
Director, AW2*



Table of Contents

BG Cheek—Our Mission	2
COL Rice—Our Commitment.....	3
Overview	4
Soldiers and Families	4
Wounded Warrior Lifecycle.....	5
Advocates	6
Career and Education	7
Continue on Active Duty/Continue on Active Reserve (COAD/COAR)	7
History.....	8
Joining the Warrior Transition Command (WTC).....	11
Communication and Outreach	12
Advocate Locations	15
AW2 Moving Forward.....	16

BG Cheek—Our Mission



BG Gary Cheek was featured in an interview with Soldiers Radio and Television studio discussing handling increase of warriors in transition, recruiting cadre, meeting with Soldiers, issues with barracks and transitioning to the Department of Veterans Affairs in June 2008.

Since the first days of our country, Americans have taken up arms to defend our nation and protect our freedoms. Their service comes with a cost. Some leave the battlefield wounded, injured, and ill. Some do not leave the battlefield at all.

It is the solemn and honorable task for those of us here at home to care for our nation's Soldiers who have raised their hands and sacrificed on behalf of our country.

The Army takes this mission very seriously.

The Army recently aligned warrior care services under one organization, Warrior Transition Command (WTC). WTC provides Soldiers and Families with unified support from the battlefield to the home front. And now, as commander of the newly formed WTC, I am very proud to have the Army Wounded Warrior Program (AW2) integrated into our collective efforts, working side by side.



BG Gary Cheek and others from the Army's medical community gathered November 2008 at the Pentagon to discuss the current status of warrior care and the progress that has been made in caring for injured Soldiers.



BG Gary Cheek (left) with Dr. Rory Cooper (right), who is the director of the Human Engineering Research Laboratories at the University of Pittsburgh, in January 2009. The Army is considering partnering with the University of Pittsburgh to improve the quality of life of injured Soldiers.

AW2 has provided personalized support to our most severely wounded, injured, and ill Soldiers and their Families since April 2004. It was the Army's first program put in place to serve the most severely wounded, ill, and injured Soldiers—most returning from post-9/11 combat deployments. Over its five years in existence, AW2 has set the standard for care and compassion and its mission will not change under WTC.

The Army has not always gotten it right. The Army has, however, always worked to fix issues and to make improvements.

Soldiers serve our country every day on the front lines. As tough as their battles can be at war, often the more difficult battles take place at home for wounded, injured, and ill Soldiers and their Families. It is our mission in Army warrior care to support Soldiers and Families as they heal, recover, and transition to their new normal. I am proud to be a part of this mission.

I look forward to continuing this noble endeavor with AW2, and I am counting on the continued dedication and enthusiasm of all who serve our wounded, ill, and injured heroes.

Thank you for your service.

A handwritten signature of BG Gary Cheek in black ink.

BG Gary Cheek
Commander, Warrior Transition Command

COL Rice—Our Commitment



AW2 Soldier Portray Woods (left) joins COL Jim Rice (right) as he speaks at the AW2 Symposium, in Indianapolis, IN, June 2008.

While many units in the Army judge success by defeating the enemy on the battlefield or achieving high marks in physical fitness and marksmanship, the U.S. Army Wounded Warrior Program (AW2) judges success differently.

Our Soldiers have already fought, and many continue

to fight a hard battle against severe wounds, injuries, and illnesses. Many have looked death in the face and won. With such harrowing experiences, AW2 Soldiers and Families measure success moment by moment, day by day.

As the Director of AW2, I can tell you that success for our organization is rooted in our ability to provide AW2 Soldiers and Families with the best personalized support possible—for as long as it takes.

Established as the Disabled Soldier Support System in 2004 with a population of 340 Soldiers, AW2 has grown as an organization over the past five years. While these are not numbers to celebrate, they are numbers to honor. The fact that the Army has extensively augmented its support of wounded Soldiers as the number of wounded has grown, is a testament to the dedication the Army has to this critical mission.

Here at AW2, we have continually expanded our services to severely wounded Soldiers and their Families. Today we have a dedicated Career and Education Section to seek out opportunities for employment and education for our Soldiers and Families. We have helped more than a hundred Soldiers remain in uniform through Continuation on Active Duty/Active Reserve. We have established an official partnership with the National Organization on Disability. We have more than 120 Advocates providing personalized support to Soldiers and Families across the country and beyond.



COL Jim Rice (left) speaks with Joan Bills (right) at the Army Officer's Wives' Club of Greater Washington Area luncheon, Fort Myer, VA, November 2008.

Through our AW2 Symposiums, our Soldiers and Families have influenced key changes in warrior care. From the establishment of Warrior Transition Units (WTUs) and Soldier Family Assistance Centers (SFACs) to positively impacting legislation for wounded Soldiers—AW2 Soldiers and Families have made their voice heard and seen the results.

As we mark five years of support to severely wounded, injured, and ill Soldiers and their Families, we must renew our commitment to these brave Families. We must show—not just with words, but with actions—that we will be there for them.

For as long as it takes,



COL Jim Rice
Director, Army Wounded Warrior Program

COL Jim Rice (left of center) and LTG Eric B. Schoomaker (right of center), Surgeon General of the U.S. Army and Commanding General of U.S. Army Medical Command, stand with AW2 Soldiers and Family members at the Army Family Action Plan (AFAP) Conference in Washington, DC, January 2009.

"AW2 has fantastic programs and our Advocate is amazing. She really gets things done."

-AW2 Spouse

Overview

The U.S. Army Wounded Warrior Program (AW2) is the official Army program that serves severely wounded, injured, and ill Soldiers and their Families, wherever they are located, for as long as it takes. AW2 supports the most severely wounded Soldiers from the Global War on Terrorism who have, or are expected to receive, an Army disability rating of 30 percent or greater in one or more specific categories or a combined rating of 50 percent or greater for conditions that are the result of combat or are combat related.

AW2 is a key component of the Army's greater mission and commitment to care for wounded Soldiers and their Families, the Army Family Covenant. AW2 is Army-led and is designed by the Soldier for the Soldier. AW2 works inside the network of Army, Government, and local and national resources to help Soldiers and their Families resolve many issues.

All AW2 Soldiers and Families are assigned an AW2 Advocate. AW2 Soldiers and Families may also be assigned to a Warrior Transition Unit (WTU) to focus on healing. The AW2 Advocate supports the WTU "triad of care" team consisting of a primary care physician, nurse case manager, and a military squad leader.

AW2 is the only Army program that assists and advocates from the time of injury and continues throughout the Wounded

Warrior Lifecycle. AW2 is not limited by physical location or constrained by recovery or rehabilitation timelines.

Soldiers and Families

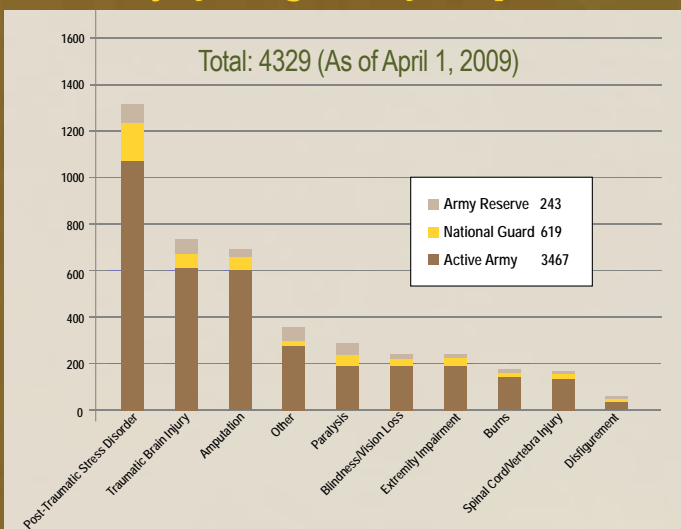
AW2 serves more than 4,000 severely wounded Soldiers and their Families—70 percent of whom are medically retired. AW2 supports Soldiers in each of the Army components: Regular Army, Army National Guard and the Army Reserves, as well as their Families. Soldiers have given so much, and AW2 is committed to ensuring that the unique population of AW2 Soldiers and their Families are given the best possible care and successfully return to duty or transition to civilian life.

The Soldiers and Families supported by AW2 have experienced life-altering injuries that require life-long attention. Soldiers with these significant injuries may need to learn how to walk again, adjust to wheelchairs, undertake speech therapy, undergo ongoing treatments, and deal with cognitive issues—to name a few of the challenges. Although the injuries may be similar, the treatment and outcomes are all unique and impact each Family differently. AW2 assists these Soldiers as they work through treatment and rehabilitation and transition into life post-injury.

The most common injuries are in the following categories:

- Blindness/vision loss
- Deafness/hearing loss
- Fatal/incurable disease
- Loss of limb
- Paralysis/spinal cord injury
- Permanent disfigurement
- Post-traumatic stress disorder
- Severe burns
- Traumatic brain injury

Injury Categories by Component



*Data Source(s): Wounded Warrior Accountability System (WWAS); AW2 Database

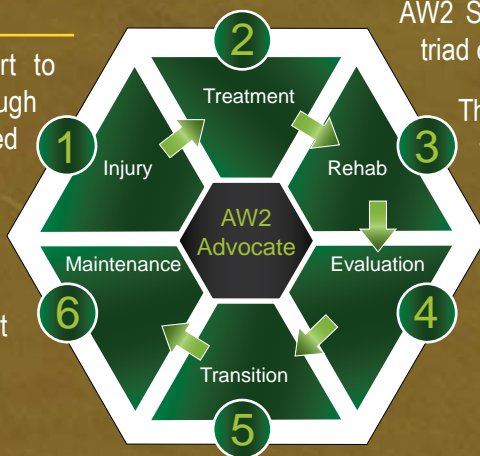
AW2 Family, the Riveras, at the AW2 Symposium, in Indianapolis, IN, June 2008.



5th Anniversary Report 2004-2009

Wounded Warrior Lifecycle

AW2 exists to provide seamless support to Soldiers and Families as they navigate through the Wounded Warrior Lifecycle. The Wounded Warrior Lifecycle consists of six phases of care for wounded warriors. These phases are used to manage the Soldiers and Families as they navigate the recovery process and also indicate the type of support needed by Soldiers and Families.



AW2 Soldiers receive support from the WTU triad of care for the first five phases.

The Department of Veteran Affairs may begin transitioning support in the second, third, or fourth phase and completes transition by the sixth phase. This may depend on the location of Soldiers and Families, injury type, and services available.

The Six-phase Wounded Warrior Lifecycle

SSG Terry Saffron and Mrs. Colleen Saffron

SSG Terry Saffron, with 1st Battalion, 21st Field Artillery Regiment, 41st Fires Brigade, was severely injured when a roadside bomb detonated near his vehicle in May 2004. He is receiving treatment for his injuries, which include a broken right arm, loss of his bicep and part of his triceps, a broken jaw that required the removal of the whole lower right side, and shrapnel wounds to both of his legs and to the side of his body. Additionally, he suffers from post-traumatic stress disorder and a traumatic brain injury.

The Saffrons continue their commitment to the Army and wounded warriors. Recently SSG Saffron and his spouse, Colleen, accepted more than 400 holiday cards from Harker Heights High School band students for the AW2 Soldiers at Fort Hood, TX, in December 2008.

Colleen Saffron, who is extremely involved in assisting wounded warrior spouses and caregivers, received a Presidential Lifetime Service Award and the Fort Hood Volunteer of the Year in 2008. Additionally, Colleen Saffron is a founding partner for a nonprofit called Operation Life Transformed that provides funding to caregivers and spouses of wounded warriors for home-based career online training programs.

The couple attended the Army Family Action Plan (AFAP) conference in January 2009 to inform the Army of issues affecting Soldiers and discuss courses of action.

"Many people don't understand the importance of the AFAP process," said Colleen Saffron. "We took the responsibility very seriously and felt it was a privilege to represent wounded warriors and Families. It was an eye-opening experience for my husband to

see the work that is done and the affect it has on the military as a whole. The Army does care."

The Saffrons have seen the improvements that the Army has made since the Gulf War and the support systems that are now available to Soldiers and Families, such as AW2.

"AW2 has fantastic programs and our Advocate is amazing. She really gets things done," Colleen Saffron said.

They plan to continue their involvement in AFAP conferences, AW2 Symposiums, nonprofits, and volunteering opportunities in the future.

Colleen (left) and SSG Terry Saffron (right) at the Army Family Action Plan (AFAP) Conference in January 2009.





A Soldier (left) listens to AW2 Advocate Melvin Kearney (right) explain the AW2 program during a Welcome Event at the Department of Veterans Affairs Healthcare System, Ann Harbor, MI, in December 2008.

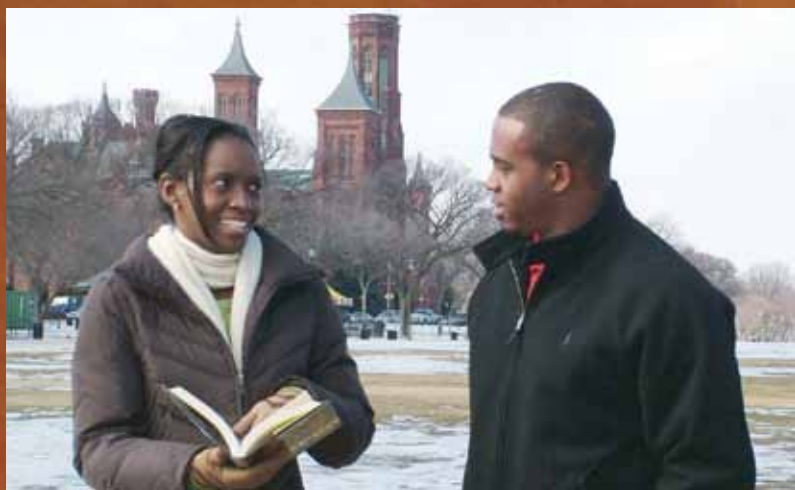
Advocates

AW2 Advocates work with Soldiers and Families locally to make certain they have a strong support network, access to medical care, and are embraced by their local community to ensure their service to the country is understood and appreciated. More than 120 AW2 Advocates are located throughout the country where there are large concentrations

of AW2 Soldiers including Department of Veterans Affairs (VA) Polytrauma Centers, VA facilities, Military Treatment Facilities (MTFs), and most military installations.

AW2 Advocates Provide:

- Personalized, local support for as long as it takes, regardless of location or military status
- Assistance with day-to-day issues in recovery, as well as longer-term decisions, such as choosing to remain in the Army or to medically retire
- Support throughout the entire six-phase Wounded Warrior Lifecycle



AW2 Advocate Ayandria Barry (left) and her AW2 Soldier Kortney Clemons (right), spend a few moments on the National Mall in Washington, DC, discussing "AMPED," a book written by Clemons about his experiences in Iraq.

Throughout the Wounded Warrior Lifecycle, wounded Soldiers are eligible for a wide array of benefits in order to help them recover physically, prepare financially, and build their skills for a rewarding career. AW2 Advocates assist wounded Soldiers and their Families with:

- Benefit information
- Career guidance
- Continuation on Active Duty (COAD) support
- Continuation on Active Reserve (COAR) support
- Education opportunities
- Financial audits
- Government agency coordination
- Lifetime assistance
- Local resources
- Medical Evaluation Board (MEB) guidance
- Physical Evaluation Board (PEB) guidance



AW2 Soldier CPT D.J. Skelton (left of center) next to Advocate Doug Miller (center), after a five-mile run with other Soldiers at the Defense Language Institute Foreign Language Center, Monterey, CA, where Skelton serves as a company commander, in November 2008. A two-tour combat veteran, Miller joined AW2 after he retired at 65 and believes everything he did in his life prepared him for this job.

5th Anniversary Report 2004-2009

Career and Education

AW2 continues to evolve and grow in order to address the changing needs of AW2 Soldiers and Families as they progress through their recovery and transition into their life post-injury. The AW2 Career and Education Section was developed to serve as a resource to enhance the AW2 Advocate's ability to help Soldiers and their Families with employment and educational goals.

The AW2 Career and Education Section and AW2 Advocates assist Soldiers and Families to make objective, informed career goals and decisions by:

- Providing accurate and updated resources and referrals
- Utilizing a career and education resource guide
- Disseminating information on career and employment opportunities
- Working closely with the Army Career Alumni Program (ACAP) to utilize their career preparation and opportunity services for Soldiers and their Families
- Making referrals to Army, federal, and other service organizations
- Working closely with federal, state, and local organizations and corporations to create employment and educational opportunities for Soldiers and their Families Education

AW2 Career and Education Section and AW2 Advocates assist Soldiers and Families with their educational goals by:

- Disseminating information on educational opportunities
- Ensuring access to the necessary educational materials and equipment
- Facilitating educational financial assistance and benefits
- Working with several universities to provide educational initiatives

Continuation on Active Duty (COAD)/ Continuation on Active Reserve (COAR)

Severely wounded, injured, and ill Soldiers often think their military career is over. This is not the case for many AW2 Soldiers. To date, most wounded, injured, and ill Soldiers who have requested to continue their service in the Army have been able to do so. Approximately three percent of AW2 Soldiers have continued their Army career. The Army wants Soldiers to have the option of continuing their service. Soldiers who are severely wounded in action and later found unfit for duty by a Physical Evaluation Board and Medical Evaluation Board may still apply for COAD/COAR regardless of the extent of their injuries.

As Soldiers and their Families decide whether to medically retire from the Army or continue their service, AW2 Advocates are with them every step of the way, from looking at their options, making a decision, and going through the process.

AW2 Advocates will work to:

- Identify interested AW2 Soldiers prior to the MEB and PEB
- Provide comprehensive counseling to ensure Soldiers understand their options and can visualize their future in the force
- Utilize a financial calculator to complete a detailed income report assisting the Soldier and Family with their "stay on active duty vs. medically retire" decision
- Assist in facilitating the COAD/COAR process for AW2 Soldiers interested in continuing their careers

MAJ Faith Junghahn (left), AW2 Operations Officer, answers questions about COAD/COAR issues with AW2 Soldier Shawn Graves (right) at the 2009 AFAP Conference, Washington, DC, in January 2009.



History

Disabled Soldier Support System (DS3)

AW2 started as the Disabled Soldier Support System (DS3) established on April 30, 2004, by the Army to respond to the needs of the most severely “disabled” Soldiers. Initially, DS3 helped all severely disabled servicemembers until the other services created their own wounded warrior programs to care for their servicemembers.

DS3 originally helped severely wounded Soldiers and their Families, but eventually evolved to include injured and ill Soldiers and their Families as well. DS3 was structured just as AW2 is now—to help “cut through red tape” so DS3 Soldiers and Families could more easily tap into services available to them through the military and VA. It gave wounded Soldiers an additional way to seek out the help or information they needed to return to active duty or receive a medical retirement from the Army. It served as a clearinghouse for the host of services already available and gave wounded Soldiers a single starting point for help with their financial, administrative, medical, vocational, and other needs. Unlike today’s AW2, which will serve Soldiers and Families as long as it takes, DS3 was only to track each AW2 Soldier for a period of five years following medical retirement.

A dedicated call center and toll free number were established by 2005 to address any questions from Soldiers and Families and/or to link them with the appropriate specialist by calling 1-800-237-1336. The call center and toll free number continue to be utilized by AW2.

Soldiers who had been involved in DS3 in the beginning, were already calling it a success. SSG Jerry Cortinas, a Special Forces Soldier who lost his left hand and has limited use of his right arm after being attacked with a rocket-propelled grenade in Afghanistan, said DS3 helped him sort out the services available to him. “I was basically lost,” he said. “I didn’t know what direction to start walking in to get the help I needed.

DS3 supports the Soldier 100 percent.”

DS3 Becomes U.S. Army Wounded Warrior Program (AW2)

The Army changed the name of DS3 in November 2005 to the U.S. Army Wounded Warrior Program (AW2). This name change was made to reflect the Warrior ethos and spirit of severely wounded Soldiers and to more clearly identify the population served by the program. AW2 also implemented and administered the Traumatic Servicemembers’ Group Life Insurance (TSGLI), an injury protection insurance program for the Army, which quickly became aligned with the Combat-Related Special Compensation Program (CRSC). TSGLI provides financial entitlements to eligible Soldiers and their Families, which is vital during their extensive recovery and rehabilitation process.

AW2 Symposium

AW2 held its first symposium in Orlando, FL, in June 2006, based on the well-established Army Family Action Plan. This week-long event is part of the Army’s overall mission to improve the care of wounded Soldiers and



AW2 children bond during the 2008 AW2 Symposium events.

their Families. AW2 selects Symposium delegates who represent a cross section of its population to identify and address the most important issues relating to severely wounded, injured, and ill Soldiers and their Families. These delegates include Soldiers, Family members, and caregivers, as well as those who represent various injury types, locations, stages of recovery, component, gender, and ethnicities. The input from delegates during this Symposium is used by Army leadership to improve processes, make changes, and institute new initiatives that improve the care of wounded warriors. Three additional Symposiums followed and took place in Arlington, VA; Irvine, CA; and Indianapolis, IN. The fifth Symposium is scheduled for July 2009, in San Antonio, TX.



AW2 Soldier Richard White (left) embraces his daughter (right) at the 2008 AW2 Symposium.

June 2006:
1st AW2 Symposium

October 2006:
2nd Symposium

March 2007:
Wounded Warrior Accountability System
(WWAS) online

April 2007:
AW2 participates in Army
Medical Action Plan
(AMAP) Conference

The 2008 AW2 Symposium brought together more than 70 severely wounded Soldiers, Family members, and caregivers to Indianapolis, IN, for the week. For the first time, children were involved in the AW2 Symposium process. Through collaboration with the National Military Family Association's Operation Purple®, more than 30 children of wounded Soldiers took part in a week-long urban adventure camp. The children participated in many activities, such as horseback riding, kayaking, a visit to the zoo, and a Family night at a baseball game—as well as counseling sessions where they worked to identify their own issues for consideration by the Army. In addition to the Family night at the ballpark, parents were treated to a “date night” to spend quality time together while their children were engaged in activities.

Also new to the 2008 Symposium was the inclusion of:

- An exhibit hall where more than 15 veterans service organizations, nonprofits, and Army programs provided one-on-one support to Symposium delegates

- A career forum where 25 delegates received assistance with resumes and interview skills, as well as delegates speaking with non-profit organizations and corporations with employment opportunities for wounded Soldiers and their Families

The Wounded Warrior Accountability System (WWAS)

The Wounded Warrior Accountability System (WWAS) was put into production in April 2007, as a web-based case management tool for AW2 to support severely wounded, injured, and ill Soldiers. This integrated data architecture was designed to provide accurate and timely data from multiple authoritative sources and to track Soldiers through the Wounded Warrior Lifecycle. The system is a single portal source for capturing data, monitoring, managing issues/events, and reporting while eliminating or reducing data inconsistencies and redundancies, and increasing data accuracy. In the end, it improves support of the wounded warrior and their Family. WWAS currently supports AW2 as well as the U.S. Army Medical Command (MEDCOM) Ombudsman and Wounded Soldier and Family Hotline.

SFC Daniel Metzdorf

SFC Daniel Metzdorf is an above-the-knee amputee who was knighted in October 2008 after enduring rigorous training and testing. He is an active duty Soldier and U.S. Army Parachute Team “Golden Knight.”

To be selected to the parachute team, an individual must be on active-duty status, have completed 150 free-fall parachute jumps, and have a good military and civilian record. Individuals submit their packets for selection, a process that includes a demanding six-week assessment and selection program of training.

Metzdorf was injured ten days into his deployment as a member of the 82nd Airborne in Iraq. He was on a routine patrol south of Baghdad when a roadside bomb went off on January 27, 2004. His leg was badly damaged and had to be amputated. During his rehabilitation and recovery, he knew he wanted to stay in the Army and worked to meet that goal.

“I love to talk about the Army and tell my story. I am living the dream,” said Metzdorf of his Army career.

If you are an AW2 Soldier and would like to contact SFC Metzdorf, please email daniel.metzdorf@us.army.mil.



SFC Daniel Metzdorf (center) kneels to recite the Golden Knight Creed as he is knighted in October 2008.

Establishing Initiatives

AW2 was involved in several initiatives to assist AW2 Soldiers and Families. Utilizing lessons learned and experience gained from working with the Army's most severely wounded, AW2 and Advocates were instrumental in establishing and training the Wounded Soldier Family Hotline for all Army wounded, injured, and ill Soldiers. AW2 developed the AW2 Benefits Calculator, in conjunction with the Army G-1, which provides AW2 Soldiers a financial comparison of continued military service versus medical retirement. AW2 also participated in the Army's transformative initiatives of the Physical Disability Evaluation System, the Army Medical Action Plan (AMAP), and the Office of the Secretary of Defense Senior Oversight Committee Lines of Action.

Eligibility Criteria Expanded

In September 2008, the eligibility criteria was expanded to include Soldiers who have received a combined Army Physical Disability Agency (PDA) rating of 50 percent for injuries and conditions incurred in combat or are combat related. In many cases, these Soldiers receive between 50 percent to 80 percent combined ratings for their combat-related injuries, but no single special category (SPECAT) rating of 30 percent or above. The Army leadership agreed with AW2's recommendation that this group of Soldiers should be afforded the opportunity to utilize AW2's services. This expanded criterion does not supersede the original eligibility requirement, but rather allows the inclusion of Soldiers with multiple medical conditions which when combined, substantiate considerable limitations.

Recovery Coordination Program

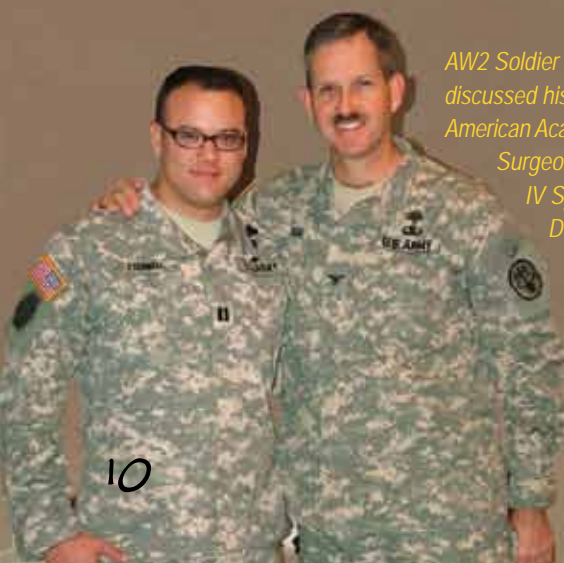
In November 2008, AW2 was given the mission of executing the Recovery Coordination Program (RCP) for the Army. The RCP is congressionally mandated and implemented by the services. The RCP mission adjusts the eligibility of AW2 to include *seriously* wounded, injured, and ill Soldiers and their Families with severe needs. Those needs are assessed by the Recovery Care Team, and Soldiers are then referred for services and assigned an AW2 Advocate.

In the past, each service put into place its own recovery plan for wounded servicemembers, but the plans varied. This mandate ensures that all servicemembers will have equal access to support and the same multi-faceted recovery plan. The recovery plans are based on a 10-step process that guides both servicemember and the Family from recovery to rehabilitation and then reintegration back to their community or back into the service. Each plan addresses an individual's personal and professional goals as they work through their educational, transportation, housing, and financial needs. This initiative was based on feedback from Families, such as those who gathered recently for the Wounded Warriors Family Summit.

AW2 will integrate the RCP into the AW2 mission in a series of phases. Six AW2 sites were selected to begin the implementation of the RCP: Forts Bragg, Campbell, Carson, Gordon, Lewis, and Stewart. Thirteen new AW2 Advocates were hired and trained alongside six experienced Advocates, one from each of the sites. AW2 Advocates at other sites will be trained during the AW2 Annual Training in 2009 and will integrate the expanded mission of AW2 at a later time. AW2 Advocates' mission of serving severely wounded, injured, and ill Soldiers and their Families for as long as it takes will not change. The RCP mission is the AW2 mission and will allow AW2 to provide better personalized assistance for Soldiers who have significant needs due to their injuries.

"My Soldiers and their Families are a magnificent generation of warriors. Their courage continually humbles me."

—AW2 Advocate



AW2 Soldier CPT Ray O'Donnell (left) discussed his road to recovery at the American Academy of Orthopaedic Surgeons' Extremity War Injuries IV Symposium in Washington, DC, January 2009. O'Donnell is pictured here with the symposium co-chair COL James R. Ficke, MD.

November 2008:
*AW2 assumes Recovery
Care Program (RCP)
mission*

January 2009:
*Re-alignment to Warrior Care and
Transition Office (WCTO)*

April 2009:
*Joined the
Warrior Transition
Command (WTC)*

Joining the Warrior Transition Command

In January 2009, the Army brought together three organizations under the Warrior Transition Command (WTC). The three organizations—which have the singular mission of supporting wounded, injured, and ill Soldiers—were AW2, Warrior Care and Transition Office (WCTO), and Warrior Transition Office (WTO). AW2 continues to serve the most severely wounded, injured, and ill Soldiers and their Families. The only difference is now AW2 is part of a larger team with the same dedicated mission. This realignment will provide AW2 more visibility and opportunities to affect change, and will improve cohesion among the Military Treatment Facilities (MTFs), Warrior Transition Units (WTUs), AW2, and the Soldier Family Assistance Centers (SFACs).

In April 2009, AW2, as part of the WTC, moved under U.S. Army Medical Command (MEDCOM) thereby bringing Army warrior care under the purview of the Army Medical Department. With the evolving nature of warrior care, this is a move that just made sense. From the battlefield to the home front, MEDCOM has the oversight and the unified resources to take care of Soldiers and Families.

One thing that will not change is AW2's dedication and commitment to providing personalized support to the most severely wounded, injured, and ill Soldiers and their Families wherever they are located for as long as it takes. It is a commitment AW2 has taken seriously since its inception in 2004, and it is a commitment Army leadership fully supports.

The Duplisea Family

Retired SFC Derek Duplisea, his wife Valerie, and their three daughters attended the 2008 AW2 Symposium. Derek and Valerie Duplisea participated in the medical services working group with other AW2 Soldiers and Family members to determine what areas they felt needed more improvement.

"We had a great group at the Symposium," said Valerie Duplisea. "Everyone was very passionate and had experienced both sides of the issues. The subject matter experts were always available to answer our questions and bring us more information. It felt good to know they were actually listening. The Symposium made a difference in how we felt about the Army. We saw the process and how much effort and care is there to make things better."

Their daughters participated in a day camp new to the 2008 Symposium, made possible by collaboration with the National Military Family Association's (NMFA) Operation Purple®, as well as provided their own issues for consideration. Their daughters enjoyed the camp and have participated in other Operation Purple® camps since the Symposium.

"They loved the camp so much, even our 16 year old daughter," said Valerie Duplisea.

During the Symposium, Derek Duplisea visited an exhibit hall and career forum, new to the 2008 Symposium, where more than 15 veterans service organizations, nonprofits, corporations, and Army programs provided one-on-one support to Symposium delegates. He spoke with Raytheon Corporation at the career forum about employment opportunities and eventually accepted a Wounded Warrior Liaison position with the company.

SFC Duplisea was conducting a traffic control point when a suicide bomber detonated herself five feet behind him in August 2006. SFC Duplisea almost lost his arm and suffered a shattered right femur, a severe traumatic brain injury, shrapnel wounds, and burns. SSG Bradford Alexander, SGT Roy Ramirez, and SGT Tray Cate were three other Soldiers who were also severely wounded during the explosion.



The Duplisea Family is pictured here in December 2008 with Mrs. and Mr. Claus at a Nashville Predators and Phoenix Coyotes hockey game in Phoenix, AZ.

"Now it's about making sure that communities, both military and civilian, know that the service [AW2] is there and how to access it."
—AW2 Mother

Communication and Outreach

A key part of AW2's mission—to serve severely wounded, injured, and ill Soldiers and their Family—is to make AW2's services known before they are needed. To fully achieve this objective, awareness of the AW2's existence, purpose, and services needed to be increased.

AW2 took steps in 2008 to increase the impact and breadth of its communications to AW2 Soldiers, Families, caregivers, and staff. AW2 conducted interviews with Soldiers, Family members, Commanders, Senior Non-commissioned Officers, non-governmental organizations, veterans service organizations, and non-AW2 Soldiers during a 2008 stakeholder analysis. The stakeholder analysis allowed AW2 to learn valuable insight about the perceptions of AW2. This information helped AW2 create communication tools with the appropriate information to provide to the right audiences through effective channels.

Based on information obtained through the stakeholder analysis, AW2 systematically made changes and created communications tools to better fulfill the needs of AW2 Soldiers and Families. For example:

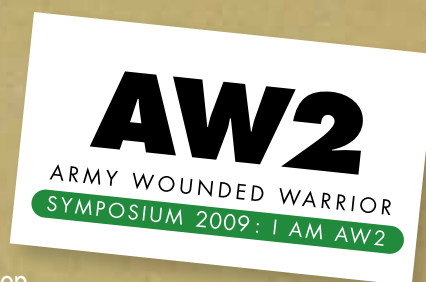
- AW2 changed the AW2 tag line to "for as long as it takes" because it resonated deeply with AW2 Soldiers, Families, and staff—who regarded the new tag line as a commitment which rang true even after Soldiers transitioned out of the Army
- AW2 changed its logo to one that featured the acronym "AW2" because AW2 Soldiers thought the old logo was too dark and did not match the acronym
- AW2 changed the name for its local representatives to AW2 Advocate because it better described their comprehensive role
- AW2 added two electronic newsletters (one for AW2 Soldiers and Families and one for AW2 staff) because AW2 Soldiers and Families preferred to receive information electronically on a semi-regular basis

Based on information obtained through the stakeholder analysis, AW2 created an informational tool kit (six fact sheets, postcard, map, portfolio, brochure, and video) and exhibit booths. Every AW2 Soldier and Family receives a tool kit with the latest information about AW2. AW2 Advocates use the informational tool kit and booths in the field to spread the word about AW2. The fact sheets were also made available online on a new, more robust AW2 Web site.

These efforts were deliberate decisions based on feedback from key stakeholder groups to fulfill AW2's mission of providing personalized support to severely wounded, injured, and ill Soldiers and their Families.

"I am AW2"

For the fourth AW2 Symposium, AW2 brought together more than 70 severely wounded Soldiers, Family members, and caregivers to identify the top five most important issues to be addressed to improve wounded Soldier care. For the first time, children could attend and participated in a week long urban adventure camp provided by National Military Family Association's Operation Purple®.



AW2 children (top) and AW2 Soldiers, Families, and caregivers (bottom) participated in AW2 Symposium activities in Indianapolis, IN, June 2008.

5th Anniversary Report 2004-2009



Sharing Stories

AW2's educational video features Soldiers and Families sharing their stories of transition into life post-injury—and AW2's support throughout the six phases of the Wounded Warrior Lifecycle.



Raising Awareness

To ensure Soldiers, Family members, and community leaders know about AW2 and its support services, AW2 launched a comprehensive outreach campaign that featured a new logo in 2008 based on a thorough stakeholder analysis.



SSG Josh Forbess

SSG Josh Forbess is assigned as the noncommissioned officer-in-charge of Fort Campbell's Soldier and Family Assistance Center (SFAC). He's also been a volunteer at the post's Fisher House since 2006 and leads wounded warrior meetings. He received the President's Volunteer Service Award from President George W. Bush in November 2008 for his volunteer work and for mentoring other wounded Soldiers and their Families.

"I took this job at the SFAC because, I believe, it helps to have a 'warrior in transition' in a position that is supposed to assist other warriors in transition," said Forbess.

"I have gone through what they have, some more, some less. I have the ability and knowledge of our situation to influence decisions affecting our future. There are so many things that I use from my personal experiences and others' stories, that goes into what I try and do to give back. No one knows any better or understands us more than we do."

Forbess is one of just five 101st Airborne Division Soldiers who survived a fiery Black Hawk helicopter collision over Mosul, Iraq, in November 2003. He lost an ear and half of his nose and received broken bones, extensive burns, and smoke inhalation injuries.

He wanted to stay in the Army because he knew he would not find something else he would rather do. "As long as you have heart, there's nothing to stop you," he said.



Victoria (left) and SSG Josh Forbess (center) are recognized on stage at Fort Campbell, KY, by President Bush.

If you are an AW2 Soldier and would like to contact SSG Forbess, please email joshua.t.forbess@us.army.mil.

AW2 Online

In addition to launching a blog that features a variety of guest authors, AW2 created a new Web site in 2008 complete with benefits information, a family corner, medical fact sheets, news room, and events.



Keeping in Touch

The Journey is the AW2 print newsletter mailed quarterly to AW2 Soldiers/Families, AW2 Advocates, and those interested in AW2. *The Journey* highlights news and information for that quarter, describes AW2's support, and spotlights AW2 Soldiers and Families.

The Wounded Warrior Voice is a bi-monthly e-newsletter emailed to AW2 Soldiers and Families with the latest information that matters to them. It includes information on what's new in AW2, education and career opportunities, money matters, recreational opportunities, resources, and AW2 Soldier Stories.

The Advocate is a monthly newsletter featuring columns about finance, careers and education, training, and news from AW2 leadership emailed to AW2 staff. It's a forum for Advocates to share knowledge and learn about upcoming events and opportunities.

Danielle Green-Byrd

Retired SPC Danielle Green-Byrd, Notre Dame graduate and former basketball player, graduated with a bachelor's degree in psychology in 1999, taught for two years, and then joined the Army in 2002. She was injured in May 2004 when a rocket-propelled grenade hit her while standing on the roof of an Iraqi police station in Baghdad. She lost her left forearm and sustained a gash on her left leg that nearly caused it to be amputated.



"I have many great memories at Walter Reed," Green-Byrd said. "All of them were very instrumental in my recovery."

She gained most of her strength from the people and organizations that embraced and helped her during her recovery and continue to provide her and her Family support, such as her AW2 Advocate.

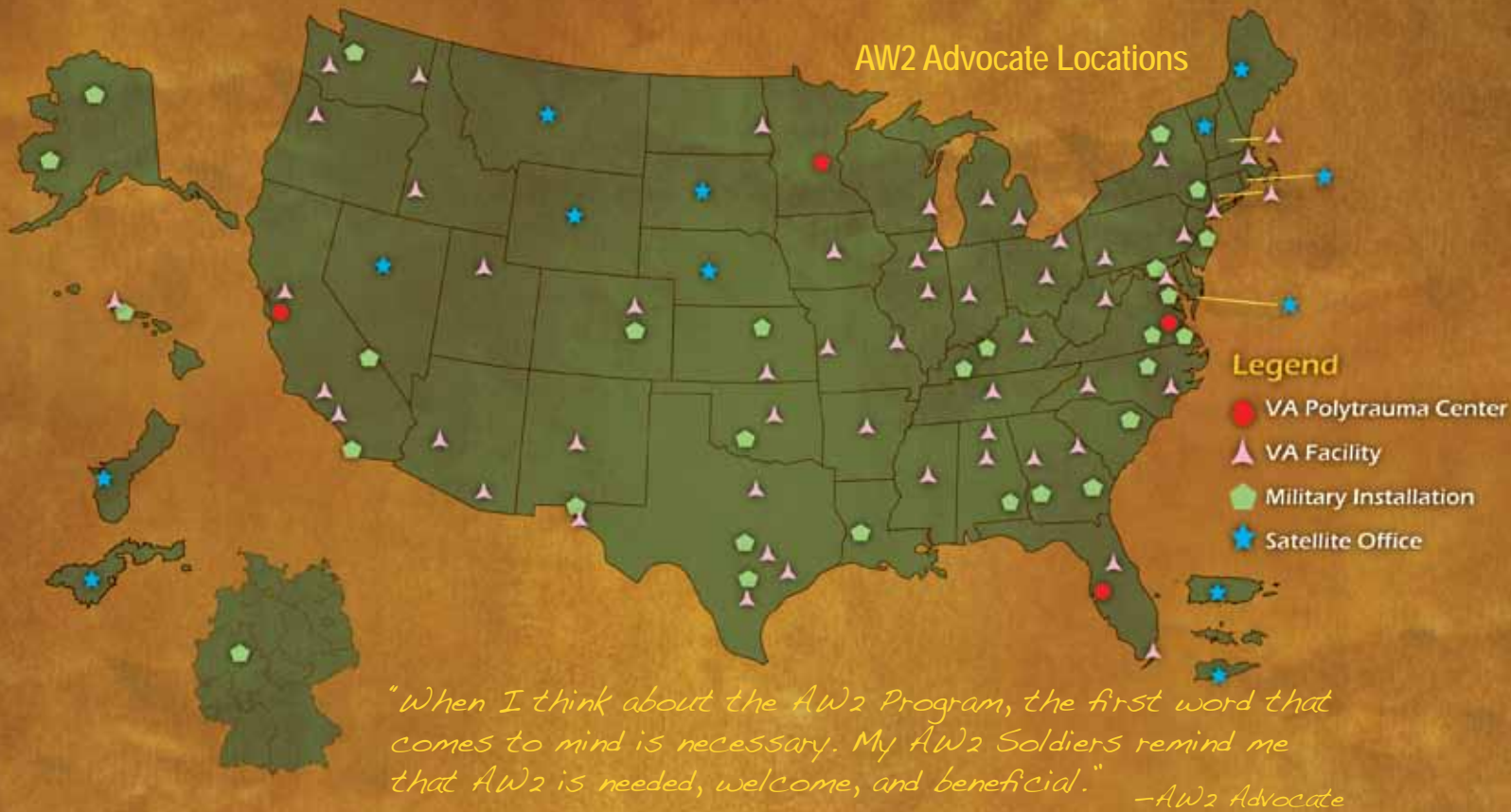
"It is nice to know that people haven't forgotten about you when you are in a non-military area," she said. "AW2 is the middle person between the military and civilian world. They keep me up-to-date on policies and upcoming events. They do a great job of keeping us informed."

Recently, her AW2 Advocate informed her that veterans were being honored in her hometown at a Chicago Bulls basketball game. Green-Byrd attended and received a standing ovation.

Green-Byrd is as an assistant sports coordinator in the Chicago Board of Education's Department of Sports Administration and Facility Management. She completed her first master's degree in school counseling in 2008 and is working toward her second master's degree in educational leadership for completion in 2009. In the future, she hopes to become a small business owner by opening a child care center. She also plans to continue working with children in her childhood school system, serving as a positive role model.

"I think my goal is just to live life to the fullest," she said. "When I was younger, I thought the glass was half empty. Now it is a glass half full all the time."

Danielle Green-Byrd serves as an assistant sports coordinator in the Chicago Board of Education's Department of Sports Administration and Facility Management.



MAJ L. Tammy Duckworth

MAJ L. Tammy Duckworth joined the Reserve Officers' Training Corps (ROTC) as a graduate student at George Washington University in 1990. MAJ Duckworth became a commissioned officer in the U.S. Army Reserve in 1992, went to flight school, and joined the Illinois National Guard in 1996. She was working towards a Ph.D. in political science at Northern Illinois University when she deployed to Iraq in 2004.

Duckworth lost both of her legs and almost her right arm on November 12, 2004, when the UH-60 Black Hawk helicopter she was co-piloting was hit by a rocket propelled grenade fired by Iraqi insurgents.

While recuperating at Walter Reed Army Medical Center, she decided to pursue public service. In the 2006 election, Duckworth was the Democratic nominee for the U.S. House of Representatives seat for the sixth district of Illinois. Her opponent won by two percent of the vote.

Duckworth served as the Director of the Illinois Department of Veterans Affairs from 2006 to 2009. She worked to develop state programs that encourage employers to hire veterans who served in Iraq, Afghanistan, or Desert Storm, fought for more state grants to service organizations, and gained support for below-market mortgages for veterans. Illinois became a leader in state benefits for its servicemembers.

"Our veterans put their lives on the line to fight for our freedoms," Duckworth is quoted on the Illinois Department of Veterans Affairs Web site. "Now, it is our time to fight for them. We owe it to them."

She helped establish a Fisher House at the Edward Hines, Jr. Veterans Affairs Hospital and is involved in fundraising to build facilities to serve other injured veterans. She advocates for other veterans by discussing issues they face. She testified before both the U.S. House and U.S. Senate regarding medical care and employment for returning veterans. She also continues to serve in the Illinois Army National Guard.

She was confirmed as the Assistant Secretary for Public and Intergovernmental Affairs at the Department of Veterans Affairs in 2009.

MAJ Tammy Duckworth waits during her introduction to speak to a crowd of U.S. Army Garrison Heidelberg employees in Patrick Henry Village Theater, October 2007.



AW2 Moving Forward



To the AW2 Soldiers and Families,
thank you for your selfless commitment
to service and your great sacrifice. It has not gone
unnoticed, America thanks you. And to those who
have embraced wounded warriors and provided local
assistance, thank you for your compassion.
We are making a difference and will continue
for as long as it takes.



"The work is about fortitude and compassion, perseverance and skill, making the time when you don't have the time, and beginning each day believing that no challenge, on behalf of my Soldiers, is insurmountable."

-AW2 Advocate



U.S. Army Wounded Warrior Program (AW2)

200 Stovall Street, 6N07 | Alexandria, Virginia 22332

Phone 1-800-237-1336 | Overseas 312-221-8186

Online www.AW2.army.mil | Email AW2@conus.army.mil