

Let's Have a Fleet of 15 Hospital Ships

By Lieutenant Jim Dolbow, U.S. Coast Guard Reserve

Each one of the Department of Defense's five regional combatant commands should have three hospital ships permanently assigned to their respective areas of responsibility. Why so many, you ask?

It's so simple that it can be summed up in two words: medical diplomacy. Former Health and Human Services Secretary Tommy Thompson (who coined that term) was right on target when he said, "medical diplomacy is the winning of hearts and minds of people in the Middle East, Asia, Africa, and elsewhere by exporting medical care, expertise, and personnel to help those who need it most." Moreover, according to Thompson, "What better way to knock down the hatred, the barriers of ethnic and religious groups that are afraid of America, and hate America, than to offer good medical policy and good health to these countries?"

Between Secretary Thompson's wisdom and the fact that the Navy's two hospital ships, USNS *Comfort* (T-AH-20) and *Mercy* (T-AH-19), have proved themselves to be outstanding ambassadors of

good will during their recent deployments, I say the Navy should go to the Office of Management and Budget and Capitol Hill and ask for the funds to begin laying the keels for an additional 13 hospital ships. The pros strongly outweigh the cons on this issue. For example:

- It would be a great boon for the shipbuilding industry that so desperately needs some work to remain afloat;
- There's no shortage of hearts and minds to win in any of the regional combatant commands;
- Joint Chiefs Chairman Admiral Mike Mullen said when he was CNO that he'd hand a part of his budget to the State Department "in a heartbeat," assuming it was spent in the right place. These additional platforms in a medical diplomacy



MEDICAL DIPLOMACY The author advocates building 13 more hospital ships to assist the USNS *Comfort* (seen here) and *Mercy* in carrying out humanitarian assistance missions. This would aid greatly in winning hearts and minds of people around the globe.

expanding the size of the Navy's hospital fleet, including: money is tight, other assets could perform the same mission, and there is not enough personnel to sail them. To borrow a line from U.S. Army Brigadier General Anthony G. McAuliffe of Bastogne fame, I say "Nuts."

First, for less than one day's cost of the wars in both Iraq and Afghanistan, a tanker could be built and equipped to be a state-of-the-art floating medical facility. The potential dividends would be similar to the huge favorable swing in public opinion enjoyed by the United States after the *Mercy*'s 2005 humanitarian mission. According to Kenneth Ballen of Terror Free Tomorrow, "nationwide polls of Indonesia and Bangladesh conducted in August 2006, following the *Mercy*'s visit, suggest that a remarkable 85 percent of Indonesians and 95 percent of the people of Bangladesh were favorable to the *Mercy*'s mission." No small feat indeed.

Second, manning the ships will not be a problem given proper recruitment and retention efforts. The new ships could sail with an expanded hybrid crew of civilian mariners, joint forces and coalition medical personnel, non-

governmental organizations, and civilian volunteers to include retired military personnel. Also, instead of reducing the Navy's end-strength as currently envisioned, some Sailors could be retrained as corpsmen. Contractors could also be hired. Headhunters could recruit plenty of doctors that would want to serve their country while at the same time getting a reprieve from insurance paperwork, TRICARE, and Medicare, etc.

- The wrath of Mother Nature is not projected by the experts to lessen any time soon. Additional hospital ships would speed up the U.S. response to natural disasters around the globe, saving lives in the process. Gone would be the lengthy transit times from San Diego or Baltimore.

Unfortunately, the same people who several years ago wanted to decommission both the *Mercy* and the *Comfort* have now been diagnosed with advanced bureaucratic arteriosclerosis. Besides needing some follow-up care after reading this article, they will most likely use some red herrings to argue against

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"Let's roll" by building a fleet of 15 hospital ships. We have some hearts and minds to win. ❄

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