



# Department of Defense Global Health Engagement

Since the Spanish-American War, the Department of Defense (DOD) has conducted *global health engagement* (GHE) to prevent certain infectious diseases from threatening U.S. national security or military operations. Early GHE in partner nations and U.S.-controlled territories included site visits by epidemiological survey teams and establishment of DOD research laboratories to conduct research and monitor emerging disease threats. As a result, DOD has played a major role in discovering and developing vaccines for numerous infectious diseases, such as yellow fever, influenza, and most recently, Ebola.

## What is GHE?

DOD policy defines GHE as activities that:

- promote and enhance partner nation stability and security;
- develop military and civilian partner nation capacity;
- build trust, confidence, and resilience;
- share information and coordinate mutual activities;
- maintain influence to enable implementation of the certain military strategy and priorities; and
- support U.S. national security objectives.

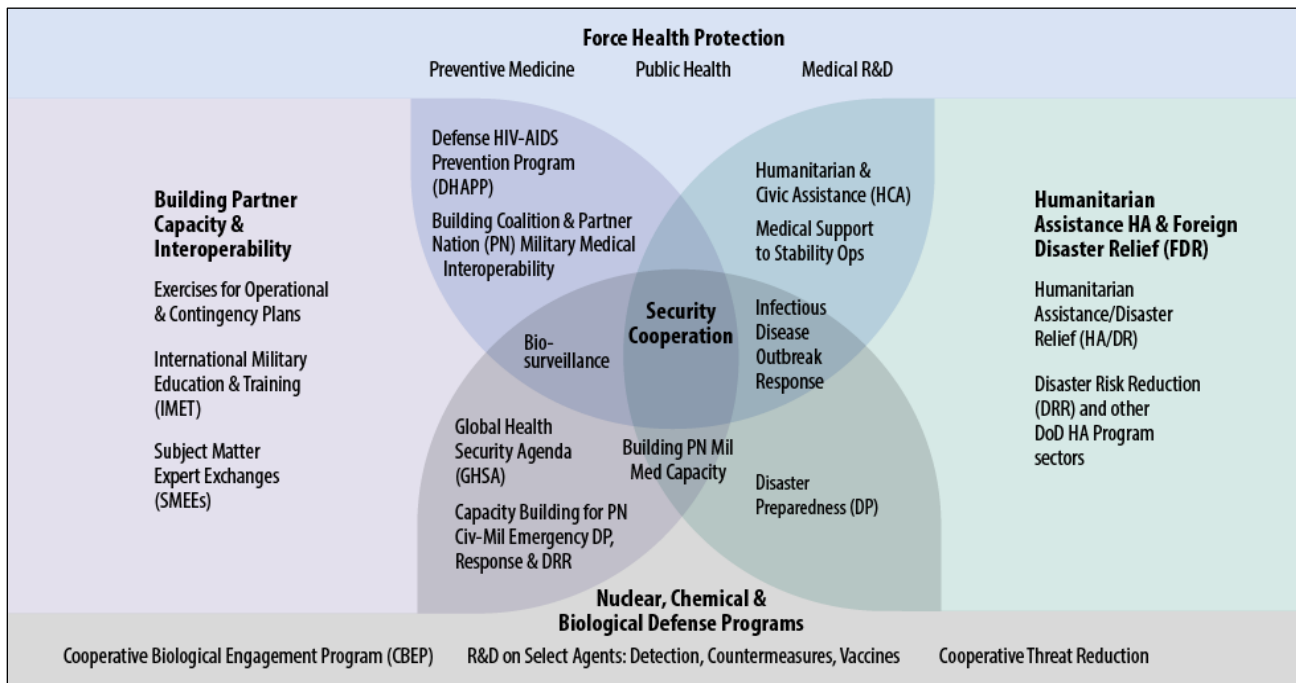
The policy also establishes a framework to align GHE to one or more broad DOD objectives (see **Figure 1**).

These activities include in-person subject-matter exchanges, embedded advisors with partner ministries of defense, augmenting partner military capabilities to support civil authorities, collaborative research efforts, live training exercises, and direct medical care.

## How does DOD organize its GHE?

Within DOD, the Under Secretary of Defense for Policy, through the Assistant Secretary of Defense for Special Operations and Low-Intensity Conflict (ASD[SO/LIC]) provides guidance and oversight for all GHE programs. ASD (SO/LIC) also leads the DOD GHE Council, which coordinates GHE programs that span across DOD components (e.g., military services, combatant commands, defense agencies, joint staff). DOD GHE may also be coordinated with, or in support of, interagency partners (e.g., U.S. Agency for International Development, Department of State [DOS], Department of Health and Human Services [HHS], and Department of Homeland Security [DHS]). Congress funds GHE through various defense (e.g., operation and maintenance; research, development, testing, and evaluation; overseas contingency operations) and nondefense accounts (through interagency transfers).

**Figure 1. DOD Framework for GHE**



**Source:** CRS adapted graphic based on DOD Instruction 2000.30, “Global Health Engagement Activities (GHE),” July 12, 2017, p. 4.

**Note:** R&D = Research and Development

## Who conducts GHE?

The geographic combatant commanders conduct most of the Defense department's GHE as part of their *theater campaign plans*, with the support of other DOD components (e.g., military services, Defense Threat Reduction Agency, and the Defense Health Agency), and interagency partners, in coordination with the respective U.S. Embassy's country team. Typically, the military services are responsible for developing and training certain personnel in GHE planning. The Center for Global Health Engagement at the Uniformed Services University of Health Sciences also trains GHE planners and provides technical assistance for combatant commands.

## GHE and U.S. National Security

In 2005, DOD began using GHE as part of its implementation strategy for *stability operations*, in accordance with National Security Presidential Directive 44 (*Management of Interagency Efforts Concerning Reconstruction and Stabilization*), which directed U.S. government agencies to plan and coordinate efforts that would assist certain partner nations with establishing a “sustainable path toward peaceful societies, democracies, and market economies.” Shortly thereafter, several other U.S. national security policy documents incorporated the promotion of global health and biological threat reduction efforts as national security priorities.

These documents included various iterations of the National Security Strategy, National Military Strategy, National Biodefense Strategy, and National Health Security Strategy. Additionally, DOD is now a component of several interagency global health efforts, including the *Global Health Security Strategy* (GHSS), the President's Emergency Plan for AIDS Relief (PEPFAR), and the President's Malaria Initiative.

## Considerations for Congress

### Funding Complexities

Various defense and nondefense accounts fund DOD GHE programs. Funding sources spread across numerous DOD programs and federal entities often present funding complexities that may create competing interests or hinder planning efforts. Some of these complexities derive from congressional restrictions on certain appropriations or interagency transfers that require advanced coordination and cooperation between two or more agencies.

### Interagency Coordination

Numerous federal entities conduct GHE as part of a whole-of-government effort to advance U.S. national security priorities. To prevent duplicative efforts and optimize resources, DOD often prioritizes the use of interagency coordination. The interagency planning and coordination process for GHE has mostly occurred on an ad-hoc basis or through subordinate working groups of the National Security Council (NSC). During the Trump Administration, NSC staff positions responsible for coordinating U.S. global health efforts have remained vacant, been reassigned to other working groups, or been returned to a federal

agency. Congress may seek to establish formal entities or processes to facilitate interagency coordination on GHE.

### Mission Creep

While DOD uses GHE in the context of stability operations, such activities may be susceptible to a gradual expansion of roles or responsibilities beyond the mission's original intent (i.e., *mission creep*). For example, broader U.S. government efforts to support global public health initiatives—such as the *Global Health Security Agenda*—have incorporated certain DOD GHE (e.g., Defense HIV-AIDS Prevention Program, Malaria research programs, and biosurveillance partnerships). Some experts have noted that DOD's engagements to promote domestic or global health security objectives directly support the National Security Strategy. Other experts have said that other federal entities, such as DHS, DOS, or HHS, are more appropriate to conduct these engagements.

### Program Effectiveness

Finally, Section 715 of the FY2012 National Defense Authorization Act (P.L. 112-239) directed DOD to establish goals, processes, and tools to measure its GHE and how “effective and efficient [they are] in meeting the national security goals of the United States.” While individual DOD components and combatant commands assess the effectiveness of their respective GHE activities, DOD policy does not establish or outline a formal, department-wide evaluation processes.

#### Relevant Statutes

Chapter 16, Title 10, U.S. Code – Security Cooperation  
Chapter 20, Title 10, U.S. Code – Humanitarian & Other Assistance  
Chapter 22, Title 32, U.S. Code – Foreign Assistance

#### CRS Products

CRS In Focus IF10530, *Defense Primer: Military Health System*, by Bryce H. P. Mendez  
CRS In Focus IF10542, *Defense Primer: Commanding U.S. Military Operations*, by Kathleen J. McInnis  
CRS In Focus IF10022, *The Global Health Security Agenda and International Health Regulations*, by Tiaji Salaam-Blyther

#### Other Resources

DOD Instruction 2000.30, “Global Health Engagement (GHE) Activities”, July 12, 2017, <https://go.usa.gov/xpcGF>  
Uniformed Services University of Health Sciences, Center for Global Health Engagement, <https://www.usuhs.edu/cghe>

**Bryce H. P. Mendez**, Analyst in Defense Health Care Policy

**Sara M. Tharakan**, Analyst in Global Health and International Development

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