CHALLENGES FOR CIVIL-MILITARY RELATIONS

The Walter Reed Scandal and the All-Volunteer Force

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ABSTRACT: This article describes the Walter Reed scandal of 2007 and what it tells us about the relationship of America to its all-volunteer force. It then offers suggestions for leadership strategies to monitor the relationship to avoid future surprises.

In February 2007, as 20,000 US troops surged into Iraq to stabilize an insurgency and curb an emerging civil war, the Washington Post published a series of articles describing shameful conditions at Walter Reed Army Medical Center, the United States Army’s flagship hospital and main hub for receiving soldiers evacuated from hostilities overseas. The articles depicted a system that provided state-of-the-art medical care, but which had broken down in multiple ways. Physical conditions in some of the barracks were squalid; clear signs of neglect such as “mouse droppings, belly-up cockroaches, stained carpets, [and] cheap mattresses” were found in some buildings. Outpatient soldiers were neglected, “chewed out by superiors,” treated with “petty condescension,” and required to navigate a “bureaucratic maze” to receive basic treatment and benefits.

Public reactions of fury and outrage were immediately expressed in congressional hearings, media reports, and opinion pieces. Interest in the scandal was intense with “more than three-in-ten Americans (31%) [paying] very close attention.” In 2007 and 2008, the Pew Research Center reported a “highly critical” public; 72 percent of respondents said “the government [did] not give enough support to soldiers who have served in Iraq and Afghanistan.”

It was unclear how such neglect could happen—at Walter Reed of all places—and how America’s heroes could be so mistreated. The public struggled to understand how the leadership at Walter Reed was not aware of the conditions, or worse, thought they were acceptable. The Post articles may have focused on a single hospital, but they touched on an extensive system and seemingly widespread attitudes. Consequently, COL Richard G. Malish creates healthcare policy in the Office of the Army Surgeon General and holds a bachelor of arts from the Johns Hopkins University and a doctor of medicine from the Uniformed Services University. He has spent his career moving between hospital-based and operational assignments. A practicing cardiologist, Malish will take command of the Carl R. Darnall Army Medical Center in the summer of 2019.

the implications were far-reaching. Government and senior military leaders stood accused of being insensitive to the needs of those asked to sacrifice so much for the nation.

This article suggests the events at Walter Reed illustrate how extraordinary public esteem for America’s modern all-volunteer force (AVF) might place unexpected constraints on its use. In the years leading up to the scandal, public adulation of the military created a significant yet unexposed gap in perceptions between wounded soldiers and the establishment that managed them. Walter Reed’s leaders did not realize they were dealing with a clientele whose relationship with the public differed from their own.

This blind spot existed for many reasons, including the hospital staff’s familiarity with the AVF, which obscured its ability to perceive the military through the public’s lens. This perception, influenced by myth and crafted by tact, is now beginning to reach a design that is decades-old. The public had moved faster to accept a special status for its military than had the US government.

A victim of its success, the government now faces repercussions of broader significance. Because of the differences of perception between soldiers and their caretaking establishment, the public may increasingly intervene to protect and to safeguard its military. The result may place constraints upon the nation’s use of its military as an instrument of national power.

The All-Volunteer Force

Soldiers who received care in Walter Reed from 2002 to 2007 had a different relationship with the public than servicemembers at any other time in American history. A 2011 Pew poll found that 90 percent of Americans “felt proud of the soldiers serving in the military” during the wars in Iraq and Afghanistan.6 The force was commonly described as “heroic.”7 In fact, positive public support for the military continues to be so pervasive that it is hard to remember or to justify any other paradigm. Nevertheless, history demonstrates considerable variation in the relationship between the public and the military. As recently as the Vietnam War, the military was the object of the American public’s “ire.”8 Prussian theorist Carl von Clausewitz used his famous trinity to indicate that war and its features of reason, chance, and passion make the relationship between soldier, people, and government unbalanced, unpredictable, and subject to change.9

The current relationship between the American people and its military is, generationally speaking, new and evolving.

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8 LTG Eric B. Schoomaker (USA Retired) (42nd surgeon general of the Army; former commanding general US Army Medical Command), interview with the author, April 6, 2018.
Members of today’s AVF are unknown to the vast majority of Americans. In spite of conducting combat operations in two theaters, the US military is the smallest since the 1930s.\textsuperscript{10} In the Second World War, roughly 50 percent of males between the ages of 18 and 49 served; however, today “less than 0.5 percent of the population serves in the armed forces.”\textsuperscript{11} Hence, few Americans have personal connections to the military. Anonymity is important because it provides a blank slate upon which to superimpose one’s personal judgements of agency and motivation. As author James Wright states, “If we have no personal relationships with those who are fighting our wars, then we think of war as a geopolitical drama, and we think of those fighting it as heroic action figures.”\textsuperscript{12}

Essayist and critic William Deresiewicz, elaborates on the lack of personal familiarity with members of the military as an important factor of modern-day military hero worship:

> The greater the sacrifice that has fallen . . . the members of the military and their families, the more we have gone from supporting our troops to putting them on a pedestal. In the Second World War, everybody fought. Soldiers were not remote figures to most of us; they were us. Now, instead of sharing the burden, we sentimentalize it. It’s a lot easier to idealize the people who are fighting than it is to send your kid to join them.\textsuperscript{13}

These observations are useful for reasons other than illustrating the impact of anonymity. They acknowledge the agency, or actions, of the uniformed services at war: the military fights and sacrifices to the benefit of national interests. The public is thankful because it understands the military shoulders the weight of society’s physically and psychically injurious work. In 2011, eighty-three percent of those polled quantified the sacrifice as “a lot.”\textsuperscript{14} Indeed, patients at Walter Reed during this period had made enormous, and in many cases permanent, sacrifices while serving.

Finally, and most importantly, the volunteer paradigm facilitates the widespread public perception of altruism in the military. Willingly sacrificing comfort to address community-afflicting problems that normal institutions have failed to solve, the AVF conveys motivations that harmonize with repeated and reinforced narratives of superheroism. As a result, Americans worship their military. Commonly expressed as patriotism, the designation of altruism toward the modern US all-volunteer force is so pervasive that even non-American contemporary military historians make the connection.\textsuperscript{15}

\textsuperscript{10} Jim Tice, “Army Shrinks to Smallest Level since before World War II,” \textit{Army Times}, May 7, 2016.
Without attribution of patriotic motivation, anonymous militaries may be perceived as victims, pawns, or worse. Five years into the Vietnam War, for example, opinion polls about the political and moral merits of the conflict were as negative in scale as those of the Iraq War in 2007.\textsuperscript{16} Yet, only 27 percent of the US population thought favorably of the force conscripted to fight in Vietnam.\textsuperscript{17}

\textbf{The Establishment}

Public adulation of the military creates a significant perception gap between the AVF and those with the power to manage it. In regards to Walter Reed, this includes senior officers, civilian leaders, and staff.

Because of the heroic status of Walter Reed patients, one can understand how the public would expect the government to provide world-class medical care and the best amenities. The \textit{Washington Post} articles, in revealing a different reality, shattered such expectations. The public’s outrage fueled decisive and immediate action by Congress and the secretary of defense. Within two weeks of the articles, the establishment began to purge itself of its perceived wrongdoers. Secretary of the Army Francis J. Harvey relieved Major General George W. Weightman, Walter Reed’s senior commander. Secretary of Defense Robert M. Gates endorsed the firing: “The care and welfare of our wounded men and women in uniform depend on the highest standard of excellence and commitment that we can muster as a government. When this standard is not met, I will insist on direct corrective action.”\textsuperscript{18}

The “direct corrective action” did not spare Harvey, whom Gates fired two days later.\textsuperscript{19} Shortly thereafter, Acting Secretary of the Army Preston M. “Pete” Geren announced the retirement of Army Surgeon General Lieutenant General Kevin C. Kiley.\textsuperscript{20} When the smoke cleared, command of Walter Reed rested in the hands of then Major General Eric B. Schoomaker who was charged with charting a course that was consistent with congressional, senior leader, and public expectations. Nonetheless, Army medicine never recovered from the damage. In 2017, the Army role in managing hospitals was bestowed upon the newly formed Defense Health Agency.\textsuperscript{21}

As the Walter Reed scandal illustrates, the more the public ascribes heroic motivation to its fighting class, the higher American expectations will be for supporting, managing, and leading it and the lower the tolerance will be for shortcomings. In contrast to that of soldiers, public

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\item Allen, Samaranayake, and Albrittain, “Iraq and Vietnam.”
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perception of the establishment has varied little over time. It may never reach the heroic threshold of the force it supports. And senior military leaders forever forfeit their heroic stature when they join the ranks of the institutions that require defending.

To discern the origin of these distinctions, it is useful to evaluate the establishment using the same triad of factors used to understand perceptions of the AVF: familiarity, agency, and motivation. First, the senior military and civilian ranks are fewer in number than the mass of the AVF. In the internet-enabled era of information, actions and decisions are available to the public in detail never before seen. As a result, they cannot exist anonymously and therefore cannot benefit from the public attribution of characteristics derived from romanticized myth. Second, while they have strategic-level capability and agency, they neither fight nor sacrifice. Instead, they pursue the nation’s work in conditions of comfort and safety. Most importantly, the public perceives their motivations differently from that of the junior ranks. Congressman Seth Moulton, a former Marine Corps officer, uses the following language: “The highest ranks [have become populated], by careerists, people who have gotten where they are by checking all the boxes and not taking risks.”

Moreover, opinion pieces, books, blogs, academic works, and political cartoons commonly attribute self-serving motivations and bureaucratic behaviors to the establishment.

Schoomaker recognized Walter Reed’s early public affairs strategy paid little attention to the perception gap between AVF and senior leadership. Even after sacking senior leaders, “we [continued to] put general officers in front of [the media] and when we did, we exacerbated the distance between the public and us.” The ages and ranks appearing in the media confirmed the public’s biases. Instead of seeing the heroism previously displayed by those in the senior military ranks, the public perceived the generals and senior leaders as self-serving bureaucrats. To rectify this issue, Schoomaker intentionally minimized the presence of generals and senior leaders as the face of Walter Reed in press conferences.

Differences between the stereotypes used to characterize senior leaders and the remainder of the AVF make media accounts of misconduct more harmful for senior leaders than junior ranks. In the former group, the messages reinforce negative stereotypes. In the latter, they are at such odds with the prevailing perception as to be considered the behavior of outliers. By persisting in the profession, senior leaders outlast the crisis for which they were called upon as saviors and expose self-serving impetuses. In contrast, soldiers become increasingly unassailable in respect and admiration. Because public respect for
the military has grown while opinions of its caretaking agents have remained stagnant, the perception gap has widened.

The Boundaries

If the public regards soldiers as a heroic elite, then the medical and support establishment must do so as well. Without such alignment, the perception gap will result in crises of the scale and type of Walter Reed. The factors leading to the physical, climatic, and bureaucratic conditions in Walter Reed were complex and multidimensional. Even so, many would argue the root cause was the simple fact that hospital leadership and staff did not perceive their patients with the same reverence as the public.

While the boundaries between the AVF and the establishment are clear to the public, they are more difficult to discern from the inside. Within Walter Reed’s walls, patients, staff, and leaders worked together in constantly changing teams in ways that obscured the boundaries between the establishment and the AVF.26 As a result, staff and leadership did not understand that public adulation for the mythical soldier had elevated patients to a status higher than the one they perceived and had come to expect for themselves.

Factors other than physical mixing contributed to this ignorance: Walter Reed’s staff included hundreds of soldiers such as Weightman, who was a combat veteran that had spent his career serving with soldiers. Many Walter Reed staffers were Operation Iraqi Freedom veterans, and the hospital routinely and cyclically deployed its staff to the war. The uniformed members of the staff, and many civilians, received their care at Walter Reed, which routinely associated them with the wounded. Members of the Walter Reed treatment team were revered alongside the wounded in previous news features about the campus. The unit won an Army Superior Unit award for its early work in the war. The wounded wanted to remain in close proximity to Walter Reed even though it was an acute, tertiary care hospital and not a rehabilitation center.27 Proud of its medical services, the hospital respected these wishes. Finally, Walter Reed workers developed traditional provider-patient alliances with the wounded. A division between patients and providers in terms of goals, approach, and motivation was anathema to their bonds. Although the system was inefficient, leaders, providers, administrators, and patients navigated it, as best they could, together.

The Washington Post articles revealed the error in the collective attitude at Walter Reed. Colonel Charles “Chuck” Callahan, the hospital’s senior physician in 2007, described the impact of the articles on the staff’s vision of reality: “The hospital staff failed [the patients]. Among staff members [at Walter Reed], the Post’s articles evoked an incredulity

26 The author observed this dynamic as a physician at Walter Reed from September 2003–June 2006.
shared with the American public, and when we were honest with ourselves, we asked along with the public, ‘How did an organization that was the most successful in history . . . break down?’”

The hospital’s leadership recognized the shift of its public perception from highly regarded to negligent was justified. Leaders at all levels had “failed as systems thinkers.” By choosing to accept, on a day-to-day basis, the constraints of the system, they represented a traditional bureaucracy—impersonal, inflexible, and accepting little accountability to change the rigid processes.

The hospital staff mixing among, familiarizing with, and commonly bonding with the AVF offers the beginning of an answer as to why more efficient administrative processes were not offered to patients. A fixture of Army life is a requirement to thrive in austere conditions. Luxury, in the Army, was once considered “three hots (warm meals) and a cot.” At the organizational level, leaders have waited months for pay and administrative issues to be resolved, essential equipment to be repaired, and key positions to be filled. Acquiring modern equipment routinely takes decades, exceeds budgets, and falls short of promises. These flaws create the climate of the military lifestyle. Survival in this atmosphere requires resilience and stoicism. To be successful, leaders adopt can-do attitudes that enable them to contend with the conditions of austerity and scarcity experienced in combat and peace. Soldiers are conditioned never to ask for luxury and to complain only in the guise of humor.

Schoomaker identified this tendency during the investigation at Walter Reed: The hospital commander “had visibility of what the problems were—but was unable to solve them . . . [for] compelling reasons . . . I had to reprimand him not for failing to recognize what was happening but because he did not notify higher command . . . He was such a terrific soldier that he was unwilling to call attention to the issues.” Instead, the commander endured the resourcing deficiencies and strove to complete the mission with what he had. Representative Christopher H. Shays also insightfully identified this predisposition as a cause for the conditions at Walter Reed.

The events of Walter Reed demonstrate the public expects leaders to overcome resourcing constraints to ensure the care, boarding, protection, and equipping of modern warriors matches their heroic station. According to Schoomaker, if there is a lesson to be learned from Walter Reed, it is that leaders must fight the tendency to “drive on” in resource-constrained environments. Instead, they must elevate the existence of subpar physical and administrative conditions to the level needed to assure correction.

29 Schoomaker, interview.
30 Schoomaker, interview.
31 CQ Transcripts Wire, “Congressional Hearing on Walter Reed Army Medical Center, House Committee on Oversight and Government Reform, Subcommittee on National Security and Foreign Affairs,” Washington Post, March 5, 2007.
32 Schoomaker, interview.
The establishment’s physical proximity to the AVF has implications beyond knowledge and stoic acceptance of routine working conditions. It has insider knowledge regarding the motivations for volunteering for military service. Unlike the public, neither the AVF nor the establishment can reflexively accept altruism as a unifying motivation for military service. Except in the most existential crises, patriotism alone cannot be used as the sole incentive to raise an army of volunteers. Instead, recruitment policies must appeal to personal interests. Such reasoning helped create the AVF of 2007 and 2008.

As the military changed its methodology from conscription to volunteerism in the 1970s, monetary rewards were incorporated into the new force. In fact, the famed Noble Prize-winning, free market-capitalist, Milton Friedman, was a key voice in the Gates Commission, which charted the Army’s conversion from a conscripted to a volunteer force.33

As a result, military pay was made more competitive with civilian wages, and financial incentives such as combat and hazardous duty pay were put in place for high-risk missions or specialized skills. Additional bonuses are offered at key decision points to retain soldiers on active duty. Finally, the military still offers a traditional lifetime pension plan after 20 years of service, one that has not been retained in other professions. Unlike the public, those immersed in the AVF cannot clearly identify where altruism ends and private interests begin. Financial incentives destroy a member’s ability to rely upon simple heuristics to categorize other volunteers into dichotomous groups of patriots and careerists, heroes and villains. Senior ranks at Walter Reed did not buy into the soldier-as-exceptional myth as completely as the public because they lived in a more complicated reality.

The Expectations

The public’s simplified perception of the all-volunteer force did not develop in a vacuum. To counteract potential impressions of a mercenary force, the military has, as a matter of policy, encouraged the public to assign paternalistic and altruistic motivations to it.34 To this day, the military crafts its image to resemble the superheroes of mainstream American culture. Recruiting advertisements portray servicemembers as possessing dual identities. In combat, they are fierce warriors masked by protective equipment and in control of marvelous futuristic machines capable of extraordinary destruction. In peace, they are good-looking, selfless, and patriotic in their dress uniforms.

Led by Army Chief of Staff General William Westmoreland, the founders of the AVF recognized this desired image of the emerging force required different support than that of the conscripted force. To maintain recruitment and to shape the AVF’s public image, benefits expanded to

include health, education, and insurance programs; personal quarters; and administrative infrastructure. These features invited the public to imagine the AVF as a family, cared for and united by common values.

To maintain this image, the military has improved benefits over the past 45 years to match social expectations. Even during combat in Iraq, the establishment provided soldiers with catered meals, private air-conditioned living quarters, and indulgences such as internet cafes. Without any signal to suggest otherwise, the military will continue its journey upward not only in public perception but also in ensuring its existence meets all the conditions suitable to its elevated station. Even so, such a transformation will require eliminating what was once the status quo. Such change is not always predictable, smooth, or easy. Walter Reed demonstrates at least one case in which the evolutionary pace of providing combat matériel and services eclipsed the progress of administrative processes on the home front.

This line of thought opens a new aperture through which to evaluate whether the events at Walter Reed were the simple failures of a few poor leaders or an inevitable step in the public’s effort to ensure its force was treated appropriately. By illustrating an antiquated and insensitive bureaucracy, Walter Reed provided the energy and urgency needed to usher in several new programs that rapidly benefited the nation’s wounded. The Army created warrior transition units to manage medical transitions properly and introduced soldier and family assistance centers to provide nonmedical support. The disability system was reformed to reduce substantially the timelines required to process benefits. The consequences of the disruptive changes on the existing establishment were necessary for equalizing the public’s expectations with the care provided to wounded servicemembers of the AVF. Walter Reed demonstrates the success of the 1970s image for the all-volunteer force. The modern public will support its heroic military whatever the cost, which is an important lesson of Walter Reed and a cautionary tale for the Defense Health Agency.

The Protection

The Somalia intervention (1992–94), the Khobar Towers bombing (1996), and the Kosovo conflict (1998–99) provide examples of the American public’s “excessive aversion to casualties” altering military responses.35 With the events at Walter Reed demonstrating such feelings have grown to an “aversion to austerity” for its military class, the possibility that the United States will experience greater constraints on military employment should be considered. Conversely, some claim that the very qualities that make the AVF cherished by the public—a willingness to fight and to sacrifice—make it more liberally employable by the government, possibly even encouraging national adventurism.

Contemporary military critic John A. Nagl states, “The American public is completely willing to let this professional class of volunteers serve where they should, for wise purpose. This gives the president much greater freedom of action.”36 Others—such as historian and international relations professor Andrew J. Bacevich—testify the situation is more menacing: “By rescinding their prior acceptance of conscription, the American people effectively opted out of war.”37 Since “they have no skin in the game, they will permit the state to do whatever it wishes to do.”38 Finally, if nothing changes, “Americans can look forward to more needless wars or shadow conflicts . . . more wars that exact huge penalties without yielding promised outcomes.”39

While history indicates a trend of increased American military expeditionary intervention, no evidence supports the contention that the public has or will become indifferent to the well-being of the AVF in times of hardship. Such analysis is at odds with the adulation of the military discussed previously. Indeed, the public’s reaction to the conditions at Walter Reed disproves the hypothesis. To suggest the government and its military could be divorced from the people would mean Clausewitz’s elements of reason and chance could be isolated from passion. The bonds between the military and the people are not weakening but strengthening. Contrary to Bacevich’s claims, it is the bonds between the military and the government that are fraying.

Underestimating the public’s power and desire to affect war is a pit into which senior military leaders have repeatedly fallen. Public support for military intervention varies according to the nature of the threat, the merit and progress of the endeavor, and ultimately, its cost. This last variable, cost—particularly human cost—is what has changed in the era of the AVF, the age of instant information, and the period of military heroism.

Only when the US military encounters success at little human cost will the public remain silent. But the human costs are increasingly visible. Furthermore, even relatively rare losses or inequities may produce soul-touching impact in the realm of public opinion—as they did at Walter Reed. When the internet and mainstream media deliver stories of human injustice or tragedy, no matter how tactically or statistically insignificant, public emotion of strategic scale may emerge. Because superheroes are held in such high esteem, harm to them is abhorrent. As they are killed, disfigured, or mistreated, their anonymity is lifted, and without armor, they appear smaller, younger, ordinary, and vulnerable. In the moment their sacrifice is realized, they instantly

36 James Fallows, “Tragedy of the American Military.”
resemble our children, and it matters not whether the force volunteered or was conscripted.

A public united to oppose the harm or discomfort affecting its heroes will retain the power to affect the course of warfare through its representatives in Congress. After reflexively criticizing the self-serving character and marginal competence of military and civilian leaders, the public will intervene to hobble the establishment’s power and limit its autonomy with the AVF. Specifically, excessive demands may be made to draft defensive rules of engagement, to make major changes in strategy, to withdrawal from combat, or to fast-track protective equipment at the cost of other acquisition programs.

In a salient example of the latter, Congress, reacting to public outcry over the death and injury of soldiers in Iraq due to primitive roadside explosive devices, demanded the immediate acquisition of safer vehicles for troops. The acquisition of mine-resistant, ambush protected vehicles occurred at a cost. Specifically, many of the military’s major modernization efforts were abandoned, which contributed to persisting strategic vulnerabilities. Hence, the US national security apparatus will increasingly need to consider the public’s feelings about the AVF as too precious to lose and too honored to harm. Otherwise, with time, the force may only be available for threats of the most existential kind.

The Solutions

More resources need to be applied to understanding the strategic implications of an AVF for America. Specifically, leaders should strive to understand how to maintain and to deploy a small, anonymous, and elite force, a force to whom the public will accord proud confidence and protection. Ironically, the bonds between a society and its guardians have been explored more in blockbuster movies than in serious academic triangles.

The problem defined in this article provides a place to begin understanding what it will mean to live in a modern America in which a group of elites provides collective security. Because this reality will not be easily disentangled from its DNA, its decades-old historical foundations, and the mass impact of myth, understanding it will be every bit as challenging as understanding future battle.

Work at the tactical and operational levels offers a logical parallel. In the multidomain battlefield of the future, the ability to collect information and act upon it rapidly will be decisive. As a result, battlefield sensors are being developed on scales from microscopic to aircraft-sized. At the strategic level, the inability to sense public opinion may lead to a loss of situational awareness, the widening of perception gaps, and finally, frequent self-imposed strategic surprises.

To avoid such events, it would be wise to design polls, surveys, focus groups, and red-team equivalents to map the ever-changing relationship between government, people, and military. Had such mechanisms existed between 2003 and 2007, the establishment may have been able to react to
early signals of the gap between the public’s expectations for wounded soldiers and the care that was provided. Eventually, technology might be leveraged to include new techniques such as predictive analytics, big data mining, simulation, and modeling.

As mentioned, the Army already implemented a solution for Walter Reed. As the Defense Health Agency matures, the organization should ensure it does not rebuild the system it was designed to replace. Costs and readiness must be balanced with patient experiences and satisfaction or history will repeat itself.

The events examined in this study depended on the creation of the AVF. Specifically, abandoning the draft, over time, created a largely anonymous force of tremendous agency and perceived altruistic motivations. Forty-five years later, with the help of lessons drawn from Walter Reed, we are beginning to understand the repercussions of an AVF in American society. Specifically, the relationship between the government, the public, and the AVF is such that the public elevates the AVF by attributing superhero characteristics and status to it.

Such a status widens the gap between the all-volunteer force and the establishment that governs it—framing civilian and military leaders as self-serving and therefore below the force in character. The public increasingly supports the highest care, protection, and treatment of the AVF. The establishment’s proximity and insider knowledge limits it from completely aligning its perceptions with the public—creating blind spots and turbulent transitions.

Finally, the perception gap between the AVF and the agents of its management will increasingly lead the public to intervene in the conduct of war as standards for the treatment of servicemembers heighten. Without indicators to forecast these phenomena, new constraints may develop regarding the nation’s ability to employ its military.