

EHOPAC Readiness Subcommittee
Marketing and Communications Workgroup
Deployment Narrative Questionnaire

1. **Rank and name?** CAPT Calvin Edwards
2. **Agency and assignment/job title?** FDA/Supervisory Investigator
3. **Years on active duty?** 25
4. **What were the logistics for your deployment?**
 - a. **Dates/Length?** OCT 2014 – 20 DEC 2014.
 - b. **Location?** Harbel, Liberia; Monrovia Medical Unit. The MMU was located next to, but not inside the physical boundary of Roberts International Airport. The soldiers from the 101st ABN we worked with were located inside the physical boundary of the airport at the Aerial Port of Debarkation (APOD) – a military airport operation.
 - c. **PHS or agency deployment?** PHS
 - d. **Collaborations with other agencies/uniformed services/local governments/groups?**

US Army – (101st ABN) provided all medical logistics and nonmedical logistics (food, water, shelter, transportation, communications, etc.) for MMU Team 1

USAID – was overall in country coordinator of the mission, and their Disaster Assistance Response Team (DART) was the analog for an IRCT in domestic response

CDC – provided training to MMU 1 in Anniston and provided an advisory role in country on safety issues

Liberian Ministry of Health and Social Work – interface with for patient acquisition patient discharge and disposition of deceased patients
5. **What was the assignment and mission for your deployment?**
 - a. **What were your main responsibilities during this deployment? Specify the EHO skills that you most brought to bear during the assignment.**

I was Officer in Charge of MMU Team 1. My first responsibility was to bring the team home safe.

I had an excellent EHO Safety Officer, CDR Robert Horsch, who covered all environmental health, industrial hygiene and infection control issues (along with his outstanding team of safety officers). We had zero cases of EVD transmission to providers on MMU 1.

I think the EHO skill I wielded, if any, was experience in working in PPE hazardous (nuclear, radiological and chemical) environments and having a profound understanding of how well that PPE works when used properly. My goal was to convey my confidence in it to assuage others' lack of confidence that it was adequate. Whether or not I was effective, you'd have to ask someone on the team.
6. **What unexpected situations, problems, or surprises occurred and how did you handle or address the issue?** Tenuous supply lines for things that shouldn't be tenuous like food and water

and some medical supplies. For Team 1, transportation was also an ongoing issue. The Army contracted buses to transport the team between the MMU and our quarters about an hour away. We had to continuously hound the Army to get the drivers to show up on time for shift change. Communications were MacGyver'ed in any way we could. We bought in-country SIM cards and set up in-country accounts for cell service at the airport. Connectivity at the MMU was like unreliable dial-up when it worked well. Many people bought their own in-country hot spots at the airport.

7. What do you consider to be the biggest challenges for this assignment?

- a. **For yourself** – bringing everyone safely home
- b. **For your team** – learning what we were going to do, how we were going to do it, how the moving parts of the team meshed

8. What is the most valuable thing you learned on this deployment?

Teams matter – MMU 1 was a resilient, well oiled, high-speed, low drag, ebola-fightin' machine when we left Liberia. We knew what our roles were and how we functioned. Forming, storming, norming and performing ahead of time in a safe environment makes a lot of sense.

9. What do you consider to be the biggest accomplishments for this assignment?

- a. **For yourself** – bringing everyone home safe
- b. **For your team** – We saw 18 patients; 13 of these were Ebola positive; 8 survived. 61% survival was the best in the country.

10. What was the most fun part of your duties or deployment? Getting to watch the EHOs light the medical waste incinerators on the hot side in full PPE with a diesel fuel soaked torch. At night. I have video.

11. What were your deployment and living conditions like? Monrovia, Liberia is hot, humid and on the equator. It's *Africa hot*. First 6 weeks most of the team lived in 6 small buildings, cabanas if you will; we called them hooches. These had 2 proper bedrooms, a living room and 2 baths including showers. The advanced team cleared all the hooches of chairs, beds, dressers, etc. and we filled them with cots, generally 3-5 or more officers per room; we used the living room as a bedroom. There were 10-15 officers per hooch, generally divided by gender and day/night shift. The water was non potable so you had to be careful when showering or brushing your teeth that you didn't get any in your mouth (brushed with bottled water). There were "air conditioners" but these were really just air coolers as they didn't remove humidity (which was always at 90%) so you'd always feel wet when you woke up, like you'd been sleeping outside.. The hooches had a small kitchen where we stored food. The plumbing was typical of what you'd find in a developing country – small in diameter and you didn't flush used toilet paper down the commode. You put it in a wastebasket in the bathroom; we generally used MRE bags for this purpose in the waste baskets. After a few weeks or so of daily floods, one of the female hooches was so bad we were able to get them moved to the airport with the soldiers (very near the MMU). Most of the plumbing issues were overflowing sewage and burst pipes.

12. What was the most valuable item you took on your deployment and the one thing you wished you had taken/missed the most?

Most valuable – my memory foam pillow from home. It was a piece of home to a stranger in a strange land.

I didn't know how much I missed hot food (that wasn't heated with an MRE heater), until after well over a month of only eating MREs. We finally were able to arrange for hot food from the Army, even though they were only T-rats. We brought it to the MMU at shift change so both day and night shift got at least one hot meal a day. Now, T-rats are a style of feeding system used by the Army to feed troops in the field; it stands for Tray Rations. They are essentially large, shallow trays (~10" x 15" x 3") and generally contain pressure cooked meat of some sort such as beef, ham slices, chicken, etc. Don't think I remember any seafood T-rats. Anyway, the first night we got T-rats the menu was beef in gravy and mashed potatoes. We didn't quite have the all the feeding details down yet (like plates, cutlery, napkins, place to sit, etc.) all worked out yet. I have enduring memory of seeing CDR Greg Davis standing up and digging into a cup of beef with gravy and mashed potatoes and just sort of slumping over, his head and shoulders dropping in one motion at the taste of hot food. I had the exact same reaction. Just the thought of being that much closer to what we were used to as normal was just intoxicating. T-rats are not all that different from MREs, in fact they taste sort of like MREs on a larger scale. But, just that fact that it was warm and you didn't have to take it out of a bag you'd heated up made it just so good. Eventually we got proper plastic silverware and paper plates but I grew to like getting a big Styrofoam cup and putting food in it so I could eat it on the bus ride in the dark back to our hooches an hour or so away. That bus ride back with hot food was one of a very few leisurely enjoyments I remember.