U.S. Air Force Chief Master Sergeant Mario Aceves, Medical Readiness Training Exercise chief enlisted manager, uses Spanish-language skills to speak with woman during exercise New Horizons 2018, May 14, 2018, in Coclé Province, Panama (U.S. Air Force/Dustin Mullen)

Linking Foreign Language Capabilities with Expeditionary Requirements

By Douglas J. Robb, Brian H. Neese, and Cara Aghajanian

hether combined forces are jumping out of airplanes together, turning wrenches side by side, or providing direct patient care as a clinical team, security cooperation activities must bridge the culture and language divides between our partner militaries. It is simply a *requirement*. When our personnel can speak that other language, their value

in any shared endeavor goes up exponentially. Language, regional expertise, and culture (LREC) capabilities are "an enduring critical competency" and a powerful force multiplier.¹

Department of Defense (DOD) efforts to train, track, and utilize members with foreign language competencies are a substantial human capital investment in support of all-domain, globally integrated

Dr. Douglas J. Robb is the Joint Medical Chair at the National Defense University. Lieutenant Colonel Brian H. Neese, USAF, MD, is Deputy Director of the 81st Medical Group at Keesler Air Force Base, Mississippi. Cara Aghajanian serves as the Director of Language Analytics, Testing, and Culture at the Defense Language and National Security Education Office.



U.S. Air Force Master Sergeant Anthony Sepongviwat, linguist augmentee with Defense Prisoner of War/Missing in Action Accounting Agency, directs other team members during recovery mission, in Laos, April 5, 2019 (U.S. Marine Corps/George Melendez)

operations. These competencies strengthen our international alliances and partnerships, inform our joint planning, and create competitive advantages in a rapidly evolving security environment. The full return on this investment occurs when these skilled individuals participate in the combatant commander's security cooperation mission or other military activities in times of peace or war. A *virtuous cycle of LREC capitalization* results, as these participants advance the security cooperation mission as well as enhance their own operational readiness and attest to Service force development efforts.

So it may come as a surprise to discover that personnel with existing language skills are often purposefully *not* employed in the joint expeditionary environment. Two gaps in the joint planning process sideline foreign language capability on missions that this capability is meant to serve: combatant command planning documents do not request language-enabled forces; and planners

at multiple levels do not identify or task language-enabled personnel. Because mission planners compete for limited resources, they prefer to keep manpower requirements as broad and generic as possible. They come to view foreign language capability as extraneous since, technically, missions could be executed without this skill set; however, this wedge separating requirement and capability means that we do not capitalize on the initial skills investment, tabling potential downstream effects on our training, force development, and even the security cooperation mission. We pay the upfront cost; we do not reap the full potential benefit.

The U.S. Southern Command (USSOUTHCOM) annual deploymentfor-training exercise known as New Horizons offers a glimpse of this disconnect in real time. Looking specifically at New Horizons 2018 in Panama as a case study, we evaluate a proof-of-concept planning effort that fully leveraged culture and language to accomplish a security cooperation and operational readiness skills training mission. This analysis informs potential improvements to the joint planning process and ensures that DOD, military Services, and individual joint personnel enter the virtuous cycle of LREC capitalization, receiving the full benefit of human capital investment.

Building the Requirement

Every spring, USSOUTHCOM sends uniformed medical professionals into Central and South America to deliver direct patient care to indigenous, highneed populations. These efforts, often called *humanitarian missions*, are supported by a military training exercise that is driven by legal and military obligations to do two things: develop the joint force's operational readiness skills that our medics need to deploy, execute the mission, and then redeploy home; and advance the combatant commander's theater security cooperation agenda in the region.² The latter objective includes building access and influence for longer term diplomatic efforts. This objective may also strengthen the multidomain networks so important to combatting illicit trafficking in a state or region.³ This was certainly the case during New Horizons 2018.

As joint operational plans began for New Horizons 2018, task force leadership considered the role of foreign language capabilities in this mission. Leaders saw a preview during planning conferences, when regional health directors from Panama came to Tucson, Arizona, to build the concept of operations. The English language skills of our Panamanian partners varied widely, as did our team's understanding of Panamanian health, ethnic diversity, and geopolitical history. All of these things factored into our decisions. If we needed LREC skills here, in Arizona, at home, how much more would we need them when we deployed hundreds of joint medics on the ground in rural Panama?

For that matter, how did New Horizons military clinicians intend to practice medicine in that country? How would pediatricians develop the clinical history of their patients? How would surgeons garner consent from non– English-speaking patients? The answers to these questions would be the key to mission success or failure. The opportunity to advance operational readiness and the combatant commander's military objectives hinged on our ability to successfully navigate the linguistic matters of the mission.

DOD Foreign Language Program and Capability Overview

The current National Defense Strategy puts a premium on building partners and allies, but this effort is not new to DOD. As U.S. military power began projecting into regions around the globe in the early 20th century, the ability to communicate in native languages became fundamental to our national defense. DOD created various language schools that over time consolidated into today's Defense Language Institute Foreign Language Center.⁴

As the war on terror progressed, DOD accelerated its language acquisition efforts. Although instructional programs such as Rosetta Stone were given away through the base library, it became clear that language skills were not a fungible commodity easily procured. It was also clear that the personnel who needed language and cultural skills were not just the intelligence unit's linguist, the special operator, or the foreign area officer. Language skills were needed, to some degree or another, by all general-purpose forces involved in the counterinsurgency effort. Security forces, medical professionals, and many other occupations were coming into direct contact with village leaders. Successfully communicating across language and cultural barriers could make or break missions where lives were on the line and the commander's theater security cooperation objectives were at risk.

That need for foreign language skills is just as valuable today, in support of the National Defense Strategy's posture of near-peer competition. Language and cross-cultural communication skills guarantee our ability to establish and develop allies and partners who then enable our competitive military advantage and form a "strategic center of gravity."5 DOD has therefore institutionalized the LREC effort, codifying it in various directives, Chairman of the Joint Chiefs of Staff instructions, and a plethora of other Service and agency guidance documents. More important, the recently completed Capabilities-Based Requirements Identification Process reviewed important combatant command mission requirements and mission-essential tasks and identified the required supporting LREC capabilities.6 As a result, combatant command operational plans now have the baseline to build an LREC annex and layer foreign language acquisition into U.S. military activities across the spectrum of competition and conflict.

The Sourcing Dilemma

New Horizons mission planners developed a concept of operations that would deploy in multiple provinces more than 100 uniformed medics across a range of medical, surgical, dental, veterinary, and other healthcare specialties. The core mission was health fair–style events welcoming all comers to receive immunizations as well as primary, dental, and optometry care. U.S. teams would coordinate with Panamanian Ministry of Health personnel, local police, politicians, social workers, and other stakeholders to care for hundreds of patients every day in makeshift clinical spaces such as elementary schools.

With this concept of operations formulating, the next operational planning steps were sourcing the personnel who would execute the mission and determine how they would communicate with the Panamanians. In spite of the clear need for personnel with foreign language skills, USSOUTHCOM's planning guidance for building the medical teams did not indicate any language requirements. This was the first of two critical planning gaps.

The plan for communicating with patients, local healthcare workers, and other stakeholders was to rely on local volunteer Spanish language interpreters, usually students from nearby universities; however, experience shows a wide variation in quality of interpretation and even day-to-day event attendance from such a group. Because these groups are not organic assets, New Horizons mission leads have no operational control to ensure the capability is available when or where it is needed most, or that its quality is mission appropriate. In clinical settings, patient-provider communication can determine whether a medical intervention cures an illness or causes harm. High-quality, reliable language interpretation is a mission requirement-and must be considered one.

Between U.S. task force and hostnation leadership, activity coordination is another area fully reliant on language skills and cross-cultural knowledge. Synchronizing mission objectives, building relationships, and coordinating force employment through a range of daily, even hourly, problems depend on effective communication. In this way, language capability has a direct impact on the security cooperation mission.

Without specific requirements in USSOUTHCOM's planning guidance, Service component planners could not justify adding support for foreign language interpreters through either civilian contractors or a request for forces (RFF). New Horizons task force leaders again stepped back to ask a broader set of questions: Does the U.S. military lack relevant language capability in its own inventory? Are there not military doctors, nurses, pharmacists, and medical technicians who speak Spanish? If there are, then tasking Spanish speakers would immediately resolve the vexing question of communication, absolving the need for interpreters. It would also build deeper bonds and trust between patients and medical providers, as well as send a signal to our Panamanian partners that the U.S. military is overwhelmingly committed as a security partner. So, then, if the foreign language capability is out there, how do we find it and put it to best use?

DOD Foreign Language Training Pipeline and Capability Identification

The DOD foreign language training pipeline can be roughly divided into formal (acquiring a new language) and sustainment (enhancing language proficiency) efforts. The Defense Language Institute Foreign Language Center is DOD's premier foreign language training institute. Using both resident and nonresident Language Training Detachments, the institute's efforts are directly tied to requirements around the world for foreign area officers, linguists, cryptologists, and other members going to units with language-coded billets. According to the U.S. Army Web site, on a given day this institute is matriculating approximately 3,500 personnel through curricula in 24 foreign languages.7

The Air Force's Culture and Language Center is the premier example of a Service language sustainment program. Part of Air University, the Language Enabled Airman Program (LEAP) enhances proficiency through a variety of training modules, including online classes as well as full-immersion experiences in foreign countries. The focus languages change over time to suit the Strategic Language List and demands expressed by operational organizations to the Air Force Senior Language Authority.⁸ Since its founding in 2013, LEAP has matriculated more than 3,000 personnel in 95 target languages.⁹

Outside the boundary of specific training platforms, the language capability of the force is certified and tracked by the Defense Language Proficiency Test (DLPT). This standardized test evaluates proficiency in the domains of reading, listening, and speaking; it reports the results using the Federal Government's Interagency Language Roundtable scale (0 through 5 in ascending level of proficiency). A score of 2 in a language domain is considered functionally proficient. The Air Force LREC office reports that its current inventory has more than 14,000 Airmen who tested at a 2/2 or higher in over 100 languages.

A key incentive in this system is DOD's foreign language bonus pay. Congress mandates this pay and sets the ceiling at \$1,000 per month per individual. Determining which languages receive pay and how much each language receives is a matrix that changes over time based on the Service-specific Strategic Language List. This memorandum qualifies a foreign language as Immediate Investment, Emerging, or Enduring, with some languages further qualified as Prevalent-in-the-Force. How a language is categorized, as well as the member's DLPT language score, career field, current job billet, and any number of other Service-specific policies, will determine whether-and in what amount-a member receives bonus pay. Pay rates are, however, the same for officer and enlisted without regard to pay grade.

According to data from the Military Personnel Budget Book, the Services combine to invest about \$9 million every month in foreign language bonus pay. The Army leads the way, carrying more than half of DOD's language pay recipients. At the end of fiscal year 2018, DOD had spent \$107 million on foreign language bonus pay for more than 35,000 joint personnel. DOD is therefore paying to keep 120 foreign languages and dialects on retainer when needed across a broad spectrum of missions around the world.

Given this inventory of capable, eager, and financially compensated languagequalified personnel, the question then becomes how to identify and access them for joint mission requirements. Service personnel management systems have ways of marking and tracking individuals with specialized skills that go beyond standard occupational codes. The Air Force, for example, uses Special Experience Identifiers (SEIs) to document regional expertise as well as participation in LEAP and in the International Health Specialist program. The latter is akin to a medical foreign area officer program and requires a minimum level of foreign language capability. The SEIs are tracked in the member's personnel record and can be queried in the Air Force personnel system.

All language proficiency test results are automatically populated in the Defense Manpower Data Center, the central DOD source for human resource management. This repository provides visibility for any stakeholder to identify language capability across DOD. Furthermore, the Defense Readiness Reporting System has integrated the Language Readiness Index, a data visualization tool that shows both the language requirement and the joint force's language capability inventory. These databases highlight individual foreign language capabilities, ensuring their potential identification by joint planners shaping expeditionary force employment.

Tasking the Language Capability

Combatant commanders set the requirement for joint force execution. As such, they are sensitive to disconnects between mission requirements and joint force capabilities, readiness, or force development. When commanders require capabilities from outside of their assigned forces, they look across the joint force by initiating an RFF.

It is this part of the joint planning process, the RFF, that starts a long bureaucratic chain identifying qualified and



Soldier with Joint Task Force Mustang, California National Guard, performs medical screening using American Sign Language interpreter on mobile device, at California State University campus in Los Angeles, February 15, 2021, to ensure accessibility of COVID-19 vaccine (U.S. Air National Guard/Neil Mabini)

ready personnel from the various Services and then deploying them under the operational control of a joint force commander. The RFF must reflect everything a planner desires out of an individual: occupation, rank, and any specialty skills (such as foreign language capabilities).

The Joint Staff J3, as the Global Force Management allocation lead, validates this capability request and recommends a Service to source the manpower.¹⁰ The request flows down the Service's chain of command to a specific unit, which assigns an individual according to the request. The unit then forwards the RFF back the way it came. There is now a name for the combatant command to place on the Time-Phased Force and Deployment Data sheet, ready for employment on the mission.

Two factors hindered the New Horizons joint planning process in finding and tasking language-enabled personnel. First, as discussed, there was no demand signal for Spanish speakers in USSOUTHCOM's planning guidance. Second, planners were unaware of the language-enabled personnel inventory and how to access it. Under these circumstances, there was little to no prospect of this tasking request delivering a Spanishspeaking healthcare provider. In the end, component planners agreed to add line remarks stating that Spanish language skills were "highly desired."

As a workaround, task force leadership asked permission to design a proof of concept intended to layer foreign language capabilities into the manning solution, which led to implementing two manpower initiatives: pre-source medical taskings based on SEIs and DLPT scores; and access additional interpretation support from nonmedical Airmen with both DLPT scores and additional interpretation training via LEAP.

Working with the Air Force LREC office, planners received data from the Air Force Personnel System listing individuals with qualifier columns such as foreign language, language proficiency test score, and any International Health Specialist or LREC-related SEI. This list included 2,770 language-enabled officers and enlisted medics from every specialty in the Air Force Medical Service. Drilling down further, 1,027 of them were Spanish speakers, and 353 held the International Health Specialist identifier. Also, officer specialty consultants and enlisted career field managers were able to identify additional medical personnel with selfassessed Spanish skills who had not taken the DLPT.

Language-qualified Airmen were then vetted by local command, deployment band obligations, and Major Command Functional Area Managers. Once an Airman was cleared for participation, the RFF arrived through normal channels to the individual's unit. The unit assigned the pre-sourced name and then returned the request as usual. Finally, the Airman's name was added to the New Horizons Time-Phased Force and Deployment Data sheet for deployment to Panama.

Concurrently, New Horizons task force leadership worked with the Air Force's LEAP office to identify Spanish speakers from any functional community able to provide interpretation support. Certain qualified LEAP participants receive in-country language and cultural immersion training. The program identified three high-quality personnel with DLPT-certified advanced language skills and additional training to support New Horizons. This proof of concept demonstrated a well-suited match—applying training to an operational need.

Layering this language capability into the original RFF took manual control over a systematic, if not automated, process. Vetting individuals was time-consuming and inefficient. Still, the proof of concept demonstrated that the inventory of members with documented foreign language skills was readily available in the force. Uniquely qualified individuals could be systematically identified in the DOD personnel management system. They could also be tasked formally, albeit through a laborious by-name-request basis. This tasking was the second critical planning gap-that between language requirement and capability-brought about by the joint planning process. However, the potential was established for the joint planning process to cast a wide LREC net across a large pool of qualified and eligible personnel. If properly utilized, this net could allow the formal joint planning process to deliver better results than would a manual workaround.

The Language Skills Impact

As planning reached fever pitch just a few months before execution, congressional appropriation delays forced planners to cancel the first medical mission. This operation was scheduled to send 45 medics to execute health fair–style events for 1 month in the Darién region, a strategically important location bordering the jungle next to Colombia. In security cooperation terms, this was the hot zone for illicit trafficking where our humanitarian outreach would have had tremendous impact. Losing this mission was a significant blow to our overall effort in Panama.

The decision was made to rescope the mission. Although it was true that we could not send a full medical team to deliver high-volume care, what if we sent a small team of three or four physicians to integrate into the local healthcare system? They could partner with Panamanian colleagues to deliver care in hospitals and clinics throughout the region. They could learn how locals treat endemic infectious diseases in a resource-constrained environment. In truth, such a mission might offer unprecedented training opportunities and advance the overall security cooperation effort. It could be done-but not without planners linking directly to the language skills inventory.

Four Spanish-speaking Air Force physicians were identified. They were tasked with and then executed this mission, embedding themselves into three regional health clinics. Over the course of 1 month, they saw 350 patients in busy clinical practices, treating them with local resources and therapies, and collaborating intimately with physicians, nurses, and staff to manage care. The team also took part in a combined medical outreach event with Panama's National Border Service and even linked up with social workers and clinicians to make home visits. Practicing in these resource-constrained environments challenged the Air Force physicians' operational readiness skills, while bilateral exchanges to develop treatment plans strengthened clinical capacities and interoperability for both Panamanian and U.S. clinicians.

The team's Spanish language skills varied from intermediate level to fluent. All were culturally sensitive and eager to engage with their patients and professional colleagues. The task force's public affairs team broadcast these efforts widely through social media. Each physician also was interviewed on a local radio station: The voices of our U.S. Air Force medics were reaching the ears of Panamanians in a language they could understand. Despite a team composition that was only 8 percent of the originally planned force, USSOUTHCOM made tremendous gains in visibility and access in the region. Where a once-canceled mission threatened our security cooperation objectives, foreign language capabilities enabled an effort of great strategic value.

Fortunately, the follow-on medical and surgical teams were able to execute as planned. This is where the proofof-concept sourcing intervention fully materialized. Of the durational leadership team, 66 percent of them spoke Spanish, including all members of the command staff. Furthermore, an unprecedented 75 percent of Air Force members on the medical outreach team had Spanish language skills—this directly facilitated the care of 7,200 patients in just 3 weeks.

Still, such a performance measure is routine for these types of missions. The impact of language skills is better reflected in three subtle but important ways: direct and clear communication with patients, expanded medical training opportunities, and intimate collaboration with local healthcare professionals.

In these health fair-style events, clinicians, nurses, and medical technicians process hundreds of patients every day. The team's language skills allowed them to largely bypass the need for interpreters, creating a seamless flow among providers, patients, and Panamanian partners. During patient care episodes, commonly used phrases were understood in their proper cultural context, minimizing the risk of misunderstanding and enabling a deeper connection to patients. In fact, multiple patients and host-nation staff inquired, incredulously, of our Servicemembers, "Do all of you speak Spanish?"

Having the agility that comes with foreign language capability, the mission commander carved out small Embedded Health Engagement Teams to work in local area clinics. Ultimately, 27 medics embedded into six clinics across two provinces. This effort exposed members to local disease burdens and pathology not seen in the traditional medical outreach events. As one



Iraqi brigadier general reviews inventory with U.S. Soldier and linguist, as part of U.S. Counter-ISIS Train and Equip Fund program, as U.S. Soldiers provide Iraqi border guard forces more than \$2 million of ammunition for weapons from previous divestment at AI Asad Air Base, April 30, 2021 (U.S. Army/Clara Soria-Hernandez)

member's after-action report noted, "The severity and complexity warranted constant requests for consultations and ... meaningful conversations regarding current clinical practice guidelines, evidence-based medicine, and ... significant pathology (e.g., lung cancer, elephantiasis, new-onset seizures)."¹¹ The language and cultural competency of participants and key leaders ensured this improved training experience.

New Horizons clinical team leaders collaborated on the ground with Ministry of Health of Panama personnel to rapidly troubleshoot operational and tactical challenges, of which there were many. For example, medical supply shipments were delayed, leaving veterinary and optometry teams with few services to offer. Spanish-speaking personnel—including International Health Specialists, LEAPtrained interpreters, and the Marine Civil Affairs team members—saved these missions by facilitating communication with local nongovernmental organizations. Similar logistics delays for the surgical team required heavy LREC lifting to work through challenges and ultimately prevent any mission degradation. Time and again, foreign language capabilities neutralized tactical threats while also forging deep and lasting partnerships with Panamanian colleagues in the public and private sectors.

The three LEAP-trained Airmen drew on specialized training and offered a baseline interpretation capability that could be controlled and relied on every day. These advanced-level Spanish speakers offered a wealth of language and cultural knowledge that facilitated key leader interactions, provider-patient interviews, and public events such as partner recognition ceremonies. Their force-enabling function was on full display in the Panamanian hospital operating theaters; there they helped process patients, interpret for providers, and communicate constantly with local staff and logisticians. Their efforts maintained clinical workflows and protected patient safety standards, directly aiding 315 eye and ear surgeries.

Conclusion

The National Defense Strategy prioritizes readiness and the strengthening of our international partnerships. Foreign language capabilities cut to the heart of both. DOD and the military Services recognize this fact and consider language skills to be a key readiness component for executing globally integrated operations.¹²

DOD and individual Servicemembers invest heavily in acquiring, enhancing,

and sustaining foreign language capabilities within the joint force. These members and their language proficiency test scores are identifiable within DOD and Service-specific personnel systems. Efforts are increasing to ensure this capability is linked more deliberately to combatant command security cooperation objectives and operational plans. Combatant commanders can now utilize LREC annexes to their operational plans in order to send these demand signals to the force providers.

Two specific gaps in the joint planning process exist, however, and they keep operational requirements separated from the DOD LREC inventory. The combatant commands do not consistently demand this capability in their planning guidance, and joint planners are largely unaware of how to identify personnel with foreign language skills and task them appropriately. The root problem is scarcity of resources; a Servicemember tasked to support a security cooperation mission because of language capability is not available to support his or her unit's operational mission or even other deployments requiring his or her functional expertise. While this resource competition is real, a joint planning process that fully integrates DOD's expansive foreign language talent pool dilutes the burden on any one functional community.

Three deliberate actions to improve the joint planning process could mitigate these gaps. First, combatant commands must demand a more robust utilization of foreign language capabilities in their areas of responsibility. As an example, USSOUTHCOM should look at recurring exercises such as New Horizons as a prime opportunity to send the demand signal for foreign language skills. Planning guidance should compel the use of language-enabled personnel wherever possible, moving foreign language capability from a "highly desired" line remark to an actual requirement. The defense language community could then respond to this increased demand signal by better integrating, strengthening, or expanding its training pipelines.

Second, LREC needs to be a builtin step in the joint planning process. Language skills, regional understanding, and cultural awareness and its implications on joint operational planning should be reinforced at various education and training levels. When planners move into joint operational planning roles, they should master how to link foreign language capabilities with mission requirements. Training should ensure that any planner involved in the RFF process is comfortable identifying and tasking foreign language capabilities.

Finally, language sustainment programs, such as LEAP, as well as foreign area officer and security cooperation officer training should leverage recurring combatant command deployment-for-training events, such as USSOUTHCOM's New Horizons or U.S. Indo-Pacific Command's Pacific Angel, as capstone training measures for their participants. These events are tailor-made to absorb language capability from across the DOD language training enterprise, providing a real-world culture and language laboratory that supports operational readiness skills development and advances theater security cooperation objectives. It is a lost opportunity not to link these efforts.

USSOUTHCOM's New Horizons 2018 experience in Panama implemented many proofs of concept that leveraged foreign language capabilities in ways that improved operational readiness skills and advanced theater security cooperation objectives. The ability to shape activities to meet a commander's intent, to integrate our forces into a partner nation's healthcare system, and to forge mutual trust with our counterparts all hinged on LREC competency. Simply put, New Horizons joint medical teams realized the full capitalization of DOD's foreign language investment.

Connecting capability to requirement ensures a virtuous cycle of LREC capitalization in which capabilities accomplish theater security cooperation objectives. Such utilization then pays value dividends back to the organization and to the individual Servicemembers. In the case of New Horizons 2018, those dividends are still paying out. JFQ

Notes

¹Department of Defense Directive 5160.41E, *Defense Language, Regional Expertise, and Culture (LREC) Program* (Washington, DC: Under Secretary for Personnel and Readiness, August 21, 2015).

²Department of Defense Instruction 2205.02, *Humanitarian and Civic Assistance* (HCA) Activities (Washington, DC: Under Secretary of Defense for Policy, May 22, 2017).

³ Kurt W. Tidd, *United States Southern Command: 2017–2027 Theater Strategy* (Doral, FL: U.S. Southern Command, April 4, 2017).

⁴Cameron Binkley, *The Defense Language Institute Foreign Language Center: A Pictorial History* (Monterey, CA: Defense Language Institute Foreign Language Center, 2011).

⁵ Joseph E. Dunford, "Allies and Partners Are Our Strategic Center of Gravity," *Joint Force Quarterly* 87 (4th Quarter 2017).

⁶Gary D. Bauleke, interview with the Defense Human Resources Activity's Defense Language and National Security Education Office about executing the LREC-related Capabilities-Based Requirements Identification Process, June 29, 2020.

⁷U.S. Army, "Defense Language Institute," available at <https://www.goarmy.com/ soldier-life/being-a-soldier/ongoing-training/ specialized-schools/defense-language-institute. html>.

⁸ Air Force Instruction 36-4005, *Total Force Language, Regional Expertise, and Culture Program* (Washington, DC: Department Headquarters of the U.S. Air Force, May 10, 2019).

⁹U.S. Air Force, "Language Enabled Airman Program," fact sheet, May 2018.

¹⁰ Joint Publication 3-35, *Deployment and Redeployment Operations* (Washington, DC: The Joint Staff, January 10, 2018).

¹¹ Christopher Segura, comments on the Embedded Health Engagement, New Horizons 2018 Panama, May 2018.

¹² Chairman of the Joint Chiefs of Staff Instruction 3126.01A, *Language, Regional Expertise, and Culture (LREC) Capability Identification, Planning, and Sourcing* (Washington, DC: The Joint Staff, January 31, 2013).