

TAB E – WAR SOUVENIRS, AMNESTY PROGRAM AND EOD

GENERAL

Soldiers may return from deployments with unauthorized articles. The following information identifies what articles are and are not permitted as souvenirs and provides instructions for an amnesty program for ammunition items.

WAR SOUVENIRS

1. Soldiers are not authorized to retain captured enemy weapons, ammunition, explosives, or equipment such as vehicles, trailers, generators, radios or communication devices.
2. The following items of enemy public property may, as a limited exception to the prohibitions above, be retained by members of the U.S. Armed Forces as souvenirs: Items of captured enemy military clothing; e.g., hats, shirts, belts, trousers, and insignia. Items of captured enemy individual military equipment; e.g., helmets, load-bearing equipment, canteens, mess kits, and ammunition pouches. Other items that clearly pose no safety or health risk such as flags, training manuals, books, posters and photographs.
3. War Souvenir POC, OPM at 381-8887

AMNESTY PROGRAM

1. The USAREUR Ammunition Amnesty Program was established to provide a means of returning ammunition and explosives to the supply system and ensuring that it is properly disposed of according to safety criteria. This program is not intended to circumvent normal turn-in procedures.

a. The amnesty program will be conducted on a no-questions-asked basis to provide an opportunity for individuals to return items without fear of reprisal or prosecution. This policy must be widely publicized to ensure the program reaches all military and civilian personnel and their family members. Ammunition kept, as a souvenir is a safety hazard and is prohibited.

b. Amnesty programs in USAREUR will be according to DA Pamphlet 710-2-1, paragraph 11-19, and USAREUR Regulation 385-64.

c. Before establishing an amnesty program, the commander will seek legal advice from the servicing legal office.

2. Local Amnesty Programs. Commanders of organizations with elements that use ammunition and explosives will develop an amnesty program. The program may be conducted in conjunction with other local units or with the ASG program.

a. All personnel will be briefed on amnesty policy and procedures before each training event, exercise or deployment that requires the use of ammunition or explosives. The briefing will include the location of the nearest amnesty-collection container or turn-in point and the telephone number of the unit responsible for the container or point. Personnel will be asked to notify the controlling unit when items have been deposited.

b. The location of the nearest amnesty-collection container or turn-in point and the telephone number of the responsible organization will be provided to anyone wishing to turn in ammunition or explosives under the program.

c. An amnesty day will be conducted at least once each quarter according to DA Pamphlet 710-2-1 to find abandoned or unauthorized ammunition and explosives.

d. Ammunition and explosive residue generated during training exercises will not be turned in to ASPs under the amnesty program.

e. The program will be monitored to ensure that it is not being used to avoid accountability or proper turn-in procedures. Appropriate records will be maintained for ammunition turned in for program evaluation.

3. Collection Points.

a. Ammunition-collection points must be located in places where people are not prevented from using them.

(1) Permanent amnesty-collection containers will be placed at each ASP, ammunition storage area, major training area, and at least one in each ASG or BSB. ASG commanders will designate additional ammunition-collection points to ensure coverage in each geographic area.

(2) Unit commanders will establish amnesty-collection points at local training areas for all training events involving ammunition and explosives other than SAA.

(3) Other convenient sites for amnesty-collection points may include areas close to combat-vehicle parking, barracks, military police stations, and departure points. Vehicle parking or assembly areas may be a good location for returning units.

NOTE: For safety reasons, containers in populated areas will be designed with an opening no larger than necessary to accept .50-caliber ammunition.

b. An SOP including the location and design of the container, procedures for checking the container, and container maintenance will be approved in writing by the ASG Safety Office, ASG Provost Marshal Office, and the servicing Ammunition-Surveillance Office (QASAS).

c. The design of the container must prevent the manual extraction of items in the container and provide sandbag protection appropriate to the highest hazardous division fire symbol of items reasonably be expected to be deposited.

d. Containers will be available for amnesty items 24 hours a day. A telephone number for the controlling unit will be stenciled on or posted immediately next to the container with directions for reporting amnesty ammunition and explosives. Numbers for explosive ordnance disposal (EOD) personnel, the QASAS, and other responsible personnel should also be provided.

e. Units responsible for controlling amnesty sites will establish irregular inspection intervals of at least once a week. Small arms ammunition will be removed for delivery to the servicing ASP. If items other than small arms ammunition are found, EOD personnel, QASAS, and other responsible personnel, as appropriate, will be consulted before moving the items. In most cases, on-site inspection by qualified personnel will be required to ensure that hazardous items are safe for movement.

4. Amnesty POC USAREUR, G4, Maintenance Division at DSN 370-7573.

EXPLOSIVE ORDNANCE DISPOSAL (EOD)

1. The staff EOD officer, assigned to the Operations Division, USAREUR G3, will exercise general staff supervision of the USAREUR EOD Program and serve as the primary POC for EOD matters. Table 1 lists USAREUR EOD organizations and telephone numbers.

Table 1 USAREUR EOD Organizations	
Unit	Telephone
EOD Control Cell 191st Ordnance Battalion Miesau, Germany	DSN 486-3767/3705 civilian 06371-842-3767/3705 fax 486-3705
702d Ordnance Company (EOD) Grafenwöhr, Germany	DSN 475-8332 civilian 09641-83-8332
720th Ordnance Company (EOD) Mannheim, Germany	DSN 384-6658 civilian 0621-730-6658

2. Local commanders and community commanders request EOD representation in all phases of range-clearance planning. The 21st TSC EOD Cell must approve all EOD range-clearance support 60 days before the operation (AR 385-63 and USAREUR Suppl 1).

3. POC: USAREUR G4 (AEAGD-SD, 370-8817).

TAB F – WELL BEING

1. Tab F supports tab B with information targeted at the NO LOSS OF LIFE safety program interface with the wellness program.
2. **Enclosure 1 – Wellness Interface.** Summarizes wellness programs that mesh with safety program goals.
3. **Enclosure 2 – Medical Program and Heat/Cold Weather Injury Prevention.** Provides relevant medical interface information and countermeasure programs for hot and cold temperature environments.

ENCLOSURE 1 TO TAB F WELLNESS INTERFACE

1. GENERAL

a. This document is provided to highlight wellness program areas that interface with the Winter Safety Campaign.

b. Wellness encompasses that variety of activities designed to facilitate behavioral and environmental alterations to improve or protect health. This includes a combination of health education and related organizational, social, emotional, spiritual, and health care activities and initiatives. These are integrated to produce a single, comprehensive program. The operational side is delegated to a diverse set of operational entities, DCS G-3 for Physical Conditioning, DCS G-4 for Nutrition, OCHAP attends to Spiritual Fitness, DENCOM for Oral Health, and OSURG handles most Clinical and Operational Areas.

2. SUICIDE

a. Suicide is a leading cause of death in the Army during peacetime. It is important to take a proactive stance on this issue to prevent suicide and respond to those who may be at risk. You are the first line of defense for the people you work and interact with on a daily basis, because you will be the first to detect the warning signs and changes. Bell Sends #4 mentions the losses to USAREUR specifically due to suicidal incidents. Policy Letter # 28 sets the requirements for Suicide Prevention in theater.

b. Warning signs of suicidal ideation include: verbal warnings, behavioral, warnings, and symptoms of depression. Specific information is available in DA Pamphlet 600-70, U.S. Army Guide to the Prevention of Suicide and Self-Destructive Behavior. The holiday period and the early months of the New Year are a particularly bad time for suicides. Concern, observation and early intervention are the main weapons we have in the fight against this foe.

c. Commanders at all levels must be sensitive and responsive to the needs of soldiers, civilian employees, and their families, and familiar with the community agencies and individuals available for suicide prevention activities. Immediate resources for suicide prevention activities include members of the Unit Ministry Teams, Behavioral Health professionals, local health professionals, and Social Work Services.

3. DOMESTIC VIOLENCE

a. Life hasn't stopped while soldiers were off serving in Operation Iraqi Freedom or Operation Enduring Freedom. Bills have had to be paid, day-to-day disasters have had to be dealt with and spouses have proven themselves equal to the task. Roles may have changed in the soldier's absence with regard to managing basic chores and household duties. Face-to-face communication may be difficult after a separation. Children grow up during separations; they may seem different in some ways. Spouses sometimes become more independent, and may need more space. The soldier may be faced with changing outlooks regarding priorities in the household. Any combination of these factors combined with the stress of "re-entering" a changed family can result in additional stress and potentially violent confrontations.

b. Domestic violence encompasses a wide range of activities including patterns of behavior resulting in emotional/psychological abuse, economic control, and/or interference with personal liberty, and the use, attempted use or threatened use of force against a person of the opposite sex. Child abuse and/or neglect include physical injury, sexual maltreatment, emotional maltreatment deprivation of necessities, withholding of medically indicated treatment or combinations of these inflicted on a child by an individual responsible for the child's welfare.

c. The Army Family Advocacy Program has a requirement, based on AR 608-18, to provide educational information, resources, and services to assist all individuals that may be victims of violence, an offender in an abusive relationship, or a person impacted by violence.

d. Programs and services include, but are not limited to: advocacy services, safety planning, domestic violence awareness programs, and child abuse prevention programs. The program also has a requirement to provide education to child care providers on the prevention of and identification of child abuse.

e. Multiple pamphlets and additional information is available at http://www.armycommunityservice.org/vacs_advocacy/user/res/res_user_display.asp. POC for Family Advocacy in USAREUR at DSN 370-8916.

4. ALCOHOL AND SUBSTANCE ABUSE

a. Soldiers returning from OIF and OEF have operated under General Order Number One. They have not been exposed to alcohol for up to a year. Abuse of alcohol and other substances remains the problem it always has been. Command needs to maintain its active role in deterring this behavior. Given the frequency that alcohol and substance abuse directly impacts on other unsafe behaviors a solid program of alcohol education may be one of the most far-reaching safety programs a commander can oversee.

b. The Army Substance Abuse Program, or ASAP, is a comprehensive program, which combines prevention education, urinalysis testing and civilian employees counseling services. Those programs are designed to strengthen the overall fitness and effectiveness of USAREUR Community and to enhance the combat readiness of its personnel and units. The main purpose is to eliminate alcohol and /or other drugs abuse. The prevention education function will provide current substance abuse prevention information for all members of USAREUR, military and civilian.

c. Associated with this subject are two USAREUR programs that should be understood:

(1) The emergency-contact and ride-home programs for soldiers provides them a safety net as required in Army in Europe Command Policy Letter 3. Each unit must ensure that their soldiers know whom to call when they are at risk. Encourage soldiers who need a ride to request one from their unit, the military police, or personnel involved in voluntary community programs.

(2) The Army in Europe's Booze It and Lose It campaign targets drinking drivers both on and off post during long holiday weekends and periodic monthly checks. Emphasize the use of designated drivers to reduce the possibility of soldiers driving while under the influence.

d. The POC for the Army Substance Abuse Program in USAREUR can be reached at DSN 370-7588

5. DEPLOYMENT CYCLE SUPPORT PROGRAM (RE-INTEGRATION)

a. The Deployment Cycle Support Program (DCSP) is a Commander's Program establishing an Army-wide standard on how we receive and reintegrate both Active Component and Reserve Component soldiers along with Department of Army Civilians, upon their return from an extended deployment. The Army has instituted a multifaceted program intended to provide deployed personnel and their families with information, programs and support to ensure our soldiers and Department of Army Civilians return home better prepared to deal with what they've seen, done, and experienced. DCSP consists of a series of tasks, briefings, and evaluations that are initiated in the theater of operations and continue at home station. DCSP ensures mandatory health screenings are completed for all deployed individuals. Additional screenings are completed to determine the need for stress counseling or critical incident decompression sessions. DCSP has added reunion training, classes on relationships, and instruction on communicating with children along with suicide prevention training and other tasks to the historical requirements we associate with a redeploying Army. DCSP is conducted in depth and is event, not time driven. DCSP does not just focus on the deployed service member. The program also focuses on the family to assist them in receiving and reintegrating their deployed family member back into the family. The entire program is planned to foster individual readiness, unit preparedness, community cohesiveness, and a return to normalcy as quickly and as successfully as possible.

b. The Deployment Cycle Support Program will be conducted in three phases: Redeployment, Post-Deployment, and Reconstitution.

(1) Redeployment Phase. Redeployment for USAREUR units begins with the warning order from the combatant commander in-theater. During this period, USAREUR units will re-posture themselves in the in-theater AOR, transfer forces and material to support other operational requirements or return personnel, equipment, and material to central region or to the DEMOB Station if the redeploying unit is an RC unit integrated with USAREUR assets. During the redeployment phase, units will begin to conduct recovery in-theater/AOR for all deployed personnel and equipment. Unit activity level will be ramped down, providing members of the unit the opportunity for well-deserved rest. Unit leaders will balance in-theater/AOR recovery/reconstitution requirements with rest, and unit directed activities. Although units begin Redeployment activities in the in-theater AOR, other actions will take place concurrently at home station. A key element of the successful reintegration of deployed personnel will center on proper preparation of all those involved, to include educating and training spouse and family members. Rear Detachment Commanders (RDC), DA civilians, volunteers, Family

Readiness Groups (FRG), community agencies and employers, should all participate. The redeployment phase ends with individual/unit arrival at home station (AC) or DEMOB station.

(2) Post-Deployment Phase. This phase begins with the arrival of USAREUR forces at home station in Central Region and provides a deliberate reintegration training and monitoring period. This period is designed to gradually reintroduce soldiers to the family unit prior to full -time block leave. This phase includes actions to recover equipment and personnel. Individual redeployment and demobilization processing for RC soldiers (Reverse SRP, Medical Screening, DCS process) will be completed during this phase. During the initial week of recovery, units will implement a “half-day” schedule to ensure soldiers have adequate personal time. For RC soldiers, demobilization begins with recovery at the port of debarkation (POD) and ends with rearm/refuel/refit at home station. Unit “Welcome Home” ceremonies will be conducted to recognize the deployed forces and will impose minimal requirements on returning soldiers and civilians. This phase ends with release from initial recovery mission (AC) or arrival at home station (RC).

(3) Reconstitution Phase. This phase continues to occur at home station with the recovery of equipment, completion of administrative requirements, continuation of soldier reconstitution, reintegration with family, and civilian jobs (RC). Units will begin preparations for future deployment missions. Activities include family readiness, reintegration of soldiers into their families and communities, equipment maintenance, and soldier readiness. These activities continue as the unit/individuals prepare to begin unit collective training. This phase ends when the unit has achieved a sufficient state that allows for the beginning of unit collective training.

c. Specific tasks for all echelons can be found in MOD 2 FRAGO 104 OPORD 1003V-03, Change 1 to MOD 2 FRAGO 104 OPORD 1003V-03, and MOD 4 FRAGO 104 OPORD 1003V-03.

6. REFERENCES

- a. AR 600-63, Army Health Promotion.
- b. DA Pamphlet 165-14, Moral Leadership— Prevention of Suicide and the Moral Aspects of Safety.
- c. DA Pamphlet 600-24, Suicide Prevention and Psychological Autopsy.
- d. DA Pamphlet 600-70, U.S. Army Guide to the Prevention of Suicide and Self-Destructive Behavior.
- e. USAREUR Regulation 40-6, Reporting Soldiers for Psychiatric Evaluation.
- f. USAREUR Pamphlet 40-6, Leader’s Guide to Suicide Prevention.
- g. AMEDD Suicide Event Report (ASER), 10 June 2003.
- h. AR 608-18, The Army Family Advocacy Program.
- i. AR 600-85, The Army Substance Abuse Program.
- j. CONPLAN for the Deployment Cycle Support Program at (http://www.armyg1.army.mil/Directorates/pr/pro/DeployCycleSpt/DCS_CONPLAN.doc).

7. POC

USAREUR, G1 Wellness, DSN 370-7585.

ENCLOSURE 2 TO TAB F
MEDICAL PROGRAM AND HEAT/COLD WEATHER INJURY PREVENTION

1. PERIODIC MEDICAL EXAMINATIONS

As of January 2003, every active duty soldier, 30 years of age and older, must have a physical examination on record that is not more than five years old. Some military medical exams conducted for purposes other than the periodic exam may now be used to comply with the periodic exam requirement. Commanders need to ensure that all soldiers are in compliance with this requirement at all times to have a current medical examination.

2. DEPLETED URANIUM AWARENESS TRAINING

CHPPM-EUR has a FACT SHEET on Depleted Uranium that references the requirement for Depleted Uranium Awareness Training and the need to exercise standard field hygiene measures as additional safety and precautionary measures. The reference for Depleted Uranium Awareness is GTA 3-4-1A.

3. DRUG FREE FIGHTING FORCE

It is every leaders responsibility to educate soldiers, deter drug use, and detect illegal drug abusers. To assist commanders in this effort, the Army Center for Substance Abuse Program (ACSAP) has established a "Club Drug Initiative" to disseminate information on the dangers and consequences of club drugs including ecstasy and the rave culture. This initiative and other tools are in place to help commanders educate, deter, and detect illegal drug use.

4. PRE-DEPLOYMENT/POST DEPLOYMENT MEDICAL PROCESSING

References applicable to ensuring the successful implementation of medical pre and post deployment processing of soldiers include the following:

- a. AR 600-8-101, Personnel Processing (In/Out Mobilization Processing) 1 Mar 97.
- b. AE 600-8-101, USAREUR Soldier Readiness Program, 10 Oct, 02.
- c. AR 40-66, Medical Record Administration and Health Care Documentation, 10 Mar 03.
- d. "Predeployment Procedures to Update Medical Readiness" Information Paper, 26 Mar 03.
- e. AR 40-4, Preventive Medicine, 15 Oct 90.
- f. MCM-0006-02, Updated Procedures for Deployment Health Surveillance and Readiness, 1 Feb 02.

5. DISEASE/ILLNESS RELATED INFORMATION

Fact Sheets are available at the CHPPM-EUR website on various diseases and illness related information such as: Tickborne Encephalitis, Fox Tapeworm, Hantavirus, Histoplasmosis, Lyme Disease, Mosquitoes, West Nile Fever, Balkan Poisonous Snakes, Tularemia (Rabbit Fever), Malaria, Lassa Fever, Head Lice, Depleted Uranium, Bovine Spongiform Encephalopathy (Mad Cow), Asbestos, Chemical Agent Resistant Coating, Lead Exposure, Crimean Congo Hemorrhagic Fever, Foot and Mouth Disease, Mold Inside Homes, Offices and Schools, JP-8 exposure, Smallpox, SARS, and Grain Dust Exposure.

6. HEAT INJURY PREVENTION

Heat injury remains a significant health threat to soldiers and to mission completion. Three variables interact to cause heat injuries: (1) the climate (temperature and humidity), (2) intensity of activity, and (3) individual soldier risk factors, especially fitness level. Heat injury occurs when a person loses excessive fluids through sweating and fails to adequately replenish water and salt. The risk of heat injury is increased with the use of heavy or impermeable clothing, such as MOPP gear, and intense prolonged activity. Soldiers who are not adapted or acclimatized to hot environments are at higher risk for heat injury.

- a. Heat injuries are preventable. Leaders are responsible for the health of their soldiers. First line leaders must identify heat injury hazards and take appropriate action to reduce or eliminate them.
- b. Leaders must take specific actions to properly care for heat casualties. Proper treatment in the field and timely evacuation can be life-saving.
- c. References on how to anticipate, prevent, and manage the adverse effects of heat stress:
 - (1) TB Med 507, Prevention, Training and Control of Heat Injury (Mar 03).

- (2) FM 21-10, Field Hygiene and Sanitation, (21 Jun 00).
- (3) FM 21-1, Foot Marches, (Jun 90).
- (4) FM 21-20 w/Change 1, Physical Fitness Training, (1 Oct 98).
- (5) FM 4-02.17, Preventive Medicine Services, (28 Aug 02).
- (6) FM 4-25.12 (21-10-1), Unit Field Sanitation Team, (25 Jan 02).
- (7) USACHPPM - <http://chppm-www.apgea.army.mil/heat/>.

7. COLD WEATHER INJURY PREVENTION

The threat of cold weather injuries exists not only for troops who are deployed or participating in field exercises, but also for personnel in garrison. Freezing temperatures are not necessary. Cold casualty prevention is a Command responsibility. The prevention of cold weather injuries requires vigorous command emphasis.

- a. A comprehensive cold weather injury prevention program should follow the principles of Risk Management by identifying hazards, assessing the hazards in terms of severity and probability, and implementing appropriate controls to abate the hazards. Personnel must recognize conditions, which are risk factors for cold weather injuries and preventive measures to reduce risk and recognize the types of cold weather injuries and be able to provide proper treatment.
- b. Spot-checking and supervision by first line leaders should be employed to ensure control measures are being implemented.
- c. Unit commanders must conduct a risk assessment for physical training under winter conditions. Unit commander should consider specific additions to the standard PT uniform (e.g., black stocking cap, gloves, balaclava, neck gaiters, etc.) based on the weather requirements. Minimum cold weather PT uniform guidance should correspond to the wind chill categories as below:

COLD WEATHER RISK	PT UNIFORM GUIDANCE
LITTLE DANGER	PFU, sweat top and bottom, black knit cap, black gloves with inserts, neck gaiter.
INCREASING DANGER	PFU, sweat top and bottom, polypropylene top and bottom, balaclava, trigger finger mittens.
GREAT DANGER	Add ECW* Mittens, parka.

***ECWCS – Extended Cold Weather Clothing System**

- d. References on how to anticipate, prevent, and manage the adverse effects of cold weather:
 - (1) USAREUR Pam 350-7, Winning in the Cold, (22 Nov 95).
 - (2) FM 21-10, Field Hygiene and Sanitation, (21 Jun 00).
 - (3) FM 21-11, First Aid for Soldiers, (27 Oct 88).
 - (4) TC 21-3, Soldier’s Handbook for Infantry Operations and Survival in Cold-Weather Operations (Mar 86).
 - (5) USARIEM Technical Note, Sustaining Health & Performance in Cold Weather Operations, (Oct 01).
 - (6) GTA 08-06-012, Adverse Effects of Cold Weather, (Aug 85).
 - (7) USACHPPM - <http://chppm-www.apgea.army.mil/coldinjury/>.

TAB G – PUBLIC AFFAIRS

1. This memorandum assigns responsibilities and provides policy guidance for USAREUR (PA) actions (public information, command and internal information) in support of the Winter Safety Campaign for the period 1 November through 31 May 2004. See the Winter Safety Campaign memorandum for operational details.

a. Policy. Policies on information strategies require PA to synchronize plans for using all available and appropriate methods of communication to achieve specific goals of informing target audiences.

b. Assumptions. Troop and equipment movement during deployment and re-deployment operations will increase risks leading to potential troop casualties. Reintegrating personnel to their home station units and block leave schedules will see an increase in unsafe acts by individuals. Personnel re-deploying will suffer from a decrease in situational awareness.

2. EXECUTION

a. Concept of Operations. OCPA will develop a synchronized and thorough PA plan to distribute the themes and messages essential to the success of the safety campaign.

b. Implementation. Command information assets will be utilized across the full spectrum of operations to reach and inform intended audiences. This will include exploration of new mediums to distribute messages, i.e. troop cards and pop up messages (see paragraph 8).

c. Audiences. Our primary audiences include deploying and redeploying troops, specifically, the leadership at the unit level, soldiers in central region and soldiers involved ingoing contingency operations in the Balkans. The secondary audience includes family members, civilians and host nation personnel in central region.

3. RESPONSIBILITIES

a. HQ USAREUR Chief of Public Affairs (OCPA).

(1) Overall responsible for the direction and approval of command information and public information products in support of the campaign plan.

(2) Lead, ICW IMA-E PA, in the preparation and execution of PA actions ISO the winter safety campaign.

b. IMA-E PA.

(1) Produce command information press releases and news and radio/TV CI spots to highlight safety issues related to Central Region reintegration.

(2) Solicit assistance from AFN and OCPA as needed for production of news and radio/TV CI spots for promotion of safety issues related to Central Region reintegration.

(3) PA Planning. Centralized planning with decentralized execution will take place throughout the AOR for execution of the PA support to the campaign plan.

(4) Commander's Intent: To use public affairs materials and mediums to increase personnel safety awareness and practices to minimize injury and/or deaths due to accidents.

(a) Create an overarching plan to manage risks.

(b) Ensure every officer, NCO and enlisted member receives training and skills to allow identification of improper procedures and unacceptable risks for foreseen challenges faced during the operation.

(c) Ensure all redeploying soldiers are re-indoctrinated into the European environment in a controlled manner.

(d) Leaders take every opportunity to remove risks, such as providing transportation, considering alternatives to putting soldiers in the situation to make tainted decisions.

5. EXECUTION

Safety issues will be addressed in three separate categories within the campaign as defined in the USAREUR Safety Campaign plan:

- a. Provide safety support to 1st Infantry Division deployment operations.
- b. Assist in the support of the return of forces (V Corps and IAD).
- c. Provide continued safety support to Central Region and operations in the Balkans.

6. THEME

PA will develop a theme and slogan for the Winter Safety Campaign. All information disseminated to the intended audiences, regardless of how, will carry the same theme and campaign slogan.

7. METHODS

During the campaign PA will use wide reaching resources to inform our publics on the safety issues outlined in the campaign plan and how to avoid casualty-causing pitfalls. The following illustrates how information related to this campaign will be disseminated. Other avenues of dissemination will be explored during the campaign.

a. **AFN Radio and Television Commercials.** 29 and 59 second commercials illustrating safety concerns and how to avoid a problem geared to a specific audience.

b. **AFN Radio and Television Stories.** Stories addressing specific safety concerns geared to a specific audience. The stories cover issues more “in depth” than commercials but have a short life span.

c. **Print Articles.** Printed stories, with photographs when possible, explaining safety issues outlined in this plan. We will distribute internally produced stories to Stars and Stripes, ASG newspapers and all PA offices within USAREUR. Printed material will also be posted on the USAREUR homepage.

d. **Pop-Up Messages.** Although pop-up messages have become widely hated as most people use the Internet it remains an effective way to ensure quick messages reach our audience. One possible idea is to display a pop-up message whenever the USAREUR homepage is accessed. These messages will carry the same safety theme but may be changed to address different safety issues.

e. **MPEG Videos via E-Mail.** This is a tactic that has not been tried in USAREUR but may prove to be very effective. Compressed video is routinely sent to and from email accounts, usually between co-workers and friends. This is done with greater frequency when the video is humorous in nature. While safety issues are to be taken very seriously there may be a TV commercial concept that can address the issue in a comedic manner. The video can be compressed and sent out to key people in USAREUR. The number of times the attached video is sent may be difficult to measure.

f. **AAFES Movie Previews.** All AAFES theaters in the USAREUR footprint aired “Drive to Arrive” commercials before the showing of the featured movie during the “Drive to Arrive campaign. TV commercials

produced for AFN may be inserted before featured movies begin in all AAFES theaters. Research is underway to determine if this is a possibility.

g. Advertising Banners. Large banners in the proper campaign theme displaying the campaign slogan displayed at all USAREUR installation entry and exit gates.

h. Pocket Leader Safety Guides. Develop and design a laminated safety guide small enough to fit into a BDU cargo pocket. This guide will address each safety issue, i.e. convoy ops safety, railhead ops safety, cold weather injuries, etc.

(1) Each card will be two-sided. Side one will have teaching points on the topic. Side two will contain a "ramp check" list of leader tasks to ensure safe execution.

(2) PAO will work with safety campaign planning personnel and determine what issues will be addressed on the pocket safety guides.

(3) Safety guides will be developed and produced by the safety office ICW OCPA.

(4) Safety guides will be disseminated to all squad leaders through a tracked system to ensure proper completion of task.

8. COORDINATING INSTRUCTIONS

a. OCPA and IMA-E will coordinate their proposed PA materials with each other as part of normal staffing processes.

b. Unit and ASG/BSB PAOs will coordinate proposed PA materials and media opportunities with each other and their respective staffs as appropriate.

c. A tracking system will be developed and implemented by the USARUER Safety Office to validate message saturation to the field.