

and Army list had at least one or more early selectees from the Joint Staff. One year we had four Air Force early selectees to lieutenant colonel.

In the primary selection zone, Army and Air Force Joint Staff selection percentages to lieutenant colonel and colonel almost always equaled their Army and Air Force headquarters staff percentages, and greatly exceeded their overall service average promotions in any given year.

Navy Joint Staff selection percentages consistently lag far behind not only Navy headquarters staff percentages but also the overall fleet average.

During my 2 years as director, I was sent three Navy O-7's—commodore rank—who had no previous joint experience, they were sent to be qualified because they had been waived for the joint duty requirement for flag selection.

That kind of thing is very unusual in the other services. An Air Force or Army brigadier general almost always has previous Joint Staff experience.

In his testimony during those same hearings, General Jones commented further upon the way the Services treat joint service in their promotion systems. Incidentally, the Services are supposed to insure that, prior to sending forward nominees for the rank of O-7 (brigadier general/rear admiral lower half), those officers have served successfully in a joint billet or its equivalent. In fact, there are many ways of evading that requirement. General Jones said:

In the O-7's, the flag/general officer rank, we have averaged about three in the JCS per year for the last 10 years and 60 percent of those have been in one service. There has been a Secretary of Defense requirement that to make O-7 you had to have joint experience. That has been frequently waived. And the services generally determine what is the definition of joint service; for example, we find in some service definitions duty as executive officer to a service secretary counting as joint service. I have had a hard time understanding the logic behind that. So that hasn't been too helpful.

There is much evidence indicating that joint assignments do not attract the "best and the brightest" of our officer corps. Joint assignments can actually be hazardous to the health of any up-and-coming officer—or, for that matter, of some relatively senior ones. An example of this occurred in the aftermath of the Beirut bombing of October 23, 1983, when serious questions arose concerning the evacuation and treatment of the wounded to Germany.

As a result of reports of serious problems including Army and Air Force bickering in the European Command (EUCOM) handling of casualties from the Beirut bombing, the Secretary of Defense directed the Assistant Secretary of Defense for Health Affairs to investigate the medical readiness planning in EUCOM. The commission, headed by Rear Admiral James A. Zimble, identified widespread shortcomings in medical readiness planning. In response to the Zimble report, the Assistant Secretary recommended that a command surgeon position be established at the U.S. European headquarters and manned full time by an officer who would oversee subordinate medical units in Europe. Although the JCS agreed in 1984 with the recommendation, no command surgeon was appointed until late in 1985. One reason was that the service medical corps have strongly and actively opposed having a joint authority placed over them.

Navy Secretary Lehman testified before the Armed Services Investigations Subcommittee last June (1985), "You do not find that interservice rivalry is an obstacle with the people that have to live where the rubber meets the road. You find it here in Washington staffs. That is where interservice rivalry dwells." The picture Congress views, he added, "is grotesquely distorted with the interserv-