

# ARMY RDT&E BUDGET ITEM JUSTIFICATION (R2 Exhibit)

February 2005

BUDGET ACTIVITY  
1 - Basic research

PE NUMBER AND TITLE  
0601105A - Force Health Protection

COST (In Thousands)		FY 2004 Actual	FY 2005 Estimate	FY 2006 Estimate	FY 2007 Estimate	FY 2008 Estimate	FY 2009 Estimate	FY 2010 Estimate	FY 2011 Estimate
Total Program Element (PE) Cost		15969	22319	0	0	0	0	0	0
D52	FORCE HEALTH PROTECTION	9446	9138	0	0	0	0	0	0
D56	GULF WAR ILLNESS RESEARCH (CA)	2014	5752	0	0	0	0	0	0
D57	MEMS FOR DEFENSE APPLICATIONS AND NANOTECHNOLOGY	4509	0	0	0	0	0	0	0
D59	ALS THERAPY DEVELOPMENT FOR GULF WAR RESEARCH (CA)	0	1917	0	0	0	0	0	0
D60	BIOMEDICAL ENGINEERING INITIATIVE (CA)	0	1438	0	0	0	0	0	0
D61	RURAL HEALTH CENTER (CA)	0	4074	0	0	0	0	0	0

**A. Mission Description and Budget Item Justification:** In FY04, OSD funds were transferred to the Army under Force Health Protection Research. Force Health Protection Research seeks to enhance protection of Service members against health threats in military deployments both by increasing our understanding of military health issues and by applying findings from a decade of research on the etiology (cause and origin of disease) and treatment of Gulf War Illnesses (GWI). This program is conducted in close coordination with the Department of Veterans Affairs. The program is divided into five thrust areas: (1) global health monitoring; (2) health behavior interventions; (3) health risk communication; (4) health risk assessment methods; and (5) medical materiel safety. This project contains no duplication with any effort within the Military Departments. The cited work is consistent with Strategic Planning Guidance, the Army Science and Technology Master Plan (ASTMP), the Army Modernization Plan, and the Defense Technology Area Plan (DTAP). Work in this PE is performed by the U.S. Army Research Institute of Environmental Medicine, Natick, MA.; the Naval Health Research Center, San Diego, CA; and the U.S. Army Center for Environmental Health Research, Fort Detrick, MD.

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<b><u>B. Program Change Summary</u></b>	<b>FY 2005</b>	<b>FY 2006</b>	<b>FY 2007</b>
Previous President's Budget (FY 2005)	9538	9680	10367
Current Budget (FY 2006/2007 PB)	22319	0	0
Total Adjustments	12781	-9680	-10367
Net of Program/Database Changes			
Congressional Program Reductions	-329		
Congressional Rescissions			
Congressional Increases	13750		
Reprogrammings			
SBIR/STTR Transfer	-640		
Adjustments to Budget Years		-9680	-10367

**Change Summary Explanation:**

FY06 - Funds restructured to PE 0602787A (\$7744K) and PE 0603002A (\$1936K) for proper program execution in accordance with DoD Financial Management Regulation Budget Activity definition.

FY07 - Funds restructured to PE 0602787A (\$8294K) and PE 0603002A (\$2073K) for proper program execution in accordance with DoD Financial Management Regulation Budget Activity definition.

Five FY05 Congressional Adds totaling \$13750 were added to this PE.

FY05 Congressional Adds with no R-2As:

(\$1918) ALS Therapy Development for Gulf War Research, Project D59: The purpose of this one year Congressional add is to fund basic research into ALS therapy development for Gulf War Illness. No additional funding is required to complete this project.

(\$1438) Biomedical Engineering Initiative, Project D60: The purpose of this one year Congressional add is to fund basic research in biomedical engineering. No additional funding is required to complete this project.

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(\$4795) Extramural Gulf War Illness Research on Chronic Physiological Brain Effects (Low Level Chemical Exposure), Project D56: The purpose of this one year Congressional add is to fund basic research on Gulf War Illness. No additional funding is required to complete this project.

(\$959) Gulf War Illness and Chemical Agent Exposure Program, Project D56: The purpose of this one year Congressional add is to fund basic research into the causes of and cures for Gulf War Illness. No additional funding is required to complete this project.

(\$4075) Rural Health Center for Remote and Medically Under-Served Areas, D61: The purpose of this one year Congressional add is to fund basic research in rural health centers for remote and medically under-served areas. No additional funding is required to complete this project.