MEMORANDUM FOR MEMBERS, AFEB

6 June 1969

 Armed Forces Epidemiological Board  
 Office of the President  
 Harvard Medical School, Boston, Massachusetts 02115

1. I have just returned to my office after a short period in residence at the Harvard Business School to take a computers-in-management course. During this time, COL Prior gathered a number of opinions on one of the matters to which we have given considerable attention at our last two meetings, namely, military officer membership on our Commissions. Feelings on the subject were expressed to me by our military colleagues during our meeting last month, and again when I spent Friday, 23 May, in the AFEB office. As matters stand now, the general opinion of the three Preventive Medicine officers and their associates, and the representatives of the MRDC is, that only those officers who have a particular and high scientific competence in the field of interest of one of our Commissions should be appointed to membership on that Commission, and that membership be at the associate level. There is serious objection to (1) having medical department officers as full members, and (2) the appointment of officers to Commissions primarily on the basis of the positions which they hold in their respective military departments.

Our military colleagues have given this problem careful consideration and we should now determine how we may wish to modify our operating procedures. I would appreciate your thoughts on whether we should limit military membership on a Commission to those officers who have a recognized competence needed by that Commission, and whether the membership offered to the officer be at the associate level only.

2. We discussed at our last meeting the term "Advisory Member" for those senior scientists who are needed as Full Members of a Commission but whom the Commission does not wish to have carry all of the responsibilities of the customary Full Member. As we agreed, this would be a good position for those members who have served long and well, and for whom the only alternative might be "Associate Membership", a designation that is really not as fitting. Since not all of the Commission Directors participated in the entire discussion of this matter, it will be difficult to expect all possible appointments to this new category to be made as of 1 July 1969. Since this is essentially an internal matter concerned with the operations of a Commission, I would like to approach Commission Directors with your permission, and request that they nominate before 1 October 1969, those members whom they wish to have designated as "Advisory Members". With the cost of meetings still rising, it might be appropriate to suggest to Commission Directors, that they limit the total number of Full Members (including Advisory Members) to approximately 12. If you agree, we might also suggest that the total number of Associate Members be approximately 12. This should not be interpreted as limiting the number of participants in an important Commission meeting, since it is always readily possible to invite scientists having particular talents, etc.

If the above is acceptable to you, I would ask Commission Directors to make nominations to the Advisory Membership category by 1 October, with final action to be taken by the Board at its meeting on 24 October 1969.

Gustave J. Dallin, M.D.  
President, AFEB