

H-NET BOOK REVIEW

Published by H-War@h-net.msu.edu (February 2006)

Robert J. Wilensky. *Military Medicine to Win Hearts and Minds: Aid to Civilians in the Vietnam War*. Modern Southeast Asia Series. Lubbock: Texas Tech University Press, 2004. 207 pp. Appendix, notes, glossary, bibliographic essay, index. \$29.95 (cloth), ISBN 0-89672-532-4.

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A New Kind of Weapon

Since its involvement in Vietnam, the U.S. military faces not large-scale wars but various types of insurgencies. Of the many aspects of counter-insurgency warfare, the winning of "hearts and minds" is probably the most important and the most difficult to achieve. In this book Wilensky examines the use of medical care as a "civil action" during the Vietnam conflict. Although remaining a noncombatant activity, it evolved into a weapon to obtain American war aims. American medics have traditionally treated local civilians. Think of the television series "M.A.S.H." or look at today's newspaper articles. While in earlier wars this was a matter of doing good works, more recently it has evolved into an overt tool of American military strategy. "Military Medicine to Win Hearts and Minds" provides a new perspective on military medical care given to the civilian population.

Although we were both "in country" during the height of the Vietnam War, I do not recall meeting Wilensky. He was a physician with an Engineering unit in the south, and I was a medic with an Infantry unit in the Central Highlands. We both actually participated in the subject of this book. While Wilensky conducted formal programs coordinated with the government of Vietnam benefiting schools, hospitals and orphanages, I made occasional trips to neighboring Montagnard villages and frequent visits to help with medical examinations of the workers at the local "Sin City." Our differing experiences demonstrate the wide variety of the military civic action programs during this time. I always thought we were simply offering a little help and encouraging the locals to be friendlier. This book clearly shows it was all much more complicated.

In looking at what he calls the "big picture," Wilensky examines the motivations behind and implementations of these programs, followed by an evaluation of their success. In part, the motivation simply involved providing help to people in need. But, medical aid was also an integral instrument of policy to advance U.S. war aims. According to the author, this is only possible if we are fighting a counterinsurgency action and two criteria are met. First, the people must need and desire the medical care. Second, the loyalty of the population must be in doubt and sought by both the insurgents and the government. Both of these conditions were clearly met in Vietnam.

Implementation of the programs was disorganized. But, as American troop levels increased and the United States took greater control of all aspects of the conflict, the military consolidated most of the various programs. A couple of chapters provide a summary of this development. The reader is introduced to the U.S. military MEDCAP (Medical Civic Action Program), MILPHAP (Military Provincial Health Assistance Program) and CWCP (Civilian War Casualty Program) programs. Each differed in its specific goals, but each supported American military policy. This information is generally useful, although the author's efforts to downplay the extent of civilian casualties caused by the U.S. military and to blame Senator Edward Kennedy for much of the bad press distract from his thesis (pp. 70-74).

Wilensky convincingly argues that the medical programs failed in both their medical and foreign policy objectives. Aside from making the caregivers feel better, medical care left little lasting improvement. Due to the wartime conditions and need for security, visits to villages could not be scheduled and regular follow-up was impossible. He claims that " 'non recurrent' civic action can be worse than no civic action at all" (p. 110). American medics typically did not understand Vietnamese culture, especially in rural tribal regions. In addition, during the war command reports often lapsed into the "body count" mentality which produced impressively large, but unreliable, numbers.

As a counterinsurgency technique, medical care was ineffective. In evaluating its use as a policy tool Wilensky concludes that when the war ended the "medical assistance effort had made little impact on the outcome of the conflict" (p. 125). Numerous factors contributed to this failure. For one thing, the medics tended to worry about the lack of in-depth care

provided, while the command worried about policy objectives. The goal was to develop a positive relationship between the population and the government in Saigon. But the U.S. military medics frequently functioned without any Vietnam government representatives. Most often, any good feelings were directed toward the U.S. medics, not the government. It accomplished little "except to possibly improve the American image" (p. 127).

Finally, the author suggests some lessons for the future. Rather than dominating the local medical care projects and providing what we think people want and need, we should train local medics to work in and with the community. Command must clearly define and understand the nature of the conflict and direct its efforts toward gaining support for the friendly government. Medical intelligence of value to military operations can be gathered by offering civilians medical care, but this makes little difference if commanders do not use what medical personnel learn. Placing good news articles in home-town publications about MEDCAP missions may help with grassroots support for American troops, but probably will not help win the war. And, of particular interest, Wilensky notes that "[n]o civic action campaign can succeed until long-term security can be guaranteed to the population at risk" (p.142). One lesson is implied, if not stated: The more foreign troops do, the less responsibility local governments will assume.

The narrative is written in a clear and concise style that will appeal to the general reader while the extensive notes and bibliographical essay will satisfy most scholars. As in any work dealing with the military, the glossary is most welcome. And, the photographs bring back some memories. It is appropriate that this work is published by Texas Tech University--the home of the Vietnam Project and Center. Wilensky lays out an ambitious goal for the book: "[T]o contribute to an understanding of the use of medical services as an instrument of policy, both to clarify what was done and to provide some insight for the future" (p. xiv). He largely succeeds. This study deals with the Vietnam period, but the reader is frequently drawn to a comparison with the United States' current involvement in Iraq. An application of Wilensky's "insight for the future" to America's most recent conflict would have made the work even more valuable. Hopefully he is working on just such a study.

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