



U.S. Army Wounded Warrior Program (AW2)

Severely wounded, ill, and injured Soldiers

often think their military career is over. This is not the case for many AW2 Soldiers. To date, most wounded, ill, and injured Soldiers who have requested to continue their service in the Army have been able to do so. The Army wants Soldiers to have the option of continuing their service. Soldiers who are severely wounded in action and later found unfit for duty by a Physical Evaluation Board and Medical Evaluation Board may still apply for Continuation on Active Duty (COAD)/ Continuation on Active Reserve (COAR) regardless of the extent of their injuries.

As Soldiers and their Families decide whether to medically retire from the Army or continue their service, AW2 Advocates are with them every step of the way, from looking at their options, making a decision, and going through the process.



SFC Jacque Keeslar, an AW2 COAD Soldier, speaks with two Soldiers going through the COAD process.

AW2 Advocates will work to:

- Identify interested AW2 Soldiers prior to the Medical Evaluation Board (MEB) and Physical Evaluation Board (PEB)
- Provide comprehensive counseling to ensure Soldiers understand their options and can visualize their future in the force
- Utilize a financial calculator to complete a detailed income report assisting the Soldier and Family with their "stay on active duty vs. medically retire" decision
- Assist in facilitating the COAD/COAR process for AW2
 Soldiers interested in continuing their careers

Empower

To be eligible for COAD/COAR, a Soldier must meet at least one of the following requirements:

- Has served 15-20 years of service for COAD or 15-20 qualifying years of service for non-regular retirement for COAR
- Is qualified in a critical skill or shortage Military Occupational Specialty (MOS)
- Has a disability as a result of combat or terrorism

U.S. Army Wounded Warrior Program (AW2)—COAD/COAR



The U.S. Army Wounded Warrior

Program (AW2) is the official Army program that serves severely wounded, ill, and injured Soldiers, Veterans, and their Families, wherever they are located, for as long as it takes. AW2 supports the most severely wounded Soldiers from Overseas Contingency Operations since 9/11 who have, or are expected to receive, an Army disability rating of 30% or greater in one or more specific categories or a combined rating of 50% or greater for conditions that are the result of combat or are combat related.

AW2 is one element of the Army's focus on caring for wounded Soldiers, Veterans, and their Families. AW2 Soldiers, Veterans, and Families are assigned an AW2 Advocate and may be assigned to a Warrior Transition Unit (WTU) to focus on healing. The AW2 Advocate supports the WTU

"triad of care" team consisting of a primary care physician, nurse case manager, and a military squad leader.

AW2 assists and advocates for more than 7,500 severely wounded Soldiers, Veterans, and their Families. More than 160 AW2 Advocates are located throughout the country where there are large concentrations of AW2 Soldiers at VA Polytrauma Centers, VA facilities, Military Treatment Facilities, and most military installations.

AW2 Advocates Provide:

- Personalized, local support for as long as it takes, regardless of location or military status
- Assistance with day-to-day issues in recovery, as well as longer-term decisions, such as choosing to remain in the Army or to medically retire
- Support throughout the entire six-phase Wounded Warrior Lifecycle

"When I was wounded, one of my first questions was if I could stay in the Army and continue to serve my country. I can tell you the Army culture is changing—severely wounded, ill, and injured Soldiers are continuing their careers and continuing to serve their country proudly."

—AW2 Soldier

Throughout the Wounded Warrior Lifecycle, AW2 Advocates assist wounded Soldiers and their Families with:

- Benefit information
- Career guidance
- COAD/COAR support
- Education opportunities
- Financial audits

- Government agency coordination
- Lifetime assistance
- Local resources
- MEB/PEB guidance