

### **Introduced in Honor of Sgt. Coleman S. Bean, Fallen New Jersey Iraq War Veteran**

(Washington, D.C.) – As part of the Defense Authorization Act, the U.S. House of Representatives today passed language written by Rep. Rush Holt (NJ-12) to fill a void in the military's suicide prevention efforts among members of the Individual Ready Reserve (IRR) and for other soldiers who are designated as Individual Mobilization Augmentees (IMAs). Unlike their active duty counterparts or those normally assigned to existing Guard and Reserve units, members of the IRR and those designated as IMAs normally are only assigned to units upon mobilization. In between deployments, they lack direct, easy access to the kinds of suicide prevention services and support structures available to active duty troops - a deficiency the bill seeks to fix. The Senate must now approve the legislation.

The language is based on legislation Holt introduced earlier this month, named in honor of the late Sergeant Coleman S. Bean of East Brunswick, New Jersey. In between and after two combat tours in Iraq, Bean sought treatment for post-traumatic stress disorder (PTSD). Because Sgt. Bean was a member of the Individual Ready Reserve, he could not get treatment for his condition because the Departments of Defense and Veterans Affairs refused to take ownership of him and the thousands like him.

"There are nearly 40,000 members currently in the Individual Ready Reserve who have served at least one tour in Iraq or Afghanistan. There's no reason these members should not get the care and attention that other members of our Armed Forces receive. This is a critical gap - one that failed one of my constituents and his family. I now urge members of the Senate to join us in taking a simple step to help all our Ready Reserve soldiers get access to the suicide prevention counseling and support that they need and deserve," Holt said.

#### **Holt's amendment would:**

- Require the Secretary of Defense to ensure that members of the IRR who have served at least one tour in either Iraq or Afghanistan will receive a counseling call from properly trained personnel not less than once every 90 days so long as the servicemember remains a member

of the IRR.

- Require personnel conducting this call to determine the emotional, psychological, medical, and career needs and concerns of the IRR member. Any IRR member identified as being at risk of harming his or her self would be referred immediately to the nearest military treatment facility or accredited TRICARE provider for immediate evaluation and treatment by a qualified mental health care provider, and in those cases the Secretary would be required to confirm that the at-risk IRR member has received the evaluation, and if necessary treatment.

- Require the Secretary of Defense, beginning in January 2011, to report to the Congress not less than yearly on the number of IRR members not assigned to units who have been referred for counseling or mental health treatment, as well as the health and career status of said servicemembers.

Linda Bean, mother of Sgt. Bean, previously offered her support for the legislation.

“Since Coleman’s death, we have come to know that one phone call – just one honest expression of compassion – can help catch and hold someone who is at the edge of despair. For us, if the phone calls mandated by this legislation help save one life – then that is blessing enough,” Bean said.

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