

On the same day the New Jersey mother of a fallen Iraq War Veteran testified before a Congressional Committee on the need for improved military suicide prevention efforts, U.S. Rep. Rush Holt wrote to the Secretaries of Defense and Veterans Affairs, urging them to “take whatever administrative action necessary” to spur their respective bureaucracies to reach out to at-risk veterans. Currently, members of the Individual Ready Reserve (IRR) and other soldiers who are designated as Individual Mobilization Augmentees (IMAs) lack direct, easy access to the kinds of suicide prevention services and support structures available to active duty troops.

A copy of Holt’s letter can be found at: http://holt.house.gov/images/stories/Letter_to_DoD-VA_on_Military_Suicides.pdf

Holt has introduced legislation, which has passed the House, to fix the current deficiency. Holt’s bill is 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). As a member of the Individual Ready Reserve, Sgt. Bean 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. Bean made appointments with the VA to obtain treatment for post-traumatic stress disorder. Those appointments were postponed. He was still waiting when he took his own life. On Wednesday, Coleman’s mother, Linda, spoke before the House Committee on Veterans Affairs.

“Although I still believe we need a legislative remedy to correct this problem, federal agency heads are capable of using the rulemaking process to bypass red tape and speed the delivery of care to our nation’s veterans,” Holt said. “The very least we can do for veterans of Iraq and Afghanistan who are still on the reserve rolls but not in units is ensure that someone at DoD or VA checks up on them from time to time. If we can afford to send them to war, we can certainly afford to pay for a few regular phone calls to make sure they are doing OK and to get them additional help quickly if they need it.”

Linda Bean shared her son’s story and spoke of the urgent need to take action.

“In the days following Coleman’s death, our family had the humbling opportunity to meet men with whom he served; they traveled from around the country to be with us, and with each other. It was clear to us then that many of these men carried their own devastating burdens,” Bean said. “We can help them and we can help their families. And it is our duty – not theirs – to figure out how.”

Video of Bean's testimony and Holt's introduction can be found at <http://www.youtube.com/watch?v=1DCbf4et3ml> . (Sound

is low for Mrs. Bean's testimony due to technical difficulties in the hearing room.)

According to figures provided to Holt by the Department of Defense and Army offices of legislative affairs, the total number of Army IRR reservists who have served at least one tour in Iraq or Afghanistan—and thus who likely experienced the kinds of stressors as Coleman—is nearly 40,000. The DoD-wide total is undoubtedly higher, and Holt is awaiting the figures for the other services.

Holt's legislation 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 evaluation and treatment by a qualified mental health care provider. Additionally, 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.