

Report Excludes Soldiers Separated From Service, Mistakes Symptoms For The Cause of Rising Suicides in the Army

Rep. Rush Holt (NJ-12) today questioned the conclusions and assertions contained in a just-released Army report on the rates, causes, and proposed solutions to the record number of suicides in the Army. The report asserts that pre-existing problems in recruits' lives made them more vulnerable to committing suicide.

"We must avoid the Blame-the-Victim mentality" Holt said. "The Army report states that 'Soldiers who ultimately take their lives have typically been engaging in high risk behavior long before their tragic end.' Coleman Bean was a man of honor and proud to serve his country. He had first-hand experience with the horrors of war, and the failure of the Army and the VA to properly treat him, that led him to take his life. The same undoubtedly applies to so many other troops who have fallen victim to suicide, and the Army should candidly acknowledge that fact."

Sergeant Coleman S. Bean of East Brunswick, New Jersey, killed himself in September 2008 after serving two tours in Iraq. Because Sgt. Bean was a member of the Individual Ready Reserve, he could not get treatment for his post-traumatic stress disorder (PTSD) because the Departments of Defense and Veterans Affairs refused to take ownership of him and the thousands like him.

In May, the House passed language based on legislation Holt introduced in Coleman Bean's memory to fill a void in the military's suicide prevention efforts among members of the Individual Ready Reserve and for other soldiers who are designated as Individual Mobilization Augmentees.

In July, Holt introduced Coleman's mother, Linda, to the House Committee on Veterans Affairs, where she relayed the story of our government's failure to help Coleman and those like him, and shared her recommendations for improving the federal government's suicide prevention efforts. Bean also criticized the Army report.

“The Army report emphasizes in great detail ‘high-risk’ behaviors and suggests that those who commit suicide were somehow broken before they joined the Army. In that way, it does a disservice to all those who have fallen to despair. More importantly, though, the report -- which acknowledges a shortage of trained mental-health and substance abuse professionals -- doesn’t address in any detail how it will fill that critical gap. I believe it is vital that both the Army and the Department of Veterans Affairs take immediate steps to identify civilian mental-health organizations that serve soldiers and their families and to assure that such information is widely available,” Bean said.

Holt welcomed the report’s call for a greater emphasis on suicide prevention measures by leaders at all levels in the Army, but he called on the service’s leadership to work with the Department of Veterans Affairs to identify all at-risk veterans.

“The Army study did not encompass soldiers who have separated from the service and who may be at risk,” said Holt. “They may or may not be enrolled in the VA for health care. We need to reach them, where ever they are, and help them get the care and support they need.”

This week, the House passed a Holt amendment to the annual Department of Veterans Affairs appropriations bill directing the VA to spend at least \$20 million on direct advertising and online social media for suicide prevention outreach programs. He also asked VA Secretary Eric Shinseki and Defense Secretary Robert Gates to meet with Linda and her husband Greg to discuss how the departments are going to better coordinate care to stop other soldiers from suffering Coleman’s fate.