

(Washington, D.C.) – The U.S. House of Representatives today approved an amendment to the FY10 Department of Defense (DOD) Authorization Act introduced by U.S. Representative Rush Holt (NJ-12) to prevent suicides among American reservists. Holt's amendment would require the Secretary of Defense to ensure that members of the Individual Ready Reserve (IRR) - a pool of Reserve soldiers not assigned to any unit but available for mobilization if needed - who have served at least one tour in either Iraq or Afghanistan receive a counseling call from properly trained personnel not less than once every 90 days. The Senate now must approve the bill.

"This amendment seeks to close a serious gap in our military suicide prevention efforts - a gap that cost the life of a young constituent of mine last year," Holt said.

Sergeant Coleman Bean of East Brunswick, New Jersey served two combat tours in Iraq. In between and after those tours, he sought treatment for post-traumatic stress disorder (PTSD). Because Sgt. Bean was a member of the IRR, he could not get treatment for his condition because the Departments of Defense and Veterans Affairs refused to take ownership of Sgt. Bean and the thousands like him. As his father, Greg Bean wrote in a Veterans Day Tribute in 2008: "He fell through the cracks. He had no advocate, no Army machinery to help him find his way through the system. He felt he was literally on his own. He made appointments with the VA to have an ulcer treated and to obtain treatment for post-traumatic stress disorder. Those appointments were postponed. He was still waiting when he took his own life Sept. 6."

A few weeks after Coleman took his life, the VA called to confirm his next appointment.

"Two federal agencies charged with helping prevent suicides among our returning troops utterly failed Sgt. Bean and his family. We cannot allow another family to lose a son or daughter, a father or mother, a husband or a wife because of bureaucratic buck-passing," Holt said.

Personnel conducting the call to the reservist would be required 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 immediately referred 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 in fact received the evaluation, and if

necessary treatment.