shut down—it has been shut down 17 times—and numerous times because the Democratic Party sought to shut it down. If you go back to the 1970s, the Democrats repeatedly tried to shut down the government over the issue of abortion

What we are talking about is the issue of preventing suffering and misery for Americans. Surely that's worth a conversation.

OBAMACARE

(Mr. CULBERSON asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. CULBERSON. Mr. Speaker, the Founding Fathers created this magnificent institution to protect our liberty. The purpose of the House, the Senate, the entire Federal Government was created to protect our liberty.

House Republicans are united in our opposition to ObamaCare because it is one of the most massive intrusions into the individual privacy of Americans that the Federal Government has ever attempted. It is an attempt to socialize the greatest health care system the world has ever seen, and we will see intrusions into the private lives of Americans on a scale never seen before.

So I just want to reassure the American people that we are united as conservatives, as constitutional conservatives, to do everything in our power to repeal, defund, delay, do whatever it takes to stop the socialization of American medicine and the destruction of the most important right we have as Americans—to be left alone.

OBAMACARE

(Mr. McDERMOTT asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. McDERMOTT. Mr. Speaker, as we approach the 1st of October when everyone in this country is going to have an opportunity to have health insurance, you know that there are some people who always like the status quo and they will say anything and do anything.

The public is today being subjected to a propaganda campaign, the likes of which we have never seen in this country, against ObamaCare. Somehow it is the worst thing that has ever happened—the sky is going to fall, the world is going to end as we have known it, we should run and pray that in the latter days we will be saved.

The fact is that ObamaCare is going to go into effect. The Supreme Court has looked at it and said it is constitutional. It is going to happen, folks.

Will there be a few problems? Of course. You can't make the change and bring 30 million people into a program without having a problem here and there. Some of the complaints I hear on the other side are from people saying: Oh, it's going to do this, it's going

to do that, it's going to do this, it's going to do that—but they didn't want to make one single change to make it better. We should just be calm.

HONORING LINDA LUNSFORD

(Mr. GRAVES of Georgia asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. GRAVES of Georgia. Mr. Speaker, I rise today to honor Linda Lunsford, a lifelong resident of Murray County, Georgia.

Ms. Lunsford has been a dedicated teacher to the students of Murray County, helping to enrich the lives of the young people both inside and outside of her classroom.

It was in 1968 that Ms. Lunsford returned to Murray County High School as an English teacher. Over those next 30 years, and for many years after her retirement in 1998, she devoted herself to teaching young Georgians, helping them value their education and succeed in life.

During her teaching career, she served as a drama sponsor, scholars bowl sponsor, yearbook advisor, cheerleading sponsor, newspaper advisor, and much, much more.

Ms. Lunsford has made such an impact on her community that Murray County is declaring October 5, 2013, the first Linda Lunsford Day.

Mr. Speaker, on behalf of the 14th Congressional District of Georgia, I join in celebrating October 5 as Linda Lunsford Day and thank her for her many contributions to our community in Georgia.

SUICIDE PREVENTION MONTH

The SPEAKER pro tempore (Mr. PITTENGER). Under the Speaker's announced policy of January 3, 2013, the gentlewoman from Arizona (Ms. SINEMA) is recognized for 60 minutes as the designee of the minority leader.

Ms. SINEMA. Mr. Speaker, September is Suicide Prevention Month, a time for our Nation to raise awareness about the persistent scourge of suicide.

Tens of thousands of Americans die each year purposefully by their own actions. They are our neighbors and our friends, they are our sons and our daughters, and too often they are the men and women who have served our country honorably in the United States military. An estimated 22 veterans commit suicide every day in our country. That is one life lost every 65 minutes.

We have assembled today's Special Order to accomplish three things:

First, we seek to demonstrate our continuing support for the individuals, organizations, and agencies whose efforts in addressing this preventable epidemic continue in the face of difficulty.

Second, we are here to challenge the VA, the Department of Defense, and our fellow lawmakers to do more. The

number of veteran deaths by suicide is increasing, despite current efforts. Clearly, what we are doing now isn't working. We are failing in our obligation to do right by those who have served so honorably.

And finally, we send a message to military families who have experienced this tragedy. To grieving families across America, know that your family's loss isn't forgotten. We are working to stop this epidemic and prevent future suicides. We work for the memory of your loved ones and for the prevention of future losses.

My colleagues here today believe, as I believe, that no one who comes home after serving our country should ever feel they have nowhere to turn. Sadly, many of our young vets feel just that.

Earlier this year, a young veteran in my district committed suicide. Daniel Somers was an Army veteran of two tours in Iraq. He served on Task Force Lightning, an intelligence unit. He ran over 400 combat missions as a machine gunner in the turret of a Humvee. Part of his role required him to interrogate dozens of terror suspects, and his work was deemed classified.

Like many veterans, Daniel was haunted by the war when he returned. He suffered from flashbacks, nightmares, depression, and additional symptoms of posttraumatic stress disorder, made worse by a traumatic brain injury. Daniel needed help. He and his family asked for help the best way they knew how.

Unfortunately, the VA enrolled Daniel in group therapy sessions instead of connecting him with a private counselor or therapist where he would be able to talk confidentially about his experiences. He attended the VA group sessions even though he knew—due to the classified nature of his work—that he could not fully share what gave him nightmares.

Like many, Daniel's isolation got worse when he transitioned home to civilian life. He tried to provide for his family, but he was unable to work due to his disability.

□ 1600

Daniel struggled with the VA bureaucracy. His disability appeal had been pending for over 2 years in the system without any resolution. Daniel didn't get the help he needed in time. On June 10 of 2013, Daniel wrote a letter to his family.

It begins:

I am sorry that it has come to this. The fact is, for as long as I can remember, my motivation for getting up every day has been so that you would not have to bury me. As things have continued to get worse, it has become clear that this alone is not a sufficient reason to carry on. The fact is, I am not getting better; I am not going to get better; and I will most certainly deteriorate further as time goes on. From a logical standpoint, it is better to simply end things quickly and let any repercussions from that play out in the short term rather than to drag things out into the long term.

He goes on to say:

I am left with basically nothing. Too trapped in a war to be at peace, too damaged to be at war, abandoned by those who would take the easy route and a liability to those who stick it out—and, thus, deserve better. So, you see, not only am I better off dead, but the world is better without me in it.

This is what brought me to my actual final mission.

Daniel's parents, Howard and Jean, were devastated; but in the midst of their pain, they bravely shared Daniel's story and created a mission of their own. Their mission is to ensure that Daniel's story brings to light America's deadliest war—the 22 veterans that we lose every day to suicide.

I am grateful to Howard and Jean for their courage and their strength, but we cannot leave this great task to Howard and Jean alone. The rest of the country must stand and join Howard and Jean in their work to prevent suicide. Each of us can do something to raise awareness, to be that light for a struggling veteran in our communities. Businesses can display signs like this one to let veterans know that help is always available, and mental health professionals can volunteer with organizations like Give an Hour to provide free counseling to veterans and their families. We can all learn to recognize the signs of crisis by visiting veteranscrisisline.net and then reaching out to the vets in our lives.

Here in Congress, we, too, can do more. We need a VA that provides real and meaningful help to veterans in need. We who enjoy freedom every day, thanks to the sacrifices of our military servicemembers, must all step up to end the epidemic of veterans' suicide.

Mr. Speaker, I yield to the gentleman from Michigan, Congressman DAN BENISHEK

Mr. BENISHEK. Mr. Speaker, I want to thank my colleague from Arizona for organizing this Special Order.

This is an issue that is very close to me as well, and I want to join the rest of my colleagues here today in recognizing September as Veterans' Suicide Prevention Month

As my colleague mentioned, a veteran in this country commits suicide every 65 minutes. That's 22 lives extinguished every day. As a father of a veteran, as a doctor who has worked at the VA hospital in northern Michigan for over 20 years, and as the chairman of the Health Subcommittee on Veterans' Affairs, I know that the challenges of military life do not end once our servicemembers retire from active duty. The mental wounds of war may be invisible, but no less real to the young men and women suffering from them.

Facing high unemployment rates, the stigma of post-traumatic stress disorder and a loss of military fellowship, returning veterans often face a crisis of confidence at the very moment they should feel nothing but relief and rest. This year, we will bring 34,000 troops home from Afghanistan. The President has indicated he may withdraw all of the 63,000 member strong force by the

end of 2014. The time to act to address this epidemic of veteran suicide is now.

I am pleased that VA leadership has made veteran suicide a priority. New programs putting researchers to work on reviewing health records for suicide risk factors is one example of the important steps that are being taken, but more—much more—needs to be done. We cannot and we will not allow 22 suicides a day to become the "new normal."

As friends and families of our veterans and those serving our country, there are some things we all can do. We can work to recognize the symptoms that could indicate serious problems and identify where and how to get assistance when we need it.

To all veterans who are struggling as to whether to take their own lives, know that there is no shame in asking for help. You are not broken, and God has not forgotten you. You volunteered to go to war for us, and we have failed to provide you adequate support when you returned home. That is changing, and I beg you to reach out to your local VA, veterans center, veterans service organization, or local Member of Congress for help.

Together, we can begin to turn the tide on veteran suicide. Everyone can help fight this epidemic and be there for those who were there for us.

Ms. SINEMA. Thank you, Congressman Benishek. I appreciate your words very much.

Our next speaker who will join us this afternoon is my colleague from Florida, Congressman PATRICK MURPHY. I yield to him.

Mr. MURPHY of Florida. First of all, I would like to thank the gentlelady from Arizona for bringing us all together for this very important issue.

Mr. Speaker, I stand in support of my colleagues who are here today who support our brave men and women of the United States military—those who were willing to give life and limb in service of our great Nation. Those who fought for our freedom have earned America's gratitude and support as they reenter society after the trauma of serving in prolonged war zones. Our Nation must remain focused on the health and well-being of the brave men and women who have served. This means treating even the wounds that are not visible.

September is Suicide Prevention Month, and it is incumbent that every one of us take the time to reach out to servicemembers and veterans who may be struggling. It should shake every Member of this body to know that we lose 22 heroes every day to suicide.

Yesterday, I was honored to join with local veterans groups to bring attention to this troubling issue. I want to take this opportunity to thank Mary Hinton with the Renewal Coalition, Dr. Deepak Mandi with the West Palm Beach VA Medical Center, and Dr. Raul Diaz with the Jupiter Veterans Center for not only joining me at this important event yesterday but for the impor-

tant work they are doing to assist the veterans and their families in our community every day.

I want to recognize the great work of the Veterans Crisis Line, which has fielded over 890,000 calls since 2007 and provides important, comprehensive mental health care at VA medical centers across the Nation.

I also want to thank Lynn Szymoniak for her hard work and dedication with Angel Fire, another organization in my district which helps our wounded veterans transition back to civilian life.

For Suicide Prevention Month, let's recommit ourselves to providing our heroes, who have sacrificed so much for our Nation, with the respect, the benefits and the care that they have earned through their service by raising awareness, ending the stigma, and treating their invisible wounds.

Ms. SINEMA. Thank you, Mr. Mur-PHY.

I yield to another colleague from the great State of Florida, Mr. TED YOHO.

Mr. YOHO. I thank my colleague from Arizona for putting this together. Mr. Speaker, I rise today to speak about the epidemic of veterans who not

only commit, but consider, suicide. I again want to address what my colleague talked about, the quote of "too trapped in a war to be at peace, too damaged to be at war." These are the words left behind by the soldier, Daniel, who tragically took his own life a few months ago. Daniel was one of many who had been affected by PTSD and who had come back from war with

suicidal thoughts. This is an epidemic among our servicemen and -women, and it must be stopped.

Again, it is estimated that more than 22 veterans take their lives each day. That's 30 percent of all veterans who have considered suicide. In Florida's Third Congressional District alone, there are over 120,000 veterans, which means, according to current data, about 36,000 veterans in my district have thought about suicide. This is unacceptable, and we must remedy this.

We need to do all we can for those who have sacrificed the most for our Nation, and that cannot just extend to the battlefield. We must continue to take care of our soldiers when they come back home. That includes setting up programs to help veterans deal with PTSD and other psychological issues so they can get the proper help they need. We have to make veteran suicide prevention a priority, and I, along with my colleagues, will work tirelessly towards that end.

George Washington said:

To judge a nation's future military force and loyalty to that nation's military will be determined by how well that nation takes care of its veterans.

Before our Nation engages in another war, I hope we look at the true cost of that war. If we look at the cost of the wars in Afghanistan and Iraq, it's not just the trillions of dollars or the thousands of lives that have been lost. The

true cost of that war will be felt by this Nation for the next 60, 70, 80 years; and we need to make sure that we take care of those veterans and that we think long and hard before we ever do that again.

Ms. SINEMA. Thank you, Mr. YOHO.

Next, I yield to the distinguished Congresswoman from Illinois, a proud veteran herself, Representative TAMMY DUCKWORTH.

Ms. DUCKWORTH. I thank the gentlelady from Arizona for bringing us together on this incredibly important issue.

Mr. Speaker, our veterans, throughout their military careers, are taught to be physically tough and mentally strong; and just because they suffer from post-traumatic stress, it does not negate that. They deserve every opportunity to achieve the same American Dream that they defended for the rest of us. Yet, unfortunately, too many of our veterans suffer from post-traumatic stress or from other mental injuries resulting from their service.

Post-traumatic stress and mental injuries are not always the result of combat; they can also include such trauma as that of sexual assault. Regardless of how the trauma is suffered, we still must take care of our veterans. We cannot allow these injuries to prevent them from living the lives that they deserve; and in some cases, these injuries have led these brave men and women to take their own lives. It has been almost 8 years since my own injury; and in that time, if the 22-suicides-a-day rate is to be counted, there have been at least 24,000 veteran suicides. This is simply unacceptable.

When I was director of the Illinois Department of Veterans' Affairs, one of the very first things that I did was to create a 24/7 hotline for mental health available for vets. We have one now across the Nation, and that telephone number is 1 (888) 273-TALK. Please put that on your refrigerator doors. You never know when that number could save a life. We started that hotline because caring for our veterans and their mental well-being is not a secondary priority; it is a mission that we must pursue each and every day.

We cannot rest until we end veterans suicide in our Nation. We need to care for these warriors' invisible wounds with as much dedication and as many resources as we do their other combat injuries. Yet, because they are invisible, we often overlook these wounds.

I am asking all levels of government, business and ordinary citizens to make preventing veteran suicides our mission. We must come together and reduce the stigma of post-traumatic stress. We must provide the funding and the support that our heroes need. They fought for us. Now it is time for us to fight for them.

Ms. SINEMA. Thank you, Representative Duckworth.

I yield to another fine colleague from the great State of Illinois, Representative RODNEY DAVIS. Mr. RODNEY DAVIS of Illinois. Thank you to the gentlelady from Arizona for putting this Special Order together. It is a true privilege to stand here to highlight an issue that needs to be dealt with here in America.

Mr. Speaker, our veterans are those who have protected our freedoms that allow us to stand on this floor and debate the issues of the day. Without their sacrifices, we wouldn't have the America that we know today.

I am surprised when I read the statistics about veteran suicides. The number that dies by his own hand each year is greater than the official number of all U.S. war deaths in more than a decade of fighting in Iraq and Afghanistan.

□ 1615

Between 2005 and 2011, over 49,000 veterans have taken their lives, and more than 69 percent of all veteran suicides were among those 50 and older; and nearly one in five suicides nationally is a veteran, even though veterans only make up 10 percent of the U.S. population.

We need to take steps to ensure that our veterans have the mental health sources they need. We need to make sure that we raise awareness and do away with the stigma of suicide so that veterans feel comfortable finally reaching out for help. When soldiers are scared to come forward about their mental health problems because they think they will be labeled a "coward," they continue down a dark and lonely path that eventually could lead to suicide. Instead, we need to ask our struggling veterans to ask for help.

As my colleague from Illinois just mentioned, the Department of Veterans Affairs launched a crisis line that since 2007 has answered more than 890,000 calls and has made over 30,000 rescues. In 2009, they added a chat line for text, and over 108,000 texts have been sent. These are the types of resources that we need to provide those who have provided so much protection and freedom for us here in America, and I stand here today to work with my colleagues across the aisle to make things happen.

Thank you again to the gentlelady from Arizona.

Ms. SINEMA. Mr. Speaker, I yield to my colleague from the great State of California, Susan Davis.

Mrs. DAVIS of California. Mr. Speaker, I'm very pleased to have an opportunity to join with my colleague from Arizona, Congresswoman SINEMA, to talk about the issue of veteran suicide today and to do it from a personal perspective here, as well.

Daniel Somers, as the Congress-woman noted, was a talented young man, a decorated war hero, and a proud soldier. He asked for help. He did. He reached out to the VA in hopes of being admitted to their suicide prevention unit, but he was informed at that time that there was no inpatient availability, no appointments that he could get right away. We now know that

Daniel took his life just a few days later

His case was brought home to me because his parents, Jean and Howard Somers, live in my former district and actually were friends of mine and friends of people that I knew. When I first heard the story, I was taken, as anybody would be, by their grief, by what had happened, and the fact that we just cannot let that happen again.

I think they asked the question that we all ask: How could a young man like that fall through the cracks? How was it that people did not respond to him? How can we make a promise to care for him who shall have borne the battle and for his widow and his orphan when we cannot guarantee placement in a suicide prevention treatment center?

One thing I think that we all learn from this is that we have to listen to our constituents. What I have found to be so rewarding is that parents with this kind of grief can work through that and use their son's words to become strong advocates for what is needed in the system.

Having served on the Personnel Committee, I know it was very important to me to work through this issue for a number years as we know of the many causes of suicide among those who have served in the military. We know that, in fact, the major reasons are not necessarily combat stress. Recent reports have shown us that financial hardship and relationship strife are major causes of suicide among the military. It points out to us how critically important this discussion of mental health is in our country.

Sometimes I feel like we've arrived a bit and we plan. I know agencies throughout our country and throughout the VA plan so hard so that these kinds of tragedies do not occur; but they do occur, no matter how hard the effort is. We have got to redouble those efforts, we have got to listen, and we have got to encourage our families to do what they can and what they think is right.

I actually think that one of the reasons that the Somers family has become such strong advocates is because people did respond to them. They didn't push them aside and say, Well, this is a terrible story, and we're sad that it happened. We're not sure we can do anything about it.

We can do something about it, and we will

I thank my colleague for bringing this forward, and I thank the Somers family, as well.

Ms. SINEMA. Thank you so much, Congresswoman DAVIS.

I yield to my colleague from Washington State, Congressman JIM MCDERMOTT.

Mr. McDERMOTT. Mr. Speaker, I applaud my colleague from Arizona for bringing this issue to the floor.

Forty-five years ago, I was a part of another era when there was a draft, and everybody was subject to that draft. In 1975, we stopped that draft, and we changed the nature of our military. We made it an all-voluntary military.

What we've done in this country is we've taken 1 percent of the people and said, You volunteered for this. You go and do this for us.

We buy the guns, the bullets, and everything else and send them out there. When they come back, we don't know them.

There's a fascinating book, called, "Breach of Trust," by a man named Andrew Bacevich. He is a colonel in the United States Army. He lost a son in Iraq, and he has written an incisive account of what the problem today is. The subtitle is "How Americans Failed Their Soldiers and Their Country."

I know about PTSD because I dealt with it as a psychiatrist with people coming back from Vietnam. The kids that were in "Apocalypse Now" are the kids that came to my clinic. So I saw what people who went through tough war was all about. What is happening today that we do here on this floor—and I'm always uneasy when we do it—is we stand up and we have a moment of silence. It's nice. We should do it, and we do it. We thank people for their service.

Every veteran finds that as hollow, because they didn't go and get us a cup of coffee; they were under orders to go and kill people. They did it on our behalf.

We bear the responsibility for sending them out there to do it. Every one of us on this floor, all 435 of us, bear the responsibility, as does the American public.

When we receive them back, what do they get—homelessness? joblessness? They get PTSD that may or may not be treated.

We say, Oh, well. The Veterans Administration will take care of that.

You can't put it off on the Veterans Administration. It is all our responsibility.

There is a movie, called, "The Invisible War," about what happens to women who are now serving in the military. You can look at brain injuries of kids who could do all kinds of things and come back and can't remember their phone number, can't remember what their house address is. and they are suffering from things that have happened to them because of the war that they've been involved with. and what happens to them is they get isolated. They get isolated, feeling that nobody really understands what's going on with them. For some, suicide seems like the only way.

Now, Native American tribes, more ancient people, understood this, that when they sent warriors out to war, they received them back into the tribe. The samurai did it. There was a whole process by which we brought people back in and cleansed them of the guilt of what they've done on our behalf. That collateral damage you read about or hear about is our responsibility as well as theirs for having actually

pulled the trigger. We sent them, and they did it on our behalf. They cannot get away from that.

We have put a provision in the National Defense Authorization Act that will create a commission for high-level people to look at how we bring these people back, and it's more than just fixing the process at the VA. That's not enough. There is a much larger process of getting us to accept what we're sending people to do. This recent brush we had with Syria, we were about to send people down there to kill people all over the place and say, Well, it was the Air Force that did it. I didn't direct the smart bomb to go in there.

Yes, you did. Yes, I did. Yes, all of us

So when we talk about suicide and these isolated young men and women who come back and feel there's no other hope, it is a much bigger issue. It's an issue of getting them to come and talk to us and tell us what they've done and accept, as we accept, the grief from that kind of event.

I thank you for the time, and I encourage you to read the book, "Breach of Trust."

Ms. SINEMA. Thank you, Congressman.

I yield to my distinguished colleague from California, Congressman Tony CÁRDENAS.

Mr. CÁRDENAS. Mr. Speaker, I would like to first thank Congress-woman SINEMA for bringing us together so we can speak for at least an hour on this very critical and important issue of supporting our veterans now that they're home.

This is something that I shouldn't have to talk about. This is something that none of us should have to bring up, but here we are. Too many of our veterans are taking their own lives.

Our soldiers and veterans, who are all volunteers, should not be killing themselves. Too many are, and it is at an epidemic rate. This is entirely unacceptable.

While veteran suicide is frequently reported in the press and focused on by the VA, it is rarely mentioned that last year 349 Active Duty service men and women killed themselves. That is more Active Duty deaths by suicide than in all combat deaths combined during the same year, 2012, including the deaths in Afghanistan.

Alongside our Active Duty forces, nearly two dozen veterans kill themselves every day. That is almost one every hour. That number is going up, not down.

A survey by the Iraq and Afghanistan Veterans of America showed that 30 percent of servicemembers have considered taking their own life, and 45 percent said they know an Iraq or Afghanistan veteran who has attempted suicide.

The Department of Veterans Affairs has devoted some resources to this effort, but more can be done, and it starts right here in Congress. We fund the VA; the VA does not fund itself.

It is important that we let military families of those who have experienced these tragedies know that their experiences matter. We need to provide resources, real support for our veterans and their families. We owe this to the men and women who kept their promise to protect and serve our Nation, because we now know and we can see that constant mobilization and combat does not just impact our Nation as a whole, but it forever impacts our men and women to whom we owe so much.

This Suicide Prevention Month, let us make a true effort to provide mental health support for our veterans and their families. Over \$1 trillion has been provided and spent on two wars over the last decade, yet we have dedicated too little—very little—to help our veterans when they return home. A trillion dollars sounds like a lot of money. Almost one veteran an hour in this country takes his or her life. What's that price, ladies and gentlemen? What's that value?

I believe that we have a backwards system in our country where we can pop off \$25 billion, \$50 billion, \$100 billion, and it keeps going and going and going, and we're creating more and more veterans who come back and who love their country. They would like to come back and feel normal, but they don't feel right. Because of that, they take their life.

We should be ashamed of ourselves because we have the answers, we know the answers, and one of those answers is for Congress to dedicate more money to our veterans so that when they come home they won't take their life. We have the answers, ladies and gentlemen, but we're not willing to heed the call. We need to do so.

Perhaps what we should consider doing in these Chambers from now on is, every time we spend a dollar to go to war, maybe we should dedicate \$1 for our veterans when they come back. Fair enough?

□ 1630

We lose count of the money we send to war. But we count every penny that we send to the VA. And we squeeze them, and we tell them there's no more. There's always more money for war, for some reason. Somehow, there's always more money for war, regardless of what the economy is, regardless of how much revenue we have. There's always more money for war. But there's never enough money for us to dedicate to the veterans who need us, who didn't question us, who we—we helped them change their lives forever. And for some, they took their life once they came back home and realized that we are not there for them. I hope that we're all listening, Mr. Speaker. I hope that we're all listening.

And I thank you, Congresswoman SINEMA, for this opportunity.

Ms. SINEMA. Thank you, Representative CARDENAS.

I now yield to my friend and colleague from southern Arizona, Congressman RON BARBER.

Mr. BARBER. I want to thank my colleague from Arizona, Congresswoman SINEMA, for bringing us together this evening on this truly critical issue in our country.

Mr. Speaker, I want to speak directly to the men and women who have served this country. To those of you who have borne a decade of war and to those of you who have endured the psychological scars that these wars have brought, scars from traumatic brain injury and post-traumatic stress, I know that your wounds and you know that your wounds cannot always be seen. But you also know and I know too that they're real.

I implore you to consider the grief and loss, the sadness that your families will feel if you are no longer with them. They love you. They want you to live. I implore you, suicide is not the answer.

For 32 years, I worked in the field of mental health services. I know from the many, the thousands of success stories that mental illness, post-traumatic stress, and emotional issues are treatable. You can recover.

If you are hurting and need help, it is there for you. It is there in your friends, in your family members, and it is there in the professional services offered in your community and at the Veterans Administration.

If you learn that someone is contemplating suicide, you have a responsibility to intervene. Let them know how much they mean to you. Help them get the services they need. It is everyone's responsibility to stop this terrible tragedy that is occurring every single day. As has been said already, 22 men and women who have served us in uniform are committing suicide when they return home to civilian life.

You each deserve the full resources of this government and of your communities and of your friends, and it is there for you.

Here in Congress, I am very pleased to say that while we talk a lot about gridlock and we talk a lot about not getting things done and the lack of bipartisanship, this is one issue on which we are truly in a bipartisan coalition. We are fighting for you to make sure that you get the support and the help and the gratitude that you deserve after serving our country so bravely.

Just this week, I was deeply honored to welcome Congresswoman TAMMY DUCKWORTH to my district. When I think about the greeting that she received when we went to the University of Arizona from the veterans who saw her courage, I knew that she was an inspiration not only to them but to veterans all over the country, a great model of someone who has been through so much and yet has found a reason to live and to serve our country.

We went to the Veterans Center at the University of Arizona, where veterans were helping other veterans not only deal with the transition back into civilian life and into school life but also to deal with the emotional issues that they have as they make that transition.

Help is there. It is there for each and every one of you who have served us so well. And I implore you, look for the help. Give the help.

This is everyone's responsibility to reach out to the men and women who have served us and to extend a helping hand and to get them to the services that they need. They can and will be treated. And treatment will, in fact, help them succeed. And they will, in fact, go through this terrible time that they're dealing with when they contemplate suicide.

I want to thank the gentlelady from Arizona once again for bringing us together to talk about this very important topic to all Americans.

Ms. SINEMA. Thank you so much, Congressman BARBER.

I now yield to my colleague from Nevada, Congresswoman DINA TITUS.

Ms. TITUS. Well, I too would like to thank my friend from the southwest, Congresswoman SINEMA, for hosting this special hour to draw attention to Suicide Prevention Month, which we recognize here in September.

Suicide within any population is a traumatic thing to deal with. But we are learning that it is increasingly important and increasingly a problem among our military and our veterans. It's critical that we work to address, to recognize, to prevent, and to eliminate military suicides. And I hope that to-day's Special Order will help to shine a bright light on this very important tonic

Suicide within the military is a national problem. You have heard my colleagues speak about it in their districts and their State and across the country. But it is especially acute in my home State of Nevada. A recent study done by the State of Nevada found that veterans in the Silver State commit suicide at a rate of more than 2½ times higher than nonveterans and quadruple the national rate. The study further reported that Nevada's female veterans, those often hidden veterans, commit suicide at more than triple the overall rate for females statewide and nearly six times—six times—the national rate for females. The study also found that in 2010, suicide accounted for more than a quarter of the deaths among young veterans—those between 24 years and younger-throughout the State of Nevada. This is a trend we just cannot allow to continue.

As other speakers have noted, every day, 22 veterans take their own lives. Almost every hour, one of our Nation's heroes takes his or her life. Nearly one in five suicides nationally is a veteran, even though veterans make up only about 10 percent of the U.S. population.

As ranking member of the House Veterans' Affairs Subcommittee on Disability Assistance, I'm working every day with my colleagues to ensure that veterans receive all the benefits that they've earned and the care that they need. So if you are a veteran who is

struggling with thoughts of suicide or you are the friend or family member of a veteran who needs help, please contact us. Reach out to us because we need to know what the VA can do to better support and serve you.

I would also encourage my colleagues to cosponsor H.R. 2527, which is the National Guard Military Sexual Trauma Parity Act. This would ensure that members of the Guard receive all the care they need if they're a victim of military sexual trauma while on training missions. We know that if you are a victim and you suffer such trauma, that can often lead to suicide.

On our committee, we're constantly working to ensure that the VA is providing care for our veterans struggling with the thought of suicide. But it's also important that we reach out and assure veterans that they know that receiving help is not a sign of weakness. Instead, it's a sign of strength.

When Army Staff Sergeant Ty Carter received a Medal of Honor, he encouraged his fellow soldiers to reach out and for the civilian community to support them. He said to the public, "Know that they are not damaged. They are simply burdened with living with what others do not. We are resilient and will emerge even stronger over time." Sergeant Carter, we know that because of leaders like you and the support of a grateful Nation, we can win the battle against military suicide.

So, again, let us hear from you. And let me remind veterans and those who love them that the VA operates a confidential support center that's open 365 days a year, 7 days a week, 24 hours a day. And please call if you need support. Their phone number is 1-800-273-8255, and then just press number 1. You can also send a text message to 838255.

So don't hesitate to reach out. Someone will be there to hear you. Just as you never leave a fellow soldier on the battlefield, we can't leave anyone behind when they come home. When they come home with wounds that are both visible and hidden, we should be there.

So thank you to my colleagues and to the Congresswoman from Arizona for giving us an opportunity to send this message loud and clear.

Ms. SINEMA. Thank you so much, Congresswoman Titus.

I now yield to my colleague from Pennsylvania, Congressman MATTHEW CARTWRIGHT.

Mr. CARTWRIGHT. I thank the gentlewoman from Arizona for yielding. And I also want to join Congresswoman DINA TITUS in thanking Congresswoman SINEMA for arranging this Special Order hour and taking the leadership to put these people together and speak out on this topic.

Congresswoman SINEMA, I say to you that you bring honor and credit to the Ninth District of Arizona in taking a leadership position in this role.

I also, Mr. Speaker, want to point out that Congresswoman SINEMA has brought the House together on these issues. She has brought Democrats and Republicans together in this Special Order hour. In case that fact has escaped your notice, we speak as one voice on behalf of American veterans. And I'm happy to lend my voice to that today.

I come from Pennsylvania, which is home to nearly 1 million American veterans. These brave men and women served our country, and unfortunately, we are here to say we have not always served them.

The United States Department of Housing and Urban Development estimates that nationwide, 62,619 veterans are homeless on any given night. And many of these veterans do suffer from mental illness.

A recently released study from the Department of Veterans Affairs found that 22 veterans commit suicide every day. Now I heard that several months ago, Mr. Speaker, and at first, I shrugged it off. I mean, we're sort of callous around here. We're used to numbers. We're used to statistics being bandied about. So when somebody said, "Be shocked: it's 22 American veterans committing suicide every day," thought, "Well, what's that, out of 400, 500 suicides nationwide every day?" No. it wasn't that. It was somewhere between 80 and 110 American suicides every day.

So we're not talking about a small proportion. We're talking about, ladies and gentlemen, Mr. Speaker, we're talking about upwards of 20 percent of the suicides every day are American veterans committing suicide. And we heard earlier this hour that it's something like less than 10 percent of Americans are veterans. So it's hugely disproportionate. The number of people committing suicide in this country is hugely, disproportionately veterans in this country, and that is a national embarrassment.

As someone who cares deeply about veterans' issues, I'm here to tell you, I have introduced two bills after I heard that statistic. First, the Veterans Mental Health Accessibility Act, and second, the Expediting Hiring for VA Trained Psychiatrist Act.

Now the Veterans Mental Health Accessibility Act aims to provide for our brave servicemen and -women when they return from combat with both easily visible and difficult to detect wounds. While the physical wounds of war are evident immediately, mental health issues obviously may take longer to discover.

□ 1645

As many as 30 percent of the Operation Iraqi and Enduring Freedom veterans face the possible diagnosis of a mental health disorder. However, after 5 post-service years—and this is the rule in the VA—after 5 years, veterans would go to the back of the line for psychiatric health care.

With the average wait time for a veteran to receive benefits at 273 days, this could mean the difference between life and death. It's like a 5-year statute of limitations.

After a servicemember is separated from the service, if he or she does not report a combat-related mental disorder within 5 years, it's as if they do not qualify for psychiatric care.

The Veterans Mental Health Accessibility Act would ensure that no veteran be denied mental health treatment, no matter when combat-related mental health disorders first appear. It eliminates that ridiculous 5-year rule.

Additionally, I've introduced the Expedited Hiring for VA Trained Psychiatrists Act. This bill allows the Secretary of Veterans Affairs to fast-track the hiring of psychiatrists who have completed a residency at a VA facility.

Mr. Speaker, I believe that we owe a great debt to those who serve our Nation through military service, including those who stood ready at a moment's notice to fight for our freedom. As long as I am a Member of this Congress, I will be working to increase knowledge of benefits available to the veterans community, to correct shortcomings in the VA system, and to ensure that the men and women of the Armed Forces who bravely serve this country receive all of the benefits to which they are so richly entitled.

Ms. SINEMA. Thank you, Representative Cartwright.

I now yield to my colleague from New York (Mr. OWENS).

Mr. OWENS. Thank you, Congresswoman SINEMA. I appreciate the work you've done in bringing a bipartisan group together to address this issue.

Mr. Speaker, I think it's important that we understand a number of things. In my district, particularly upstate New York, there are 48 attempts at suicide every year. The hotline which was addressed before receives 137,000 calls, on average, annually, and that is statistics gathered from 2007–2012.

That number, and I'll repeat this again for any veteran out their listening today, is (800) 273-8255.

How many of us have known someone who has committed suicide and have thought to ourselves: I didn't see it coming. How could I have helped?

We hear that constantly when we talk to the families of those who have committed suicide.

The New York Times reports that being a veteran increases your risk of suicide double, so you have two times a greater risk of committing suicide if you have served your country.

I urge all of us to stay alert, to make sure that we are focused on watching those amongst us who may show signs of suicide, and it is incumbent upon Congress to provide the funding to defeat this terrible disease.

In my district, a young man committed suicide, who came from Glens Falls, who was assigned to the 10th Mountain Division in Watertown, New York. He was a skilled Blackhawk mechanic. And the theme that I mentioned before was repeated by his friends and coworkers: I didn't see it coming. How could I have helped?

We say thank you to our veterans by oftentimes saying thank you for your service, but do we provide the service to them that they deserve? We do not nearly enough, and we should.

Ms. SINEMA. Thank you so much, Congressman OWENS.

I now yield to the gentlewoman from New Hampshire (Ms. KUSTER).

Ms. KUSTER. Thank you, Congresswoman SINEMA, and thank you so much for bringing us together today. This is a unique experience since I've been here in the United States Congress.

Mr. Speaker, today we've heard from Republicans and Democrats, men and women, people from literally every corner of our country, young and old, who have served this country and who honor those who serve us. Each of us has been touched by this issue.

And I want to say, from a personal perspective, having been raised by a combat veteran—my husband and I are both the children of combat veterans. My father was a World War II pilot, and he flew in 63 missions before he was shot down and served in a POW camp. My father-in-law landed on the beaches of Normandy when my father was flying overhead.

Both my husband and I were raised in households that, although successful, had many dark secrets. These were households where we lived with PTSD. And I want to say to the veterans who have served our country, of every era, that we are here to serve you, and we will not leave you on the battlefield.

I serve on the Veterans' Affairs Committee, and it's a tremendous honor. With my colleagues on both sides of the aisle, led by Congressman BENISHEK, whom you've heard from today, on the Health Subcommittee, we will stand by the veterans who have served our country. We will work to provide the resources and to help the men and women that are working across this country in our Veterans Administration to provide you with the services and the treatment and the support that you need.

It's been a tremendous honor for me, as I travel around the State of New Hampshire and my district, to work with veterans groups, to sit in veterans centers, and to see the one-on-one support from the VSOs, from those who have worked in this field, from people who understand the dark secrets that you carry.

We are here for you. We will work together and, under the leadership of Congresswoman SINEMA and all of us who serve on the Veterans' Affairs Committee and throughout this U.S. Congress, please know that we are here for you and we will not forget.

Thank you for your service.

Ms. SINEMA. Mr. Speaker, I yield to my colleague from Illinois (Mr. ENYART).

Mr. ENYART. Mr. Speaker, "Always Ready, Always There"—that's the motto of the National Guard. That motto's engraved on this commander's coin, my commander's coin that I carry with me wherever I go.

Before I came to Congress, I had the honor and the privilege and the responsibility, for 5 years, to exercise command over the Illinois Army and Air National Guard. I commanded 10,000 soldiers and 3,000 airmen. It was my responsibility to train them, equip them, and order them into war.

Most of them came back—34 of them did not, 19 of them during my command. I carry those names with me in my breast pocket—ranks, names, ages, hometowns, units of assignment, date of death.

What I don't carry are the two soldiers that I lost to suicide. I don't know why I don't have those names. I should have those names. They didn't come back either.

Most of those soldiers that I ordered to go to war came home. Those few didn't. Many of them came home wounded, some of those wounds not visible.

The first time a soldier under my command committed suicide, my staff came to me and said, General, are you going to go to the funeral? I said, Of course I'm going to the funeral. They said, Well, your predecessor didn't go to funerals for soldiers that committed suicide. I said, I do. We took them whole, sent them to war, and they came back broken. That's my responsibility. I go.

Congressman JIM McDermott earlier spoke about responsibility. He talked about how we in Congress and we as a Nation must take responsibility for these broken lives. I accept responsibility for what I've done. I accept responsibility for taking whole men and women and sending them to war. I take responsibility for those two soldiers who committed suicide under my command, under my watch. It's not an easy thing to do. But that's what you have to do as a soldier, because you're always ready and you're always there.

Illinois was very lucky. During my command we went several years without a single suicide, while other States were losing soldiers and airmen. And we were very proud of that. We thought we were doing a great job. And, of course, oh, it was because we were doing such a great job, and we drove it down to the lowest levels that it was okay to be stressed and it was okay to accept help and you should get help.

And those are all good things and they were the right things to do; but it wasn't all that we did, because I know those figures were a lie. I know those zero suicides were a lie, because we had soldiers who were drunk at 2 in the morning riding motorcycles who died. We had soldiers driving cars at 120 miles an hour 2 months after coming home from a deployment, and that was a suicide.

We must respond to that, and every soldier who comes home must take responsibility for another soldier so that we can save them.

Ms. SINEMA. Mr. Speaker, I yield back the balance of my time.

FURTHER MESSAGE FROM THE SENATE

A further message from the Senate by Ms. Curtis, one of its clerks, announced that the Senate concurs in the amendment of the House to the amendment of the Senate to the bill (H.R. 527), "An Act to amend the Helium Act to complete the privatization of the Federal helium reserve in a competitive market fashion that ensures stability in the helium markets while protecting the interests of American taxpayers, and for other purposes."

THE SCOURGE OF MINOR SEX TRAFFICKING

BIPARTISANSHIP

The SPEAKER pro tempore. Under the Speaker's announced policy of January 3, 2013, the gentleman from Texas (Mr. POE) is recognized for 60 minutes as the designee of the majority leader.

Mr. POE of Texas. Mr. Speaker, I want to thank Ms. SINEMA from the State of Arizona for her holding the last Special Order, bipartisan, to talk about this terrible plight that has happened to our veterans. Twenty-two veterans a day, Americans, commit suicide. So I thank the gentlewoman for bringing that to the attention of the House and to the American public. That's an issue that we will continue to work on in a bipartisan way to help our veterans.

I would like to, Mr. Speaker, at this time, yield to the gentlewoman from the great State of Florida (Ms. ROS-LEHTINEN).

Ms. ROS-LEHTINEN. Thank you so much to the great gentleman from the wonderful State of Texas. And I'm so glad that the gentleman brings up the word "bipartisan" to describe what we just witnessed, very heartfelt testimony.

But, Mr. Speaker, we have a lot of work to do right here in the House as well and with the Senate and with the President, because it's time for all parties to work together in a genuine, bipartisan, and adult manner to avoid a government shutdown. A shutdown is not some abstract exercise, as the gentleman knows. It has real consequences for our communities and our families.

The American people sent us to Washington to work together for our great Nation, and it is unacceptable for one side to refuse to negotiate.

□ 1700

Where's the President in all of this? The bully pulpit can just as equally be used for constructive leadership as it can be used for political showmanship.

Let us work together, get something done, and help America's vanishing middle class.

Mr. Speaker, it is just as important to remember that in addition to the constant legislative battles happening right here in Congress, life goes on outside of the Capitol. And I want to take just a few minutes today to recognize

two remarkable south Florida organizations that are holding events this weekend.

Tomorrow, Go Red for Women will be celebrating its 10th anniversary in south Florida. The Go Red for Women organization is an impressive force to be reckoned with. Many people don't know this, but heart disease is the number one killer of women. It is more deadly than all forms of cancer.

Fortunately, we have the strong women of Go Red taking the fight to heart disease. Mothers, daughters, sisters, and friends all are standing together and leading the charge and the charge that we need to educate, to advocate, and to raise awareness about heart disease.

I want to especially congratulate Jessica Cerda-Antomarchi, the Miami Heart Society director, as well as Gabrielle Finley-Haze, the 2013 chair, and all of the women of Go Red. With their continued strength and leadership, we will finally put an end to heart disease.

Finally, let me congratulate the Lupus Foundation of America's southeast Florida chapter. They will be holding this year's Walk to End Lupus Now in Miami this month. Despite approximately 1.5 million Americans suffering from lupus, including my stepdaughter, the lovely Katharine Lehtinen, we still do not know what causes lupus. It is a cruel and mysterious disease.

We know that almost 28,000 people are suffering from lupus in my south Florida community. While that disease cuts across racial, gender, and social lines, we do know that lupus disproportionately impacts women and ethnic minority populations.

So I'm extremely grateful for the outreach and the advocacy of the Lupus Foundation of America and especially its southeast Florida chapter. As cochair of the Congressional Lupus Caucus, I will keep up the fight against this terrible disease, and I extend my deepest gratitude to Amy Kelly-Yalden and everyone in the southeast Florida chapter for their continued incredible work

Let's continue to work together in a bipartisan way to avoid a government shutdown, and I thank the gentleman for yielding me the time.

Mr. POE of Texas. Reclaiming my time, I want to spend some time talking about what I think and believe has become a scourge—a scourge not only in America, but in other parts of the world

Several years ago, I had the opportunity to be in the Ukraine. I was there on some energy issues, and I came in contact with that scourge that I will talk about today.

The Ukraine, because of its location, because of its former Soviet connections, and because of its high poverty, has a problem that a lot of countries do—and that's human trafficking. I'm not talking about people going from one country to another legally or even illegally. I'm talking about people