

among other things, Congressman KENNEDY spoke of the importance of properly addressing the needs of veterans and servicemembers.

As a Nation, we will never be fully healthy, never fully productive, until we eliminate all barriers to good mental health care for all our citizens, and especially those who have put themselves in harm's way to serve our country.

This amendment requires the Secretary of Defense to develop a plan to reduce the likelihood that personnel in combat will develop post-traumatic stress disorder or other stress-related psychopathologies, what we might call psychological Kevlar.

Prevention, how nice. No, how necessary. It is what we do in the military. Successful generals win. Then they go to war.

This is what we must do to ensure that our soldiers are properly prepared, not just physically with the right Kevlar but, also, thanks to the knowledge developed through the peer-reviewed research called for in this amendment, with the proper psychological Kevlar. We must treat both physical and mental care of our troops the same.

I urge my colleagues to support this amendment.

I reserve the balance of my time.

Mr. SKELTON. Mr. Chairman, will the gentleman yield?

Mr. SESTAK. I yield to the gentleman from Missouri.

Mr. SKELTON. Mr. Chairman, I have examined this amendment. I think it is an excellent one, and I compliment you. It is certainly acceptable on our side.

Mr. KENNEDY. Mr. Chairman, I ask unanimous consent to claim the time in opposition, although I am not in opposition to the amendment.

The Acting CHAIRMAN. Without objection, the gentleman from Rhode Island is recognized for 5 minutes.

There was no objection.

Mr. KENNEDY. Mr. Chairman, I only asked for the opportunity to speak in opposition just to claim the time in opposition. This is my amendment, so I won't be speaking in opposition to it.

Of course, I do want to speak in favor of this, because clearly this is the leading cause of disability, I believe, and will be the leading cause of disability for this war. As we have seen our soldiers come back, more and more of them are reporting mental health as the leading cause of disability; and, of course, this has been underreported in so many instances.

Why? It has been underreported because of the stigma, Mr. Chairman. Continued in this country is the fact that our society continues to stigmatize the treatment of mental illness. So even our soldiers who have every right to feel that they have been stressed by the experience of having suffered through the trauma of war, even those that have been through this experience and have every right to seek

mental health treatment, even they feel stigmatized by having to need mental health treatment, and that is the reason why so many of them don't actually go and seek mental health treatment.

But in spite of the stigma, we still find that 35 percent of those returning from Iraq and Afghanistan have sought treatment for mental health services. This is an enormous number, and I think it points very much to the fact that this is a very enormous challenge for our country.

Mr. Chairman, we need to deal with this problem before we even have these soldiers returning from Iraq, and that is why we are looking to have the psychological Kevlar act adopted in this legislation.

I want to identify Kristen Henderson, who is a spouse of a member of our military who came to my office and said, why is it that we are waiting until our soldiers get back from Iraq until we deal with their post-traumatic stress disorder? Why don't we start helping them become resilient, and how come we don't start preparing them for the trauma of war before they even get into the trauma of war? We do so much to put them into boot camps to train them physically for war. Why don't we do more to put them together and train them mentally for war?

This is what this amendment says. It puts the Department of Defense in the position where they have to put together a program where our military men and women are put into a curriculum where they are better prepared to deal with the conflicts and the stresses of war before they actually see the trauma of combat.

Mr. Chairman, I think that this is something that we need to do, because we need to make sure that when our soldiers come back that they don't have that sense of stigma attached to seeking mental health services. And if they understand that in order for them to be good soldiers that they need to be of sound mind and sound body and that is part of their being part of a esprit de corps, then they will be more forthcoming in seeking help when they need it. That will mean they will be better soldiers in the long run.

Mr. Chairman, just a few years ago, I had the opportunity to go down to Fort Bragg and see our Green Berets. Mr. Chairman, they have psychiatrists available 24 hours, 7 days a week.

You might ask, why do the best and brightest in the military have that? The reason they do is because the military has figured out that if they have anything else on their mind bothering them, they can't do their job the way they are best trained to do their job. I think, Mr. Chairman, if it is good enough for the Green Berets, then why isn't it good enough for the rest of our Armed Forces?

That is what this psychological Kevlar bill puts in place. It says we need to protect the mind as well as the body of our soldiers before battle, and

we need to make sure that they are prepared for every eventuality when it comes to wartime.

I ask my colleagues to vote for this and destigmatize mental health and help the Department of Defense lift the veil of the stigma of mental illness and vote for the psychological Kevlar bill. For that reason, I will ask for a recorded vote on this amendment.

□ 1530

The Acting CHAIRMAN. The question is on the amendment offered by the gentleman from Pennsylvania (Mr. SESTAK).

The amendment was agreed to.

Mr. SKELTON. Mr. Chairman, I move that the Committee do now rise.

The motion was agreed to.

Accordingly, the Committee rose; and the Speaker pro tempore (Ms. HOOLEY) having assumed the chair, Mr. ROSS, Acting Chairman of the Committee of the Whole House on the state of the Union, reported that that Committee, having had under consideration the bill (H.R. 1538) to amend title 10, United States Code, to improve the management of medical care, personnel actions, and quality of life issues for members of the Armed Forces who are receiving medical care in an outpatient status, and for other purposes, had come to no resolution thereon.

PERMISSION TO OFFER AMENDMENTS OUT OF ORDER DURING CONSIDERATION OF H.R. 1538, WOUNDED WARRIOR ASSISTANCE ACT OF 2007

Mr. SKELTON. Madam Speaker, I ask unanimous consent that during further consideration of H.R. 1538 in the Committee of the Whole pursuant to House Resolution 274, any of the amendments printed in House Report 110-78 may be considered at any time.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Missouri?

There was no objection.

WOUNDED WARRIOR ASSISTANCE ACT OF 2007

The SPEAKER pro tempore. Pursuant to House Resolution 274 and rule XVIII, the Chair declares the House in the Committee of the Whole House on the state of the Union for the further consideration of the bill, H.R. 1538.

□ 1532

IN THE COMMITTEE OF THE WHOLE

Accordingly, the House resolved itself into the Committee of the Whole House on the state of the Union for the further consideration of the bill (H.R. 1538) to amend title 10, United States Code, to improve the management of medical care, personnel actions, and quality of life issues for members of the Armed Forces who are receiving medical care in an outpatient status, and for other purposes, with Mr. ROSS (Acting Chairman) in the chair.