

These are some of the commonsense ideas Americans are looking for on health care reform.

Health care reform will not be easy. But it does not have to bury our children and grandchildren deeper in debt when so far this year we're already spending an average of \$500 million a day in interest on the national debt. The proposal I have mentioned should be easy for everyone to agree on. They would lead to measurable results. And they would not force anyone to lose the care they have, see cuts to Medicare, or foist higher taxes on small businesses.

Americans are concerned about the cost of reform. We should work hard to assure them that we are too.

I yield the floor and suggest the absence of a quorum.

The ACTING PRESIDENT pro tempore. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

Mrs. SHAHEEN. I ask unanimous consent that the order for the quorum call be rescinded.

The ACTING PRESIDENT pro tempore. Without objection, it is so ordered.

RESERVATION OF LEADER TIME

The ACTING PRESIDENT pro tempore. Under the previous order, the leadership time is reserved.

MORNING BUSINESS

The ACTING PRESIDENT pro tempore. Under the previous order, there will be a period of morning business for 1 hour, with Senators permitted to speak for up to 10 minutes each, with the time equally divided between the two leaders or their designees, with the majority controlling the first half and the Republicans controlling the final half.

The Senator from New Hampshire.

SUICIDE PREVENTION

Mrs. SHAHEEN. Mr. President, I rise today to speak about an amendment that I have filed to the National Defense Authorization Act of 2010. This amendment is to ensure that comprehensive suicide prevention services will be offered to our National Guard and Reservists as part of the Yellow Ribbon Reintegration Program.

Sadly, too often we hear about the death of an armed services member from an unnecessary and preventable suicide. Suicide has become an increasingly severe problem across the Armed Forces. For the first time in history, the number of battlefield suicides in early 2009 was higher than the number of combat deaths. I am pleased that the Defense Authorization Act we are considering supports increased efforts to prevent suicide among active duty personnel. However, there is currently no requirement that all National Guard members and communities have access

to a comprehensive suicide prevention program.

Even in the wake of suicides, Guard members are often called back to active duty and redeployed into dangerous and intense combat situations. Suicide devastates not only military families but also military communities and fellow soldiers. Currently, while active duty soldiers receive suicide prevention training programs, there are no established programs to train National Guardsmen and Reservists to prevent suicides when they return to their communities from deployment. And the families of Guardsmen and Reservists do not receive training under Yellow Ribbon to recognize the warning signs of suicide.

In Afghanistan and Iraq, we increasingly rely on our National Guard and Reservists. We see that first-hand in New Hampshire: Recently, more than 1,100 members of the 197th Fires Brigade, which includes units from Berlin, Franklin and Manchester, NH, received notice that they can expect to be deployed to the Middle East. Fortunately, when these soldiers return home from battle, they and their communities will have comprehensive suicide prevention training available to them. That is thanks to the initiative of New Hampshire's National Guard's pilot Program, the Connect Program, that has gone beyond the Yellow Ribbon Program.

To date, the Connect Program, which is administered by the National Alliance on Mental Illness in New Hampshire, has provided hundreds of officers, Chaplains and other Guardsmen with an interactive, community-based suicide prevention training. Through Connect, a Guard member who returns home from duty learns how to recognize the warning signs of suicidal behavior, how to respond to someone who shows those signs, and where to point that person to the services he or she needs.

But the program doesn't end with the Guard member. It also provides this training to the Guard member's community. The Guard member's commanding officers are trained to recognize suicidal tendencies in the soldiers who they command. Guard families, who often have no experience with mental illness and suicide, are also provided with that training. This is especially critical because, unlike active duty personnel, Guard members don't see their fellow soldiers every day when they come back from being deployed. Instead, they go back to their families and civilian communities, which simply aren't capable of recognizing the warning signs of suicidal behavior. The Connect Program fills a crucial gap because it uses interactive training to emphasize that mental health is a community responsibility.

The Connect Program also ensures that community members know how to cope with and respond to a suicide in the Guard community. People who know someone who has died by suicide

are statistically at increased risk of taking their own life. The program helps communities reduce that risk and promote healing in response to a suicide, which is an essential element of any suicide prevention program. Thanks to their effective work in response to suicides, Connect has been designated as a National Best Practice Program in Suicide Prevention and its work with the National Guard was recently recognized as a model program by the Substance Abuse Mental Health Services Administration in the Department of Health and Human Services, HHS.

But not all State National Guards offer such comprehensive suicide prevention programs after deployment. In the Army National Guard alone, there have been 29 confirmed suicides this year among Army Guardsmen who were not on active duty. I rise today because we need to extend these critical services across the country before even more soldiers fall through the cracks.

The Yellow Ribbon Reintegration Program has been a tremendously important and successful effort to transition our Guard members back to civilian life. However, these Guard and Reservist suicides have made clear that Yellow Ribbon is simply incomplete without an established, nationally implemented program that trains Guard members, communities and families to recognize the warning signs of suicide after deployment and to cope with the loss of a loved one.

Fortunately for us in New Hampshire, our National Guard identified that need early and went above and beyond Yellow Ribbon, creating a pilot program to ensure that the New Hampshire Guard community has the tools they need to prevent suicides when soldiers return from battle. Studies of the Connect Program have shown that people who receive this training feel particularly well-prepared to not only recognize the warning signs of suicide, but also to respond to suicides in their communities.

But others across the country may not be so fortunate. That is why this amendment would require the Office for Reintegration Programs to establish a program to provide these members, their families, and their communities with training in suicide prevention and community healing in response to suicide. The principals of the program would be modeled on the nationally recognized pilot program that has worked so well in New Hampshire.

I am pleased that the amendment is supported by the National Guard Association of the United States. Please join us in making these critical services a standard part of our outreach to National Guard members, families, and communities across the country.

Mr. President, I ask unanimous consent that a copy of the amendment be printed in the RECORD at this point.

There being no objection, the text of the bill was ordered to be printed in the RECORD, as follows: