

Public Law 110–110
110th Congress

An Act

To amend title 38, United States Code, to direct the Secretary of Veterans Affairs to develop and implement a comprehensive program designed to reduce the incidence of suicide among veterans.

Nov. 5, 2007
[H.R. 327]

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

Joshua Omvig
Veterans Suicide
Prevention Act.
38 USC 101 note.

SECTION 1. SHORT TITLE.

This Act may be cited as the “Joshua Omvig Veterans Suicide Prevention Act”.

SEC. 2. SENSE OF CONGRESS.

38 USC 1720F
note.

It is the sense of Congress that—

(1) suicide among veterans suffering from post-traumatic stress disorder (in this section referred to as “PTSD”) is a serious problem; and

(2) the Secretary of Veterans Affairs should take into consideration the special needs of veterans suffering from PTSD and the special needs of elderly veterans who are at high risk for depression and experience high rates of suicide in developing and implementing the comprehensive program under this Act.

SEC. 3. COMPREHENSIVE PROGRAM FOR SUICIDE PREVENTION AMONG VETERANS.

(a) IN GENERAL.—

(1) COMPREHENSIVE PROGRAM FOR SUICIDE PREVENTION AMONG VETERANS.—Chapter 17 of title 38, United States Code, is amended by adding at the end the following new section:

“§ 1720F. Comprehensive program for suicide prevention among veterans

“(a) ESTABLISHMENT.—The Secretary shall develop and carry out a comprehensive program designed to reduce the incidence of suicide among veterans incorporating the components described in this section.

“(b) STAFF EDUCATION.—In carrying out the comprehensive program under this section, the Secretary shall provide for mandatory training for appropriate staff and contractors (including all medical personnel) of the Department who interact with veterans. This training shall cover information appropriate to the duties being performed by such staff and contractors. The training shall include information on—

“(1) recognizing risk factors for suicide;

“(2) proper protocols for responding to crisis situations involving veterans who may be at high risk for suicide; and
“(3) best practices for suicide prevention.

“(c) HEALTH ASSESSMENTS OF VETERANS.—In carrying out the comprehensive program, the Secretary shall direct that medical staff offer mental health in their overall health assessment when veterans seek medical care at a Department medical facility (including a center established under section 1712A of this title) and make referrals, at the request of the veteran concerned, to appropriate counseling and treatment programs for veterans who show signs or symptoms of mental health problems.

“(d) DESIGNATION OF SUICIDE PREVENTION COUNSELORS.—In carrying out the comprehensive program, the Secretary shall designate a suicide prevention counselor at each Department medical facility other than centers established under section 1712A of this title. Each counselor shall work with local emergency rooms, police departments, mental health organizations, and veterans service organizations to engage in outreach to veterans and improve the coordination of mental health care to veterans.

“(e) BEST PRACTICES RESEARCH.—In carrying out the comprehensive program, the Secretary shall provide for research on best practices for suicide prevention among veterans. Research shall be conducted under this subsection in consultation with the heads of the following entities:

“(1) The Department of Health and Human Services.

“(2) The National Institute of Mental Health.

“(3) The Substance Abuse and Mental Health Services Administration.

“(4) The Centers for Disease Control and Prevention.

“(f) SEXUAL TRAUMA RESEARCH.—In carrying out the comprehensive program, the Secretary shall provide for research on mental health care for veterans who have experienced sexual trauma while in military service. The research design shall include consideration of veterans of a reserve component.

“(g) 24-HOUR MENTAL HEALTH CARE.—In carrying out the comprehensive program, the Secretary shall provide for mental health care availability to veterans on a 24-hour basis.

“(h) HOTLINE.—In carrying out the comprehensive program, the Secretary may provide for a toll-free hotline for veterans to be staffed by appropriately trained mental health personnel and available at all times.

“(i) OUTREACH AND EDUCATION FOR VETERANS AND FAMILIES.—In carrying out the comprehensive program, the Secretary shall provide for outreach to and education for veterans and the families of veterans, with special emphasis on providing information to veterans of Operation Iraqi Freedom and Operation Enduring Freedom and the families of such veterans. Education to promote mental health shall include information designed to—

“(1) remove the stigma associated with mental illness;

“(2) encourage veterans to seek treatment and assistance for mental illness;

“(3) promote skills for coping with mental illness; and

“(4) help families of veterans with—

“(A) understanding issues arising from the readjustment of veterans to civilian life;

“(B) identifying signs and symptoms of mental illness;

and

“(C) encouraging veterans to seek assistance for mental illness.

“(j) PEER SUPPORT COUNSELING PROGRAM.—(1) In carrying out the comprehensive program, the Secretary may establish and carry out a peer support counseling program, under which veterans shall be permitted to volunteer as peer counselors—

“(A) to assist other veterans with issues related to mental health and readjustment; and

“(B) to conduct outreach to veterans and the families of veterans.

“(2) In carrying out the peer support counseling program under this subsection, the Secretary shall provide adequate training for peer counselors.

“(k) OTHER COMPONENTS.—In carrying out the comprehensive program, the Secretary may provide for other actions to reduce the incidence of suicide among veterans that the Secretary considers appropriate.”

(2) CLERICAL AMENDMENT.—The table of sections at the beginning of such chapter is amended by adding at the end the following new item:

“1720F. Comprehensive program for suicide prevention among veterans.”.

(b) REPORT TO CONGRESS.—

(1) REPORT REQUIRED.—Not later than 90 days after the date of the enactment of this Act, the Secretary of Veterans Affairs shall submit to Congress a report on the comprehensive program under section 1720F of title 38, United States Code, as added by subsection (a).

(2) CONTENTS OF REPORT.—The report shall contain the following:

(A) Information on the status of the implementation of such program.

(B) Information on the time line and costs for complete implementation of the program within two years.

(C) A plan for additional programs and activities designed to reduce the occurrence of suicide among veterans.

(D) Recommendations for further legislation or administrative action that the Secretary considers appropriate to improve suicide prevention programs within the Department of Veterans Affairs.

Approved November 5, 2007.

LEGISLATIVE HISTORY—H.R. 327 (S. 479):

HOUSE REPORTS: No. 110–55 (Comm. on Veterans' Affairs).

SENATE REPORTS: No. 110–132 accompanying S. 479 (Comm. on Veterans' Affairs).

CONGRESSIONAL RECORD, Vol. 153 (2007):

Mar. 21, considered and passed House.

Sept. 27, considered and passed Senate, amended.

Oct. 23, House concurred in Senate amendment.