

Sec.

SUBCHAPTER III—GENERAL PROVISIONS  
RESPECTING GRANT PROGRAMS

## PART A—STATE MENTAL HEALTH SERVICE PROGRAMS

9451, 9452. Repealed.

## PART B—APPLICATIONS AND RELATED PROVISIONS

9461 to 9465. Repealed.

## PART C—PERFORMANCE

9471 to 9473. Repealed.

## PART D—ENFORCEMENT

9481. Repealed.

## PART E—MISCELLANEOUS

9491 to 9493. Repealed.

SUBCHAPTER IV—MENTAL HEALTH RIGHTS AND  
ADVOCACY

9501. Bill of Rights.

9502. Repealed.

SUBCHAPTER V—SEX OFFENSE PREVENTION  
AND CONTROL9511. Grants for sex offense prevention and control.  
9512. Repealed.

## SUBCHAPTER VI—MISCELLANEOUS

9521. Repealed.

9522. Report on shelter and basic living needs of  
chronically mentally ill individuals.

9523. Repealed.

**§ 9401. Congressional statement of findings**

The Congress finds—

(1) despite the significant progress that has been made in making community mental health services available and in improving residential mental health facilities since the original community mental health centers legislation was enacted in 1963, unserved and underserved populations remain and there are certain groups in the population, such as chronically mentally ill individuals, children and youth, elderly individuals, racial and ethnic minorities, women, poor persons, and persons in rural areas, which often lack access to adequate private and public mental health services and support services;

(2) the process of transferring or diverting chronically mentally ill individuals from unwarranted or inappropriate institutionalized settings to their home communities has frequently not been accompanied by a process of providing those individuals with the mental health and support services they need in community-based settings;

(3) the shift in emphasis from institutional care to community-based care has not always been accompanied by a process of affording training, retraining, and job placement for employees affected by institutional closure and conversion;

(4) the delivery of mental health and support services is typically uncoordinated within and among local, State, and Federal entities;

(5) mentally ill persons are often inadequately served by (A) programs of the Department of Health and Human Services such as medicare, medicaid, supplemental security income, and social services, and (B) programs

of the Department of Housing and Urban Development, the Department of Labor, and other Federal agencies;

(6) health care systems often lack general health care personnel with adequate mental health care training and often lack mental health care personnel and consequently many individuals with some level of mental disorder do not receive appropriate mental health care;

(7) present knowledge of methods to prevent mental illness through discovery and elimination of its causes and through early detection and treatment is too limited;

(8) a comprehensive and coordinated array of appropriate private and public mental health and support services for all people in need within specific geographic areas, based upon a cooperative local-State-Federal partnership, remains the most effective and humane way to provide a majority of mentally ill individuals with mental health care and needed support; and

(9) because of the rising demand for mental health services and the wide disparity in the distribution of psychiatrists, clinical psychologists, social workers, and psychiatric nurses, there is a shortage in the medical specialty of psychiatry and there are also shortages among the other health personnel who provide mental health services.

(Pub. L. 96-398, § 2, Oct. 7, 1980, 94 Stat. 1565.)

## SHORT TITLE

Pub. L. 96-398, § 1, Oct. 7, 1980, 94 Stat. 1564, provided that: "This Act [enacting this chapter, amending sections 210, 225a, 229b, 242a, 246, 289k-1, 300l-2, 300m-2, 1396b, 2689a to 2689c, 2689e, 2689g, and 2689h of this title, repealing section 2689q of this title, and enacting provisions set out as notes under section 242a, 246, 289k-1, and 2689b of this title] may be cited as the 'Mental Health Systems Act'."

## SUBCHAPTER I—GENERAL PROVISIONS

## AMENDMENTS

1981—Pub. L. 97-35, title IX, § 902(e)(1), (f)(1)(A), Aug. 13, 1981, 95 Stat. 560, struck out heading "Part A—Definitions" before section 9411 and heading "Part B—State Administrative Responsibilities" before section 9421.

**§ 9411. Repealed. Pub. L. 97-35, title IX, § 902(e)(1), Aug. 13, 1981, 95 Stat. 560**

Section, Pub. L. 96-398, title I, § 101, Oct. 7, 1980, 94 Stat. 1566, set forth general provisions respecting community mental health centers.

## EFFECTIVE DATE OF REPEAL

Repeal effective Oct. 1, 1981, see section 902(h) of Pub. L. 97-35, set out as an Effective Date of 1981 Amendment note under section 238l of this title.

**§ 9412. Definitions**

For purposes of this chapter:

(1) The term "Secretary" means the Secretary of Health and Human Services.

(2) The term "State" includes (in addition to the fifty States) the District of Columbia, the Commonwealth of Puerto Rico, the Virgin Islands, Guam, American Samoa, the Trust Territory of the Pacific Islands, and the Northern Mariana Islands.

(3) The term "nonprofit", as applied to any entity, means an entity which is owned and