

Former part J “Biomedical Ethics”, consisting of section 275, was repealed by Pub. L. 103-43, title I, §121(a), June 10, 1993, 107 Stat. 133.

1990—Pub. L. 101-616, title I, §101(a)(1), Nov. 16, 1990, 104 Stat. 3279, redesignated part I “Biomedical Ethics” as J. Former part J “Injury Control” redesignated K.

§ 280b. Research

(a) The Secretary, through the Director of the Centers for Disease Control and Prevention, shall—

(1) conduct, and give assistance to public and nonprofit private entities, scientific institutions, and individuals engaged in the conduct of, research relating to the causes, mechanisms, prevention, diagnosis, treatment of injuries, and rehabilitation from injuries;

(2) make grants to, or enter into cooperative agreements or contracts with, public and nonprofit private entities (including academic institutions, hospitals, and laboratories) and individuals for the conduct of such research; and

(3) make grants to, or enter into cooperative agreements or contracts with, academic institutions for the purpose of providing training on the causes, mechanisms, prevention, diagnosis, treatment of injuries, and rehabilitation from injuries.

(b) The Secretary, through the Director of the Centers for Disease Control and Prevention, shall collect and disseminate, through publications and other appropriate means, information concerning the practical applications of research conducted or assisted under subsection (a) of this section. In carrying out the preceding sentence, the Secretary shall disseminate such information to the public, including through elementary and secondary schools.

(July 1, 1944, ch. 373, title III, §391, as added Pub. L. 99-649, §3, Nov. 10, 1986, 100 Stat. 3633; amended Pub. L. 101-558, §2(a), Nov. 15, 1990, 104 Stat. 2772; Pub. L. 102-531, title III, §312(d)(3), Oct. 27, 1992, 106 Stat. 3504; Pub. L. 103-183, title II, §203(b)(2), Dec. 14, 1993, 107 Stat. 2232.)

PRIOR PROVISIONS

A prior section 280b, act July 1, 1944, ch. 373, title III, §390, as added Oct. 22, 1965, Pub. L. 89-291, §2, 79 Stat. 1059; amended Mar. 13, 1970, Pub. L. 91-212, §§4(b), 5(b), 6(b), 84 Stat. 64, 65; July 23, 1974, Pub. L. 93-353, title II, §§201(a), (b), 202(a), 88 Stat. 371, 372; Aug. 1, 1977, Pub. L. 95-83, title II, §202, 91 Stat. 386; Nov. 9, 1978, Pub. L. 95-622, title II, §211, 92 Stat. 3420; Aug. 13, 1981, Pub. L. 97-35, title IX, §925(a), 95 Stat. 569, set forth findings and declaration of policy and authorized appropriations with regard to assistance to medical libraries, prior to repeal by Pub. L. 99-158, §3(b), Nov. 20, 1985, 99 Stat. 879.

A prior section 391 of act July 1, 1944, ch. 373, title III, as added Oct. 22, 1965, Pub. L. 89-291, §2, 79 Stat. 1059; amended Mar. 13, 1970, Pub. L. 91-212, §10(b)(3), 84 Stat. 66; July 23, 1974, Pub. L. 93-353, title II, §202(b), 88 Stat. 372, which defined “sciences related to health”, “National Medical Libraries Assistance Advisory Board”, “Board”, and “medical library”, was classified to section 280b-1 of this title, prior to repeal by Pub. L. 99-158, §3(b), Nov. 20, 1985, 99 Stat. 879.

AMENDMENTS

1993—Subsec. (b). Pub. L. 103-183 inserted at end “In carrying out the preceding sentence, the Secretary shall disseminate such information to the public, including through elementary and secondary schools.”

1992—Pub. L. 102-531 substituted “Centers for Disease Control and Prevention” for “Centers for Disease Control” in subssecs. (a) and (b).

1990—Subsec. (a)(2). Pub. L. 101-558, §2(a)(1), inserted “, or enter into cooperative agreements or contracts with.” after “grants to”.

Subsec. (a)(3). Pub. L. 101-558, §2(a)(2), added par. (3).

FINDINGS AND PURPOSES

Pub. L. 99-649, §2, Nov. 10, 1986, 100 Stat. 3633, provided that:

“(a) The Congress finds and declares that:

“(1) Injury is one of the principal public health problems in America, and causes over 140,000 deaths per year.

“(2) Injury rates are particularly high for children and the elderly.

“(3) Injury causes 50 percent of all deaths for children over the age of one year and two-thirds of all deaths for children over the age of 15 years, and is the leading cause of death for individuals under the age of 44 years. Individuals over the age of 65 years have the highest fatality rates for many injuries.

“(4) Injury control has not been given high priority in the United States, and the research being conducted on injury control and the number of personnel involved in injury control activities are not adequate.

“(b) The purposes of this Act [enacting this part] are—

“(1) to promote research into the causes, diagnosis, treatment, prevention, and control of injuries and rehabilitation from injuries;

“(2) to promote cooperation between specialists in fields involved in injury research; and

“(3) to promote coordination between Federal, State, and local governments and public and private entities in order to achieve a reduction in deaths from injuries.”

§ 280b-1. Prevention and control activities

(a) The Secretary, through the Director of the Centers for Disease Control and Prevention, shall—

(1) assist States and political subdivisions of States in activities for the prevention and control of injuries; and

(2) encourage regional activities between States designed to reduce injury rates.

(b) The Secretary, through the Director of the Centers for Disease Control and Prevention, may—

(1) enter into agreements between the Service and public and private community health agencies which provide for cooperative planning of activities to deal with problems relating to the prevention and control of injuries;

(2) work in cooperation with other Federal agencies, and with public and nonprofit private entities, to promote activities regarding the prevention and control of injuries; and

(3) make grants to States and, after consultation with State health agencies, to other public or nonprofit private entities for the purpose of carrying out demonstration projects for the prevention and control of injuries at sites that are not subject to the Occupational Safety and Health Act of 1970 [29 U.S.C. 651 et seq.], including homes, elementary and secondary schools, and public buildings.

(July 1, 1944, ch. 373, title III, §392, as added Pub. L. 99-649, §3, Nov. 10, 1986, 100 Stat. 3634; amended Pub. L. 101-558, §2(b), Nov. 15, 1990, 104 Stat. 2772; Pub. L. 102-531, title III, §§301, 312(d)(4), Oct. 27, 1992, 106 Stat. 3482, 3504; Pub. L. 103-183, title II, §203(a)(2), (b)(1), Dec. 14, 1993, 107 Stat. 2232.)

REFERENCES IN TEXT

The Occupational Safety and Health Act of 1970, referred to in subsec. (b)(3), is Pub. L. 91-596, Dec. 29, 1970, 84 Stat. 1590, as amended, which is classified principally to chapter 15 (§651 et seq.) of Title 29, Labor. For complete classification of this Act to the Code, see Short Title note set out under section 651 of Title 29 and Tables.

PRIOR PROVISIONS

A prior section 280b-1, act July 1, 1944, ch. 373, title III, §391, as added Oct. 22, 1965, Pub. L. 89-291, §2, 79 Stat. 1059; amended Mar. 13, 1970, Pub. L. 91-212, §10(b)(3), 84 Stat. 66; July 23, 1974, Pub. L. 93-353, title II, §202(b), 88 Stat. 372, defined "sciences related to health", "National Medical Libraries Assistance Advisory Board", "Board", and "medical library", prior to repeal by Pub. L. 99-158, §3(b), Nov. 20, 1985, 99 Stat. 879.

A prior section 392 of act July 1, 1944, ch. 373, title III, as added Oct. 22, 1965, Pub. L. 89-291, §2, 79 Stat. 1060; amended Mar. 13, 1970, Pub. L. 91-212, §10(b)(4), (d)(2)(A), 84 Stat. 66, 67; July 23, 1974, Pub. L. 93-353, title II, §202(c), 88 Stat. 372, which related to composition, functions, etc., of the National Medical Libraries Assistance Advisory Board, was classified to section 280b-2 of this title, prior to repeal by Pub. L. 99-158, §3(b), Nov. 20, 1985, 99 Stat. 879.

AMENDMENTS

1993—Pub. L. 103-183, §203(a)(2)(A), substituted "Prevention and control activities" for "Control activities" in section catchline.

Subsec. (a)(1). Pub. L. 103-183, §203(a)(2)(B), inserted "and control" after "prevention".

Subsec. (b)(1). Pub. L. 103-183, §203(a)(2)(C), substituted "the prevention and control of injuries" for "injuries and injury control".

Subsec. (b)(2). Pub. L. 103-183, §203(b)(1), substituted "to promote activities regarding the prevention and control of injuries; and" for "to promote injury control. In carrying out the preceding sentence, the Secretary shall disseminate such information to the public, including through elementary and secondary schools; and".

1992—Pub. L. 102-531, §312(d)(4), substituted "Centers for Disease Control and Prevention" for "Centers for Disease Control" in introductory provisions of subsecs. (a) and (b).

Subsec. (b)(1). Pub. L. 102-531, §301(1), struck out "and" after semicolon at end.

Subsec. (b)(2). Pub. L. 102-531, §301(2), inserted sentence requiring Secretary to disseminate information on injury control to the public, including through elementary and secondary schools and substituted "; and" for period at end.

Subsec. (b)(3). Pub. L. 102-531, §301(3), added par. (3).

1990—Subsec. (b)(2). Pub. L. 101-558 amended par. (2) generally. Prior to amendment, par. (2) read as follows: "work in cooperation with Federal, State, and local agencies to promote injury control."

§ 280b-1a. Interpersonal violence within families and among acquaintances

(a) With respect to activities that are authorized in sections 280b and 280b-1 of this title, the Secretary, acting through the Director of the Centers for Disease Control and Prevention, shall carry out such activities with respect to interpersonal violence within families and among acquaintances. Activities authorized in the preceding sentence include the following:

(1) Collecting data relating to the incidence of such violence.

(2) Making grants to public and nonprofit private entities for the evaluation of programs whose purpose is to prevent such violence, in-

cluding the evaluation of demonstration projects under paragraph (6).

(3) Making grants to public and nonprofit private entities for the conduct of research on identifying effective strategies for preventing such violence.

(4) Providing to the public information and education on such violence, including information and education to increase awareness of the public health consequences of such violence.

(5) Training health care providers as follows:

(A) To identify individuals whose medical conditions or statements indicate that the individuals are victims of such violence.

(B) To routinely determine, in examining patients, whether the medical conditions or statements of the patients so indicate.

(C) To refer individuals so identified to entities that provide services regarding such violence, including referrals for counseling, housing, legal services, and services of community organizations.

(6) Making grants to public and nonprofit private entities for demonstration projects with respect to such violence, including with respect to prevention.

(b) For purposes of this part, the term "interpersonal violence within families and among acquaintances" includes behavior commonly referred to as domestic violence, sexual assault, spousal abuse, woman battering, partner abuse, elder abuse, and acquaintance rape.

(July 1, 1944, ch. 373, title III, §393, as added Pub. L. 103-183, title II, §201(2), Dec. 14, 1993, 107 Stat. 2231.)

PRIOR PROVISIONS

A prior section 393 of act July 1, 1944, was renumbered section 394 and is classified to section 280b-2 of this title.

Another prior section 393 of act July 1, 1944, was renumbered section 394 and was classified to section 280b-4 of this title.

§ 280b-1b. Use of allotments for rape prevention education

(a) Permitted use

The Secretary, acting through the National Center for Injury Prevention and Control at the Centers for Disease Control and Prevention, shall award targeted grants to States to be used for rape prevention and education programs conducted by rape crisis centers, State, territorial or tribal sexual assault coalitions, and other public and private nonprofit entities for—

(1) educational seminars;

(2) the operation of hotlines;

(3) training programs for professionals;

(4) the preparation of informational material;

(5) education and training programs for students and campus personnel designed to reduce the incidence of sexual assault at colleges and universities;

(6) education to increase awareness about drugs and alcohol used to facilitate rapes or sexual assaults; and

(7) other efforts to increase awareness of the facts about, or to help prevent, sexual assault,