

(10) develop accident prevention and safety education programs;

(11) develop activities for the prevention and control of communicable diseases; and

(12) develop community and environmental health education programs.

(c) Assistance

The Secretary shall provide technical assistance to Indian tribes in the development of health education plans, and the dissemination of health education materials and information on existing health programs and resources.

(d) Criteria for review and approval of applications

The Secretary shall establish criteria for the review and approval of applications for grants made pursuant to this section.

(e) Report of recipient

Recipients of grants under this section shall submit to the Secretary an annual report on activities undertaken with funds provided under this section. Such reports shall include a statement of—

(1) the number of preschools, elementary schools, and secondary schools served;

(2) the number of students served;

(3) any new curricula established with funds provided under this section;

(4) the number of teachers trained in the health curricula; and

(5) the involvement of parents, members of the community, and community health workers in programs established with funds provided under this section.

(f) Program development

(1) The Secretary of the Interior, acting through the Bureau of Indian Affairs and in cooperation with the Secretary, shall develop a comprehensive school health education program for children from preschool through grade 12 in schools operated by the Bureau of Indian Affairs.

(2) Such program shall include—

(A) school programs on nutrition education, personal health, and fitness;

(B) mental health wellness programs;

(C) chronic disease prevention programs;

(D) substance abuse prevention programs;

(E) accident prevention and safety education programs; and

(F) activities for the prevention and control of communicable diseases.

(3) The Secretary of the Interior shall—

(A) provide training to teachers in comprehensive school health education curricula;

(B) ensure the integration and coordination of school-based programs with existing services and health programs available in the community; and

(C) encourage healthy, tobacco-free school environments.

(g) Authorization of appropriations

There are authorized to be appropriated to carry out this section \$15,000,000 for fiscal year 1993 and such sums as may be necessary for each of the fiscal years 1994, 1995, 1996, 1997, 1998, 1999, and 2000.

(Pub. L. 94-437, title II, §215, as added Pub. L. 102-573, title II, §211, Oct. 29, 1992, 106 Stat. 4553.)

§ 1621o. Indian youth grant program

(a) Grants

The Secretary, acting through the Service, is authorized to make grants to Indian tribes, tribal organizations, and urban Indian organizations for innovative mental and physical disease prevention and health promotion and treatment programs for Indian preadolescent and adolescent youths.

(b) Use of funds

(1) Funds made available under this section may be used to—

(A) develop prevention and treatment programs for Indian youth which promote mental and physical health and incorporate cultural values, community and family involvement, and traditional healers; and

(B) develop and provide community training and education.

(2) Funds made available under this section may not be used to provide services described in section 1665g(c) of this title.

(c) Models for delivery of comprehensive health care services

The Secretary shall—

(1) disseminate to Indian tribes information regarding models for the delivery of comprehensive health care services to Indian and urban Indian adolescents;

(2) encourage the implementation of such models; and

(3) at the request of an Indian tribe, provide technical assistance in the implementation of such models.

(d) Criteria for review and approval of applications

The Secretary shall establish criteria for the review and approval of applications under this section.

(Pub. L. 94-437, title II, §216, as added Pub. L. 102-573, title II, §212, Oct. 29, 1992, 106 Stat. 4554; amended Pub. L. 111-148, title X, §10221(a), Mar. 23, 2010, 124 Stat. 935.)

CODIFICATION

Amendment by Pub. L. 111-148 is based on sections 101(b)(4) and 131 of title I of S. 1790, One Hundred Eleventh Congress, as reported by the Committee on Indian Affairs of the Senate in Dec. 2009, which were enacted into law by section 10221(a) of Pub. L. 111-148.

AMENDMENTS

2010—Subsec. (b)(2). Pub. L. 111-148 substituted “section 1665g(c) of this title” for “section 1621h(m) of this title”.

Subsec. (e). Pub. L. 111-148 struck out subsec. (e) which authorized appropriations for fiscal years 1993 to 2000.

§ 1621p. American Indians Into Psychology Program

(a) Grants authorized

The Secretary, acting through the Service, shall make grants of not more than \$300,000 to each of 9 colleges and universities for the pur-

pose of developing and maintaining Indian psychology career recruitment programs as a means of encouraging Indians to enter the behavioral health field. These programs shall be located at various locations throughout the country to maximize their availability to Indian students and new programs shall be established in different locations from time to time.

(b) Quentin N. Burdick program grant

The Secretary shall provide a grant authorized under subsection (a) to develop and maintain a program at the University of North Dakota to be known as the “Quentin N. Burdick American Indians Into Psychology Program”. Such program shall, to the maximum extent feasible, coordinate with the Quentin N. Burdick Indian health programs authorized under section 1616j(b)¹ of this title, the Quentin N. Burdick American Indians Into Nursing Program authorized under section 1616h(e)¹ of this title, and existing university research and communications networks.

(c) Regulations

The Secretary shall issue regulations pursuant to this chapter for the competitive awarding of grants provided under this section.

(d) Conditions of grant

Applicants under this section shall agree to provide a program which, at a minimum—

- (1) provides outreach and recruitment for health professions to Indian communities including elementary, secondary, and accredited and accessible community colleges that will be served by the program;
- (2) incorporates a program advisory board comprised of representatives from the tribes and communities that will be served by the program;
- (3) provides summer enrichment programs to expose Indian students to the various fields of psychology through research, clinical, and experimental activities;
- (4) provides stipends to undergraduate and graduate students to pursue a career in psychology;
- (5) develops affiliation agreements with tribal colleges and universities, the Service, university affiliated programs, and other appropriate accredited and accessible entities to enhance the education of Indian students;
- (6) to the maximum extent feasible, uses existing university tutoring, counseling, and student support services; and
- (7) to the maximum extent feasible, employs qualified Indians in the program.

(e) Active duty service requirement

The active duty service obligation prescribed under section 254m of title 42 shall be met by each graduate who receives a stipend described in subsection (d)(4) that is funded under this section. Such obligation shall be met by service—

- (1) in an Indian health program;
- (2) in a program assisted under subchapter IV; or
- (3) in the private practice of psychology if, as determined by the Secretary, in accordance

with guidelines promulgated by the Secretary, such practice is situated in a physician or other health professional shortage area and addresses the health care needs of a substantial number of Indians.

(f) Authorization of appropriations

There is authorized to be appropriated to carry out this section \$2,700,000 for fiscal year 2010 and each fiscal year thereafter.

(Pub. L. 94-437, title II, §217, as added Pub. L. 102-573, title II, §213, Oct. 29, 1992, 106 Stat. 4555; amended Pub. L. 111-148, title X, §10221(a), Mar. 23, 2010, 124 Stat. 935.)

REFERENCES IN TEXT

Section 1616j(b) of this title, referred to in subsec. (b), does not authorize the Quentin N. Burdick Indian health programs. For provisions authorizing the Quentin N. Burdick Indian Health Programs, see section 1616g(b) of this title.

Section 1616h(e) of this title, referred to in subsec. (b), does not authorize the Quentin N. Burdick American Indians Into Nursing Program. For provisions authorizing the Quentin N. Burdick American Indians Into Nursing Program, see section 1616e(e) of this title.

This chapter, referred to in subsec. (c), was in the original “this Act”, meaning Pub. L. 94-437, Sept. 30, 1976, 90 Stat. 1400, known as the Indian Health Care Improvement Act, which is classified principally to this chapter. For complete classification of this Act to the Code, see Short Title note set out under section 1601 of this title and Tables.

CODIFICATION

Amendment by Pub. L. 111-148 is based on section 132 of title I of S. 1790, One Hundred Eleventh Congress, as reported by the Committee on Indian Affairs of the Senate in Dec. 2009, which was enacted into law by section 10221(a) of Pub. L. 111-148.

AMENDMENTS

2010—Pub. L. 111-148 amended section generally. Prior to amendment, section authorized Secretary to provide grants to at least 3 colleges and universities for purpose of developing and maintaining American Indian psychology career recruitment programs to encourage Indians to enter mental health field.

§ 1621q. Prevention, control, and elimination of communicable and infectious diseases

(a) Grants authorized

The Secretary, acting through the Service, and after consultation with the Centers for Disease Control and Prevention, may make grants available to Indian tribes and tribal organizations for the following:

- (1) Projects for the prevention, control, and elimination of communicable and infectious diseases, including tuberculosis, hepatitis, HIV, respiratory syncytial virus, hanta virus, sexually transmitted diseases, and *H. pylori*.
- (2) Public information and education programs for the prevention, control, and elimination of communicable and infectious diseases.
- (3) Education, training, and clinical skills improvement activities in the prevention, control, and elimination of communicable and infectious diseases for health professionals, including allied health professionals.
- (4) Demonstration projects for the screening, treatment, and prevention of hepatitis C virus (HCV).

¹ See References in Text note below.