

§ 290bb-32. Priority mental health needs of regional and national significance

(a) Projects

The Secretary shall address priority mental health needs of regional and national significance (as determined under subsection (b)) through the provision of or through assistance for—

- (1) knowledge development and application projects for prevention, treatment, and rehabilitation, and the conduct or support of evaluations of such projects;
- (2) training and technical assistance programs;
- (3) targeted capacity response programs; and
- (4) systems change grants including state-wide family network grants and client-oriented and consumer run self-help activities, which may include technical assistance centers.

The Secretary may carry out the activities described in this subsection directly or through grants, contracts, or cooperative agreements with States, political subdivisions of States, Indian tribes or tribal organizations (as such terms are defined in section 5304 of title 25), health facilities, or programs operated by or in accordance with a contract or grant with the Indian Health Service, or,¹ other public or private nonprofit entities.

(b) Priority mental health needs

(1) Determination of needs

Priority mental health needs of regional and national significance shall be determined by the Secretary in consultation with States and other interested groups. The Secretary shall meet with the States and interested groups on an annual basis to discuss program priorities.

(2) Special consideration

In developing program priorities described in paragraph (1), the Secretary shall give special consideration to promoting the integration of mental health services into primary health care systems.

(c) Requirements

(1) In general

Recipients of grants, contracts, and cooperative agreements under this section shall comply with information and application requirements determined appropriate by the Secretary.

(2) Duration of award

With respect to a grant, contract, or cooperative agreement awarded under this section, the period during which payments under such award are made to the recipient may not exceed 5 years.

(3) Matching funds

The Secretary may, for projects carried out under subsection (a), require that entities that apply for grants, contracts, or cooperative agreements under this section provide non-Federal matching funds, as determined appropriate by the Secretary, to ensure the institu-

tional commitment of the entity to the projects funded under the grant, contract, or cooperative agreement. Such non-Federal matching funds may be provided directly or through donations from public or private entities and may be in cash or in kind, fairly evaluated, including plant, equipment, or services.

(4) Maintenance of effort

With respect to activities for which a grant, contract or cooperative agreement is awarded under this section, the Secretary may require that recipients for specific projects under subsection (a) agree to maintain expenditures of non-Federal amounts for such activities at a level that is not less than the level of such expenditures maintained by the entity for the fiscal year preceding the fiscal year for which the entity receives such a grant, contract, or cooperative agreement.

(d) Evaluation

The Secretary shall evaluate each project carried out under subsection (a)(1) and shall disseminate the findings with respect to each such evaluation to appropriate public and private entities.

(e) Information and education

(1) In general

The Secretary shall establish information and education programs to disseminate and apply the findings of the knowledge development and application, training, and technical assistance programs, and targeted capacity response programs, under this section to the general public, to health care professionals, and to interested groups. The Secretary shall make every effort to provide linkages between the findings of supported projects and State agencies responsible for carrying out mental health services.

(2) Rural and underserved areas

In disseminating information on evidence-based practices in the provision of children's mental health services under this subsection, the Secretary shall ensure that such information is distributed to rural and medically underserved areas.

(3) Geriatric mental disorders

The Secretary shall, as appropriate, provide technical assistance to grantees regarding evidence-based practices for the prevention and treatment of geriatric mental disorders and co-occurring mental health and substance use disorders among geriatric populations, as well as disseminate information about such evidence-based practices to States and non-grantees throughout the United States.

(f) Authorization of appropriations

There are authorized to be appropriated to carry out this section \$394,550,000 for each of fiscal years 2018 through 2022.

(July 1, 1944, ch. 373, title V, §520A, as added Pub. L. 100-690, title II, §2057(3), Nov. 18, 1988, 102 Stat. 4212; renumbered §520 and amended Pub. L. 101-93, §3(e), (g), Aug. 16, 1989, 103 Stat. 610, 611; Pub. L. 101-639, §2, Nov. 28, 1990, 104 Stat. 4600; renumbered §520A and amended Pub. L. 102-321,

¹ So in original. The comma probably should not appear.

title I, § 116, July 10, 1992, 106 Stat. 348; Pub. L. 106-310, div. B, title XXXII, § 3201(a), Oct. 17, 2000, 114 Stat. 1189; Pub. L. 114-255, div. B, title VII, § 7003, title IX, § 9012, Dec. 13, 2016, 130 Stat. 1223, 1245.)

CODIFICATION

Section was formerly classified to section 290cc-13 of this title prior to renumbering by Pub. L. 102-321.

AMENDMENTS

2016—Subsec. (a). Pub. L. 114-255, § 7003(1)(B), in concluding provisions, inserted “, contracts,” before “or cooperative agreements” and substituted “Indian tribes or tribal organizations (as such terms are defined in section 5304 of title 25), health facilities, or programs operated by or in accordance with a contract or grant with the Indian Health Service, or” for “Indian tribes and tribal organizations”.

Subsec. (a)(4). Pub. L. 114-255, § 7003(1)(A), inserted “, which may include technical assistance centers” before period at end.

Subsec. (e)(3). Pub. L. 114-255, § 9012, added par. (3).

Subsec. (f). Pub. L. 114-255, § 7003(2), amended subsec. (f) generally, substituting appropriations for fiscal years 2018 through 2022 for appropriations for fiscal year 2001, and such sums as may be necessary for each of the fiscal years 2002 and 2003 and data infrastructure provisions.

2000—Pub. L. 106-310 amended section catchline and text generally, substituting provisions relating to priority mental health needs of regional and national significance for provisions relating to establishment of grant programs for demonstration projects.

1992—Subsec. (a)(1). Pub. L. 102-321, § 116(b)(1), substituted “Center for Mental Health Services” for “National Institute of Mental Health”.

Subsec. (c). Pub. L. 102-321, § 116(b)(2), substituted “five” for “three”.

Subsec. (e)(1). Pub. L. 102-321, § 116(b)(3), amended par. (1) generally. Prior to amendment, par. (1) read as follows: “For the purposes of carrying out this section, there are authorized to be appropriated \$40,000,000 for fiscal year 1991, and such sums as may be necessary for each of the fiscal years 1992 and 1993.”

1990—Subsec. (a). Pub. L. 101-639, § 2(a), amended subsec. (a) generally. Prior to amendment, subsec. (a) read as follows: “The Secretary, acting through the Director, may make grants to States, political subdivisions of States, and nonprofit private agencies—

“(1) for mental health services demonstration projects for the planning, coordination, and improvement of community services (including outreach and self-help services) for seriously mentally ill individuals, seriously emotionally disturbed children and youth, elderly individuals, and homeless seriously mentally ill individuals, and for the conduct of research concerning such services;

“(2) for demonstration projects for the prevention of youth suicide;

“(3) for demonstration projects for the improvement of the recognition, assessment, treatment, and clinical management of depressive disorders; and

“(4) for demonstration projects for treatment and prevention relating to sex offenses.”

Subsec. (e)(1). Pub. L. 101-639, § 2(b), amended par. (1) generally. Prior to amendment, par. (1) read as follows: “For the purposes of carrying out this section, there are authorized to be appropriated \$60,000,000 for each of the fiscal years 1989 and 1990.”

1989—Pub. L. 101-93 substituted “programs” for “program” in section catchline and in subsec. (a) substituted “seriously mentally ill” for “chronically mentally ill” wherever appearing, redesignated par. (5) as (4), and inserted “for” before “demonstration” in pars. (2), (3), and (4).

EFFECTIVE DATE OF 1992 AMENDMENT

Amendment by Pub. L. 102-321 effective Oct. 1, 1992, with provision for programs providing financial assist-

ance, see section 801(c), (d) of Pub. L. 102-321, set out as a note under section 236 of this title.

COMMUNITY MENTAL HEALTH SERVICES DEMONSTRATION PROJECTS FOR HOMELESS INDIVIDUALS WHO ARE CHRONICALLY MENTALLY ILL

Pub. L. 100-77, title VI, § 612, July 22, 1987, 101 Stat. 523, as amended by Pub. L. 100-607, title VIII, § 821, Nov. 4, 1988, 102 Stat. 3171; Pub. L. 100-628, title VI, § 621, Nov. 7, 1988, 102 Stat. 3244; Pub. L. 101-93, § 5(t)(1), (2), Aug. 16, 1989, 103 Stat. 615; Pub. L. 101-645, title V, § 521, Nov. 29, 1990, 104 Stat. 4734, which authorized to be appropriated for payments under this section such sums as may be necessary for each of the fiscal years 1991 through 1993, in addition to any other amounts authorized to be appropriated for such payments for each of such fiscal years with such additional amounts to be available only for the provision of community-based mental health services to homeless individuals who are chronically mentally ill, and amounts paid to grantees under subsection (a) of this section that remain unobligated at the end of the fiscal year in which the amounts were received to remain available to grantees during the succeeding fiscal year for the purposes for which the payments were made, was repealed by Pub. L. 106-310, div. B, title XXXII, § 3201(b)(3), Oct. 17, 2000, 114 Stat. 1190.

§ 290bb-33. Repealed. Pub. L. 114-255, div. B, title IX, § 9017, Dec. 13, 2016, 130 Stat. 1248

Section, act July 1, 1944, ch. 373, title V, § 520B, as added Pub. L. 111-148, title X, § 10410(b), Mar. 23, 2010, 124 Stat. 984, related to national centers of excellence for depression.

A prior section 290bb-33, act July 1, 1944, ch. 373, title V, § 520B, formerly title XXIV, § 2441, as added Pub. L. 100-607, title II, § 211, Nov. 4, 1988, 102 Stat. 3092; renumbered title V, § 520B, and amended Pub. L. 102-321, title I, § 118(a), (b)(2), July 10, 1992, 106 Stat. 348, 349, related to demonstration projects for individuals with positive test results, prior to repeal by Pub. L. 106-310, div. B, title XXXII, § 3201(b)(2), Oct. 17, 2000, 114 Stat. 1190.

§ 290bb-34. Suicide prevention technical assistance center

(a) Program authorized

The Secretary, acting through the Assistant Secretary, shall establish a research, training, and technical assistance resource center to provide appropriate information, training, and technical assistance to States, political subdivisions of States, federally recognized Indian tribes, tribal organizations, institutions of higher education, public organizations, or private nonprofit organizations regarding the prevention of suicide among all ages, particularly among groups that are at a high risk for suicide.

(b) Responsibilities of the Center

The center established under subsection (a) shall conduct activities for the purpose of—

(1) developing and continuing statewide or tribal suicide early intervention and prevention strategies for all ages, particularly among groups that are at a high risk for suicide;

(2) ensuring the surveillance of suicide early intervention and prevention strategies for all ages, particularly among groups that are at a high risk for suicide;

(3) studying the costs and effectiveness of statewide and tribal suicide early intervention and prevention strategies in order to provide information concerning relevant issues of im-