

(E) for intensive home- and community-based services.

(3) Criteria

The Secretary, acting through the Service, shall, in consultation with Indian tribes and tribal organizations, establish criteria for the review and approval of applications or proposals for funding made available pursuant to this subsection.

(d) Federally owned structures

(1) In general

The Secretary, in consultation with Indian tribes and tribal organizations, shall—

(A) identify and use, where appropriate, federally owned structures suitable for local residential or regional behavioral health treatment for Indian youths; and

(B) establish guidelines for determining the suitability of any such federally owned structure to be used for local residential or regional behavioral health treatment for Indian youths.

(2) Terms and conditions for use of structure

Any structure described in paragraph (1) may be used under such terms and conditions as may be agreed upon by the Secretary and the agency having responsibility for the structure and any Indian tribe or tribal organization operating the program.

(e) Rehabilitation and aftercare services

(1) In general

The Secretary, Indian tribes, or tribal organizations, in cooperation with the Secretary of the Interior, shall develop and implement within each Service unit, community-based rehabilitation and follow-up services for Indian youths who are having significant behavioral health problems, and require long-term treatment, community reintegration, and monitoring to support the Indian youths after their return to their home community.

(2) Administration

Services under paragraph (1) shall be provided by trained staff within the community who can assist the Indian youths in their continuing development of self-image, positive problem-solving skills, and nonalcohol or substance abusing behaviors. Such staff may include alcohol and substance abuse counselors, mental health professionals, and other health professionals and paraprofessionals, including community health representatives.

(f) Inclusion of family in youth treatment program

In providing the treatment and other services to Indian youths authorized by this section, the Secretary, acting through the Service, shall provide for the inclusion of family members of such youths in the treatment programs or other services as may be appropriate. Not less than 10 percent of the funds appropriated for the purposes of carrying out subsection (e) shall be used for outpatient care of adult family members related to the treatment of an Indian youth under that subsection.

(g) Multidrug abuse program

The Secretary, acting through the Service, shall provide, consistent with section 1665a of

this title, programs and services to prevent and treat the abuse of multiple forms of substances, including alcohol, drugs, inhalants, and tobacco, among Indian youths residing in Indian communities, on or near reservations, and in urban areas and provide appropriate mental health services to address the incidence of mental illness among such youths.

(h) Indian youth mental health

The Secretary, acting through the Service, shall collect data for the report under section 1671 of this title with respect to—

(1) the number of Indian youth who are being provided mental health services through the Service and tribal health programs;

(2) a description of, and costs associated with, the mental health services provided for Indian youth through the Service and tribal health programs;

(3) the number of youth referred to the Service or tribal health programs for mental health services;

(4) the number of Indian youth provided residential treatment for mental health and behavioral problems through the Service and tribal health programs, reported separately for on- and off-reservation facilities; and

(5) the costs of the services described in paragraph (4).

(Pub. L. 94-437, title VII, § 708, as added Pub. L. 111-148, title X, § 10221(a), Mar. 23, 2010, 124 Stat. 935.)

Editorial Notes

REFERENCES IN TEXT

The Indian Self-Determination and Education Assistance Act (25 U.S.C. 450 et seq.), referred to in subssecs. (a) and (b)(4)(A)(ii), is Pub. L. 93-638, Jan. 4, 1975, 88 Stat. 2203, which was classified principally to subchapter II (§ 450 et seq.) of chapter 14 of this title prior to editorial reclassification as chapter 46 (§ 5301 et seq.) of this title. Section 4(l) of the Act was classified to section 450b(l) of this title prior to editorial reclassification as section 5304(l) of this title. For complete classification of this Act to the Code, see Short Title note set out under section 5301 of this title and Tables.

CODIFICATION

Section 708 of Pub. L. 94-437 is based on section 181 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.

PRIOR PROVISIONS

A prior section 1665g, Pub. L. 94-437, title VII, § 708, as added Pub. L. 102-573, title VII, § 702(a), Oct. 29, 1992, 106 Stat. 4578, provided for grants to Indian tribes and tribal organizations to establish fetal alcohol syndrome and fetal alcohol effect programs, prior to the general amendment of this subchapter by Pub. L. 111-148.

§ 1665h. Inpatient and community-based mental health facilities design, construction, and staffing

Not later than 1 year after March 23, 2010, the Secretary, acting through the Service, may provide, in each area of the Service, not less than 1 inpatient mental health care facility, or the equivalent, for Indians with behavioral health problems. For the purposes of this subsection,¹

¹ So in original. Probably should be "section."

California shall be considered to be 2 area offices, 1 office whose location shall be considered to encompass the northern area of the State of California and 1 office whose jurisdiction shall be considered to encompass the remainder of the State of California. The Secretary shall consider the possible conversion of existing, underused Service hospital beds into psychiatric units to meet such need.

(Pub. L. 94-437, title VII, §709, as added Pub. L. 111-148, title X, §10221(a), Mar. 23, 2010, 124 Stat. 935.)

Editorial Notes

CODIFICATION

Section 709 of Pub. L. 94-437 is based on section 181 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.

PRIOR PROVISIONS

A prior section 1665h, Pub. L. 94-437, title VII, §709, as added Pub. L. 102-573, title VII, §702(a), Oct. 29, 1992, 106 Stat. 4579, related to the Pueblo substance abuse treatment project for San Juan Pueblo, New Mexico, prior to the general amendment of this subchapter by Pub. L. 111-148.

§ 1665i. Training and community education

(a) Program

The Secretary, in cooperation with the Secretary of the Interior, shall develop and implement or assist Indian tribes and tribal organizations to develop and implement, within each Service unit or tribal program, a program of community education and involvement which shall be designed to provide concise and timely information to the community leadership of each tribal community. Such program shall include education about behavioral health issues to political leaders, tribal judges, law enforcement personnel, members of tribal health and education boards, health care providers including traditional practitioners, and other critical members of each tribal community. Such program may also include community-based training to develop local capacity and tribal community provider training for prevention, intervention, treatment, and aftercare.

(b) Instruction

The Secretary, acting through the Service, shall provide instruction in the area of behavioral health issues, including instruction in crisis intervention and family relations in the context of alcohol and substance abuse, child sexual abuse, youth alcohol and substance abuse, and the causes and effects of fetal alcohol spectrum disorders to appropriate employees of the Bureau of Indian Affairs and the Service, and to personnel in schools or programs operated under any contract with the Bureau of Indian Affairs or the Service, including supervisors of emergency shelters and halfway houses described in section 2433 of this title.

(c) Training models

In carrying out the education and training programs required by this section, the Secretary, in consultation with Indian tribes, tribal

organizations, Indian behavioral health experts, and Indian alcohol and substance abuse prevention experts, shall develop and provide community-based training models. Such models shall address—

(1) the elevated risk of alcohol abuse and other behavioral health problems faced by children of alcoholics;

(2) the cultural, spiritual, and multigenerational aspects of behavioral health problem prevention and recovery; and

(3) community-based and multidisciplinary strategies for preventing and treating behavioral health problems.

(Pub. L. 94-437, title VII, §710, as added Pub. L. 111-148, title X, §10221(a), Mar. 23, 2010, 124 Stat. 935.)

Editorial Notes

CODIFICATION

Section 710 of Pub. L. 94-437 is based on section 181 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.

PRIOR PROVISIONS

A prior section 1665i, Pub. L. 94-437, title VII, §710, as added Pub. L. 102-573, title VII, §702(a), Oct. 29, 1992, 106 Stat. 4580, provided for the completion of construction of the Thunder Child Treatment Center, prior to the general amendment of this subchapter by Pub. L. 111-148.

§ 1665j. Behavioral health program

(a) Innovative programs

The Secretary, acting through the Service, consistent with section 1665a of this title, may plan, develop, implement, and carry out programs to deliver innovative community-based behavioral health services to Indians.

(b) Awards; criteria

The Secretary may award a grant for a project under subsection (a) to an Indian tribe or tribal organization and may consider the following criteria:

(1) The project will address significant unmet behavioral health needs among Indians.

(2) The project will serve a significant number of Indians.

(3) The project has the potential to deliver services in an efficient and effective manner.

(4) The Indian tribe or tribal organization has the administrative and financial capability to administer the project.

(5) The project may deliver services in a manner consistent with traditional health care practices.

(6) The project is coordinated with, and avoids duplication of, existing services.

(c) Equitable treatment

For purposes of this subsection,¹ the Secretary shall, in evaluating project applications or proposals, use the same criteria that the Secretary uses in evaluating any other application or proposal for such funding.

(Pub. L. 94-437, title VII, §711, as added Pub. L. 111-148, title X, §10221(a), Mar. 23, 2010, 124 Stat. 935.)

¹ So in original. Probably should be "section,".