

than Mar. 31, 1994, to submit to Congress a comprehensive report on the Secretary's actions under 38 U.S.C. 1720D.

#### § 1720E. Nasopharyngeal radium irradiation

(a) The Secretary may provide any veteran a medical examination, and hospital care, medical services, and nursing home care, which the Secretary determines is needed for the treatment of any cancer of the head or neck which the Secretary finds may be associated with the veteran's receipt of nasopharyngeal radium irradiation treatments in active military, naval, air, or space service.

(b) The Secretary shall provide care and services to a veteran under subsection (a) only on the basis of evidence in the service records of the veteran which document nasopharyngeal radium irradiation treatment in service, except that, notwithstanding the absence of such documentation, the Secretary may provide such care to a veteran who—

(1) served as an aviator in the active military, naval, or air service before the end of the Korean conflict; or

(2) underwent submarine training in active naval service before January 1, 1965.

(Added Pub. L. 105-368, title IX, §901(a), Nov. 11, 1998, 112 Stat. 3360; amended Pub. L. 116-283, div. A, title IX, §926(a)(27), Jan. 1, 2021, 134 Stat. 3830.)

#### Editorial Notes

##### AMENDMENTS

2021—Subsec. (a). Pub. L. 116-283 substituted “air, or space service” for “or air service”.

#### § 1720F. Comprehensive program for suicide prevention among veterans and members of the reserve components of the Armed Forces

(a) ESTABLISHMENT.—The Secretary shall develop and carry out a comprehensive program designed to reduce the incidence of suicide among covered individuals incorporating the components described in this section.

(b) STAFF EDUCATION.—In carrying out the comprehensive program under this section, the Secretary shall provide for mandatory training for appropriate staff and contractors (including all medical personnel) of the Department who interact with covered individuals. This training shall cover information appropriate to the duties being performed by such staff and contractors. The training shall include information on—

(1) recognizing risk factors for suicide;

(2) proper protocols for responding to crisis situations involving covered individuals who may be at high risk for suicide; and

(3) best practices for suicide prevention.

(c) HEALTH ASSESSMENTS.—In carrying out the comprehensive program, the Secretary shall direct that medical staff offer mental health in their overall health assessment when covered individuals seek medical care at a Department medical facility (including a center established under section 1712A of this title) and make referrals, at the request of the individual concerned, to appropriate counseling and treatment pro-

grams for covered individuals who show signs or symptoms of mental health problems.

(d) DESIGNATION OF SUICIDE PREVENTION COUNSELORS.—In carrying out the comprehensive program, the Secretary shall designate a suicide prevention counselor at each Department medical facility other than centers established under section 1712A of this title. Each counselor shall work with local emergency rooms, police departments, mental health organizations, and veterans service organizations to engage in outreach to covered individuals and improve the coordination of mental health care to covered individuals.

(e) BEST PRACTICES RESEARCH.—In carrying out the comprehensive program, the Secretary shall provide for research on best practices for suicide prevention among covered individuals. Research shall be conducted under this subsection in consultation with the heads of the following entities:

(1) The Department of Health and Human Services.

(2) The National Institute of Mental Health.

(3) The Substance Abuse and Mental Health Services Administration.

(4) The Centers for Disease Control and Prevention.

(f) SEXUAL TRAUMA RESEARCH.—In carrying out the comprehensive program, the Secretary shall provide for research on mental health care for covered individuals who have experienced sexual trauma while in military service. The research design shall include consideration of veterans or members of a reserve component.

(g) 24-HOUR MENTAL HEALTH CARE.—In carrying out the comprehensive program, the Secretary shall provide for mental health care availability to covered individuals on a 24-hour basis.

(h) HOTLINE.—In carrying out the comprehensive program, the Secretary may provide for a toll-free hotline for covered individuals to be staffed by appropriately trained mental health personnel and available at all times.

(i) OUTREACH AND EDUCATION.—In carrying out the comprehensive program, the Secretary shall provide for outreach to and education for covered individuals and the families of covered individuals, with special emphasis on providing information to veterans of Operation Iraqi Freedom and Operation Enduring Freedom and the families of such veterans. Education to promote mental health shall include information designed to—

(1) remove the stigma associated with mental illness;

(2) encourage covered individuals to seek treatment and assistance for mental illness;

(3) promote skills for coping with mental illness; and

(4) help families of covered individuals with—

(A) understanding issues arising from the readjustment of covered individuals to civilian life;

(B) identifying signs and symptoms of mental illness; and

(C) encouraging covered individuals to seek assistance for mental illness.

(j) PEER SUPPORT COUNSELING PROGRAM.—(1) In carrying out the comprehensive program, the