

diagnosis, care and treatment of individuals with sexually transmitted diseases.

(b) Support of promising clinicians

In order to foster the application of the most current developments in the etiology, pathogenesis, diagnosis, prevention and treatment of sexually transmitted diseases, amounts made available under this section shall be directed to the support of promising clinicians through awards for research, study, and practice at centers of excellence in sexually transmitted disease research and treatment.

(c) Excellence in certain fields

Research shall be carried out under awards made under subsection (b) in environments of demonstrated excellence in the etiology and pathogenesis of sexually transmitted diseases and shall foster innovation and integration of such disciplines or other environments determined suitable by the Director of the Institute.

(July 1, 1944, ch. 373, title IV, §447B, as added Pub. L. 106-505, title IX, §901, Nov. 13, 2000, 114 Stat. 2349; amended Pub. L. 109-482, title I, §103(b)(28), Jan. 15, 2007, 120 Stat. 3688.)

Editorial Notes

AMENDMENTS

2007—Subsec. (d). Pub. L. 109-482 struck out heading and text of subsec. (d). Text read as follows: “For the purpose of carrying out this section, there are authorized to be appropriated \$2,250,000 for fiscal year 2001, and such sums as may be necessary for each of fiscal years 2002 through 2005.”

Statutory Notes and Related Subsidiaries

EFFECTIVE DATE OF 2007 AMENDMENT

Amendment by Pub. L. 109-482 applicable only with respect to amounts appropriated for fiscal year 2007 or subsequent fiscal years, see section 109 of Pub. L. 109-482, set out as a note under section 281 of this title.

§ 285f-4. Microbicide research and development

The Director of the Institute, acting through the head of the Division of AIDS, shall, consistent with the peer-review process of the National Institutes of Health, carry out research on, and development of, safe and effective methods for use by women to prevent the transmission of the human immunodeficiency virus, which may include microbicides.

(July 1, 1944, ch. 373, title IV, §447C, as added Pub. L. 110-293, title II, §203(c), July 30, 2008, 122 Stat. 2941.)

§ 285f-5. Research centers for pathogens of pandemic concern

(a) In general

The Director of the Institute, in collaboration, as appropriate, with the directors of applicable institutes, centers, and divisions of the National Institutes of Health, the Assistant Secretary for Preparedness and Response, and the Director of the Biomedical Advanced Research and Development Authority, shall establish or continue a multidisciplinary research program to advance the discovery and preclinical development of medical products for priority virus families and

other viral pathogens with a significant potential to cause a pandemic, through support for research centers.

(b) Uses of funds

The Director of the Institute shall award funding through grants, contracts, or cooperative agreements to public or private entities to provide support for research centers described in subsection (a) for the purpose of—

(1) conducting basic research through preclinical development of new medical products or technologies, including platform technologies, to address pathogens of pandemic concern;

(2) identifying potential targets for therapeutic candidates, including antivirals, to treat such pathogens;

(3) identifying existing medical products with the potential to address such pathogens, including candidates that could be used in outpatient settings; and

(4) carrying out or supporting other research related to medical products to address such pathogens, as determined appropriate by the Director.

(c) Coordination

The Director of the Institute shall, as appropriate, provide for the coordination of activities among the centers described in subsection (a), including through—

(1) facilitating the exchange of information and regular communication among the centers, as appropriate; and

(2) requiring the periodic preparation and submission to the Director of reports on the activities of each center.

(d) Priority

In awarding funding through grants, contracts, or cooperative agreements under subsection (a), the Director of the Institute shall, as appropriate, give priority to applicants with existing frameworks and partnerships, as applicable, to support the advancement of such research.

(e) Collaboration

The Director of the Institute shall—

(1) collaborate with the heads of other appropriate Federal departments, agencies, and offices with respect to the identification of additional priority virus families and other viral pathogens with a significant potential to cause a pandemic; and

(2) collaborate with the Director of the Biomedical Advanced Research and Development Authority with respect to the research conducted by centers described in subsection (a), including, as appropriate, providing any updates on the research advancements made by such centers, identifying any advanced research and development needs for such countermeasures, consistent with section 247d-7e(a)(6) of this title, and taking into consideration existing manufacturing capacity and future capacity needs for such medical products or technologies, including platform technologies, supported by the centers described in subsection (a).

(f) Supplement, not supplant

Any support received by a center described in subsection (a) under this section shall be used to

supplement, and not supplant, other public or private support for activities authorized to be supported.

(July 1, 1944, ch. 373, title IV, §447D, as added Pub. L. 117-328, div. FF, title II, §2301, Dec. 29, 2022, 136 Stat. 5756.)

SUBPART 7—EUNICE KENNEDY SHRIVER NATIONAL INSTITUTE OF CHILD HEALTH AND HUMAN DEVELOPMENT

Editorial Notes

CODIFICATION

Pub. L. 110-154, §1(b)(7), Dec. 21, 2007, 121 Stat. 1827, substituted “Eunice Kennedy Shriver National Institute of Child Health and Human Development” for “National Institute of Child Health and Human Development” in subpart heading.

§ 285g. Purpose of Institute

The general purpose of the Eunice Kennedy Shriver National Institute of Child Health and Human Development (hereafter in this subpart referred to as the “Institute”) is the conduct and support of research, training, health information dissemination, and other programs with respect to gynecologic health, maternal health, child health, intellectual disabilities, human growth and development, including prenatal development, population research, and special health problems and requirements of mothers and children.

(July 1, 1944, ch. 373, title IV, §448, as added Pub. L. 99-158, §2, Nov. 20, 1985, 99 Stat. 856; amended Pub. L. 106-554, §1(a)(1) [title II, §215], Dec. 21, 2000, 114 Stat. 2763, 2763A-28; Pub. L. 110-154, §1(d), Dec. 21, 2007, 121 Stat. 1828; Pub. L. 111-256, §2(f)(2), Oct. 5, 2010, 124 Stat. 2644.)

Editorial Notes

AMENDMENTS

2010—Pub. L. 111-256 substituted “intellectual disabilities,” for “mental retardation.”

2000—Pub. L. 106-554 inserted “gynecologic health,” after “with respect to”.

Statutory Notes and Related Subsidiaries

CHANGE OF NAME

“Eunice Kennedy Shriver National Institute of Child Health and Human Development” substituted for “National Institute of Child Health and Human Development” in text, on authority of section 1(d) of Pub. L. 110-154, set out below.

Pub. L. 110-154, §1(d), Dec. 21, 2007, 121 Stat. 1828, provided that: “Any reference in any law, regulation, order, document, paper, or other record of the United States to the ‘National Institute of Child Health and Human Development’ shall be deemed to be a reference to the ‘Eunice Kennedy Shriver National Institute of Child Health and Human Development’.”

EUNICE KENNEDY SHRIVER NATIONAL INSTITUTE OF CHILD HEALTH AND HUMAN DEVELOPMENT; FINDINGS

Pub. L. 110-154, §1(a), Dec. 21, 2007, 121 Stat. 1826, as amended by Pub. L. 111-256, §2(h), Oct. 5, 2010, 124 Stat. 2644, provided that: “Congress makes the following findings:

“(1) Since it was established by Congress in 1962 at the request of President John F. Kennedy, the National Institute of Child Health and Human Develop-

ment has achieved an outstanding record of achievement in catalyzing a concentrated attack on the unsolved health problems of children and of mother-in-fant relationships by fulfilling its mission to—

“(A) ensure that every individual is born healthy and wanted, that women suffer no harmful effects from reproductive processes, and that all children have the chance to achieve their full potential for healthy and productive lives, free from disease or disability; and

“(B) ensure the health, productivity, independence, and well-being of all individuals through optimal rehabilitation.

“(2) The National Institute of Child Health and Human Development has made unparalleled contributions to the advancement of child health and human development, including significant efforts to—

“(A) reduce dramatically the rates of Sudden Infant Death Syndrome, infant mortality, and maternal HIV transmission;

“(B) develop the Haemophilus Influenza B (Hib) vaccine, credited with nearly eliminating the incidence of intellectual disabilities; and

“(C) conduct intramural research, support extramural research, and train thousands of child health and human development researchers who have contributed greatly to dramatic gains in child health throughout the world.

“(3) The vision, drive, and tenacity of one woman, Eunice Kennedy Shriver, was instrumental in proposing, passing, and enacting legislation to establish the National Institute of Child Health and Human Development (Public Law 87-838) [see Tables for classification] on October 17, 1962.

“(4) It is befitting and appropriate to recognize the substantial achievements of Eunice Kennedy Shriver, a tireless advocate for children with special needs, whose foresight in creating the National Institute of Child Health and Human Development gave life to the words of President Kennedy, who wished to ‘encourage imaginative research into the complex processes of human development from conception to old age.’”

[For definition of “intellectual disabilities” in section 1(a) of Pub. L. 110-154, set out above, see Definitions note below.]

LONG-TERM CHILD DEVELOPMENT STUDY

Pub. L. 106-310, div. A, title X, §1004, Oct. 17, 2000, 114 Stat. 1130, as amended by Pub. L. 108-446, title III, §301, Dec. 3, 2004, 118 Stat. 2803; Pub. L. 109-482, title I, §104(b)(3)(E), Jan. 15, 2007, 120 Stat. 3694; Pub. L. 110-154, §1(d), Dec. 21, 2007, 121 Stat. 1828, provided that:

“(a) PURPOSE.—It is the purpose of this section to authorize the Eunice Kennedy Shriver National Institute of Child Health and Human Development to conduct a national longitudinal study of environmental influences (including physical, chemical, biological, and psychosocial) on children’s health and development.

“(b) IN GENERAL.—The Director of the Eunice Kennedy Shriver National Institute of Child Health and Human Development shall establish a consortium of representatives from appropriate Federal agencies (including the Centers for Disease Control and Prevention, the Environmental Protection Agency, and the Department of Education) to—

“(1) plan, develop, and implement a prospective cohort study, from birth to adulthood, to evaluate the effects of both chronic and intermittent exposures on child health and human development; and

“(2) investigate basic mechanisms of developmental disorders and environmental factors, both risk and protective, that influence health and developmental processes.

“(c) REQUIREMENT.—The study under subsection (b) shall—

“(1) incorporate behavioral, emotional, educational, and contextual consequences to enable a complete assessment of the physical, chemical, biological and psychosocial environmental influences on children’s well-being;