

113TH CONGRESS  
2D SESSION

# H. R. 4170

To provide for a Youth Mental Health Research Network.

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IN THE HOUSE OF REPRESENTATIVES

MARCH 6, 2014

Mr. FATTAH introduced the following bill; which was referred to the  
Committee on Energy and Commerce

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## A BILL

To provide for a Youth Mental Health Research Network.

1 *Be it enacted by the Senate and House of Representa-*  
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Youth Mental Health  
5 Research Act”.

6 **SEC. 2. FINDINGS.**

7 Congress finds the following:

8 (1) More than 100 million Americans currently  
9 have some sort of brain-related condition. Millions of  
10 Americans, many of whom are currently school chil-  
11 dren, have some sort of developmental delay, autism,  
12 or learning disability.

1           (2) Moreover, many Americans suffer from  
2           some form of psychotic disorder, including schizo-  
3           phrenia and affective psychotic disorders.

4           (3) These brain disorders usually result in sig-  
5           nificant life-long disability, and psychotic disorders  
6           in particular, despite advances in treatment, rank  
7           among the top causes of disability worldwide.

8           (4) Neuroscience research has the potential to  
9           dramatically improve the quality of life for people  
10          facing brain disease and injury, and to significantly  
11          improve our understanding of learning.

12          (5) Because of the impact on the health and  
13          economy of the country, the Federal Government  
14          has taken a special interest in promoting neuro-  
15          science and mental health research. Several Federal  
16          agencies, including the National Science Foundation,  
17          National Institutes of Health (NIH), Veterans Ad-  
18          ministration, and Department of Defense oversee re-  
19          search on the brain and nervous system.

20          (6) In December 2011, Congress directed the  
21          Office of Science and Technology Policy to establish  
22          an Interagency Working Group on Neuroscience  
23          (IWGN). The IWGN is currently convening rep-  
24          resentatives across the Federal Government to make

1 recommendations about the future of neuroscience  
2 research.

3 (7) Given the findings about the role of mental  
4 illness in multiple shootings across the Nation, in-  
5 cluding Newton, Connecticut, Aurora, Colorado, and  
6 other communities experiencing similar tragedies,  
7 the Federal Government has an interest in pursuing  
8 research on the early detection, intervention, and  
9 prevention of psychosis.

10 (8) In line with this, the Federal Government  
11 is looking for new ways of increasing the Nation's  
12 knowledge of the underlying causes of psychosis.

13 (9) The United States commitment to fur-  
14 thering the early detection of mental illness in youth  
15 was seen in its participation in two public/private re-  
16 search programs that studied the earliest stages of  
17 psychotic illness, namely—

18 (A) the North American Prodrome Longi-  
19 tudinal Study (NAPLS); and

20 (B) the Recovery After an Initial Schizo-  
21 phrenia Episode (RAISE) initiative.

22 **SEC. 3. YOUTH MENTAL HEALTH RESEARCH NETWORK.**

23 (a) YOUTH MENTAL HEALTH RESEARCH NET-  
24 WORK.—

1           (1) NETWORK.—The Director of the National  
2 Institutes of Health may provide for the establish-  
3 ment of a Youth Mental Health Research Network  
4 for the conduct or support of—

5                   (A) youth mental health research; and

6                   (B) youth mental health intervention serv-  
7 ices.

8           (2) COLLABORATION BY INSTITUTES AND CEN-  
9 TERS.—The Director of NIH shall carry out this  
10 Act acting—

11                   (A) through the Director of the National  
12 Institute of Mental Health; and

13                   (B) in collaboration with other appropriate  
14 national research institutes and national centers  
15 that carry out activities involving youth mental  
16 health research.

17           (3) MENTAL HEALTH RESEARCH.—

18                   (A) IN GENERAL.—In carrying out para-  
19 graph (1), the Director of NIH may award co-  
20 operative agreements, grants, and contracts to  
21 State, local, and tribal governments and private  
22 nonprofit entities for—

23                           (i) conducting, or entering into con-  
24 sortia with other entities to conduct—

1 (I) basic, clinical, behavioral, or  
2 translational research to meet unmet  
3 needs for youth mental health re-  
4 search; or

5 (II) training for researchers in  
6 youth mental health research tech-  
7 niques;

8 (ii) providing, or partnering with non-  
9 research institutions or community-based  
10 groups with existing connections to youth  
11 to provide, youth mental health interven-  
12 tion services; and

13 (iii) collaborating with the National  
14 Institute of Mental Health to make use of,  
15 and build on, the scientific findings and  
16 clinical techniques of the Institute's earlier  
17 programs, studies, and demonstration  
18 projects.

19 (B) RESEARCH.—The Director of NIH  
20 shall ensure that—

21 (i) each recipient of an award under  
22 subparagraph (A)(i) conducts or supports  
23 at least one category of research described  
24 in subparagraph (A)(i)(I) and collectively

1           such recipients conduct or support all such  
2           categories of research; and

3           (ii) one or more such recipients pro-  
4           vide training described in subparagraph  
5           (A)(i)(II).

6           (C) NUMBER OF AWARD RECIPIENTS.—  
7           The Director of NIH may make awards under  
8           this paragraph for not more than 70 entities.

9           (D) SUPPLEMENT, NOT SUPPLANT.—Any  
10          support received by an entity under subpara-  
11          graph (A) shall be used to supplement, and not  
12          supplant, other public or private support for ac-  
13          tivities authorized to be supported under this  
14          paragraph.

15          (E) DURATION OF SUPPORT.—Support of  
16          an entity under subparagraph (A) may be for a  
17          period of not to exceed 5 years. Such period  
18          may be extended by the Director of NIH for  
19          additional periods of not more than 5 years.

20          (4) COORDINATION.—The Director of NIH  
21          shall—

22                 (A) as appropriate, provide for the coordi-  
23                 nation of activities (including the exchange of  
24                 information and regular communication) among

1 the recipients of awards under this subsection;  
2 and

3 (B) require the periodic preparation and  
4 submission to the Director of reports on the ac-  
5 tivities of each such recipient.

6 (b) INTERVENTION SERVICES FOR, AND RESEARCH  
7 ON, SEVERE MENTAL ILLNESS.—

8 (1) IN GENERAL.—In making awards under  
9 subsection (a)(3), the Director of NIH shall ensure  
10 that an appropriate number of such awards are  
11 awarded to entities that agree to—

12 (A) focus primarily on the early detection  
13 and intervention of severe mental illness in  
14 young people;

15 (B) conduct or coordinate one or more  
16 multisite clinical trials of therapies for, or ap-  
17 proaches to, the prevention, diagnosis, or treat-  
18 ment of early severe mental illness in a commu-  
19 nity setting;

20 (C) rapidly and efficiently disseminate sci-  
21 entific findings resulting from such trials; and

22 (D) adhere to the guidelines, protocols,  
23 and practices used in the North American Pro-  
24 drome Longitudinal Study (NAPLS) and the

1 Recovery After an Initial Schizophrenia Episode  
2 (RAISE) initiative.

3 (2) DATA COORDINATING CENTER.—

4 (A) ESTABLISHMENT.—In connection with  
5 awards to entities described in paragraph (1),  
6 the Director of NIH shall establish a data co-  
7 ordinating center for the following purposes:

8 (i) To distribute the scientific findings  
9 referred to in paragraph (1)(C).

10 (ii) To provide assistance in the de-  
11 sign and conduct of collaborative research  
12 projects and the management, analysis,  
13 and storage of data associated with such  
14 projects.

15 (iii) To organize and conduct multisite  
16 monitoring activities.

17 (iv) To provide assistance to the Cen-  
18 ters for Disease Control and Prevention in  
19 the establishment of patient registries.

20 (B) REPORTING.—The Director of NIH  
21 shall—

22 (i) require the data coordinating cen-  
23 ter established under subparagraph (A) to  
24 provide regular reports to the Director of  
25 NIH on research conducted by entities de-



1           scribed in paragraph (1), including infor-  
2           mation on enrollment in clinical trials and  
3           the allocation of resources with respect to  
4           such research; and

5                   (ii) as appropriate, incorporate infor-  
6           mation reported under clause (i) into the  
7           Director’s biennial reports under section  
8           403 of the Public Health Service Act (42  
9           U.S.C. 283).

10       (c) DEFINITIONS.—In this Act, the terms “Director  
11 of NIH”, “national center”, and “national research insti-  
12 tute” have the meanings given to such terms in section  
13 401 of the Public Health Service Act (42 U.S.C. 281).

14       (d) AUTHORIZATION OF APPROPRIATIONS.—To carry  
15 out this Act, there is authorized to be appropriated  
16 \$25,000,000 for each of fiscal years 2015 through 2019.

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