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F I S C A L I M P A C T R E P O R T

SPONSOR Thomson ORIGINAL DATE 02/11/14 LAST UPDATED HB 319
SHORT TITLE Fetal Alcohol Syndrome Prevention Program SB
ANALYST Esquibel

APPROPRIATION (dollars in thousands)

Appropriation		Recurring or Nonrecurring	Fund Affected
FY14	FY15		
	\$100.0	Recurring	General Fund

(Parenthesis () Indicate Expenditure Decreases)

Relates to Appropriation in the General Appropriation Act

SOURCES OF INFORMATION

LFC Files

Responses Received From

University of New Mexico Health Sciences Center (UNMHSC)
Department of Health (DOH)

SUMMARY

Synopsis of Bill

House Bill 319 appropriates \$100 thousand from the general fund to the Department of Health (DOH) to fund the University of New Mexico's Center on Alcoholism, Substance Abuse and Addictions' Program on preventing fetal alcohol syndrome.

FISCAL IMPLICATIONS

HB 319 includes an FY15 general fund recurring appropriation of \$100 thousand. Any unexpended or unencumbered balance remaining at the end of FY15 shall revert to the general fund.

The House Appropriations and Finance Committee version of the DOH's FY15 budget includes \$50 thousand for fetal alcohol syndrome prevention and awareness.

SIGNIFICANT ISSUES

The University of New Mexico Health Sciences Center indicates in New Mexico there were 27,251 resident births in 2011 (NM Vital Statistics). The current estimates of the prevalence of fetal alcohol spectrum disorders (FASD) is 2 percent to 5 percent of the children in the mainstream U.S. population, and of the more severe cases of FASD, fetal alcohol syndrome (FAS) 2 to 7 per 1,000 children (May et al., 2009). Therefore there are 545 to 1,363 births of children with FASD each year in our state and approximately 55 to 190 children with FAS. These children place an extreme cost burden on several state agencies: DOH, CYFD, and Department of Education (PED).

Each child with FAS has been conservatively estimated to cost an extra \$931,742 in lifetime care expenses (Lupton, et al., 2004), much of which places substantial burden on the agencies mentioned above. Therefore, preventing even a few cases of FAS and FASD, each year can help protect and preserve the budgets of the DOH, CYFD, and the PED, while enhancing the quality and economic and social potential of the next generation.

TECHNICAL ISSUES

DOH indicates HB 319 does not specify what prevention efforts would be funded or require that interventions be evidence-based.

OTHER SUBSTANTIVE ISSUES

DOH indicates the Fetal Alcohol Syndrome Prevention Project at the University of New Mexico was established in 1996 and has developed public education campaigns, community projects, and advocacy efforts (www.preventfas.com). Fetal alcohol spectrum disorders (FASD) are caused by a woman drinking alcohol during pregnancy. These effects can include physical problems and problems with behavior and learning. Fetal Alcohol Syndrome (FAS) represents the severe end of the FASD spectrum. Individuals with FAS might have specific facial features, growth problems, and central nervous system problems and can have problems with learning, memory, attention span, communication, vision, or hearing (fasdcenter.samhsa.gov). Each year in the United States, an estimated 40,000 babies are born with an FASD (Centers for Disease Control and Prevention, 2010).

A number of programs have been developed to prevent drinking during pregnancy and FASD, and can reduce maternal alcohol consumption and improve the outcome of the offspring. Examples include public service announcements, beverage warning labels, screening all pregnant women for alcohol consumption and counseling those who do drink. Prevention approaches that target high-risk women (e.g., alcohol dependency or a child with FAS) typically offer repeated counseling over several years (pubs.niaaa.nih.gov/publications/arh26-1/58-65.htm).

The University of New Mexico (UNM) Health Sciences Center indicates it has been a leader in research on FAS and FASD since the middle 1970's and has produced some of the best and most widely distributed prevention strategies and materials in the entire United States. The UNM Statewide FASD Prevention Program was founded in 1996 as the second statewide program in the U.S., and it has benefited from consistent leadership since its inception. In the past it has provided novel public education programs statewide including peer education in the schools, prenatal education in clinics, and leadership training of health educators and health providers

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statewide. The program has been instrumental in bringing national conferences to the State of New Mexico. FASD Prevention work that was developed in New Mexico has been replicated in sites across the United States and internationally.

RAE/ds