

# Youth Voices, Real Priorities

## Ways to Improve Youth Mental Health and Wellness in New Mexico

During Spring 2025, researchers conducted focus groups with middle- and high-schoolers, social service, and mental health providers serving youth. This report highlights the priorities and solutions identified by these community members to advance youth mental health and wellness in New Mexico.

### Invest in Places for Youth to Connect and Belong

Youth and youth-serving providers call for the **expansion of spaces and programs that promote connection and belonging**:

- In-school clubs, field trips, and activities open to all students (e.g., not eligibility-based on grades)
- Out-of-school sports, clubs, and activities
- Peer-to-peer support programs
- Safe, public spaces to socialize (e.g. youth centers)
- School-based access points to counseling

Youth identified these spaces and activities as the **most effective way** to:

- **Foster connections** with friends, mentors, and supportive adults, which combat loneliness.
- **Build youth confidence** and leadership skills, resulting in an increased likelihood of achieving goals and decreased susceptibility to negative peer pressures (e.g. substance use).
- **Create healthy outlets** for youth to cope with stress and avoid “bottling up” their feelings and/or turning to risky behaviors or self-harm.
- **Decrease bullying** and mitigate the negative impacts.
- **Reduce substance use** driven by "boredom" (i.e., lack of out-of-school activities for youth).

These priorities emphasize a need for expanding what mental health care looks like beyond clinical services. Everyday relationships can make a big difference in supporting youth mental health, helping young people feel a **sense of community, belonging, and hope for the future**.

### Support Adults and Families So They Can Support Young People

Youth also want adults in their lives to **better understand mental health**, calling for a whole-community approach, which includes:

- Ensuring **basic needs** are met - because when families have access to housing, food, education, or counseling, the whole system of support for young people becomes stronger.
- Investing in culturally relevant **parenting programs** that support healthy adult-child communication and mental health awareness, particularly for families navigating stigma and barriers to care. Youth participants also spoke to the overall importance of adults being able to truly listen and not dismiss concerns of young people.
- Supporting culturally relevant **education and training** for educators, youth workers, and parents on topics like suicide prevention, de-escalation, crisis response, and allyship. Because beyond clinical providers, everyone can play a role in supporting youth.

### State of Youth Mental Health in New Mexico

*2023 New Mexico Youth Risk & Resiliency Survey*

In the past year...

- 37% of students persistently felt sad or hopeless
- 17% of students were bullied on school property
- 19% of students engaged in non-suicidal self-injury
- 15% of students seriously considered suicide, and 8% attempted it

In the past month...

- 22% of students used a nicotine product
- 16% used alcohol

## Where do youth go when they have health questions or need help?

Youth were clear that where, or to whom, they go, “depends on the issue.” The most common places identified included:

- **Peers** – which is why investing in youth leadership and peer support skills is important. In places where there are less resources, this peer-to-peer support is vital.
- **Online community** – youth today are more connected online than previous generations. For those who do not have strong in-person support or do not have people locally who can relate to their lived-experience or interests, online spaces and social media can be lifesaving. This indicates a need for adults to better understand the importance, and risks, of online community for youth.
- **School-based care** - schools remain a critical resource hub for students, and access to school-based counseling is an important resource.

*“...About the preference for being in online spaces versus in-person spaces. I think a lot of that can be because of logistics. If someone doesn't have a car or if they're not out to their families, they're not going to go ask to go to a queer event. And that was like a lot of the youth that I worked with, a lot... So having the online spaces can be very freeing for the for the youth.”*

Adult Participant

## What Else Supports Youth Mental Health?

**Youth are actively finding ways to cope:** from playing video games and reading, to exercising, journaling, listening to music, or eating well, youth participants shared that they are finding what works for them to build healthier habits and ways for managing stress.

**Youth turn to, and watch out for, each other:** by listening, de-escalating tense moments, raising awareness, and educating, we heard many examples of how youth are already helping their peers.

**Youth are advocates:** adult providers see that today's youth are already strong in self-advocacy and more open to talking about mental health than previous generations.

**Supportive relationships and people:** everyday connections with friends, family, teachers, and other adults, in addition to structured support from school counselors and behavioral health professionals are key to strong mental health.

**Social Emotional Learning and supportive spaces:** community organizations, churches, grassroots and mutual aid groups - both online and in person - create supportive environments and a sense of belonging. Youth recognize the big impact that can come from small, everyday things. Kind words, affirmations, learning about mindfulness, strategies to cope with stress, and events and celebrations can help create positive school and community environments.

## Calls to Bridge Gaps in Support

### Increasing Accessible, Affirming, and Inclusive Care

Many lack access to timely care for mental health concerns. Youth and adults advocated for early intervention and more mental health providers in **schools** and **rural areas**.

Support should be tailored and give specific attention to **cultural relevance** and **accessibility**. Participants spoke about some of the service gaps and challenges facing certain groups, for example:

- Limited availability of LGBTQ+ affirming providers and safe treatment options, especially for transgender youth.
- Difficulty navigating school and health systems, particularly for families with children with disabilities.
- A need for improved sex education and stronger support systems in schools for youth who experience sexual or physical violence.

Conversations with participants focused on LGBTQ+ youth and families with disabilities. A limitation of this project is the absence of input from **Indigenous or Native**-serving organizations and community members. However, existing reports align with the themes identified in our findings. For instance, data from the 2023 national Youth Risk Behavior Survey highlights the importance of engaged adult caregivers and school connectedness in supporting the emotional wellbeing of American Indian/Alaska Native high school students and in preventing substance use, suicide-related behaviors, and experiences of violence.<sup>1</sup> Moving forward, it is key for researchers and government agencies to continue strengthening partnerships with communities most affected by inequities. Doing so centers lived experiences and may inform approaches that go beyond individual treatment to address the broader systemic and structural factors shaping health outcomes.

### Trust and Understanding from Parents/Guardians

Common among the youth participants' experiences was that parents or guardians can often be dismissive when mental health concerns are talked about by their children. Youth and youth-serving providers also identified the need for more mental health awareness-building for parents or guardians.

### Transitioning Out of High School

Participants also called for more help for **youth transitioning out of high school**, including for those not planning to attend a four-year college. This includes mentorship and support assisting with career, vocational, educational or other tracks.

### Barriers to Accessing Mental Health Care

Youth and adults talked about what makes it hard for young people to get help, including:

- Fear or anxiety in seeking help
- Not knowing where to go
- Complex steps that make it overwhelming to get support
- Confidentiality concerns, particularly with school counselors
- Negative past experiences or lack of trust
- Lack of transportation access
- Stigma among family members
- Parental consent requirements for youth under 14 years old

*"I think they need to not call me dramatic and ignore my feelings." Youth participant*

*"There should be more talk about connecting youth to jobs, internships, or creative projects. When we have things to work toward, it gives us hope and motivation." Youth participant*

## In Their Own Words



### Youth say they need more third spaces and engaging activities.

“A lot of people who live in small towns turn to substances and partying because there's really nothing to do to ease the stress of just being human. So it's also like a funded resource thing. Like if there were more resources, there would be more outlets for people to go and express themselves instead of turning to harming themselves.” - *Youth Participant*

“I think a big thing that we're lacking...is social and recreational activities, whether that may look like a safe space for individuals to socialize so that way, especially young people, can connect with others.” - *Youth Participant*

“I remember whenever I needed to cope with something, I would just go to substances...and it's really not a good thing to do...it doesn't make you feel better. It can cause addiction...the physical activity, I recently started picking it up and it just makes, my mind is like clear...that's something I look forward to every day now.” - *Youth Participant*



### Youth want adults in their lives to better understand mental health and listen to youth.

“If adults and decision makers understand their own feelings...it's more than just happiness and sadness, there's more to mental health. And just to really be informed about the different types, and to listen to their children and not to tell them that ‘oh you're a child, you're fine,’ ...but to really understand them.” - *Youth Participant*

“Sometimes I feel like whenever you talk to adults. They always feel like, sometimes they feel like you're lying or they don't see...they don't trust us. They don't see your side of the problem.” - *Youth Participant*

“I think something that a lot of adults don't understand currently is that they think whenever their child is going through a mental health issue, they think that it's all their fault. And they're like, ‘oh, I'm such a horrible parent’ and they tell this to the child. And that I feel like this discourages a lot of people from actively getting help. I think parents need to understand that it's not always their fault and it's better to just be supportive.” - *Youth Participant*



## **Sometimes it's easiest for young people to go to a friend for help.**

“I think there's many places/people where individuals can get help, whether that looks like parents or family members, maybe the way they approach a parent or sibling if they feel comfortable and believe they will be understanding. I think there's also like friends or peers...I feel like peer support can be crucial as youth might sometimes even feel more comfortable sharing their emotions with someone of their own age instead of speaking to an adult.” - *Youth Participant*



## **Youth also reflected on the importance of addressing cultural stigma.**

“I think culture plays a big role when it comes to this. I can speak for myself...we're always taught, at least in my household, that we're supposed to be something in life...they don't consider mental health as an important thing. They think that there's no stress. So I think my culture plays a big role in this as there's more pressure in becoming something...I have always been taught to not care about emotions, to not care about mental health.”

- *Youth Participant*



## **Everyone can play a role in promoting youth mental health – relationships and positive environments are foundational to improving outcomes.**

“Every morning our teacher makes us say something good about the day, something that we appreciate. I found that that has really helped me and my classmates have a better outlook on everything.” - *Youth Participant*

“I have this one teacher who just hands down, is one of the best persons I've ever met because she understands that we're more than just a number to be scored, that we're like humans who have our own crises. And she gets down to our level and she understands what we're like person to person. She doesn't treat us like just a number.” - *Youth Participant*

“I think sometimes some kids just...they don't believe in themselves and people kind of set low expectations for themselves. So they think that they'll never reach their goals....I think everybody needs...a reminder from people to tell them, you can reach your goals. Even if it's a goal to graduate high school, high school, like you can reach it. I think anybody constantly needs to be reminded that whatever they set their mind to, even if it's a small goal, that they can do it.” - *Youth Participant*



## Adult participants reflected on the strengths of this generation of youth.

“I feel like the youth are ahead of us...and so much more courageous. And to me, a lot of my work is catching up and making sure that they have a space because they are fearless and courageous and lovely.” – *Adult Participant*

“I see a lot of them advocating for themselves, and letting us know what they need and what they want.” – *Adult Participant*



## Participants also shared how current systems can harm or re-traumatize youth and the importance of protecting trans and queer youth.

“...on the role of school discipline and how it affects mental health. In [my community], students of color or LGBTQ+ students sometimes feel targeted or unsupported when it comes to school policies. More training for school staff on equity, mental health, and restorative practices would really help.” – *Youth Participant*

“It isn’t just about increasing access to therapy and LGBTQ+ providers...it’s also about ensuring that providers across the board have adequate training and are genuinely safe for LGBTQ+ youth to work with. Oftentimes, there are harms occurring in these relationships that perpetuate stigma and mental health difficulties, while hindering youth in healthy identity development.” – *Adult Participant*

“I think when they are going into the short- term hospitalization, like stabilization forces, like I understand why those institutions are there, but also like they're not necessarily intended to be therapeutic or like healing in the long run. And even if some folks at those places are using their pronouns and their name, they're still getting dead-named [*when a transgender or non-binary person is called by their birth name after they have chosen a new name*] ...they're actively being re-traumatized, which is then perpetuating the suicidality further. And then I also think that in general, like some of our youth with chronic suicidality kind of get pushed from provider to provider because folks are scared to work with them or don't know how to kind of manage it in a more chronic sense. And then that further perpetuates them feeling like they don't have that safe, consistent kind of corrective experience.”

– *Adult Participant*

“Protecting queer and trans youth, they deserve that. They don’t deserve to be pawns in anyone’s political agenda because they’re kids and they deserve to have spaces to exist where they’re not just protected, but they’re celebrated and get to do whatever it is that they enjoy doing. Not just like what we’re saying, like not just therapy spaces, but hobbies, fun things like that, that they’re not being excluded like with some of the other spaces that exist right now.” – *Adult Participant*



**Participants urged decision makers to continue investing resources in behavioral health supports and social safety nets to help break cycles of violence and poor health outcomes.**

“*[With bullying]* the conversation about suicide comes up a lot, maybe ideations without a plan, and it's starting as early as elementary now. So top priority I would say mental health for youth is needed...that's not a negotiable. We're trying to save lives.” – *Adult Participant*

“I think one of the most important things to consider in mental health crises in youth is their family dynamics or the support that their family is getting, because that's going to affect the youth and the family. And so stuff like welfare, WIC, and stuff like that is essential to families because eventually it'll affect their youth and the family.” - *Youth Participant*

“Queer youth go on to become queer adults...if you want to interrupt these cycles, if you want to break these cycles, you have to intervene early on and not perpetuate trauma further...these problems are going to show up in the adult queer population and the population at large if we’re not addressing it for youth.” – *Adult Participant*

## Who Participated in the Focus Groups?

Five virtual focus groups were hosted with participants:

- Ranging from 11 years to over 60 years old, and
- From 14 ZIP codes across New Mexico, with at least one participant from all five public health regions.

### Participants Identified As:

- 52% female, 17% male, 10% non-binary or agender
- 38% Hispanic, 34% White or Caucasian, 10% Black or African American, 3% Indigenous

\* 21% of participants did not provide their demographic information



## Key Findings and Strategic Recommendations

### Invest in Places for Youth to Connect and Belong



**Key Finding:** Youth identify access to clubs, sports, and safe social spaces as one of the most effective ways to help mental health, overall wellness, and successful academic outcomes. However, funding for these programs is often insufficient. There is a need for increasing partnership (planning and funding) between health providers/departments of health and schools/community-based youth recreational programs.

**Strategic Recommendation #1:** There is an opportunity to expand what “health care” looks like to include extracurricular activities and welcoming, free public spaces –these are particularly needed in rural areas of New Mexico and for youth in under-resourced urban communities. Youth called for increased availability of:

- In-school clubs, field trips, and activities open to all students (e.g., not eligibility based on grades)
- Out-of-school sports, clubs, and activities - including culturally relevant programming for diverse communities throughout New Mexico, including affirming programming for LGBTQ+ youth
- Peer-to-peer support programs
- Safe, public spaces to socialize (e.g. youth centers)
- School-based access points to counseling



**Key Finding:** Young people also often turn to each other for help first, but some young people may not know what advice to give or where to go for help. There is a need for building a coalition of young people with skills, information, and resources that can be used to safely help peers in need.

**Strategic Recommendation #2:** Expand un-restricted or low-restricted funding for positive youth development programs. Research shows that these programs support reductions in risky health behaviors, increase positive self-perception, social behaviors, and academic outcomes.<sup>ii iii iv</sup> Prioritize programs that center youth leadership, peer-to-peer support, resource-sharing, culturally relevant and strength-based approaches. Fund programs for younger youth (8-12 years old) as well as initiatives supporting older youth in their transition to adulthood. Avoid “recreating the wheel” by identifying and partnering with trusted community organizations already doing this work.

**Strategic Recommendation #3:** Fund opportunities that uplift youth leadership, including programs focused on health literacy and helping young people understand their rights, policies that impact them, and creating opportunities for informed civic engagement to support community health. Enhance youth-adult partnerships in decision-making by sharing power through youth advisory boards and collaborative program development within government agencies.



## Support Young People by Supporting Adults and Families in Their Lives



**Key Finding:** Focus group results, established research, and national data underscore the importance of supportive relationships with adults as key protective factors for youth resilience and health.<sup>v vi vii</sup>

**Strategic Recommendation #4:** Invest in programs that provide parenting support, community education, and training for adults who work with young people to address mental health stigma, promote mental health awareness, and build adult allyship to better support and work with diverse youth.

**Strategic Recommendation #5:** Support educators in improving health education, connecting young people to health services, and making school environments affirming, supportive, and safe. Continue to uplift and reinforce strategies schools can use to improve mental health, including:

- increasing students' mental health literacy
- promoting mindfulness
- promoting social, emotional, and behavioral learning
- providing psychosocial skills training and cognitive behavioral interventions, and
- supporting staff well-being.<sup>viii</sup>

In our focus groups, youth who received these lessons at school agreed they were very useful and made a positive impact on their lives.

## Conclusion

What was said by focus group participants closely aligns with existing research and policy recommendations in the fields of public health, prevention, and positive youth development. These areas of alignment include:<sup>ix x xi xii</sup>

- Take a population health approach to mental health—not just connecting people to providers.
- Tackle economic and social barriers that affect mental wellbeing.
- Use comprehensive strategies for suicide and violence prevention, including peer support and a diverse mental health workforce.
- Ensure behavioral health care and family support are culturally relevant and safe.
- Address the role of schools and communities in shaping mental health.
- Expand access to programs and spaces that help youth express themselves, build skills, and form connections.

**Key Takeaway:** Celebrate the outcome that current strategies are having positive impact and aligned with what community members are sharing works best! Knowing what works can allow for a focus on advancing state-level policy and funding to expand programming related to:

- Youth and family behavioral health services, including prevention and early intervention.
- Access to vital social and economic supports (e.g., WIC, housing).
- Coordination across services.

## Acknowledgements

We are humbled by the generosity of our focus group participants - thank you for the time, stories, and insights you shared with us. We are encouraged by your hopes and commitment to helping create spaces and communities that foster health, wholeness, and belonging.

This project was funded by the New Mexico Department of Health (NMDOH) Office of School and Adolescent Health (OSAH). Thank you to NMDOH staff who supported participant recruitment. A special thanks to Dylan Pell, Mental Health Epidemiologist, for his insights into the Youth Risk and Resiliency Survey.

In partnership with OSAH, Apex Evaluation conducted the focus groups, analyzed the data, and produced this report. This summary was authored by Hana Ferronato and Eliza Gardiner. We wish to thank Apex team members Chelsea Henkel, Carley Sedillo, and Mary Lombardo for their work on this project.

OSAH and Apex are grateful for all the community champions who helped recruit participants for focus groups and gave advice on facilitation. We could not have done this project without your support.

### New Mexico Department of Health Office of School and Adolescent Health

OSAH's mission is to improve the health of all students and adolescents in New Mexico. OSAH engages in adolescent public health promotion and disease prevention activities directly and through collaboration with public and private agencies. OSAH staff guide policy development on school and adolescent health issues, and are involved in workforce development and training for those providing services to New Mexico youth.

### Apex Evaluation

Apex Evaluation is a consulting firm specializing in systems learning and equitable evaluation. For over twenty years, we have partnered with public agencies, nonprofits, and community organizations to advance strategic learning and social change. Our work is grounded in the belief that evaluation should amplify the voices of those closest to and most impacted by the work, build evidence through multiple perspectives, and generate actionable insights that inform decisions and drive equitable systems improvement.

## Appendix I: About this Project

### About the Focus Groups

Between February - April 2025, five virtual focus groups were conducted with youth and adults from across New Mexico. Before sharing the findings publicly, we invited participants to review and provide feedback on a summary of the focus group results. Participants received honorariums for both their participation in the focus groups and their feedback on the summary.

### Demographics

The ages of participants ranged from 11 years to over 60 years old. Adult participants were largely mental and behavioral health service-providers who work directly with youth.

<b>Number of participants:</b> 29 (12 youth and 17 adults)	<b>Participants' Self-Reported Gender</b>	<b>%</b>	<b>Total number</b>
	Female	52%	15
<b>Geographies:</b> 14 zip codes, 8 counties, with at least one participant from all five public health regions	Male	17%	5
	Non-binary or agender	10%	3
	No response	21%	6
<b>Participants' Self-Reported Race/Ethnicity*</b>		<b>%</b>	<b>Total number</b>
	Hispanic	38%	11
	White or Caucasian	34%	10
	Black or African American	10%	3
	Indigenous	3%	1
	No response	21%	6

\*Some participants identified as more than one race/ethnicity, in these cases, they were counted in each category.

### Positionality Statements

We include positionality statements from Apex team members to acknowledge how our identities and experiences shape our evaluation work. Making these influences visible challenges traditional notions of objectivity and reflects our commitment to equity, transparency, and shared learning.

#### Hana Ferronato

I am a Yonsei (fourth-generation Japanese American) and white settler of European ancestry, living on the lands of the Duwamish and Coast Salish peoples (Seattle, WA). The experiences of my family ground my commitment to engage in work that contributes to collective wellbeing and justice. As a multiracial and queer person navigating the “in-between,” I am reminded to question assumptions and understand categories, ideas, data, and people beyond binaries and first appearances. I grew up with economic privilege and access to higher education. I am also a U.S. citizen, able-bodied, cisgender woman. All of this informs my sense of responsibility and commitment to practice reflexivity, learn from other perspectives, and support redistribution of resources and space.

My background in social services and advocacy informs how I approach research and evaluation. I enjoy listening, working alongside, and centering the perspectives of those most impacted. My training in social

work helps me connect individual experiences to larger systems and strive to foster spaces and processes that honor personal dignity. As an evaluation practitioner, I see myself as a facilitator and co-learner who is committed to practicing (even if imperfectly) culturally responsive, equitable, and decolonial approaches. I believe that evaluation should celebrate strengths alongside its examination of challenges for the purpose of improving strategies and impact.

### **Eliza Gardiner**

My background in anthropology, intercultural communication, and community-based research informs how I connect individual experiences to broader social and structural dynamics. I've also worked across cultures, including internationally, which reminds me to question assumptions, recognize complexity, and engage with people and data beyond surface-level categories.

These experiences fuel my commitment to reflexivity, continuous learning, and contributing to work that supports equity, dignity, and shared wellbeing. As an evaluator, I see myself as both facilitator and co-learner. I value deep listening, trust-building, and working in partnership with those most impacted by the systems we study. I strive to practice culturally responsive, trauma-informed, and equity-centered approaches, and believe evaluation should highlight strengths as well as challenges to support *meaningful learning and action*.

I am also a white, cisgender woman who has benefited from economic and housing stability and access to higher education. I am neurodivergent, shaping how I relate to the world - with empathy, creativity, and systems awareness - which also influences my approach to evaluation.

## References

---

- <sup>i</sup> Everett Jones, S., Satter, D.E., Reece, J., et al. (2024). *Adult Caretaker Engagement and School Connectedness and Association with Substance Use, Indicators of Emotional Well-Being and Suicide Risk, and Experiences with Violence Among American Indian or Alaska Native High School Students –Youth Risk Behavior Survey, United States, 2023*. MMWR Suppl 73(4): 13-22. DOI: <http://dx.doi.org/10.15585/mmwr.su7304a2>
- <sup>ii</sup> Catalano, R.F., Berglund, M.L., Ryan, J.A.M., Lonczak, H.S., & Hawkins, J.D. (2004). *Positive Youth Development in the United States: Research Findings on Evaluations of Positive Youth Development Programs*. The ANNALS of the American Academy of Political and Social Science, 591(1), 98-124. <https://doi.org/10.1177/0002716203260102>
- <sup>iii</sup> Durak, J.A., Weissberg, R.P., & Pachan, M. (2010). *A Meta-Analysis of After-School Programs That Seek To Promote Personal and Social Skills in Children and Adolescents*. American Journal of Community Psychology, 45(3-4): 294-309. <https://doi.org/10.1007/s10464-010-9300-6>
- <sup>iv</sup> . Ciocancel, O., Power, K., Eriksen, A., & Gillings, K. (2017). *Effectiveness of Positive Youth Development Interventions: A Meta-Analysis for Randomized Controlled Trials*. J Youth Adolesc. 46(3): 483-504. doi: 10.1007/s10964-016-0555-6. Epub 2016 Aug 12. PMID: 27518860.
- <sup>v</sup> Centers for Disease Control and Prevention. (2024). *Youth Risk Behavior Survey Data Summary & Trends Report 2013-2023*. U.S. Department of Health and Human Services. <https://www.cdc.gov/yrbs/dstr/pdf/YRBS-2023-Data-Summary-Trend-Report.pdf>
- <sup>vi</sup> Office of Office of the Surgeon General. (2021). *Protecting Youth Mental Health: The U.S. Surgeon General’s Advisory*. <https://www.hhs.gov/sites/default/files/surgeon-general-youth-mental-health-advisory.pdf>
- <sup>vii</sup> Centers for Disease Control and Prevention. (2024). *Mental Health*. <https://www.cdc.gov/healthy-youth/mental-health/index.html>
- <sup>viii</sup> Centers for Disease Control and Prevention. (2023). *Promoting Mental Health and Well-Being in Schools: An Action Guide for School and District Leaders*. [https://www.cdc.gov/mental-health-action-guide/media/pdfs/DASH\\_MH\\_Action\\_Guide\\_508.pdf](https://www.cdc.gov/mental-health-action-guide/media/pdfs/DASH_MH_Action_Guide_508.pdf)
- <sup>ix</sup> Ross-Reed, A. (2025). *We Can Improve Community Mental Health: Roadmap for Lawmakers*. [Unpublished]. LGBTQ Roundtable & HEAL Plus New Mexico.
- <sup>x</sup> Pell, D., Green, D. (2022). *State of Mental Health in New Mexico*. Injury and Behavioral Epidemiology Bureau, Epidemiology and Response Division, New Mexico Department of Health. <https://www.nmhealth.org/data/view/report/2650/>
- <sup>xi</sup> Apex Evaluation. (2024). *Building Strengths and Resilience: A look into the past, present, and future of the New Mexico Youth Peer-to-Peer Helper Program*. Albuquerque, NM.
- <sup>xii</sup> Carbajal, D.R. (2021). *Mental Health, School Climate, and the Resilience of LGBTQIA+ Mexican/x Youth*. [Masters Thesis, University of New Mexico]. UNM Digital Repository.