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FISCAL IMPACT REPORT

SPONSOR:	Feldman	DATE TYPED:	2/2/03	НВ	
SHORT TITLE	E: Education for At-Risk	Families		SB	252
			ANALY	ST:	Dunbar

APPROPRIATION

Appropriation Contained		Estimated Additional Impact		Recurring or Non-Rec	Fund Affected
FY03	FY04	FY03	FY04		
	\$2,300.0			Recurring	GF
	\$300.0			Recurring	GF

(Parenthesis () Indicate Expenditure Decreases)

SOURCES OF INFORMATION

Responses Received From

Department of Health (DOH) New Mexico State Department of Education (NMSDE)

SUMMARY

Synopsis of Bill

Senate Bill 252 appropriates \$2,300.0 to the Department of Health (DOH) and \$300.0 to the Board of Regents of NM State University for expenditure in fiscal year 2004. The appropriation to DOH is as follows and for the following purposes:

- \$300.0 to contract with a suicide intervention project to develop statewide prevention strategies and training for adults and students;
- \$2,000.0 to fund new services and build infrastructure, with priority given to alcohol and substance abuse intensive post-treatment community based case management, jail diversion and crisis intervention, and to address behavioral health needs and gaps, as recommended in the department's 2002 gap analysis;

Senate Bill 252 -- Page 2

The appropriation to the Board of Regents of NMSU is as follows and for the following purposes:

• \$300.0 for expanding family strengthening partnership parenting education programs to improve parenting and life skills, nutrition education for low-income at-risk families, and to expand infrastructure and geographic locations of the program.

Significant Issues

In 1999, New Mexico had the third highest suicide rate in the U.S., with an age adjusted death rate of 18.9/100,000. The overall age adjusted death rate for the U.S. was 10.7/100,000. In that same year, suicide was the 2nd leading cause of death for New Mexicans ages 15-24, and the 4th leading cause of death for New Mexicans ages 10-14.

A 2002 gap analysis outlined the extensive behavioral health treatment needs in New Mexico. DOH reports that SB 252 would ensure that many of these gaps could be addressed, in particular, community-based post treatment alcohol and substance abuse case management, jail diversion, and crisis intervention. According to the gap analysis, current funding addresses only 19% of substance abuse services and 46% of mental health services.

PERFORMANCE IMPLICATIONS

SB 252 supports the DOH Strategic Plan, Program Area I, Prevention, Health Promotion and Early Intervention. The funds would be utilized to reduce individual and interpersonal violence in New Mexico families, schools, communities and the workplace.

SB 252 relates to the State Department of Education's (SDE) measures for safe schools and respectful learning environment.

FISCAL IMPLICATIONS

The appropriation of \$2,600.0 contained in this bill is a recurring expense to the general fund. Any unexpended or unencumbered balance remaining at the end of FY 04 shall revert to the general fund.

The current recommendations for Behavioral Health Program contracts included in HB 2 provide for a \$1,700.0 increase from the FY 03 operating budget.

Currently there are limited funds in the Department of Health allocated to suicide prevention: 1) \$83,000 from the Centers for Disease Control Preventive Health and Health Services Block Grant to the Public Health Division to provide prevention programs and services in two counties; and 2) an estimated \$60,000 from the Title V MCH Block Grant to the state that funds staff for the NM Child Fatality Review which includes review of suicide deaths in youth to age 24 to better identify risk factors and community systems issues.

ADMINISTRATIVE IMPLICATIONS

The Public Health Division (PHD) could adequately develop and monitor a funded suicide prevention contract within existing resources. PHD staff would collaborate with NMSU in its par-

Senate Bill 252 -- Page 3

enting and nutrition education endeavors. The Behavioral Health Services Division (BHSD) has structures and personnel in place to implement the behavioral health treatment sections of this bill with minimal administrative impact.

TECHNICAL ISSUES

The wording of Section 1.A.(1) (p. 1, lines 22-25) is vague and needs more clarification. The funds should be utilized to address strategies about how to implement the goals and objectives of the National Suicide Prevention Strategy.

The wording for Section 2 (p. 2, lines 13-22) should reflect <u>evaluation</u> of the effectiveness of the services to improve parenting and life skills. The language is also unclear about geographic expansion coverage. Will services occur through a program implemented at the university in a nearby community or statewide?

OTHER SUBSTANTIVE ISSUES

There were 939 suicides in New Mexico from 1998 - 2000, and people ages 25-44 have the highest rate of suicide in New Mexico. The ten counties with the highest suicide rates from 1998-2000 include: McKinley, Rio Arriba, Colfax, Mora, San Miguel, Santa Fe, De Baca, Lincoln, Sierra, Grant, and Hidalgo (Office of New Mexico Vital Records and Health Statistics, NMDOH). In 1999, 17% of New Mexico youth surveyed through the school system reported seriously considering suicide, 14% reported having made a plan for suicide, and 7.5% actually attempted suicide (1999 New Mexico Youth Risk Behavior Survey: Report of State Results).

According to DOH:

- The best and most promising prevention strategies are: Work and/or School Gatekeeper Training, Community Gatekeeper Training, General Suicide Prevention Education, Screening Programs, Peer Support Programs, Crisis Center and Hotlines, Means Restriction, and Post-event Intervention After a Suicide. Currently, there is inadequate funding to provide these activities statewide.
- High poverty rates and increasing child poverty rates place many New Mexico families at risk of negative outcomes. New Mexico ranks number one in the USA for "food insecurity" and "hunger", according to Brandeis University.
- The most effective approach in teaching parenting skills is to build on family strengths. Parenting skills building is necessary for parents who have little support in their lives, are adjusting to major changes, or are overwhelmed by major stressors. Information needs to be provided by trained staff that is skilled in understanding cultural behaviors and beliefs.
- Even moderate under-nutrition can have lasting effects on the cognitive development of children. Under-nutrition begins to exact its toll even before the child is born. Pregnant women who are under-nourished are more likely to have low birth weight babies who are at greater risks for delay in physical and mental development.

POSSIBLE QUESTIONS

What program gaps would be addressed by this funding?

BD/njw:yr