A MEMORIAL

REQUESTING THE HEALTH SCIENCES CENTER AT THE UNIVERSITY OF NEW MEXICO TO CREATE THE J. PAUL TAYLOR EARLY CHILDHOOD TASK FORCE AS AN INITIATIVE TO IMPROVE COLLABORATION AMONG EARLY CHILDHOOD DEVELOPMENT STAKEHOLDERS, TO BETTER IDENTIFY CHILDREN AT RISK OF CHILD ABUSE AND NEGLECT, TO DEVELOP AN EARLY CHILDHOOD MENTAL HEALTH PLAN AND TO IMPROVE THE EARLY CHILDHOOD SERVICES SYSTEM AND PROMOTE EVIDENCE- AND COMMUNITY-BASED EARLY CHILDHOOD PROGRAMS THROUGHOUT THE STATE.

WHEREAS, former Representative J. Paul Taylor has devoted his life to and been a beloved champion of children throughout the state, and, over his years as a legislator and an advocate, he has always urged state policymakers to recognize the vital importance of a coordinated, seamless system of care for New Mexico's children, particularly for those from birth to age five and those at risk; and

WHEREAS, early childhood is the most important phase for overall development throughout a person's life span; and

WHEREAS, brain and biological development during the first years of life is highly influenced by an infant's environment, and early experiences determine health, education, economic and social participation for the rest of a person's life; and

WHEREAS, preschool-aged children are overrepresented in HM 75 Page 1 substantiated cases of abuse, neglect and maltreatment that leave a legacy of poor physical and emotional health and developmental challenges; and

WHEREAS, children at risk, especially those affected by prenatal health challenges, family trauma or disruption, parental depression or mental illness, poverty, abuse or exposure to violence, need a safety net of early childhood mental health services; and

WHEREAS, the social and financial costs that New Mexico and the United States pay for the failed potential of children are enormous, and they are costs that could be ameliorated by adequate funding for early childhood services, particularly services for at-risk infants and children; and

WHEREAS, as states have faced financial crises and struggled to fund necessary public services, early childhood programs have been drastically reduced and, in some cases, eliminated, even though research and data show the costeffectiveness of such programs, and the result of such cutbacks is that underserved and unidentified at-risk infants and children remain in the societal shadows; and

WHEREAS, in its report on early childhood, the world health organization notes that "globally, societies that invest in children and families in the early years - whether rich or poor - have the most literate and numerate HM 75 populations. These are also the societies that have the best

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health status and lowest levels of health inequality in the world. . . . Investing in young children is an essential component for the development of a national economy. Early opportunities for learning in combination with improved nutrition increase the likelihood that a child will attend school and become an adult with higher income, better health, lower crime rates, and lower levels of welfare dependence than those who do not receive early development support"; and

WHEREAS, to reach their potential, young children need to spend time in a caring, responsive environment that protects them from abuse, neglect and inappropriate disapproval and punishment, and parents and families are the key to early child development, but they sometimes need support to provide the right environment; and

WHEREAS, New Mexico has unacceptably high rates of child abuse and neglect, and not only does the state's current system of care for at-risk children have significant geographic and programmatic gaps, the state lacks a comprehensive plan of prevention, intervention and treatment for at-risk children and families; and

WHEREAS, in New Mexico, behavioral health services for children from birth through five years of age have been reduced and altered drastically over the past three years, evidenced by significant funding restrictions and cuts to services for children in the family, infant, toddler program

HM 75 Page 3 and in the children, youth and families department behavioral health program and in the redefining of services to at-risk young children that has resulted in the elimination of individualized services for three-, four- and five-year-old at-risk children and the establishment of a significant deficit-based model; and

WHEREAS, a public health approach seeks to optimize the well-being of all children through health promotion, and the health care system and health providers have pivotal roles to play in intervention and treatment strategies as they are often the points of early contact with a child and can serve as gateways to other early childhood services;

NOW, THEREFORE, BE IT RESOLVED BY THE HOUSE OF REPRESENTATIVES OF THE STATE OF NEW MEXICO that the health sciences center at the university of New Mexico appoint the "J. Paul Taylor early childhood task force", to be chaired by the chairperson of the children's trust fund board of trustees and to include members who represent the New Mexico youth providers alliance, New Mexico state university, the birth to five policy alliance, the coalition against child abuse and neglect, the New Mexico early learning advisory council and the early childhood accountability partnership; one representative each from military child care, the peanut butter and jelly family services and the infant mental health association; one member who represents the interests of early HM 75 Page 4 childhood development in Native American communities and one who represents those interests in immigrant communities; one medical professional and one research faculty at a college of education or other university department with expertise in early childhood cognitive and social development research, and, in an advisory role, one member each from the public education department's race to the top team, the children, youth and families department's early childhood services, the department of health's family, infant, toddler program and the human services department's medical assistance and behavioral health services divisions;

BE IT FURTHER RESOLVED that the task force:

A. recommend means and methods to improve collaboration among early childhood development stakeholders;

B. develop a system to identify invisible, unserved and underserved at-risk infants and young children;

C. develop an early childhood mental health plan and process for infants and children through age eight, ranging from prevention through early intervention and treatment, that is community health-based and outcomes-driven to ensure that children and infants at risk for child abuse and neglect and adverse childhood environments have a full cadre of services, with multiple access points, and that informs state and local funding decisions and the growth of the early childhood system;

HM 75 Page 5 D. identify how the early childhood system can be used for child abuse prevention; and

E. promote evidence-based, community early childhood programs in New Mexico by ensuring access to state data for early childhood research; and

BE IT FURTHER RESOLVED that the university of New Mexico's health sciences center office of community health be requested to coordinate and administer the task force along with the legislative council service; and

BE IT FURTHER RESOLVED that the task force report its findings and recommendations to the legislative health and human services committee, the legislative finance committee and the early learning advisory council no later than November 2013; and

BE IT FURTHER RESOLVED that a copy of this memorial be transmitted to the health sciences center at the university of New Mexico.

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