

LFC Requestor: Kelly Klundt

2024 LEGISLATIVE SESSION
AGENCY BILL ANALYSIS

Section I: General

Chamber: House

Category: Bill

Number: 144

Type: Introduced

Date (of THIS analysis): 1/22/24

Sponsor(s): [Dayan Hochman-Vigil](#)

Short Title: Office Of Gun Violence Prevention

Reviewing Agency: Agency 665 - Department of Health

Person Writing Analysis: Arya Lamb

Phone Number: 505 - 470 - 4141

e-Mail: arya.lamb@doh.nm.gov

Section II: Fiscal Impact

APPROPRIATION (dollars in thousands)

| Appropriation Contained | | Recurring or Nonrecurring | Fund Affected |
|-------------------------|-------|---------------------------|---------------|
| FY 24 | FY 25 | | |
| \$0 | \$0 | n/a | n/a |
| | | | |

REVENUE (dollars in thousands)

| Estimated Revenue | | | Recurring or Nonrecurring | Fund Affected |
|-------------------|-------|-------|---------------------------|---------------|
| FY 24 | FY 25 | FY 26 | | |
| \$0 | \$0 | \$0 | n/a | n/a |
| | | | | |

ESTIMATED ADDITIONAL OPERATING BUDGET IMPACT (dollars in thousands)

| | FY 24 | FY 25 | FY 26 | 3 Year Total Cost | Recurring or Non-recurring | Fund Affected |
|-------|---------|---------|---------|-------------------|----------------------------|---------------|
| Total | \$746.9 | \$746.9 | \$746.9 | \$2240.7 | Recurring | n/a |

| | |
|--|-----------|
| PS & EB | |
| Pay band 75-\$37.34 x 2080 x 1.36=105,627 (Epi A) | \$105,627 |
| Pay band 75-\$37.34 x 2080 x 1.36=105,627 (program coordinator II) | \$105,627 |
| Pay band 75-\$37.34 x 2080 x 1.36=105,627 (program coordinator II) | \$105,627 |
| Pay band 75-\$37.34 x 2080 x 1.36=105,627 (program coordinator II) | \$105,627 |
| Pay band 75-\$37.34 x 2080 x 1.36=105,627 (program coordinator II) | \$105,627 |
| Pay band A01-\$37.34 x 2080 x 1.6 =113,043 (staff manager) | \$113,043 |
| | |
| Computer setup \$2700/FTE | \$16,200 |
| Supplies, software \$699/FTE/Year | \$4194 |
| | \$10,344 |
| Fixed costs (IT, phone lines, etc) \$4000/FTE/yr | \$24,000 |
| | |
| Office space, \$5000/FTE/Yr | \$30,000 |
| | |
| Training, continuing education, conference attendance, \$3500/FTE/yr | \$21,000 |
| | |
| | \$746,916 |

Section III: Relationship to other legislation

Duplicates: None

Conflicts with: None

Companion to: None

Relates to: None

Duplicates/Relates to an Appropriation in the General Appropriation Act: None

Section IV: Narrative

1. BILL SUMMARY

a) Synopsis

House Bill 144 (HB0144) proposes to create the Office of Gun Violence Prevention and Intervention, creates the director selection committee to appoint a director to the Office identifies the process for this appointment [housed in the Department of Health] that includes:

- Creating a committee (4 members selected from the legislative council [no more than two from the same political party] and 4 members by the governor [no more than two from the same political party]).
- Identifying a committee chair selected by the majority of the committee who is not a candidate for the director position.
- Selecting a candidate for a 6-year term within 30 days after a vacancy. (One exception is the initial term that begins on July 1, 2024 and ends December 31, 2024.) The Director can be appointed to a second [or additional] 6-year term.
- Setting the salary of the director, which is done by the committee.

HB0144 also describes the duties of employees of the Office of Gun Violence Prevention & Intervention that includes:

- Hiring and contracting for technical and support staff consistent with the Personnel Act.
- Maintaining a resource bank on best practices for preventing gun violence and collaborating with research institutions, public health departments, police departments, organizations, and researchers seeking information about gun violence in New Mexico.
- Identifying gaps in available data needed for gun violence prevention and developing strategies to improve relevant data collection in New Mexico
- Gathering and analyzing data on petitions filed under the Extreme Risk Firearm Protection Order Act.
- Using existing available research to improve evidence-based gun violence prevention tools and resources for New Mexico's residents.
- Promoting new gun violence prevention research including gun violence prevention awareness and outreach campaigns that are accessible to researchers and the public.
- Coordinating among state agencies, localities, and nongovernmental organizations to address gun violence comprehensively.
- Collaborating with the New Mexico law enforcement academy to assist with gun violence prevention education and training for officers.
- Applying for federal grants to gather and disseminate data on gun violence in New Mexico with a focus on public health, education, and racial and economic equity in collaboration with other state department and partners to identify.
- Reporting to the legislature annually on the Office's findings and recommendations by December 15th of each year.
- Providing an annual report to the public through the office's website or the website of the Department of Health.

HB0144 also specifies the duties of the director that includes:

- Overseeing, managing, assigning, and distributing the work of the office.
- Providing funding from grants and other funding to outside organizations to further the goals of the office.

Is this an amendment or substitution? Yes No

Is there an emergency clause? Yes No

b) Significant Issues

Firearm deaths in New Mexico

- In 2022, New Mexico had the third highest age-adjusted rate of firearm involved death among all states in the United States (26.5 deaths per 100,000 residents) (Unpublished data, [BVRHS](#)), which was 84% higher than the United States (14.4 deaths per 100,000 residents, age adjusted) ([Provisional Mortality Statistics, 2018 through Last Week Request Form \(cdc.gov\)](#)).
- In 2022, the age adjusted firearm death rate in New Mexico was 26.5 deaths per 100,000 residents, which was the second highest rate in New Mexico since 1999 (Unpublished data, New Mexico Bureau of Vital Records and Health Statistics [[NM BVRHS](#)]).
- The age adjusted firearm death rate in New Mexico *decreased* by 1.9% between 2021 and 2022 (from 27.0 to 26.5 deaths per 100,000 residents), but increased by 17.3% between 2020 and 2022 (from 22.6 to 26.5 deaths per 100,000 residents) (Unpublished data, [NM BVRHS](#)).
- In 2022, there were 550 firearm-related deaths in New Mexico that included *295 suicides, which represents 54% of all firearm deaths in New Mexico* (Unpublished data, [NM BVRHS](#)).
 - In New Mexico, there have been 140 firearm deaths among children aged 0 – 18 between 2016 and 2020, which include 68 suicide deaths and 64 homicide deaths (<https://wonder.cdc.gov/Deaths-by-Underlying-Cause.html>).

Applying the Public Health Approach to Gun Violence

Medical clinicians treat disease by focusing on one patient at a time. In contrast, public health brings together researchers, practitioners, educators, and other stakeholders to prevent disease and injury at the community or population level by: (1) identifying root causes; and (b) implementing large scale solutions. When you apply the public health framework to gun violence, this would mean focusing less on treating individual gunshot wounds and shifting the focus to identify root causes of gun violence and developing interventions to prevent it (<https://publichealth.jhu.edu/about/what-is-public-health>).

Root Causes (Shared Risk and Protective Factors) for Firearm Injury

For the past decade, the CDC has recognized that: (1) violence can take many forms (e.g., domestic violence, sexual violence, child maltreatment, suicidal behavior, elder abuse and neglect); and (2) this spectrum of violent behavior is often interconnected and shares a common set of root causes. The take home message is that understanding shared root causes (or shared risk and protective factors) and having a broader perspective on violence prevention can maximize the impact of public health initiatives by preventing multiple types of violence at once (<https://www.cdc.gov/violenceprevention/about/connectingthedots.html#:~:text=The%20different%20forms%20of%20violence,share%20the%20same%20root%20causes>). For example, more recent research has found that:

- Structural determinants of health (e.g., income inequality [poverty], economic opportunity [e.g., employment], and access to healthcare, mental health, or substance abuse services) are common root causes for multiple types of violence and other injury outcomes, including substance misuse and overdose. (<https://onlinelibrary.wiley.com/doi/epdf/10.1002/jcop.22232>).
- Exposure to violence (in the household or community) is a shared risk factor for multiple forms of violence (<https://pubmed.ncbi.nlm.nih.gov/29189502/>).
- Focusing on upstream causes (e.g., child abuse and neglect) is consistent with public health's goal of prevention (e.g., preventing violent behavior and/or violent victimization in adulthood), but this approach also requires that public health initiatives include a broader range of programs and services that go beyond treating individuals or families in crisis (<https://www.journals.uchicago.edu/doi/pdf/10.1086/704958>).
- Exposure to violence, gang fights, drug sales, violent behavior, and delinquent peers are a shared risk factor for youth firearm access (possession or carrying) in a sample of U.S. urban youth in the Mountain West ([Risk and Protective Factors Associated with Youth Firearm Access, Possession or Carrying - PMC \(nih.gov\)](#)).

Public Health Partnerships and Firearm Injury Prevention

A second key aspect of firearm injury prevention is the breadth of public health partnerships, which includes social services, healthcare organizations, community organizations, and state and local governments (<https://pubmed.ncbi.nlm.nih.gov/32663079/>). Several challenges facing these public health partnerships include bureaucratic barriers [between organizations] to data sharing and restrictions from funding agencies [that prohibit or restrict funding to a single discipline (i.e., only social service organizations)] (<https://onlinelibrary.wiley.com/doi/10.1111/hsc.13374>). However, the broad scope of public health partnerships offer tangible benefits including:

- Using the shared risk and protective factors framework to combine funding from several sources (pooling funds) or increased ability to sustain public health initiatives by over time by having the ability to apply for funding from a broader range of funding sources (braiding funds) (<https://onlinelibrary.wiley.com/doi/10.1111/hsc.13374>).
 - For example, the Colorado Department of Public Health and Environment (CDPHE) used the CDC's Rape Prevention Education funding and Core Violence and Injury Prevention Program (Core VIPP) to create a state grant program that funded community agencies to select and implement prevention strategies that addressed shared risk and protective factors that impacted multiple types of violence (<https://pubmed.ncbi.nlm.nih.gov/29189502/>).
 - CDPHE also leveraged the CDC's Rape Prevention Education funding and the state's Child Fatality Prevention System to create a youth suicide prevention program that focused on shared protective factors [youth-adult connectedness and school connectedness] for both sexual violence and suicide prevention (<https://pubmed.ncbi.nlm.nih.gov/29189502/>).
 - CDPHE also focused on common risk and protective factors for unintentional injury, suicide, prescription overdose, older adult falls, motor vehicle crashes, interpersonal violence, child maltreatment, and traumatic brain injury to develop a five year plan based on a comprehensive public health approach to

both injury and violence (<https://pubmed.ncbi.nlm.nih.gov/29189502/>).

NMDOH Office of Gun Violence Prevention and the Public Health Approach

NMDOH works to implement public health approaches such as those described above. The current NMDOH Office of Gun Violence Prevention was created and funded in 2022 by the legislature via an appropriation to NMDOH of recurring funding in the amount of \$300,000. This funding has been used to create and fund two positions, a Violence Prevention Evaluator and a Gun Violence Prevention Coordinator, with a small amount left over to fund community violence prevention efforts.

This Office of Gun Violence Prevention is housed within the Injury and Violence Prevention Section of the Injury and Behavioral Epidemiology Bureau (IBEB) within the Epidemiology and Response Division (ERD). As part IBEB, the current Office of Gun Violence Prevention is part of a larger public health approach to injury prevention that also includes suicide prevention, falls prevention, and overdose prevention.

Siloing gun violence prevention into a single topic office isolated from collaboration with other injury programs could hinder comprehensive efforts to address gun violence and potentially duplicate efforts. Applying the public health approach that address not only immediate causes but also root causes of gun violence, using data to inform and evaluate interventions, and building collaborative partnerships will provide the most return for our investments.

To implement the activities described in the bill, 6 new positions will need to be created.

- A Unit Manager position will need to be created to guide and assign the work.
- Two positions, a program coordinator and a data analyst or epidemiologist will be needed for the following activities:
 - (1) maintain the resource bank, which includes a range of collaborative relationships with research institutions, researchers, the police, hospitals, and community organizations (SECTION 7, part B); establish near real-time data sharing agreements with the police statewide to analyze data on Extreme Risk Firearm Protection Orders (SECTION 7, part B);
 - (2) create a gun violence prevention training program for the New Mexico law enforcement academy (SECTION 7, part B);
- Three program coordinator positions will need to be created for the following:
 - (3) facilitate statewide gun violence prevention efforts across state agencies, localities, and nongovernmental organizations (SECTION 7, part B);
 - (4) create gun violence prevention dissemination products tailored to residents as well as gun violence prevention researchers (SECTION 7, part B);
 - (5) conduct gun violence prevention awareness and outreach campaigns (SECTION 7, part B);
 - (6) create a report for the New Mexico legislative council [by December 15th of each year] and the public available on the Office's or the department's website (SECTION 9).

(7) apply for federal grants or other funding in collaboration with other state departments and/or partners (SECTION 8).

- Since gun policy is a highly polarized topic in the U.S. (<https://www.pewresearch.org/politics/2021/04/20/amid-a-series-of-mass-shootings-in-the-u-s-gun-policy-remains-deeply-divisive/>), the public health approach, which is the foundation of HB0144, may be undermined since the hiring process for the Director of the Office of Gun Violence Prevention and Intervention, and the duties for employees and the Director in the Office of Gun Violence Prevention and Intervention are being mandated by a committee comprised of political actors (four from the legislature and four by the governor).

2. PERFORMANCE IMPLICATIONS

- Does this bill impact the current delivery of NMDOH services or operations?
 Yes No
- Is this proposal related to the NMDOH Strategic Plan? Yes No
 - Goal 1:** We expand equitable access to services for all New Mexicans
 - Goal 2:** We ensure safety in New Mexico healthcare environments
 - Goal 3:** We improve health status for all New Mexicans
 - Goal 4:** We support each other by promoting an environment of mutual respect, trust, open communication, and needed resources for staff to serve New Mexicans and to grow and reach their professional goals

3. FISCAL IMPLICATIONS

- If there is an appropriation, is it included in the Executive Budget Request?
 Yes No N/A
- If there is an appropriation, is it included in the LFC Budget Request?
 Yes No N/A
- Does this bill have a fiscal impact on NMDOH? Yes No

4. ADMINISTRATIVE IMPLICATIONS

Will this bill have an administrative impact on NMDOH? Yes No

5. DUPLICATION, CONFLICT, COMPANIONSHIP OR RELATIONSHIP: None

6. TECHNICAL ISSUES

Are there technical issues with the bill? Yes No

7. LEGAL/REGULATORY ISSUES (OTHER SUBSTANTIVE ISSUES)

- Will administrative rules need to be updated or new rules written? Yes No
- Have there been changes in federal/state/local laws and regulations that make this legislation necessary (or unnecessary)? Yes No
- Does this bill conflict with federal grant requirements or associated regulations?
 Yes No
- Are there any legal problems or conflicts with existing laws, regulations, policies, or programs? Yes No
 - HB0144 does not appropriate additional funding for the Office of Gun Violence Prevention & Intervention or the Director position. Without an appropriation, the activities identified in the bill will not be feasible.
 - HB0144 (SECTION 7 & 8) require the creation of a resource bank and the application for non-state funding for gun violence prevention. However, this will require additional state funding for 6 new positions and contracts.

8. DISPARITIES ISSUES

Firearm Deaths in New Mexico

- Between 2018 and 2022, there were 117 firearm deaths among children aged 0 – 17 in New Mexico, which included 50 suicide deaths and 56 homicide deaths (Unpublished data, [NM BVRHS](#)).
 - Between 2018 and 2022, child (age 1-17) firearm injury emergency department visits have increased by 73% (from 90 visits in 2018 to 156 visits in 2022) (<https://www.governor.state.nm.us/gun-violence-dashboard/>).
- In 2022, American Indian and Alaska Natives (AI/AN) residents in New Mexico were 21% more likely (30.6 deaths per 100,000 residents, age adjusted) to be killed with a firearm compared to White residents (25.2 deaths per 100,000 residents, age adjusted) (Unpublished data, [NM BVRHS](#)).
- In 2022, Black or African American residents in New Mexico were 49% more likely (42.7 deaths per 100,000 persons) to have a firearm involved death than White residents (28.7 deaths per 100,000 persons) (Unpublished data, [NM BVRHS](#)).
- In 2022, males in New Mexico were nearly five times more likely (44.2 deaths per 100,000 residents, age adjusted) to have a firearm-involved death than females (9.0 deaths per 100,000 residents, age adjusted) (Unpublished data, [NM BVRHS](#)).

9. HEALTH IMPACT(S)

Firearm Deaths in New Mexico

- Between 2018 and 2022, there were 117 firearm deaths among children aged 0 – 17 in New Mexico, which included 50 suicide deaths and 56 homicide deaths (Unpublished data, [NM BVRHS](#)).
- Between 2018 and 2022, child (age 1-17) firearm injury emergency department visits have increased by 73% (from 90 visits in 2018 to 156 visits in 2022) (<https://www.governor.state.nm.us/gun-violence-dashboard/>).
- In 2022, New Mexico had the third highest age-adjusted firearm death rate among all states in the United States (26.5 deaths per 100,000 residents) (Unpublished data, [BVRHS](#)), which was 84% higher than the United States rate (14.4 deaths per 100,000 residents, age adjusted) ([Provisional Mortality Statistics, 2018 through Last Week Request Form \(cdc.gov\)](#)).
- In 2022, firearm involved death would be the 10th leading cause of death in New Mexico with more deaths than nutritional deficiencies and influenza and pneumonia ([CDC Wonder - Underlying Cause of Death Form](#) – Data queried and prepared by NMDOH – ERD on 1.11.2024).
- Between 2012 and 2022, the age-adjusted firearm death rate in New Mexico increased by 75% (from 15.1 deaths per 100,000 residents in 2012 to 26.5 deaths per 100,000 residents in 2022) (Unpublished data, [NM BVRHS](#)).
- Between 2020 and 2022, the age-adjusted rate of firearm death *increased by 17%* (from 22.6 to 26.5 deaths per 100,000 residents) with 69 more deaths than in 2020. However, there was a 2% decrease in the rate from 2021 to 2022 (from 27.0 to 26.5 deaths per 100,000 residents) with 12 fewer deaths in 2022 (Unpublished data, [NM BVRHS](#)).
- The health impact of expanding the Office of Gun Violence Prevention would be to reduce gun violence.

10. ALTERNATIVES None

11. WHAT WILL BE THE CONSEQUENCES OF NOT ENACTING THIS BILL?

If HB0144 is not enacted, then the appointment process for the Director of the Office of Gun Violence Prevention & Intervention and the duties for the employees and Director of the Office of Gun Violence Prevention & Intervention will not be specified.

12. AMENDMENTS

None