

September 26, 2013

Representative Debbie Rodella
Room 306A, New Mexico State Capitol
Santa Fe, NM 87501

Dear Representative Rodella,

House Joint Memorial 12 (HJM12) requests the Department of Health (DOH) and the Human Services Department (HSD) incorporate "peer-to-peer approaches" into existing substance abuse efforts. To achieve this goal, the DOH and HSD must change existing program models to incorporate peer-to-peer components, or modify grant requirements in future requests for proposals to include peer-to-peer strategies. HJM12 asserts that research shows peer-to-peer programs reduce: substance use, injection risk behaviors, arrest rates, sports injuries, and riding with a driver who has been using substances. Also, HJM asserts peer-to-peer programs improve healthy behaviors such as seeking appropriate health care.

The high prevalence and heavy burden of adolescent substance abuse in New Mexico is well-documented. The most recent estimates from the National Survey on Drug Use and Health (NSDUH) show that in 2009-2010, among 12-17 year-olds, New Mexico had the eighth highest rate of past-month illicit drug use (12.4%), the second highest rate of past-month illicit drug use other than marijuana (5.5%). Also, for the same time frame and age group, New Mexico had: the second highest rate of past-year non-medical use of pain relievers (8.3%); the third highest rate of past-year alcohol dependence (2.2%); and the highest rate of past-year illicit drug dependence or abuse (6.8%) in the United States. During the most recent three-year period for which alcohol-related mortality data are available (2005-2007), New Mexico had the fifth highest alcohol-related injury death rate among 15-24 year-olds in the United States (NMDOH, 2013). During the most recent five-year period for which drug overdose mortality data are available (2006-2010), New Mexico had the highest drug overdose death rate among 10-19 year olds in the United States (CDC Wonder, 2013).

These substance abuse and related mortality data suggest the need for the most effective possible substance abuse prevention efforts among adolescents in New Mexico. However, the peer-to-peer prevention approach recommended by HJM12 has not been recommended by various expert bodies convened to review scientific literature related to substance abuse prevention. Systematic reviews of alcohol-related prevention strategies by the World Health Organization (*Alcohol: No Ordinary Commodity*, 2nd edition, Babor *et al*, 2010) and the Institute of Medicine (*Reducing Underage Drinking: A Collective Responsibility*, 2004) did not include peer-to-peer approaches among the wide array of effective strategies they recommended. Also, the Community Guide found insufficient evidence that peer organizations such as Students Against Drunk Driving have a significant effect on drunk driving or riding with drunk drivers (*Effectiveness of School-Based Programs for Reducing Drinking and Driving and Riding with Drinking Drivers: A Systematic Review*, Elder *et al*, AJPM, 2005). In the decade since these published studies, the Substance Abuse and Mental Health Services Administration (SAMHSA) created the National Registry of Evidence-Based Programs and Practices (NREPP) as a repository for suggested substance abuse prevention programs; to date, only four of the 268

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programs posted to NREPP involve “peer-to-peer” or “peer-led” components, suggesting that this approach has not emerged as a leading substance abuse prevention paradigm in the decade since the most recent analyses were completed.

Given the relative weakness of the scientific evidence for the effectiveness of peer-to-peer approaches in reducing substance abuse and related outcomes, and after having consulted with the Human Services Department and the Children, Youth and Families Department, neither DOH nor the other two agencies support the reorientation of existing substance abuse prevention programming to emphasize this approach, as suggested by HJM12. However, all three agencies plan to continue to work with the Legislature and various community groups to implement evidence-based approaches that have been shown to be effective to attempt to reduce New Mexico’s substance abuse problem.

Sincerely,

A handwritten signature in black ink that reads "Retta Ward". The signature is written in a cursive, flowing style.

Retta Ward
Cabinet Secretary



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