

Fiscal impact reports (FIRs) are prepared by the Legislative Finance Committee (LFC) for standing finance committees of the NM Legislature. The LFC does not assume responsibility for the accuracy of these reports if they are used for other purposes.

Current FIRs (in HTML & Adobe PDF formats) are available on the NM Legislative Website (legis.state.nm.us). Adobe PDF versions include all attachments, whereas HTML versions may not. Previously issued FIRs and attachments may be obtained from the LFC in Suite 101 of the State Capitol Building North.

FISCAL IMPACT REPORT

SPONSOR Stapleton ORIGINAL DATE 2/17/07
LAST UPDATED _____ HB 917
SHORT TITLE African American Education and Health Care SB _____
ANALYST Lucero

APPROPRIATION (dollars in thousands)

Appropriation		Recurring or Non-Rec	Fund Affected
FY07	FY08		
	\$75.0	Recurring	General Fund

(Parenthesis () Indicate Expenditure Decreases)

Relates to: HJM31

Relates to Appropriation in the General Appropriation Act

SOURCES OF INFORMATION

LFC Files

Responses Received From

Human Services Department (HSD)

Children, Youth and Families Department (CYFD)

Department of Health (DOH)

SUMMARY

Synopsis of Bill

House Bill 917 appropriates seventy-five thousand (\$75,000) from the general fund to Office of African American Affairs for expenditure in fiscal year 2008 for a pilot project to address education and health care disparities for African American children.

FISCAL IMPLICATIONS

The appropriation of seventy-five thousand (\$75,000) contained in this bill is a recurring expense to the general fund. Any unexpended or unencumbered balance remaining at the end of fiscal year 2008 shall revert to the general fund.

SIGNIFICANT ISSUES

The New Mexico Department of Health Racial and Ethnic Health Disparities Report Card notes that African Americans have higher rates than Whites or Hispanics for the following indicators: Infant Mortality; Adult Obesity, and Smoking. HB 917 seeks to address the disparities in health and educational outcomes for African Americans in the state of New Mexico.

Health and educational disparities are a critical issue for African American children. In New Mexico, as well as in the country as a whole, African American children are over-represented in the child welfare and juvenile justice systems, compared to their Caucasian peers. They are also more likely to reside in poverty and to lack health care coverage. As a result, they tend to receive insufficient or inadequate medical and dental care. Children who live in impoverished areas are likely to attend under-funded school systems, and African American children have a higher drop out rate than then children from other ethnic groups. In the juvenile justice system, African American youth are less likely to be placed in diversion programs and have higher rates of being tried as adults.

PERFORMANCE IMPLICATIONS

The bill could support the work of the CYFD Disproportionate Minority Contact panel, which endeavors to identify, understand, and respond to the factors which drive minority overrepresentation in the juvenile justice and child welfare systems.

ADMINISTRATIVE IMPLICATIONS

The Office of African American Affairs is administratively attached to the Human Services Department (HSD); therefore, HB 917 might require the investment of HSD staff time or other administrative resources, however, these resource demands could be absorbed.

CONFLICT, DUPLICATION, COMPANIONSHIP, RELATIONSHIP

Relates to: HJM31

TECHNICAL ISSUES

The purpose of the pilot project is not clear. The purpose of OAAA to provide information and advocacy services to improve the quality of life of all New Mexicans. It is unclear if the purpose of the pilot project is to provide information and advocacy or if to help provide direct services.

OTHER SUBSTANTIVE ISSUES

In 2001 the United States African American child poverty rate of 26.6% was 1.7 times higher than the national average of 15.8%. In 2001 the infant death rate for African American infants, 14.2 deaths per 1,000 live births, was 2.5 times that of European American infants, 5.7 deaths.

Multiple factors contribute to racial/ethnic health disparities, including socioeconomic factors (e.g., education, employment, and income), lifestyle behaviors (e.g., physical activity and alcohol intake), social environment (e.g., educational and economic opportunities, racial/ethnic discrimination, and neighborhood and work conditions), and access to preventive health-care

services (e.g., cancer screening and vaccination). For blacks in the United States, health disparities can mean earlier deaths, decreased quality of life, loss of economic opportunities, and perceptions of injustice. For society, these disparities translate into less than optimal productivity, higher health-care costs, and social inequity. By 2050, an estimated 61 million black persons will reside in the United States, amounting to approximately 15% of the total U.S. population

ALTERNATIVES

The sponsor of the bill might consider requiring that a report be presented annually to the Health and Human Services Legislative Committee on the findings and progress being made addressing the disparities.

WHAT WILL BE THE CONSEQUENCES OF NOT ENACTING THIS BILL

Status quo

DL/csd