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# FISCAL IMPACT REPORT

ODICINIA DA EE 01/00/10

SPONSOR Lo	_	AST UPDATED	01/30/12	НВ	
SHORT TITLE	Native American Suicio	de Prevention		SB	95
			ANAL	YST	Hoffmann

# **APPROPRIATION** (dollars in thousands)

Appropr	iation	Recurring	Fund Affected	
FY12	FY13	or Nonrecurring		
	\$150.0	Recurring	General Fund	

(Parenthesis ( ) Indicate Expenditure Decreases)

### **SOURCES OF INFORMATION**

LFC Files

Responses Received From
Higher Education Department (HED)
Human Services Department (HSD)

No Response Received From Indian Affairs Department

#### **SUMMARY**

### Synopsis of Bill

Senate Bill 95 appropriates \$150 thousand from the general fund to the Board of Regents of the University of New Mexico to fund a clearinghouse and technical assistance program and provide culturally appropriate suicide prevention, intervention and post-event assistance state wide to Native Americans living with suicide, attempted suicide or the risk of suicide.

# FISCAL IMPLICATIONS

The appropriation of \$150 thousand is a recurring expense to the general fund. Any unexpended or unencumbered balance remaining at the end of fiscal year 2013 shall revert to the general fund.

### **SIGNIFICANT ISSUES**

The HSD provided the following information on the state's efforts to deal with Native American suicide.

Suicide is the 3<sup>rd</sup> leading cause of death for youth in New Mexico and suicide rates for Native American youth are nearly twice as high as for other races and ethnicities. In 2010, it is estimated that nearly two dozen Native American youth attempted suicide and another 18 fatalities were documented in western New Mexico. The recently released New Mexico Child Fatality Review reports that 24 of the 54 youth suicides documented in New Mexico between 2008 - 2010 were Native American youth, for a rate of 10.7/100,000, compared to an overall rate of 2.1/100,000 for white youth.

The causes of youth suicide in Indian communities are multi-faceted and complex. Unrecognized and untreated mental illness is certainly the main culprit for all youth suicides. In 2007, the New Mexico Youth Risk and Resiliency Survey (YRSS) revealed that 34.8% of Native youth in grades 9 through 12 reported feeling sadness and hopelessness. The additional factors of isolation, poverty, loss of cultural and individual identity, historical trauma, substance abuse, and self-esteem issues all play into the increased risk for our Native American youth to take their own lives.

New Mexico tribal communities also lack critical mental health resources and technical assistance to support appropriate community, family, and individual support when suicide attempts or completed suicides do occur. While effective culturally-based prevention and wellness programs are being developed, there are few resources available for implementation and evaluation of these models.

Following the passage and signing of SB417 in the 2011 Regular Legislative Session, UNM's Center for Rural and Community Behavioral Health (CRCBH) worked to implement the intent of SB417. The Clearinghouse was created after several youth suicide clusters in tribal communities were developed within New Mexico. There was recognition that, while New Mexico's 22 tribes are unique in their cultures and communities, there might be some benefit to having a central site to provide them with suicide prevention and post-event information, data, training, evaluation, and support. At the time of the second suicide cluster, a statewide workgroup was initiated among the tribes, The UNM Center for Rural and Community Behavioral Health (CRCBH), the State of New Mexico, and the Indian Health Service to begin coordination of information and support statewide. This workgroup effort led to the creation of the statewide Clearinghouse. The agreed upon initial home for the Clearinghouse was the Native American Behavioral Health (NABH) Program at CRCBH in UNM's Psychiatry Department.

CRCBH was felt to have the clinical, research, and systems experience with tribes across the entire state to successfully implement and sustain the Clearinghouse. At the time the Clearinghouse was initiated with no funding there were agreements to focus on several areas of development. One was additional technical assistance and support. This past year the Clearinghouse brought together partners who worked to develop a website for tribes to access for state suicide prevention information ( www.honoringnativelife.org ). In

addition, a template was developed and disseminated in draft form for tribes to implement suicide prevention and post-prevention efforts in their own communities.

Clearinghouse staff worked with the Behavioral Health Collaborative's suicide prevention strategic planning process in the Human Services Department. In addition, several NM tribes also received new federal suicide prevention funds this past calendar year, some with support and technical assistance from CRCBH. Clearinghouse team members also met with the Southwest Tribal Epidemiological Center and the State Epidemiological and Outcomes Workgroup and are exploring the development of a Tribal Suicide Data Workgroup. The Clearinghouse also worked to find additional funds to support implementation efforts. Through these efforts, some support was provided through the Albuquerque Area of the IHS, a Vista volunteer joined the project through the Department of Health Office of School and Adolescent Health, and a small amount of mental health outreach funds for the Clearinghouse were obtained by CRCBH through a grant from the National Institute of Mental Health.

Suicide prevention among Native Americans is a current priority of the Behavioral Health Collaborative.

The New Mexico Behavioral Health Collaborative's FY 11-FY14 Strategic Plan, 'Positioning Behavioral Health for Health Care Reform' relates to SB95, specifically:

• Chapter 5, 'Holistic Service Array': Prevention Programming must be effectively directed to populations who are at all levels of risk.

HSD's Strategic Goal 4, 'Improve Behavioral Health' relates to SB 95, specifically:

- Task 4.1, 'Reduce suicide among young and high-risk individuals'
- Task 4.2: Reduce adverse impacts of substance abuse and mental illness on individuals, families and communities

The HED cites a report presented to the Interim Legislative Health & Human Services Committee on July 6, 2011

(see:

http://www.nmlegis.gov/lcs/handouts/Native%20American%20Suicide%20Prevention-Grant%20Partnerships%20Between%20Tribal%20Programs.pdf), the UNM Center for Rural and Community Behavioral Health (CRCBH) agreed to be the initial coordinating site for the Clearinghouse due to lack of funding. Activities noted in the report were:

- Developing a process to inform and engage tribes throughout the state about the Clearinghouse;
- Initiate a process to create a joint working group on suicide data collection;
- Develop a process to expand outreach and information including website development;
- Engage stakeholders from across the State including the Pueblos of Zuni, Acoma, Kewa, San Felipe, Five Sandoval, the Mescalero Apache and Navajo Nations, the Albuquerque urban Indian community, IHS, and other state/local partners.

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An update on the Clearinghouse implementation was given by CRCBH on November 1, 2011(see

http://www.nmlegis.gov/lcs/handouts/IAC%20110111%20UNM%20Native%20American%20Suicide%20Prevention%20Clearinghouse.pdf). The Clearinghouse received support as follows:

- \$20,000 from the Indian Health Service;
- Vista volunteers through the New Mexico Department of Health Office of School & Adolescent Health;
- Reconfigured support from existing Behavioral Health Collaborative contracts to CRCBH.

The New Mexico Department of Health issued its Racial and Ethnic Health Disparities Report Card in September 2011, which supports the critical issue the Clearinghouse is tasked to address.

Finally, the HED states this request was not submitted by UNM to them for review. The HED has established a formal process for reviewing earmarked budget requests for higher education institutions. This process requires prior approval by the governing body of the university or college. It also provides for analysis of each request by HED, DFA and LFC. HED recommends that requests that circumvent the formal review process not receive funding in the annual budget but be directed to be resubmitted for funding in FY14.

## PERFORMANCE IMPLICATIONS

SB95 does not provide performance measures; however, if funded, the Native American Suicide Prevention Clearinghouse through the University of New Mexico should develop performance measures in coordination with HED.

### **ALTERNATIVES**

The HED suggests that SB95 could be amended to make the appropriation to the Human Services Department as previously intended in the originally introduced SB417 in 2011.

CH/lj