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FISCAL IMPACT REPORT

SPONSOR	Ortiz	z y Pino	ORIGINAL DATE LAST UPDATED	2/8/15	HB	
SHORT TITL	LE _	Develop Strategies	for SIDS Prevention		SM	4

ANALYST Peterson

<u>APPROPRIATION</u> (dollars in thousands)

Appropr	iation	Recurring	Fund Affected
FY15	FY16	or Nonrecurring	
	None		General Fund

(Parenthesis () Indicate Expenditure Decreases)

SOURCES OF INFORMATION LFC Files

<u>Responses Received From</u> Department of Public Safety (DPS) Human Services Department (HSD) Children, Youth and Families Department (CYFD) Indian Affairs Department (IAD) Office of the Medical Investigator (OMI)

SUMMARY

Synopsis of Bill

Senate Memorial 4 requests that the Department of Health (DOH) assemble a task force to evaluate New Mexico's approach to sudden unexpected infant deaths and to develop strategies for prevention. The task force is to meet regularly to examine community awareness of the risks of unsafe sleeping arrangements, increasing access to the evidence-based community programming, and establishing short and long-term recommendations to reduce unexpected infant deaths by implementing cost-effective measures.

FISCAL IMPLICATIONS

None. SM 4 does not contain an appropriation.

SIGNIFICANT ISSUES

SM 4 states over one hundred sudden unexpected infant deaths occurred between 2009 and 2013 in New Mexico.

The OMI has participated in Child Fatality Review (CFR) for many years where one of the main components of the panel is the revision of the cause of infant deaths. According to the OMI and the CFR, they have been able to identify risk factors and prevention measures that need to be taken but the primary obstacle has been disseminating the recommendations and obtaining funding for these projects.

OMI points out tribal entities are not represented at CFR, and CFR has had difficulty getting established on tribal lands. OMI believes that a task force from the Secretary of Indian Affairs could help reach this vulnerable population.

As reported by IAD, the Center for Disease Control (CDC) reported most sudden unexpected infant deaths are reported as one of three types:

Sudden Infant Death Syndrome (SIDS)

SIDS as the sudden death of an infant less than 1 year of age that cannot be explained after a thorough investigation is conducted, including a complete autopsy, examination of the death scene, and a review of the clinical history. SIDS is the third leading cause of infant deaths in the United States and the leading cause of death in infants 1 to 12 months old.

Unknown Cause

CDC further states that the sudden death of an infant less than 1 year of age that cannot be explained often because a thorough investigation was not conducted and cause of death could not be determined.

Accidental Suffocation and Strangulation in Bed

CDC identifies mechanisms that lead to accidental suffocation includes:

- Suffocation by soft bedding—such as a pillow or waterbed mattress.
- Overlay—when another person rolls on top of or against the infant while sleeping.
- Wedging or entrapment—when an infant is wedged between two objects such as a mattress and wall, bed frame, or furniture.
- Strangulation—such as when an infant's head and neck become caught between crib railings.

Even after a thorough investigation, it is hard to tell SIDS apart from other sleep-related infant deaths such as overlay or suffocation in soft bedding. While an observed overlay may be considered an explained infant death, no autopsy tests can tell for certain that suffocation is the cause of death.

According to IAD, American Indians and Alaskan Natives have the second highest infant death rate in the United States. Native infants have the highest rate of SIDS, and are 30 percent more

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likely to die due to complications related to low birth weight or birth defects, than non-Hispanic White infants.

American Indians living in urban areas have a higher infant death rate at 8.1 per 1,000 live births compared to all races in urban areas at 6 per 1,000 births, according to the Urban Indian Health Institute. Additionally, American-Indian infants are more likely than infants of other races to die of genetic problems, sudden infant death syndrome (SIDS) and unintentional injuries.

Continuing with this report, a campaign to help reduce infant mortality in the American Indian community has launched called Native Generations. The campaign's concept is to connect young parents with Urban Indian Health Organizations, now in twenty states, including New Mexico (First Nations Community Healthsource), which offers parent education, support as well as culturally relevant techniques and information. For example, parents are taught how to use cradleboards, a traditional Native American carrier for babies, whose design can prevent SIDS by keeping babies off their stomachs while they sleep.

ADMINISTRATIVE IMPLICATIONS

This memorial may require support from existing resources.

SEP/bb