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FISCAL IMPACT REPORT

SPONSOR Herndon/Trujillo **ORIGINAL DATE** 2/10/22
LAST UPDATED 2/14/22 **HM** 43
SHORT TITLE School Mental Health Wellness Spaces **SB** _____
ANALYST Chilton

ESTIMATED ADDITIONAL OPERATING BUDGET IMPACT (dollars in thousands)

	FY22- FY23	FY24	3 Year Total Cost	Recurring or Nonrecurring	Fund Affected
Total	\$28.7		\$28.7	Nonrecurring	General Fund

(Parenthesis () Indicate Expenditure Decreases)

SOURCES OF INFORMATION

LFC Files

Responses Received From

Human Services Department (HSD)

No Response Received

Public Education Department (PED)

SUMMARY

Synopsis of Memorial

House Memorial 43 asks the Legislative Education Study Committee, in conjunction with the Public Education Department, to convene a task force to make a comprehensive plan to address student mental health issues by establishing mental wellness spaces in New Mexico’s public middle schools and high schools, citing the need made even more evident than before by the Covid-19 pandemic.

The task force would be made to include

- Community members and groups;
- PED personnel;
- Mental health care providers;
- School teachers, counselors and administrators;
- School union representatives; and
- Other interested persons.

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The task force is given the request to consider a pilot project of mental health spaces and is asked to report to the Legislature and the governor by November 2022.

There is no effective date of this memorial. It is assumed that the effective date is 90 days following adjournment of the Legislature.

FISCAL IMPLICATIONS

There is no appropriation in House Memorial 43.

PED has not estimated any costs associated with convening the task force or establishing a program of “Mental Wellness Spaces”. HSD has stated that “If HSD were asked to support the taskforce enacted by HM43, HSD/Behavioral Health Services Division (BHSD) would require .5 FTE calculated at a pay band 70, for a total annual cost of \$28,680 including salary, benefits, and operational costs.”

SIGNIFICANT ISSUES

House Memorial 11 gives the following background and justification for this request, as follows:

- New Mexico has done well at controlling the physical manifestations and contagiousness associated with the Covid-19 pandemic, but less well with regard to the pandemic’s mental health consequences, including anxiety and depression and behavioral disorders.
- Educational researchers indicate that learning that has stagnated will be best addressed in part by mental health strategies.
- Students are stressed by many factors on top of those associated with the pandemic.
- Mental wellness is associated with ability to do well at schooling.
- Statistics show that one-fifth of students have mental health problems, half of which start before age 14.
- Behavioral health problems, anxiety and depression are common among school children, and only one fifth of those who would benefit from mental health support receive it.
- Schools could address the mental health needs of students by providing such solutions as a “mental health space,” where the students would be able to access trained mental health personnel or otherwise discuss their concerns. These spaces are not readily available in most schools.

As noted by the American Academy of Pediatrics (AAP), mental health disorders had been rising in prevalence since before the pandemic’s beginning in 2020, but have reached crisis proportions due to some of the effects of the pandemic.

The AAP, American Academy of Child and Adolescent Psychiatry (AACAP) and Children’s Hospital Association have declared a [national emergency in children’s mental health](#), citing the serious toll of the COVID-19 pandemic on top of existing challenges.

They are urging policymakers to take action swiftly to address the crisis.

“Young people have endured so much throughout this pandemic and while much of the attention is often placed on its physical health consequences, we cannot overlook the escalating mental health crisis facing our patients,” AAP President Lee Savio Beers, M.D., FAAP, said in a statement. “Today’s declaration is an urgent call to policymakers at all levels of government — we must treat this mental health crisis like the emergency it is.”

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Before the pandemic, rates of childhood mental health concerns and suicide had been rising steadily for at least a decade. By 2018, suicide was the second leading cause of death for youths ages 10-24 years.

The pandemic then brought on physical isolation, ongoing uncertainty, fear and grief. Centers for Disease Control and Prevention researchers quantified that toll in several reports. They found between March and October 2020, [emergency department visits](#) for mental health emergencies rose by 24 percent for children ages 5-11 years and 31 percent for children ages 12-17 years. In addition, emergency department visits for suspected suicide attempts increased [nearly 51 percent](#) among girls ages 12-17 years in early 2021 compared to the same period in 2019.

Additionally, many young people have been impacted by loss of a loved one. [Recent data show](#) that more than 140 thousand U.S. children have experienced the death of a primary or secondary caregiver during the Covid-19 pandemic, with children of color disproportionately impacted.

According to an article in the Journal of the AACAP, “fear of illness and death and the many stressors of the pandemic can result in symptoms that correspond to adjustment disorders and to posttraumatic stress disorder (PTSD), diagnoses that can be made during ongoing dangers (such as pandemics, wars, domestic violence).

“Some populations may be especially vulnerable, such as those for whom the stresses reactivate personal or transgenerational traumas. This reactivation may be associated with the severity of the exposure, such as if youth or their loved ones have become sick or family members or friends have died.

“In addition, children of essential workers, homeless children, children with uncertain immigration status, and children whose supports (particularly intensive psychiatric and psychosocial supports) have suddenly diminished or disappeared may be at increased risk for developing mental health difficulties.”

One school district, in Orange County, California, has addressed the marked increase in anxiety, depression and behavior disorders with “wellness spaces:”

As described in the district’s June 2021 newsletter,

Imagine a space on a middle or high school campus that resembles a tranquil coffee house or the lobby of a high-end spa, replete with soft lighting, comfortable chairs, relaxing literature and light snacks.

And imagine all that’s asked of students who enter is that they take a moment to unplug, relax and recenter.

The need is certainly well-documented. Mental health has emerged as a major challenge not just in Orange County but across the country, with rates of youth depression and anxiety spiking even before the pandemic.

According to the 2019-20 California Healthy Kids Survey, 25 percent of Orange County’s seventh-graders and about 35 percent of 11th-graders said they felt chronically sad or experienced feelings of hopelessness over the previous year, and more than 10 percent reported having suicidal thoughts.

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It is spaces such as these that this memorial would like a task force to study and report on to LESC.

LC/al