

LFC Requestor: KLUNDT, Kelly

**2025 LEGISLATIVE SESSION  
AGENCY BILL ANALYSIS**

**Section I: General**

**Chamber:** Senate  
**Number:** 517

**Category:** Bill  
**Type:** Introduced

**Date (of THIS analysis):** 02/25/2025  
**Sponsor(s):** Angel M. Charley  
**Short Title:** SAFE SLEEP FOR INFANTS OUTREACH & EDUCATION

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**Section II: Fiscal Impact**

**APPROPRIATION (dollars in thousands)**

| Appropriation Contained |       | Recurring or Nonrecurring | Fund Affected |
|-------------------------|-------|---------------------------|---------------|
| FY 25                   | FY 26 |                           |               |
| \$0                     | 100.0 | Nonrecurring              | General       |
|                         |       |                           |               |

**REVENUE (dollars in thousands)**

| Estimated Revenue |       |       | Recurring or Nonrecurring | Fund Affected |
|-------------------|-------|-------|---------------------------|---------------|
| FY 25             | FY 26 | FY 27 |                           |               |
| \$0               | \$0   | \$0   | N/A                       | N/A           |
|                   |       |       |                           |               |

**ESTIMATED ADDITIONAL OPERATING BUDGET IMPACT (dollars in thousands)**

|              | FY 25 | FY 26 | FY 27 | 3 Year Total Cost | Recurring or Non-recurring | Fund Affected |
|--------------|-------|-------|-------|-------------------|----------------------------|---------------|
| <b>Total</b> | \$0   | \$3   | \$0   | 3.0               | Nonrecurring               | General       |
|              |       |       |       |                   |                            |               |

SB517 would require the procurement and distribution of safe sleep items such as cribs, firm mattresses, fitted sheets, and sleep sacks by DOH. Storage space will be required to manage inventory effectively with an estimated expense of \$3,000 for the fiscal year.

**Section III: Relationship to other legislation**

Duplicates: None

Conflicts with: None

Companion to: None

Relates to: None

Duplicates/Relates to an Appropriation in the General Appropriation Act: None

## Section IV: Narrative

### 1. BILL SUMMARY

#### a. Synopsis

Senate Bill 517 (SB517) proposes allocating funds to the Department of Health to create a Safe Sleep for Infants Outreach and Education Program. This program is designed to enhance infant safety by providing new parents with essential items that support safe sleep practices for infants. SB517 would:

- Appropriate \$100,000 from the general fund to the New Mexico Department of Health for expenditure in FY 2026
- Require the establishment of a Safe Sleep for Infants Outreach and Education Program
- Any unused funds at the end of FY 2026 will revert to the general fund

Is this an amendment or substitution?  Yes  No

Is there an emergency clause?  Yes  No

#### a. Significant Issues

Sudden Unexpected Infant Death (SUID), including Sudden Infant Death Syndrome (SIDS), remains a significant public health issue in both New Mexico and the United States.

- In 2022, there were about 3,700 sudden unexpected infant deaths in the United States which include 1,529 deaths from SIDS, 1,131 deaths from an unknown cause, and 1,040 deaths from accidental suffocation or strangulation in bed. ([Data and Statistics for SUID and SIDS | SUID and SIDS | CDC](#))
- In New Mexico, an average of 20 infant deaths per year were attributed to sleep-related causes between 2018 and 2022 (<https://www.nmhealth.org/news/awareness/2024/10/?view=2132>).
- In New Mexico, the Child Fatality Review identified unsafe sleep environments as a contributing factor in 20 out of 30 cases of SUID deaths in 2022, in 15 out of the 20 cases sleeping in an adult bed was a contributing in death. (<https://www.nmhealth.org/publication/view/report/8803/>).
- The 2022 American Academy of Pediatrics (AAP) Technical Report on SUID emphasizes that sleep characteristics—such as sleep position, surface, location, and caregiver practices—are key risk factors for infant sleep-related deaths (<https://publications.aap.org/pediatrics/article/150/1/e2022057991/188305/Evidence-Base-for-2022-Updated-Recommendations-for?autologincheck=redirected>).

To respond to these concerns, the Early Childhood Education and Care Department (ECECD) established the Safe Sleep New Mexico campaign in 2023. Through this campaign free safe sleep kits are made available to parents through an online portal ([NewMexicoKids.org](http://NewMexicoKids.org)). While additional funding could be used to increase the reach of the program by offering a similar service through another department (DOH), it may be more impactful to enhance the already existing program at ECECD.

Several states have implemented safe sleep programs with varying degrees of funding and success:

- Ohio launched a statewide [Cribs for Kids program](#) that provides free Pack 'n Plays to eligible families and has seen a notable reduction in sleep-related infant deaths since its expansion.
- Tennessee implemented a [Safe Sleep Public Awareness Campaign](#), which was associated with increased awareness among parents and caregivers about infant sleep safety.
- Illinois passed legislation requiring hospitals to provide safe sleep education and resources at discharge, [Equity and Safe Sleep for Infants](#), improving compliance with AAP recommendations.

## 2. PERFORMANCE IMPLICATIONS

- Does this bill impact the current delivery of NMDOH services or operations?  
 Yes  No
- Is this proposal related to the NMDOH Strategic Plan?  Yes  No
  - Goal 1:** We expand equitable access to services for all New Mexicans
  - Goal 2:** We ensure safety in New Mexico healthcare environments
  - Goal 3:** We improve health status for all New Mexicans
  - Goal 4:** We support each other by promoting an environment of mutual respect, trust, open communication, and needed resources for staff to serve New Mexicans and to grow and reach their professional goals

## 3. FISCAL IMPLICATIONS

- If there is an appropriation, is it included in the Executive Budget Request?  
 Yes  No  N/A
- If there is an appropriation, is it included in the LFC Budget Request?  
 Yes  No  N/A
- Does this bill have a fiscal impact on NMDOH?  Yes  No  
This bill would present minimal fiscal impact to DOH which would require the renting of additional storage space.

## 4. ADMINISTRATIVE IMPLICATIONS

Will this bill have an administrative impact on NMDOH?  Yes  No

## 5. DUPLICATION, CONFLICT, COMPANIONSHIP OR RELATIONSHIP

None

## 6. TECHNICAL ISSUES

Are there technical issues with the bill?  Yes  No

## 7. LEGAL/REGULATORY ISSUES (OTHER SUBSTANTIVE ISSUES)

- Will administrative rules need to be updated or new rules written?  Yes  No
- Have there been changes in federal/state/local laws and regulations that make this legislation necessary (or unnecessary)?  Yes  No
- Does this bill conflict with federal grant requirements or associated regulations?  
 Yes  No
- Are there any legal problems or conflicts with existing laws, regulations, policies, or programs?  Yes  No

## 8. DISPARITIES ISSUES

SB517 would impact infants and their caregivers, particularly new parents who may lack access to safe sleep resources. Given the financial barriers many families face, this bill could positively impact low-income households, rural communities, and historically underserved populations who may struggle to afford cribs, firm mattresses, and other safe sleep essentials.

### Sleep-Related Mortality Disparities

- In 2022, the New Mexico Child Fatality Review assessed 30 cases of sudden unexpected infant deaths, finding that 19 could have been prevented with safe sleep practices. Among the 30 cases, 53.3% were male and 46.7% were female. Racially and ethnically, 46.7% were Hispanic or Latino, 30% were White, 16.7% were Native American, and 6.7% were Black or African American. Most deaths occurred in infants aged 1 to 8 months ([nmhealth.org/publication/view/report/8803/](https://nmhealth.org/publication/view/report/8803/))
- CDC analysis of 2009–2015 Pregnancy Risk Assessment Monitoring System (PRAMS) data revealed notable disparities in infant sleep practices. In 2015, 21.6% of respondents from 32 states and New York City reported placing their infant in a non-supine sleep position, with the highest prevalence among non-Hispanic Black respondents. Non-supine sleep positioning was also more common among younger mothers (under 25), those with lower education ( $\leq 12$  years), and those who participated in the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC). The prevalence of bed sharing was 61.4% in 14 states, and 38.5% reported using soft bedding, with disparities also noted across maternal characteristics (<http://dx.doi.org/10.15585/mmwr.mm6701e1>).
- Alston et al. (2022) examined the link between racial disparities in sleep-related infant deaths (SRID) and social determinants of health (SDOH) in impoverished communities. In 2017, SRID in the U.S. totaled approximately 3,600, with African American infants experiencing a SRID rate more than twice as high as White American infants. Using data from Baltimore, an environmental scan revealed that SRID disparities aligned with poor SDOH such as low education, high unemployment, poverty, poor housing, and violence. The authors advocate for addressing these hazardous SDOH through well-funded programs and policies to reduce SRID, beyond just providing safe sleep equipment (<https://doi.org/10.1007/s40615-021-01016-5>).

## 9. HEALTH IMPACT(S)

- Since 1990, SIDS cases have decreased by 70%. In 1994, the U.S. Public Health Service launched the “Back to Sleep” campaign to raise awareness and educate the public on safer infant sleep practices. The campaign utilized mailers, radio announcements, and outreach through hospitals, pediatricians, and maternal care providers to inform parents.

Following these efforts, the national SIDS rate declined from 103 to 87 per 100,000 live births (<https://sleepopolis.com/education/sids-statistics-and-facts/>).

- A research by Moon et al. (2022) shows that safe sleep practices, such as placing infants on their backs to sleep, using a firm mattress without soft bedding, and ensuring the infant sleeps in a separate, safe space, can significantly reduce the risk of SIDS among infants (<https://doi.org/10.1542/peds.2022-057990>).
- Aggelou et al. (2024) conducted a systematic review of 23 studies that found that educational interventions, including hospital-based programs, home visits, and mobile health technologies, significantly improve caregiver's knowledge and adherence to safe sleep practices, reducing unsafe sleep behaviors and enhancing infant health outcomes. These programs increase parental satisfaction and effectiveness in home settings (<https://doi.org/10.3390/children11111337>).
- Ellis et al. (2022) conducted another systematic review of interventions to reduce SUDI and identified five key approaches: safer sleep education programs, targeted home visiting services, peer educators, health education campaigns, and digital media messages. The review found that effective interventions have shifted from simply providing information to fostering ongoing relationships and personalized support (<https://doi.org/10.3389/fped.2021.778186>).

## **10. ALTERNATIVES**

Funding could be allocated to already existing safe sleep programs which are operated by ECECD.

## **11. WHAT WILL BE THE CONSEQUENCES OF NOT ENACTING THIS BILL?**

If SB517 is not enacted, there will be no allocation to the Department of Health to create a Safe Sleep for Infants Outreach and Education Program, which would provide new parents with items that support safe sleep practices for infants.

## **12. AMENDMENTS**

None.