



NEW MEXICO



Children's
CABINET

NEW MEXICO CHILDREN'S CABINET

2020 REPORT CARD & BUDGET REPORT

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EARLY CHILDHOOD EDUCATION AND CARE DEPARTMENT

The Children's Cabinet Welcomes the Early Childhood Education and Care Department

Governor Michelle Lujan Grisham created the New Mexico Early Childhood Education & Care Department, signing the new department into law March 2019. The department was officially launched in July 2020 by integrating a number of child- and family-focused programs and agencies, which previously resided across state government, to improving their coordination and collaboration.

One of only four such departments in the nation, ECECD creates a more cohesive, equitable, and effective prenatal-to-five early childhood system—improving child well-being, strengthening family support services through a mixed-delivery approach, and aligning critical public and private early childhood systems.

ECECD brings together the Child Care Assistance and Regulation, Community-based PreK, Family Nutrition, Head Start Collaboration and Home Visiting programs of CYFD; the Families FIRST and Family, Infant and Toddler programs of DOH; and Public PreK program of PED.

ECECD, in partnership with the Children's Cabinet, is Governor Lujan Grisham's vision of ensuring universal access to high-quality early childhood care and education and expanding access to the state's home visiting program. ECECD is also responsible for ensuring:

- **Seamless transitions** from prenatal to early childhood programs to kindergarten;
- Consumer **education and access** to early childhood care and education programs;
- Quality **early childhood education and care programs** to support the development of children to prepare them for success in school;
- **Effective collaboration** with state and local child welfare programs and early childhood health and behavioral health programs;
- Development and management of **effective data systems** to support the necessary functions of a coordinated program;
- Development of an **aligned system of workforce development** for early childhood professionals; and
- Promotion of **culturally and linguistically appropriate programming** to provide equal education and care opportunities to non-English speaking families.



The law that created ECECD also established the country's first Assistant Secretary for Native American Early Care and Education. As the new department seeks guidance from stakeholders around the state, the Assistant Secretary will proactively engage and seek guidance from our Pueblos, Tribes, and Nations. Additionally, ECECD established an internal working group of tribal liaisons who represent each division and bureau within the new department to work closely with the Assistant Secretary. This working group will develop and implement strategic communications and consultation, and ensure integrated state collaboration with our tribal partners and Honorable Governors and Presidents.

"Equity Councils should honor the courageous voices of those who hunger for resources."

Songtree Pioche, Parent and Advocate, Taos Pueblo/Oglala Lakota

Finally, ECECD prioritizes strengthening partnerships with other state agencies to enhance coordination and effectiveness, including the Indian Affairs Department (IAD) and the Public Education Department (PED) to meet the requirements of the Yazzie/Martinez case, which mandates the creation of Equity Councils. Currently, ECECD is establishing an Early Childhood Equity Council to establish short-term and long-term goals – as well as to partner with local communities and programs to help foster equity and quality.

KEY DUTIES OF THE ASSISTANT SECRETARY FOR NATIVE AMERICAN EARLY EDUCATION AND CARE



Responsible for administration, coordination, and oversight of Indian early childhood education.



Collaborate with state and federal partners and agencies, tribal governments, eligible providers, and community partners.



Consult with nations, tribes, and Pueblos for delivery of learning guidelines in language, culture, and history designed for tribal and non-tribal students.



Provide assistance to school districts and educational agencies to expand appropriate Indian education programs for infants, toddlers, children, youth, and families pursuant to the Indian Child Welfare Act (ICWA).



Seek funding to establish and strengthen programs related to infants, toddlers, children, youth, and families.



Ensure that language and cultural considerations are included in programs administered through the department.



NEW ADMINISTRATION PROGRAM PRIORITIES

Ending Child Hunger

New Mexico ranks highest in the nation for children experiencing food insecurity, with as many as one in three children at risk for hunger. Hunger negatively impacts child development, physical and mental health, educational success, workforce preparedness, and job readiness. Governor Michelle Lujan Grisham is committed to ending childhood hunger in New Mexico and in 2019 launched a statewide effort through the Children's Cabinet to develop a comprehensive approach that includes strengthening the nutrition safety net by optimizing state-administered federal nutrition programs including SNAP, WIC, meals in early childhood education and care settings, school meals, afterschool meals, summer meals, and by putting more money in the pockets of New Mexicans.

The Governor's Childhood Hunger Initiative seeks to leverage cross-agency collaboration to bridge the meal gap to ensure that children have access to three meals a day, seven days a week, 365 days a year. In addition to feeding more children, this initiative will build awareness of the impacts of childhood hunger on children and families and leverage a heightened investment from community partners to meet this acute need.

The Administration is dedicated to maximizing the implementation and operation of federal food and nutrition programs statewide to feed hungry people in New Mexico. State agencies provide resource information, engage in networking events, initiate partnership discussions that include proposing new agreements, attend outreach events, and provide regulation and statutory clarification related to each program.

During the COVID-19 pandemic the Governor mobilized an extensive food operation utilizing federal programs to the fullest extent possible as well as leveraging private partnerships to help match critical federal funding through FEMA. At the same time, the Administration advanced a range of other initiatives unrelated to the pandemic across state agencies.

Strengthening New Mexico's Behavioral Health Infrastructure, Access, and Outcomes

Coordinating State Government Through the New Mexico Behavioral Health Collaborative

In the current administration, the State has taken great strides in strengthening community-based behavioral health services throughout the state. Current efforts include rebuilding the state's behavioral health system that was dismantled by the previous administration and leveraging funding across departments towards common behavioral health goals.

The New Mexico Behavioral Health Collaborative (BHC) was created during the 2004 Legislative Session. The enabling statute allows several state agencies and multiple resources across state government involved in behavioral health prevention, treatment, and recovery to work as one in an effort to improve behavioral health and substance abuse services in New Mexico. Behavioral Health Collaborative member agencies include: Aging and Long-Term Services Department (ALTSD); Children, Youth and Families Department (CYFD); Department of Corrections (DOC); Department of Health (DOH); Department of Workforce Solutions (DWS); Higher Education Department (HED); Human Services Department (HSD); Indian Affairs Department (IAD); and Public Education Department (PED).

THE GOALS OF THE NM BEHAVIORAL HEALTH COLLABORATIVE ARE TO:

- | | |
|---|--|
| 1 | Build a new provider network; |
| 2 | Develop community-based mental health services for children and families; |
| 3 | Effectively address substance use disorder (SUD); and |
| 4 | Effectively address behavioral health service needs of justice-involved individuals. |

Current Priorities of the Behavioral Health Collaborative Include:

Increasing the Footprint of Supportive Behavioral Health Services in Communities

In FY20 (through 5/27/20), CYFD's Community Behavioral Health Clinicians (CBHCs) served a target population of approximately 2,300 CYFD-involved children and youth. CBHCs consult, assess, coordinate, and advocate internally and externally for the target population of children and youth involved in juvenile justice and protective services, including serving as a liaison between community partners and CYFD. CYFD Behavioral Health therapists also provide behavioral health services at three Juvenile Justice Services Reintegration Centers.

CYFD is leading a cross-agency team to support the expansion of Behavioral Management Services (BMS), a community-based service to prevent children and youth from experiencing disruption from their homes, schools, and communities and to get the treatment they need to prevent or correct institutionalization. A demonstration project—initially based in Albuquerque, Las Cruces, and Hobbs/Anthony—will align BMS with implementation of the Child and Adolescent Needs and Strengths (CANS) tool, Medicaid billable services such as Comprehensive Community Support Service (CCSS), therapy, Certified Family Peer Support services, and the Nurtured Heart Approach (NHA). These programs are anticipated to serve 150 youth in year one, with a special focus on successful reintegration of youth from out-of-state institutions.

CYFD maintains an Open Fund Pool for children and youth in need of Applied Behavior Analysis (ABA) services, which assist parents, teachers, and other stakeholders engaged with clients with Autistic Spectrum Disorders (ASD) in understanding and appropriately responding to the client's socially significant behavioral challenges. BHS also maintains an Open Fund Pool for community-based behavioral health services intended to reduce or ameliorate the symptoms of a diagnosed substance abuse or mental health disorder for non-Medicaid eligible children and youth under the age of 18 or persons between the ages of 18 and 21 who received CYFD services prior to their 18th birthday.

Expanding the Use of Evidence-Based Practices

CYFD has prioritized the expansion of behavioral health services and supports that are evidence-based, well-supported, or promising practices, with a particular emphasis on Multi-Systemic Therapy (MST). CYFD is utilizing a \$1 million allocation from the State Legislature to support the development and expansion of additional MST services in New Mexico, while partnering with the University of Denver's Center for Effective Interventions (DU-CEI) to develop an expansion program that will both increase MST outreach with five additional teams across the state and support the sustainability of all MST teams in New Mexico.

CYFD's High-Fidelity Wraparound program provides youth and family-driven intensive care coordination via a strengths-based model to create an individualized plan designed to meet the family's needs and reach their desired outcomes beyond their time with formal system involvement. CYFD supports the training, coaching, and oversight of Wraparound in Roosevelt, Lea, Bernalillo, Valencia, Sandoval, Chaves, and San Juan Counties serving approximately 150 children and youth per year. In collaboration with HSD CARES Act funding, CYFD is supporting the expansion of High-Fidelity Wraparound to two new sites in SFY 21, located in McKinley and Doña Ana Counties. CYFD is working with HSD to leverage Medicaid for Wraparound, through amending the current 1115 Medicaid Waiver. The goal is to bring Wraparound state to scale for priority populations, phase one will be focused on children/youth in custody of CYFD.

The Indian Affairs Department (IAD) partnered with HSD to create a coloring book for native children to help them understand and cope with pandemic related changes. The book can be accessed for download at <https://123331-424245-raikfcquaxqncofqfm.stackpathdns.com/wp-content/uploads/2020/08/StoodisNM-ColoringBook-ForWeb-1.pdf>.

The Early Childhood Education and Care Department (ECECD) created a campaign with tip sheets, exercises, and curriculum for parents of young children. Moments Together NM can be accessed at <https://momentsnm.org/>.

NEW ADMINISTRATION PROGRAM PRIORITIES

In partnership with the Human Services Department, CYFD has supported implementation of the Nurtured Heart Approach (NHA), an evidence-informed and relationship-based practice which helps build inner wealth (confidence) in children and young people. Allocations to CYFD have funded costs of training and coaching in CYFD Protective Services (PS) offices to change office culture, support staff, and build up children's confidence by creating success for them and their families.

Supporting the Mental Health Wellness of New Mexico's Students

The New Mexico Public Education Department (NMPED) received a \$6 million three-year federal grant to expand mental health service providers working with local education communities in order to: increase the number of service providers in selected local districts and improve their retention, reduce the student-to-provider ratio, increase the percentage of students accessing mental health services, improve student attendance through improved mental health status, decrease student suicide rate, and improve mental health outcomes as measured by the New Mexico Risk and Resilience Survey.

Multiple partners and stakeholders will be engaged by NMPED in the final planning and implementation of this effort. NMPED will collaborate with selected local districts to coordinate program activities that support school-based mental health (SBMH) provider recruitment and retention; partner with the many Native American communities in the state to support their students and school communities; and partner with the five largest universities in the state to help channel SBMH provider trainees to selected local education agencies (LEAs), foster a rural SBMH provider community, and support the overarching goals of the program.

NMPED will further invest in its strong and ongoing partnerships with other state agencies, with special focus being given to the Office of School and Adolescent Health (OSAH) within the New Mexico Department of Health (DOH). DOH leads school-based health center operations for integrated primary and mental health care for 48 school-based health centers (SBHCs) statewide providing

behavioral health care services. During the pandemic these services have moved to telehealth to provide ongoing access.

OSAH also received a \$3.65 million, five-year Garrett Lee Smith Suicide Prevention grant from the federal Substance Abuse and Mental Health Services Administration (SAMHSA) to address suicide prevention in adolescents by facilitating a comprehensive public health approach. The grant is designed to help build essential capacity and infrastructure to support expanded efforts to promote wellness and help-seeking behaviors in order to prevent suicide. OSAH is currently working with local communities to train them in several evidence-based awareness campaigns.

Utilizing a data driven approach, CYFD and HSD have expanded the New Mexico Crisis and Access line services to include an 'App' available to smart phone users for free, which allows texting access to Certified Peer Support Specialists, as well as phone access for clinical support (NMConnect). Under the coordination of the Children's Cabinet, multiple state agencies are working together to get the message of hope and support out to all New Mexicans. The "Path to Wellness" campaign is a three-pronged approach to augment the state's current approach to suicide prevention and wellness promotion by: 1) utilizing the NMConnect app to send a push notification each week to offer words of hope and link the user to supports, 2) utilizing social media for public service announcements by people with lived experience including validating difficulties, offering hope, and connecting to resources, and 3) Public Service Announcements on radio and television.

Leveraging Federal Resources to Expand Peer-to-Peer Programs

CYFD's Family Peer Support Service (FPSS) program supports providers who employ Family Peer Support Workers (FPSWs)—parents or primary caregivers with lived experience navigating child-serving systems—in Clovis and Hobbs. CYFD was awarded a four-year federal Systems of Care Grant in September 2019 which will support expansion of FPSS to three additional providers in Sandoval, Valencia, and Chaves Counties. Additionally, CYFD is working with HSD to ensure that providers

statewide who are interested in employing FPSWs can do so by billing Medicaid for the service. CYFD trained eight members of San Felipe Pueblo in 2019 to be FPSWs and is working to expand this service to other tribal communities.

CYFD is also in the process of developing Youth Peer Support Services (YPSS) through its federal Substance Abuse and Mental Health Services Administration (SAMHSA) Healthy Transitions Expansion Program (HTEP) grant. This five-year grant will provide an array of services to youth and young adults experiencing Severe Emotional Disturbance (SED) or Serious Mental Illness (SMI), including intensive care coordination utilizing the CYFD BHS High Fidelity Wraparound model, Youth Peer Support Services (YPSS), trauma-informed care, and other related services such as Family Peer Support Services (FPSS) or Adult Peer Support Services (APSS), as available. This grant specifically works with transition age youth 15.5 years old until their 26th birthday on the specific needs of this population and tailoring High Fidelity Wraparound to meet their needs. CYFD has been partnering with two providers in San Juan and Bernalillo Counties and with HSD to develop policies that support youth in successfully transitioning from the children's behavioral health system to the adult behavioral health system.

Mitigating the Impacts of Trauma and Substance Abuse in Adolescents

CYFD's Adolescent Substance Use Reduction Effort (ASURE) continues its statewide effort to provide services for youth experiencing trauma, substance, and co-occurring mental health disorders. During SFY20 ASURE was able to utilize both state funding and a \$785,000 annual award from SAMHSA to provide innovative supports and treatment for young people suffering from substance use concerns or who are at risk for substance use.

Youth Support Services (YSS) is a unique, non-clinical and relationship-based life skills coaching model developed within the ASURE-TI project. Through YSS, CYFD has provided life skills coaching and non-clinical, relationship focused supports for young people under the umbrella of prevention and as an adjunct to formal treatment services for New Mexico youth and young adults ages 12 to 21. The

YSS program has served approximately 840 youth since its inception and approximately 610 youth during SFY20 alone. The program has contributed to a significant increase in life skills (such as skills related to managing money, relationships, housing, vocation, and education) among its youth and a significant increase in quality of life.

CYFD BHS also oversees Activity Therapy Services that build social competencies, positive values, and positive identity development to increase resiliency of youth and prevent, reduce, or ameliorate the symptoms of a diagnosed substance abuse or mental health disorder. During SFY20 approximately 670 children received Activity Therapy Services. In alignment with the BHC's goal of increasing quality SUD services, in FY20 DOH increased access to medication assisted treatment and was awarded a \$4.7 million per year drug overdose surveillance and prevention grant for three years.



NEW ADMINISTRATION PROGRAM PRIORITIES

Assessment and Screening

Additionally, CYFD oversees the implementation and expansion of the Child and Adolescent Needs and Strengths (CANS) tool. BHS collaborates with Protective Services to ensure that all staff are trained in the tool. In 2020, CYFD BHS hosted a Train the Trainer for 96 Protective Services staff and providers, and 22 new CANS trainers were trained in 2020. An additional 20 staff were trained in the Youth Support Assessment (YSA), which is a subset of questions from the CANS aimed at gathering the needs of transition age youth. Over 280 baseline CANS were completed in 2020, with an additional 60 updates completed. CYFD BHS is collaborating with the Praed Foundation to develop the Crisis Assessment Tool (CAT), a subset of questions from the CANS that identifies youth high risk behaviors that need immediate intervention such as risk of harm to self and others, as well as providing guidance on related policies and procedures. CYFD BHS successfully partnered with Falling Colors, Inc., for a data build to collect and analyze CANS data, and is now working with them to similarly integrate the CAT tool into the data build.

BHS contracts with forensic evaluators to conduct Juvenile Forensic Evaluations. Such evaluations are appropriate for juveniles when there is an issue of the youth's competency, or for any other juvenile when there is concern about mental illness, diminished cognitive abilities, or severe learning disabilities that may adversely affect the youth's comprehension of their legal situation. In SFY20 approximately 120 young people were evaluated for competency under this program. CYFD also partners with NMSU to develop a Center of Innovation (COI) to coordinate training and practice improvement efforts to develop the skills and competencies of the children's behavioral health workforce.

Expanding Infant Mental Health Supports

The New Mexico Infant Mental Health (IMH) Association works to ameliorate the transmission of intergenerational trauma between parents and infants, by making Child Parent Psychotherapy (CPP) services available to infants and their caregivers throughout the state. CPP is the only evidenced-based clinical protocol for infants ages 0 to 3 that focuses on trauma and the intergenerational consequences of traumatic experiences. In FY20, 253 infants, plus 444 parents, caregivers, and/or foster parents received CPP services from agencies in the following counties: Doña Ana, Grant, Taos, Santa Fe, Curry, Bernalillo, Valencia, Socorro, McKinley, Sandoval, Otero, and Torrance. IMH has also focused on making IMH CPP services available to more infants and their caregivers throughout the state by increasing the number of clinicians to be trained in CPP. As of the beginning of FY21, 31 clinicians from 12 agencies are moving forward with CPP training. This will increase the number of clinicians providing CPP services in New Mexico from 20 to 51, and the number of counties where services are available from 12 to 18, plus two Native American Pueblos. CYFD is collaborating with ECECD and other stakeholders to support ECECD's development of a clinical consultation model for birth to 5.

Cross-Agency Data Integration for Medicaid-Eligible Children

The State is embarking on a new and expansive data initiative known as the CYFD MMIS/CCWIS Modernization Project to integrate CYFD's specialty mental health information system with data from HSD and DOH-run programs to track which services and programs are most effective—in both outcomes and cost—in promoting long-term child well-being. The purpose of this project is to replace the existing case management system with one that better supports a person-centric approach to human services and is fully integrated with our partner agencies as a native component in a larger health and human services system. HSD, CYFD, and other departments are aligning business practices and coordinating shared and inter-operative data systems to better promote and support services



delivery, case management (therapeutic care coordination), evaluation, and increased access to services for Medicaid-eligible children and families throughout the state. The new system will promote "no wrong door" methodologies so that families and children can be evaluated for eligibility and enrolled in services (e.g., SNAP, TANF, childcare, subsidized guardianship payments, infant mental health programs) regardless of which system or department they access.

Achieving Educational Equity

The New Mexico Public Education Department (NMPED) agrees with the Court that "no education system can be sufficient for the education of all children unless it is founded on the sound principle that every child can learn and succeed." Similarly, the New Mexico Legislature found that the key to success is having a multicultural education system that:

1. Attracts and retains quality and diverse teachers to teach New Mexico's multicultural student population;
2. Holds teachers, students, schools, districts, and the state accountable;
3. Integrates the cultural strengths of its diverse student population into the curriculum with high expectations for all students;
4. Recognizes that cultural diversity in the state presents special challenges for policymakers, administrators, teachers, and students;
5. Provides students with a rigorous and relevant high school curriculum that prepares them to succeed in college and the workplace; and
6. Elevates the importance of public education in the state by clarifying the governance structure at different levels.

New Mexico's Path Forward Toward Educational Equity

The New Mexico Public Education Department (NMPED) is currently developing a management philosophy, strategic plan, and key performance indicators to better align and focus the work of all divisions and bureaus of the Department on providing an equitable education for all students in New Mexico.

The Department's Strategic Plan and Key Performance Indicators encompass four pillars:

- Whole Child Education: Providing an educational experience that attends to students' academic, linguistic, cultural, social-emotional, and enrichment needs.
- Educator Ecosystem: Ensuring that every child has a high-quality teacher in each classroom.
- Opportunity Gap: Removing systemic barriers to student success and providing school and family supports to help students thrive.
- Pathways and Profiles: Raising graduation rates by ensuring equitable access to highly relevant and rigorous pathways to and beyond graduation.

Meeting the diverse, unique needs of all of our students with disabilities requires new thinking, new resources, and an unwavering sense of urgency. NMPED has convened a diverse working group charged with leading the transformation of special education services throughout the state. Bringing together classroom educators, special education advocates, state agencies, family members, and other key stakeholders, the working group will put forth transformative proposals for improving special education in the following categories:

- Educator training, support, and preparation
- Positive behavioral supports for students
- Family support and advocacy
- Role of the state education agency
- Data and accountability.

The New Mexico Constitution instructs the State to develop a uniform system of public schools sufficient for the education of New Mexico students. The Court's 2018 decision and order in the Martinez and Yazzie consolidated lawsuit held that New Mexico has not met its duty to provide an education to the state's "at-risk" students, including those who are economically disadvantaged, Native American, English learners, or students with disabilities. The Court further found the Indian Education Act (IEA), the Hispanic Education Act (HEA), and the Bilingual Multicultural Education Act (BMEA), which were enacted to help many of these students succeed, were not being fully implemented.

NEW ADMINISTRATION PROGRAM PRIORITIES

The Early Childhood Education and Care Department (ECECD) is committed to achieving equitable access and outcomes for all New Mexican families and young children, including ensuring all families and young children have access to high-quality early childhood services that are family-driven, trauma responsive, and respect and support culture and language. To accurately identify local, community-based assets and needs, ECECD intentionally listens to the voices of families and tribal leaders throughout the state.

ECECD, with funds awarded by the Brindle Foundation and the Preschool Development Block Grant Birth to Five (PDG B-5), has initiated the important work of establishing an internal Equity Council. The Equity Council's primary objectives include developing a common understanding of equity and vision for equitable community engagement, developing an internal ECECD equity council team, and establishing processes for the development of local equity councils throughout the state. The Council will work with the most impacted community members to develop regionally-based Equity Agenda Action Plans that include locally-led, community-based decisions and solutions. ECECD's commitment to build and sustain its relationships with tribal partners is ongoing, and to date includes the following efforts:

- Partnering with NMPED and the Higher Education Department to convene the first cradle-to-career Government-to-Government Summit on Indian Education in Nov. 2020.
- Investing in the creation of eight capacity building workshops to assist tribes in their efforts to develop culturally relevant and responsive curriculum.
- Identifying eight tribal liaisons within ECECD that represent each division aimed at deepening the agency's understanding of cultural traditions, language and indigenous knowledge systems in order to strengthen ECECD programs and services.
- Partnering with Project ECHO and the National Center of Excellence on Early Childhood Mental Health Consultation to convene a statewide task force to develop a three-year plan for a statewide Infant Early Childhood Mental Health Consultation model. The plan will address equity, workforce development, policy and financing, data and evaluation and marketing and community. The task force includes representation from the Navajo Nation, Nambe Pueblo and Apache Jicarilla tribe.
- Listening to, and engaging with, the Navajo Nation through First Lady Phefelia Nez, a supporter of early childhood, to learn about current support systems and additional needs. ECECD participates in a weekly meeting with the Navajo Nation Early Childhood Collaborative.
- Setting aside funds specifically for tribes for the Summer JumpStart PreK program and committing to earmarking NM PreK funding for tribal PreK and Head Start programs as needed.
- Collaborating with Indian Affairs Department to administer HB2 General Appropriations funds to support tribal early childhood programs with curricula development, professional development and facility assessments.



The New Mexico Higher Education Department likewise launched multiple initiatives aimed at serving Native American, first-generation, and all New Mexico students by supporting college readiness, outlining career pathways, expanding opportunities in adult education, and renovating instructional facilities. The department developed a Longitudinal Data System to gain a greater understanding of a student's experiences from early childhood into the workforce in order to close the achievement gap to support New Mexicans from cradle to career.

Meanwhile, developing career profiles to align Native American students with pathways to careers in their home communities is critical. The agency spearheaded a Research and Public Service Project (RPSP) in partnership with Navajo Technical University to establish an Associate's degree in nursing program which aims to enroll 24 students each year to provide a career pathway and serve the health care needs of Northwestern New Mexico. The agency recognizes and understands that specific expertise exists within Tribal communities and institutions and believes that involving Native American experts is important to driving effective and localized approaches to education. This approach will serve as a model to continue efforts to support Hispanic, at-risk, special needs, and English language learners as we collaborate to provide college and career readiness for all New Mexico students.



Beginning in March 2020, New Mexico faced a dual public health and economic crisis that fundamentally changed our lives and our communities in unprecedented ways. Many families already under stress from the public health shutdowns were thrust into financial uncertainty through job and wage losses; the reliance on safety net programs to help families meet their basic needs soared; students and parents had to adapt to virtual learning as schools closed; and many health and behavioral health care services transitioned to telehealth. Despite the fear and hardship the virus caused, New Mexicans from all walks of life and all areas of the state came together in community and through noteworthy sacrifice to contain the spread of the virus in our state. Meanwhile, state agencies adapted and mobilized to ensure the safety, health, and well-being of New Mexico's children and families.

The State of New Mexico was awarded \$1 billion dollars from the Coronavirus Relief Fund (CRF) through the federal CARES Act to assist the state in mitigating and responding to the COVID-19 public health emergency. Of this amount, \$250 million was budgeted for FY20 and \$750 million was budgeted for expenditure by State government entities between July 1, 2020, and December 31, 2020. The Coronavirus Relief Fund has 18 eligible expenditure categories, 10 of which significantly impact children and families, including Facilitating Distance Learning, Food Programs, Housing Support, and Medical Expenses. The following section provides some highlights of the COVID-19 response efforts of Children's Cabinet agencies and how they are using funds, including federal COVID funds, to support New Mexico's children and their families.

Public and Behavioral Health

Testing and Contact Tracing

Beginning in early March 2020, managing COVID-19 became the NM Department of Health's top priority. Currently, most agency resources are dedicated to the pandemic response. NMDOH's regular programs and services continue to function with many employees teleworking to ensure COVID-safe workplace practices. Teleworking employees regularly take on COVID-19 response work, and they as well as all front-line response staff often work

outside of usual business hours to manage the pandemic. Responding to the COVID-19 pandemic has significantly strengthened the department's community partnerships, intra-departmental and inter-divisional collaborations, and has provided an excellent opportunity to better understand the state's health and emergency response infrastructure.

The Public Health Department (PHD) has been the central point of testing for COVID 19. PHD has provided drive-through testing sites since the middle of March in addition to providing testing at many of the 52 Public Health Offices throughout the state—testing seven days a week in each of the four public health regions across the state. PHD has responded to requests by long-term care facilities, tribal organizations, assisted living facilities, food processing facilities, grocery stores, child care workers, first responders, and mining companies for testing requests, while supporting health care partners in establishing additional test sites throughout the state. An online registration app was developed that helped make the testing process quicker and more efficient. A contact tracing work force was also mobilized by the Department of Health, expanding to 85 individuals that have provided contact tracing throughout the state, helping to trace exposure to the virus.

Pregnant Women and Infants

The Department of Health Family Health Bureau provided direct case monitoring and guidance to pregnant women with COVID-19 and to more than 1,500 families who were caring for an infant or small child who was COVID positive. FHB staff were trained to offer case management, community resources, and support to pregnant women and infants who tested positive for COVID-19. A social worker was assigned to link these families to local resources and to facilitate access to services such as prenatal care, WIC and nutritional support or enrollment with health insurance. Staff worked with families and perinatal health providers to help them understand current clinical and hospital guidelines for delivery, breastfeeding, and infant care. Families continue to be connected to the Families FIRST Program in ECECD, and DOH and ECECD staff collaborate to ensure families receive the resources they need.

FHB/Children's Medical Services also collaborated with the Contact Tracing Unit, CYFD, Roadrunner Food Bank, the Food Depot, and many local community churches and social service agencies to coordinate and deliver food and other needed items to families who had to isolate or quarantine due to COVID and did not have other resources available such as neighbors who could provide them with food delivery. Children's Medical Services Staff coordinated and personally delivered food boxes, diapers and other necessities to these families so they could remain in isolation and prevent spread of COVID-19.

Behavioral Health

State agencies worked with providers to quickly adapt to the need for telehealth services, while securing waivers from the federal government to adapt to service delivery needs. Since the beginning of the pandemic there has been a 300% expansion of telehealth for most behavioral health services. The New Mexico Crisis and Access Line 24/7 call center has also been available with therapists and peer support workers, and a new call line for essential workers was established. Remote crisis counseling and peer support services have been made available for long-term care facilities and displaced COVID patients, and a Native American COVID campaign was launched. Several telemedicine pilot grants have been implemented, and certified peer support workers have been trained and mobilized. The NM Connect App was launched to provide immediate access to resources, peer supports, and providers across the state.

Basic Needs and Services

Food Security

The Human Services Department (HSD) was the lead state agency in enrolling eligible children and families in programs to address food security issues. In the process, HSD secured federal resources and waivers to increase program flexibility for the state's residents.

INCREASED MONTHLY SNAP BENEFITS TO CUSTOMERS MARCH-AUGUST:

March	\$25,180,741.81
April	\$25,427,055.20
May	\$22,943,556.00
June	\$23,713,247.00
July	\$23,587,883.00
August	\$23,329,019.00
Total	\$144,181,502.01

New Mexico families receiving Supplemental Nutrition Assistance Program (SNAP) benefits are now eligible to use an Electronic Benefit Transfer (EBT) card to purchase eligible foods online. HSD also helped establish a system for EBT online food purchases through Walmart and Amazon to ensure rural and frontier communities maintain access to food supplies throughout the pandemic. HSD also secured \$5.1 million additional food benefits for low-income residents through The Emergency Food Assistance Program (TEFAP), a federal program.

HSD was one of the first departments in the country to leverage the new emergency federal Pandemic EBT (P-EBT) program to offset the loss of school meals, providing more than \$104 million in food assistance to 348,913 students. More than 9 million meals have been delivered to students through Grab & Go sites and school bus delivery coordinated by the Public Education Department (PED) and Children, Youth and Families Department (CYFD).

Through the Meals to You (MTY) program, more than 222,742 meals have been delivered to 2,858 children in tribal communities, while the DHSEM Emergency Operations Center – which includes staff from CYFD, HSD, Department of Agriculture, and IAD – also provided more than two million pounds of food to tribal communities. CYFD has also coordinated with the Department of Aging and Long-Term Services to pick up and deliver meals to New Mexican families headed by seniors and grandparents.

COVID-19 RESPONSE

New Mexico's WIC offices were the first in the nation to establish curbside visits in the parking lots of the public health offices, including reloading of benefits and recertification, all done without the client having to leave their car. Benefits are provided for four months at a time to limit direct contact for services, and more than 700 new food products and sizes were added as options to improve shopping selection variety. Families can pick up meals for their children provided through the Summer Food Service Program and collect their Farmers Market Nutrition Program vouchers. WIC staff also collaborated with ECECD and CYFD to help purchase and distribute formula and other needed items to the tribes in the early days of the pandemic when food and formula shortages were common.

Shelter Care

CYFD has worked with the state's youth and domestic violence shelters to establish emergency and continuity of operations plans, while collaborating with HSD and other agencies to provide hotel vouchers for quarantined or self-isolated individuals and families who may have been exposed to COVID-19. On the ground site coordinators at all shelter locations are working closely with emergency managers, medical staff, and community partners to address child and family needs, including provide information about meals available for youth at school and community sites. On-site and remote Community Based Mental Health Clinicians (CBHCs) coordinate well-being checks, assist with discharge planning, and connect individuals to supports in their communities. A 24-hour call center is also operated by 23 volunteers who screen and coordinate intake and help local managers problem solve and find additional resources and supports.

Wage and Job Loss

During the economic downturn, claims for the state's unemployment insurance (UI) program increased from 14,027 in February to 199,678 by mid-June, and the Department of Workforce Solutions (DWS) had issued more than \$1 billion in assistance by early July. The agency was the first in the country to submit the application to the United States Federal Emergency Management Administration (FEMA) for funding that would provide an additional \$300 per-week payments to New Mexicans receiving unemployment benefits. The agency expanded call center hours, launched a chat bot and other technical support features, and disseminated a series of videos to support claimants through the process.

Educational Support and Continuity

The Public Education Department (PED) has been the lead agency in coordinating support to students, educators, and school districts. The agency has thus far distributed more than \$110 million in federal CARES Act funding to support districts and schools, while developing guidance, training, and support for schools to ensure educational continuity through virtual learning. The agency has extensively surveyed families to identify technology and remote learning needs and challenges in closing the digital divide.

PED collaborated with ECECD and the Regional Education Centers to develop a system that supports families with child care needs. The agency has also ensured that all districts and charters have three robust plans for school reentry—remote, hybrid, and full reentry—and created a system by which all districts and charters submit plans and assurances documents for reentry approval. A hotline was created for family and educator outreach, and guidance documents have been developed for families, schools, and districts on reentry protocols including safe practices, priority academic standards, and supports for at-risk students. PED has also partnered with the Department of Homeland Security to distribute PPE to all districts and charters across the state, and purchased and distributed 900 no-touch thermometers for each school site.



More than \$300,000 worth of devices and hot spots have been purchased and distributed to Native communities across the state, while tribes have been consulted on the protocols for schools on tribal lands and serving high populations of Native students.

In response to the pandemic crisis, the Department of Cultural Affairs (DCA) transitioned to digital programs, exhibitions, tours, and camps, creating wide-ranging access to resources and training representing a wide variety of expertise to keep New Mexicans connected to the arts, history, science, culture, and literacy. Through DCA's "Invite a DCA Educator" program, DCA staff has visited hundreds of virtual classrooms and thousands of students statewide. New Mexico Historic Sites education staff also released 25 online lesson-plans to provide teachers with resources while transitioning to distance learning models. DCA increased its geographic reach through online education, virtual classroom visits, and distribution of over 8,500 at-home summer activity kits to rural and tribal areas. With help from Lieutenant Governor Howie Morales, the State Library kicked off its first online statewide reading program, Imagine Your Story, to encourage every child to keep learning over the summer months, while the Broadband for Libraries program helped 26 communities close the digital divide.

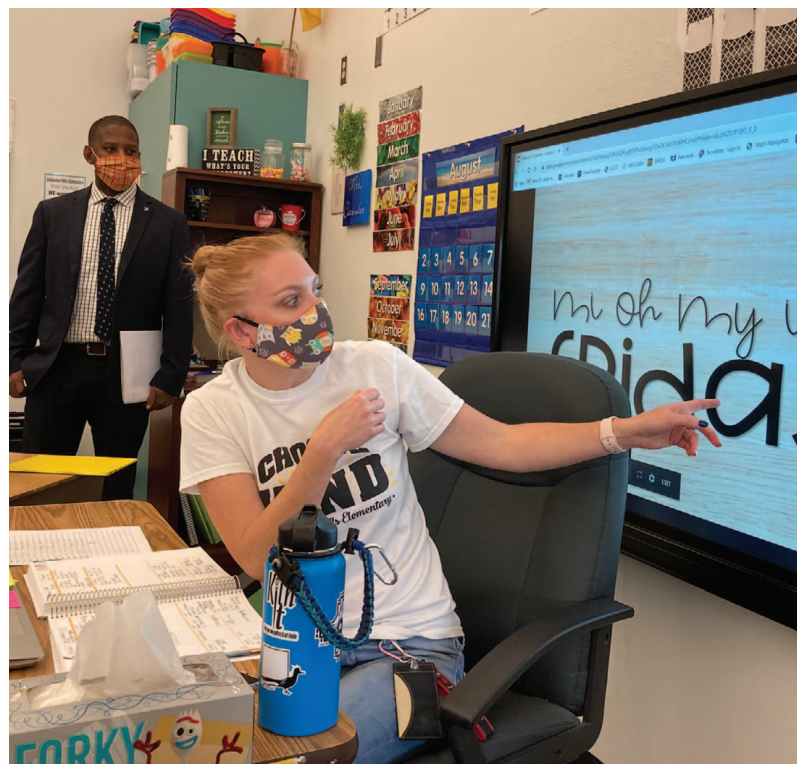
Protective Services Response to Pandemic Absences from School

CYFD's Statewide Central Intake coordinates all reports of educational neglect. If the report meets criteria for a Priority 2 investigation (which is no imminent danger or threats identified), it is screened out and forwarded to the Family Resource Connections (FRC) unit. An FRC Advocate contacts the family to determine the barriers they are facing in getting their children to school. FRC Advocates obtain verbal permission from the family to contact the school. Contact is then made to the school for their perspective/input. The FRC Advocate often acts as a case manager and facilitates communication between families/schools, arranges meetings, facilitates educational planning meetings, and links the family to services they need (internet, food boxes, basic needs, community services, etc.). Once there is confirmation the child is engaged in school and the school and family have a plan in place, the

case is closed and considered successful. If the family disengages from this process or we are unable to make contact after three attempts the family is referred for investigation by the local office. Investigators conduct the same process of ascertaining the needs of the family and supporting them to return to school.

Meeting the Educational Needs of Youth Involved with the Juvenile Justice System

Early in the pandemic, CYFD's Juvenile Justice Services (JJS) Field staff participated in an Outreach to Wellness initiative. The agency pulled the data of families that had reached out to Juvenile Probation for assistance during the previous year, and then contacted those families. Staff asked families about food insecurity, COVID information, mental health needs, and education and supported families in getting connected to those resources in their local community. Meanwhile youth that had needs specific to education were connected back to their school districts to address issues like technology needs and assistance in filling out proper paperwork for students that were being homeschooled.



CYFD is partnering with PED, Engage NM, and community providers to provide assistance related to reengaging students back to schools. Ongoing supports consist of working with schools around excessive absenteeism by providing an electronic referral form as well as a contact list for the local juvenile probation offices. Under New Mexico's Attendance for Success Act, JJS coordinates meetings with the schools and families when the student has been identified as excessively absent. JJS has also participated in recent webinars on the Attendance for Success Act to school personnel where over 1100 people attended.

CYFD is partnering with PED, ECECD and HSD to identify students that are missing from the current database of students that are not showing as enrolled. When the final numbers of students are determined, CYFD reaches out to those families to determine resources or services they may need in order to thrive. ECECD contacts the families of identified students in grades K-2 and CYFD contacts the rest. These contacts are made via telephone and other methods, and for any families that cannot be contacted by that method, home visits are another option.

Child Care and Early Learning

ECECD led daily calls with the state's early childhood community for the first month of the pandemic to identify and address needs, including providing financial resources to families and providers. A wage incentive program was established providing \$350 per month (part-time) and \$700 per month (full-time) for 3,312 early childhood professionals that continued to work during the early months of the pandemic. Meanwhile the State established the New Mexico Child Care Stabilization and Recovery Grant program to provide direct assistance to licensed facilities and incentive payments to facilities that remained open, and ensured that payments for subsidized child care were made to providers for all enrolled children regardless of attendance through June. Child care assistance was also provided to certain essential employees and parent copays were waived during the initial months.

The Family Infant and Toddler (FIT) program adapted to enable the delivery of telehealth services while increasing the reimbursement rates and providing personal protective equipment (PPE) for service providers. The State also developed testing and rapid response protocols for the early childhood educator community to ensure continued safety.

Strengthening Families and Ensuring Child and Youth Safety

Social Work Support and Resources

The Department of Health has provided additional support to New Mexico's children and families through efforts to stabilize family situations and assist with complex family issues related to COVID, including difficulty isolating from family members, healthcare needs, families in isolation/quarantine who needed food or help with getting family members tested, and other complex social and medical situations. Children's Medical Services (CMS) staff, which consists of licensed social workers, nutritionists, nurses, and administrative staff, have been reaching out by phone to families of children with special healthcare needs to address any unmet medical needs such as durable medical equipment and medications. Many of these children have serious medical conditions such as cancer,



cerebral palsy, and cystic fibrosis. Staff have also been assisting families in finding other needed resources such as food, behavioral health care, and other COVID-19 related needs, and are a source of comfort and reassurance to families that are stressed.

Children and Youth in Foster Care and/or Juvenile Justice

CYFD increased the monthly payment by \$1,000 for families to support children in care during the economic downturn. The agency utilized technology to increase monthly visits for youth in foster care and maintain a visitation rate of over 100% throughout the pandemic. Special shelter sites were established for COVID-positive youth and children in care. Additionally, 67,000 PPE were distributed to state employees, service providers, and Tribes to keep the workforce safe. The agency also launched an outreach campaign on reporting child abuse, including trainings on how to identify abuse in virtual settings.

Families involved with the child welfare system were also delivered food, cleaning supplies, educational resources, and informational materials. Youth who had exited foster care within the past two years were contacted to help them connect to resources, including monthly financial support that they were otherwise not eligible. Emergency youth housing partnerships have also been set up across the state.

CYFD's juvenile justice facilities developed emergency operations and continuity of operations plans, including procedures for supporting young people who have been exposed to COVID-19. Facility cleaning and screening protocols were also enhanced, and as a result there have been no COVID cases among youth in the state's facilities. 227 Juvenile Justice Field Staff were also trained in the use of Narcan to prevent overdose deaths as suicides and overdoses have increased.

Grandparents Raising Grandchildren

COVID-19 presented particular and unique challenges for grandparents raising grandchildren. Because many grandparents rely on schools to provide meals for children, when the pandemic began CYFD, Aging and Long-Term Services



Department (ALTSD), and the Public Education Department (PED) took quick action to ensure that meals were still being served to grandparents and children, allowing for “no wrong door.” If grandparents arrived at a senior center to receive a to-go meal, their grandchildren were also given a meal. Over 4,000 meals were provided to children through senior centers throughout the state. ALTSD also organized countless food boxes for elders and families. Flyers with available legal services and other resources for seniors and their families were included in these food boxes. The legal services community also quickly adapted to the pandemic circumstances and conducted many virtual trainings, advertising through press releases, direct mail, Courts, libraries, and senior centers.

Additional Tribal Support

The COVID-19 pandemic added a new dimension of work for the Indian Affairs Department (IAD). The department built upon its existing relationships with the Nations, Tribes, and Pueblos of the state and provided information on vital resources through constant communication. One way IAD provided support was through the tribal liaison team as an Emergency Support Function (“ESF”) to the

COVID-19 RESPONSE

Emergency Operation Center (EOC). The team communicated regularly with tribal emergency managers and leadership, provided COVID-19 best practice information, information on state processes, and assisted tribes with any needs requested. The tribal liaisons worked closely with ESF-11 Agriculture and ESF-6 Human Services (HSD and CYFD) to provide food and water to all Tribes.

IAD served as a vital convener, gathering trusted partners from tribal, state, and federal sections in order to provide information to tribal leadership and communities. The department relayed critical information to tribal communities in a manner that was culturally relevant and appropriate. IAD hosted weekly calls with tribal leadership beginning in March 2020. PED, ECECD, CYFD, DWS, and the EOC Tribal Liaison (EOC TL) desk were frequent presenters on these calls to inform tribes of programs and resources on the following:

- PED – Tribal broadband infrastructure, closing and reopening of schools;
- ECECD – Infant Care Supplies Donation, and childcare resources;
- CYFD/PED – Meals-to-You so that children had access to food;

- DWS – Pandemic Unemployment Assistance Program training to Nations, Tribes, and Pueblos;
- EOC TL – Directed tribal community needs to appropriate departments;
- DOH – COVID-19 testing, data, and rapid response protocols; and
- Federal Partners – CARES Act funding information and updates on federal legislation.

The IAD coordinated efforts with sister agencies to provide much needed resources, e.g., Personal Protective Equipment (PPE), food and water, culturally appropriate behavioral health information, and internet access through the deployment of hotspots and internet connecting devices. Additionally, informational resources were created to assist Tribes to navigate CARES Act funding, Pandemic Unemployment Assistance, FEMA reimbursements, and Rapid Response Protocols. Finally, IAD worked with the Native American Budget Policy Institute to publish a report titled “COVID-19: Internet Access and the Impact on Tribal Communities in New Mexico.”



Broadband

IAD remains committed to providing tribal communities with both short-term and long-term solutions by partnering with the Public Education Department (PED), the Department of Information and Technology (DoIT), the Native American Budget and Policy Institute (NABPI), the NAVA Education Project, Santa Fe Indian School, High Water Mark, LLC, the Navajo Tribal Utility Authority, and commercial carriers such as Verizon and T-Mobile. Short-term solutions include: the deployment of temporary wireless hotspots; knowledge of and access to federal and state broadband assistance opportunities, such as the Federal Communications Commission's 2.5 GHz Spectrum Window; and distribution of internet-connected devices, such as tablets and Chromebooks. Long-term solutions center on investment in tribal broadband infrastructure through the establishment of tribally owned vertical assets, ameliorated network capabilities that are consistent and reliable across rural New Mexico, and the modernization of tribal administrative systems.

Infant Care Supplies Donation

IAD assisted the Early Childhood Education and Care Department (ECECD) to supply the state's Nations, Tribes, and Pueblos with two sets of infant care donations. In April 2020, IAD and ECECD delivered infant formula to all tribal communities to ensure that mothers have immediate access to formula. Through this donation, IAD and ECECD continued to encourage all tribal communities to enroll eligible families for the Tribal Women, Infants, and Children's (WIC) program. In May 2020, IAD assisted ECECD in donating tribal infant packages that included diapers, wipes, onesies, formula, bassinets, baby books, and baby food to the state's Nations, Tribes, and Pueblos.

Pandemic Unemployment Assistance Program

IAD assisted the Department of Workforce Solutions to conduct tribal outreach regarding the Pandemic Unemployment Assistance (PUA) Program. The PUA is an unemployment insurance benefits program geared towards artists and other self-employed individuals who do not meet the general federal unemployment insurance eligibility requirements. Through IAD's assistance, all tribal nations were notified, and most tribes were trained on how to enroll their eligible community members.



PROFILE OF NEW MEXICO CHILDREN

Racial and ethnic distribution of NM children, 2019 population estimates

Age	American Indian or Alaska Native	Asian or Pacific Islander	Black or African American	Hispanic	White	Total
0-4 Yrs	18,886	2,340	5,001	64,444	30,998	121,669
5-9 Yrs	22,148	2,529	5,563	69,713	33,168	133,120
10-14 Yrs	19,851	2,818	5,700	77,038	34,374	139,782
15-19 Yrs	18,772	2,963	5,337	76,768	35,030	138,870
Total	79,657	10,650	21,601	287,963	133,570	533,441

Figure 1

Data source: NMDOH NM Indicator Based Information System (NM-IBIS) Population Estimates: University of New Mexico, Geospatial and Population Studies (GPS) Program, <http://gps.unm.edu/>. The Bureau of Business and Economic Research (BBER) and the Geospatial and Population Studies (GPS) Program are both housed within the UNM Institute for Applied Research Services (IARS).

In 2019, there were an estimated 2,096,829 New Mexicans of all ages and an estimated 533,441 children ages 0-19 years. Children and youth comprised 25.4% of the total population.

Children's relationship to householder

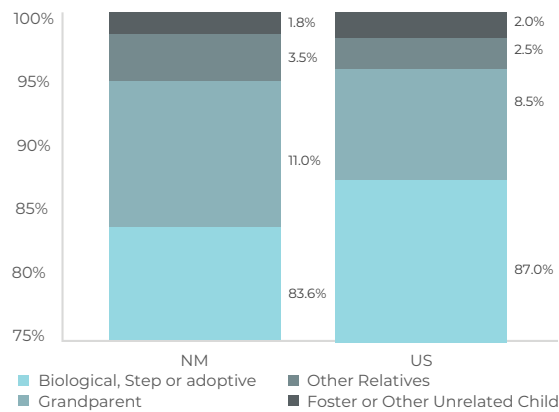


Figure 2

Data source: National Survey of Children's Health, 2019

In 2019, 11% of NM children lived with their grandparent(s) compared to ~9% of U.S. children. About 4% of NM children were residing with other relatives, and close to 2% were in foster care or a non-relative home, similar to children in the rest of the United States.

Race ethnicity of New Mexico Children in 2019

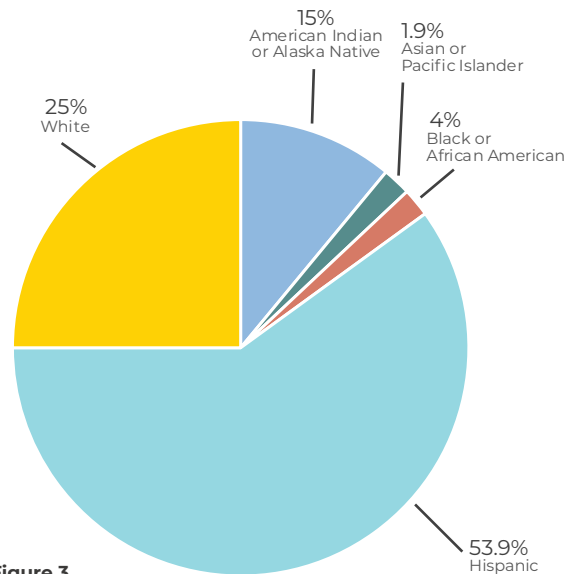


Figure 3

New Mexico is a minority-majority state with 54% Hispanic or Latino children, 15% AI-Alaska Native children, 4% Black or African American children, 2% Asian or Pacific Islander. Non-Hispanic White children make up about 25% of the population.

Percent of children living in poverty by type of household

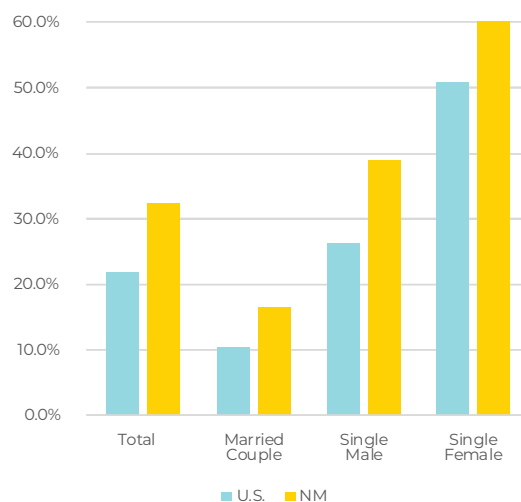


Figure 4

Data source: National Survey of Children's Health, 2019

In 2019, NM children living in single-parent households were significantly more likely to live in poverty as those who lived in a two-parent household. Over 40% of children in a single-parent home were living in a poor household compared to ~16% of those living with two parents who were married.

An estimated 52.7% of children lived in households with public assistance in the form of Supplemental Security Income (SSI), income support or food stamp benefits. The estimate varied by family composition: 34.8% in married-couple family households and 76.8% in a single-parent home. An estimated 20% of children lived in households with Supplemental Security Income (SSI), public assistance income or food stamp benefits. The estimate varied by family composition: 9.4% in married couple family households; 20% in a single parent home headed by a male; and 45% in a single parent home headed by a female.

Poverty is linked to educational attainment. Adults who fail to complete high school are twice as likely to live in poverty than those who completed high school; six times more likely than those who finished college; and ten times more likely than those who obtained a graduate or professional degree.

Percent of New Mexico adults age 25 and older who lived in poverty by their educational achievement level

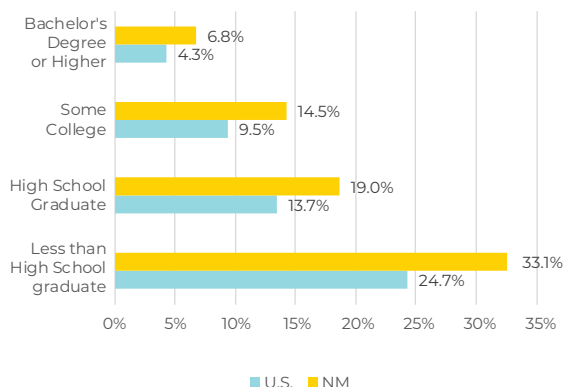


Figure 5: NM to US comparison of percent of adults age 25+ who lived in poverty, by educational achievement.

Poverty and New Mexico's Children

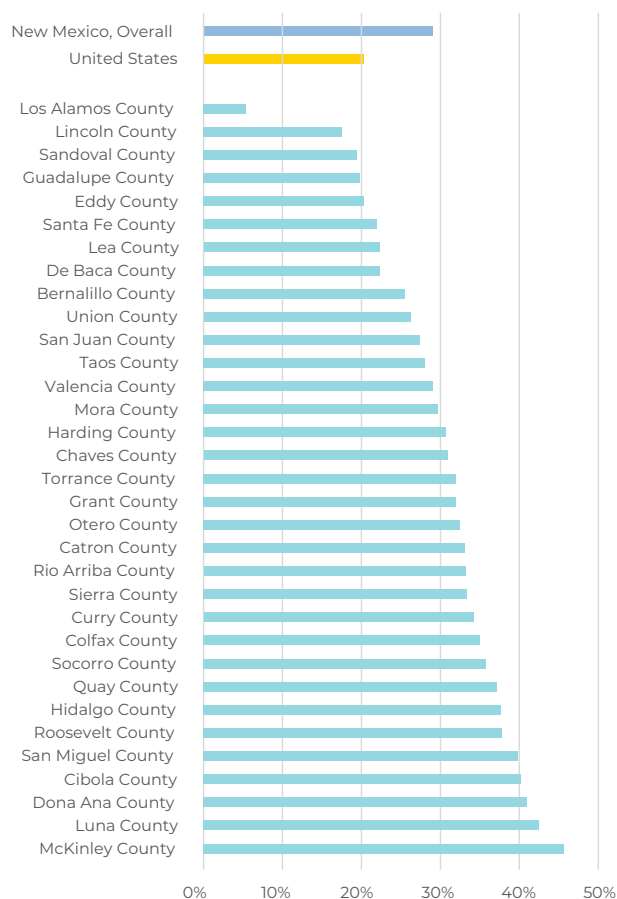


Figure 6: Percent of children under 18 years of age who are living in households with an income at or below the federal poverty level, by county in New Mexico, 2015-2019.

Data source: American Community Survey, US. Census- accessed NM-IBIS, 2021

For the period 2015-2019, an estimated 27.0% of NM children and 18.1% of US children younger than 18 years of age were living in families at or below the federal poverty level (FPL). Poverty is a significant determinant of health and well-being for children. In 2015-2019, the highest prevalence of NM children living in poverty was in the Southwest region of the state followed by the Northwest region.

BUDGET SUMMARY

Total Program Funding by State Agency

STATE AGENCY	2016		2017		2018		2019		2020	
		Total Programs and Total Funding		Total Programs and Total Funding		Total Programs and Total Funding		Total Programs and Total Funding		Total Programs and Total Funding
Public Education Department State Funds	27	\$ 151,427,600	26	\$ 140,920,700	21	\$ 133,875,000	17	\$ 98,511,600	15	\$ 74,050,000
Public Education Department Federal Funds	18	\$ 410,552,456	20	\$ 448,545,492	17	\$ 431,895,281	22	\$ 436,731,798	23	\$ 422,465,150
State Equalization Guarantee (*SEG)		\$ 2,497,476,907		\$ 2,486,143,507		\$ 2,498,258,700		\$ 2,587,377,551		\$ 3,073,803,400
Non-SEG Public School Support**		\$		\$		\$		\$		\$ 121,928,500
Aging and Long Term Services Department					3	\$ 1,805,000	3	\$ 1,948,803	3	\$ 2,154,400
Children Youth and Families Department	30	\$ 325,580,119	30	\$ 332,280,662	30	\$ 357,146,901	29	\$ 389,504,850	32	\$ 473,740,256
Department of Cultural Affairs	17	\$ 673,656	17	\$ 794,429	17	\$ 768,858	17	\$ 1,083,498	16	\$ 1,689,926
Department of Health	16	\$ 271,034,553	16	\$ 269,882,462	15	\$ 258,476,752	19	\$ 263,508,275	19	\$ 299,659,876
Department of Workforce Solutions	3	\$ 6,267,785	3	\$ 5,377,524	3	\$ 6,053,647	3	\$ 9,413,695	3	\$ 8,704,574
Higher Education Department	5	\$ 64,796,100	5	\$ 65,876,300	5	\$ 49,833,336	5	\$ 43,564,300	8	\$ 53,883,594
Human Services Department	11	\$ 1,051,082,989	10	\$ 1,030,422,004	10	\$ 978,357,251	6	\$ 984,527,842	6	\$ 1,093,800,735
Corrections Department	6	\$ 568,154	6	\$ 158,738	6	\$ 159,188	7	\$ 152,138	3	\$ 5,228,782
Department of Finance and Administration	4	\$ 3,223,000	4	\$ 2,995,900	1	\$ 17,700	1	\$ 17,700	1	\$ 17,700
Indian Affairs Department	1	\$ 249,300	1	\$ 249,300	2	\$ 442,061	2	\$ 395,300	9	\$ 852,124
Office of African American Affairs							4	\$ 47,000	3	\$ 34,400
Grand Total	138	\$ 4,782,932,619	138	\$ 4,783,647,018	130	\$ 4,717,089,675	135	\$ 4,816,784,350	141	\$ 5,632,013,417

*The SEG uses a formula to distribute funding to 88 school districts and state-run charter schools.

**It is unclear from analysis if pre-2020 data delineated between SEG and non-SEG Public School Support. As such, it is reported separately starting in FY2020.

Figure 7: Provides a detail of aggregated total funding for Children's Cabinet programs within agencies, FY16-20. Note that for FY20 the SEG increased significantly in response to the Martinez-Yazzie lawsuit, from approximately \$2.6 billion in FY19 to \$3.1 billion in FY20.



Total program funding disaggregated by primary outcome, FY16-FY20

PRIMARY OUTCOME	2016		2017		2018		2019		2020	
	Total Programs and Total Funding		Total Programs and Total Funding		Total Programs and Total Funding		Total Programs and Total Funding		Total Programs and Total Funding	
Healthy										
Children, Youth and Families Dept.	7	\$ 73,131,306	7	\$ 72,488,561	7	\$ 75,604,600	8	\$ 81,612,150	7	\$ 84,246,803
Indian Affairs Department	1	\$ 249,300	1	\$ 249,300	1	\$ 249,300	1	\$ 249,300	3	\$ 331,506
Department of Health	14	\$ 269,678,464	14	\$ 268,599,810	14	\$ 257,369,752	16	\$ 259,129,419	16	\$ 293,581,784
Human Services Department	2	\$ 925,109,596	2	\$ 903,257,521	2	\$ 857,129,103	2	\$ 852,890,305	2	\$ 948,974,773
Office of African American Affairs							1	\$ 10,000		\$
Public Education Department (State funds)	6	\$ 39,589,700	6	\$ 36,724,600	6	\$ 40,625,000	3	\$ 2,125,000	4	\$ 5,150,000
Healthy Subtotal	30	\$ 1,307,758,366	30	\$ 1,281,319,792	30	\$ 1,230,977,755	31	\$ 1,196,016,174	32	\$ 1,332,284,866
Educated										
Public Education Department (State Funding)	21	\$ 111,837,900	20	\$ 104,196,100	15	\$ 93,250,000	14	\$ 96,386,600	11	\$ 68,900,000
State Equalization Guarantee (SEG)		\$ 2,497,476,907		\$ 2,486,143,507		\$ 2,498,258,700		\$ 2,587,377,551		\$ 3,073,803,400
Non-SEG Public School Support*										\$ 121,928,500
Public Education Department (Fed. Funds)	15	\$ 260,696,082	17	\$ 299,266,619	14	\$ 282,430,658	19	\$ 287,909,855	19	\$ 308,241,035
Higher Education Department	5	\$ 64,796,100	5	\$ 65,876,300	5	\$ 49,833,336	5	\$ 43,564,300	8	\$ 53,883,594
Children, Youth and Families Dept.	6	\$ 93,901,874	6	\$ 81,815,734	6	\$ 99,469,534	6	\$ 102,580,623	6	\$ 119,233,929
Department of Cultural Affairs	13	\$ 619,317	13	\$ 743,596	13	\$ 716,316	16	\$ 1,065,998	15	\$ 1,672,426
Department of Finance & Administration	3	\$ 3,203,100	3	\$ 2,976,800		\$		\$		
Department of Health	1	\$ 1,782,319	1	\$ 1,861,519	1	\$ 1,861,456	2	\$ 3,271,856	2	\$ 4,971,092
Indian Affairs Department					1	\$ 192,761	1	\$ 146,000	4	\$ 439,375
Educated Subtotal	64	\$ 3,034,313,599	65	\$ 3,042,880,175	55	\$ 3,026,012,761	62	\$ 3,122,302,783	65	\$ 3,753,073,351
Safe										
Children, Youth and Families Dept.	13	\$ 54,070,056	13	\$ 56,759,448	13	\$ 58,241,512	11	\$ 58,062,110	11	\$ 67,729,936
Safe Subtotal	13	\$ 54,070,056	13	\$ 56,759,448	13	\$ 58,241,512	11	\$ 58,062,110	11	\$ 67,729,936
Supported										
Aging and Long Term Services Department					3	\$ 1,805,000	3	\$ 1,948,803	3	\$ 2,154,400
Children, Youth and Families Dept.	3	\$ 102,584,598	3	\$ 118,875,589	3	\$ 121,497,396	3	\$ 145,172,614	7	\$ 200,799,049
Corrections Department	6	\$ 568,154	6	\$ 158,738	6	\$ 159,188	7	\$ 152,138	3	\$ 5,228,782
Department of Health	2	\$ 1,356,089	2	\$ 1,282,652	1	\$ 1,107,000	1	\$ 1,107,000	1	\$ 1,107,000
Public Education Department (USDA- Fed. Funds)	3	\$ 149,856,374	3	\$ 149,278,873	3	\$ 149,464,623	3	\$ 148,821,943	4	\$ 114,224,115
Human Services Department	9	\$ 125,973,393	8	\$ 127,164,483	8	\$ 121,228,148	4	\$ 131,637,538	4	\$ 144,825,962
Supported Subtotal	23	\$ 380,338,608	22	\$ 396,760,335	24	\$ 395,261,355	21	\$ 428,840,036	22	\$ 468,339,308
Involved										
Children, Youth and Families Dept.	1	\$ 1,892,285	1	\$ 2,341,330	1	\$ 2,333,859	1	\$ 2,077,355	1	\$ 1,730,539
Department of Workforce Solutions	3	\$ 6,267,785	3	\$ 5,377,524	3	\$ 6,053,647	3	\$ 9,413,695	3	\$ 8,704,574
Department of Cultural Affairs	4	\$ 54,339	4	\$ 50,833	4	\$ 52,542	1	\$ 17,500	1	\$ 17,500
Office of African American Affairs							3	\$ 37,000	3	\$ 34,400
Dept. Finance and Administration	1	\$ 19,900	1	\$ 19,100	1	\$ 17,700	1	\$ 17,700	1	\$ 17,700
Indian Affairs Department									2	\$ 81,243
Involved Subtotal	9	\$ 8,234,309	9	\$ 7,788,787	9	\$ 8,457,748	9	\$ 11,563,250	11	\$ 10,585,956
Grand Total	139	\$ 4,784,714,938	139	\$ 4,785,508,537	131	\$ 4,718,951,131	139	\$ 4,816,784,353	142	\$ 5,632,013,417

*It is unclear from analysis if pre-2020 data delineated between SEG and non-SEG Public School Support. As such, it is reported separately starting in FY2020.

Figure 8: Provides a detail of aggregated total funding per Children's Cabinet Outcome for FY 16-FY 20 with the educated outcome reflecting total recurring public education (PreK-12) appropriations.

Introduction, Trends & Considerations

The mission of the NM Department of Health (NMDOH) is to promote health and wellness, improve health outcomes, and assure safety net services for all people in New Mexico. NMDOH is a centralized system of health services that works to promote health and wellness, improve health outcomes, and assure safety net services for all people in the state to achieve a healthier New Mexico. DOH partners with other state and federal agencies as well as tribal and community partners to expand access to services and improve the health status of NM residents. Regional directors and staff provide services to every county within their region through the 52 public health offices that are located throughout the state. These local offices partner with their communities to ensure that services meet communities' specific needs. The NMDOH achieves its mission and vision by promoting health and preventing disease, collecting, analyzing and disseminating data, licensing and certifying health facilities, and providing clinical testing services. The department also operates health care facilities that serve veterans, persons with developmental disabilities, those with behavioral health issues, and those with rehabilitation needs.

According to the CDC, there are three primary core functions of public health with 10 corresponding essential health services. Since NMDOH is the main public health entity of New Mexico, we are charged with providing these three core function areas statewide:

- **Assessment** – Monitor and assess health problems and then diagnose and investigate the problems' solutions.
- **Policy Development** – Inform, educate and empower people, mobilize community partnerships and then develop plans and policies around agreed upon health efforts.
- **Assurance** – Enforce laws and regulations, guarantee a competent workforce, and evaluate service delivery's effectiveness to assure the provision of public health services and ensure the population's safety.

Specifically with regard to child health outcomes, DOH serves the child and adolescent population in many ways. The Women Infant and Children (WIC) program provides supplemental food, formula and breast feeding support in offices across the state. The Children's Medical Services program provides critical social work care coordination and safety net medical services for children with chronic conditions and special needs, also working out of offices statewide. Family planning services, school-based health centers, and childhood immunizations are all supported and/or provided by public health staff across the state. DOH staff also work on the child, infant, and maternal mortality review panels; work to prevent childhood injuries and promote safe sleep; work to improve infant mortality; provide training on safe sleep, prevention of shaken baby syndrome, and developmental screening; and collect and analyze data to improve child wellbeing and support program evaluation; and much more.



Administration Initiatives and Interagency Collaboration

Reducing the Number of Newborns Exposed to Substances (CARA)

Substance use in pregnancy has been increasing for the past decade, and New Mexico is among some of the states with higher than average rates of neonatal opioid withdrawal syndrome (NOWS). While many states have taken punitive approaches to substance use in pregnancy, which have not proven effective, New Mexico is taking steps to ensure mothers and babies get the treatment and support they need.

The federal Comprehensive Addiction and Recovery Act (CARA) required states to provide Plans of Care for all babies born exposed to substances. In response, CYFD convened an interagency working group, partnering with DOH and the J. Paul Taylor Task Force to pass a new law to connect families to the supports they need, now signed into law by Governor Michelle Lujan Grisham. This law was designed to ensure that babies born exposed to substances, and their families, receive everything they need to thrive without being stigmatized or punished.

Staff in CYFD and DOH have worked to implement CARA, traveling around the state and training hundreds of medical professionals, hospital employees, and care coordinators so they understand the intent of the law and what is required of them. CYFD is developing an online portal for submission of the plans, and CYFD, DOH, and UNM are working together to develop online training modules. Evaluation of the program is being led by DOH and data collection and analysis is ongoing.

Maternity Home

Maternity Home is considered a New and Innovative Program which is a statutory subset of children's shelter. The existing Maternity Home has a capacity to serve six young expectant or parenting mothers from the ages of 13 to 21 and their minor children. In order to provide the mothers and children with a stable home environment over the long term, there is no time limit on how long the young mothers can

stay in the Maternity Home. The Maternity Home provides mothers with clinical services including individual and group therapeutic treatment and case management, and refers small children and babies to appropriate services when needed. CYFD is currently developing a request for applications to incorporate a second Maternity Home in New Mexico.

Infant Maternity Home (IMH)

CYFD Infant Maternity Home (IMH) has had an ongoing partnership with the CARA Navigator/Program Supervisor in order to support the efforts of both programs to improve the lives of infants in New Mexico. IMH facilitated the development of educational slides regarding the effects of substance exposure on child development which are now a part of the CARA Educational Modules used to train hospital staff who will oversee the development of the CARA Plans of Care. Additionally, IMH created a pamphlet with a brief description of the three IMH programs as well as a list of all IMH child parent psychotherapy providers by county, to facilitate the referral process. IMH is also providing IMH CPP providers' contact information for the CARA representatives at their local hospitals. IMH's intent is to encourage the establishment of partnerships between providers to ease the referral process for families.



Children's Oral Health Prevention Program (DOH)

Tooth decay is preventable yet remains the most common chronic disease among children. The Centers for Disease Control and Prevention estimates that over 51 million school hours are lost due to tooth decay. Untreated cavities can cause pain and infections that may lead to problems with eating, speaking, playing, and learning. Children who have poor oral health often miss more school and receive lower grades than children who do not.

The Office of Oral Health's (OOH) mission is to prevent oral disease, contributing to a healthier New Mexico. Its vision is to promote oral health and overall health, improved oral health outcomes, and assure safety net services are available for the uninsured and low-income people in our communities. Chapter 24 of the New Mexico Health and Safety Code mandates that the Department of Health operate a dental program. OOH provides oral health information, conducts a school-linked prevention program focused on pre-school and elementary school aged children, and funds contractors to provide preventive and treatment services to the uninsured and low-income residents.

OOH works very closely with various organizations to promote the importance of children's oral and overall health. Some of the local organizations are: the New Mexico Oral Health Coalition (consisting of over 20 local oral health advocates), the New Mexico Primary Care Association, Health Action New Mexico, Santa Fe County Head Start, Water Utility offices of Santa Fe and Bernalillo County, City of Albuquerque Head Start, YDI Head Start, New Mexico Children Youth and Family Department, St. Joseph's CHI home visiting program, Villa Therese Catholic Clinic, Native American Professional Parent Resources, the New Mexico Human Services Department, and the Office of School and Adolescent Health at DOH. The program is supported with \$1.7 million in General Fund allocated each year in the state budget, and federal Title V funds/PHHS Block Grant in the amount of \$67,000. About \$1.4 million is spent providing school-based preventive services as well as preventive and treatment services for the uninsured or those who have low income.

Estimated expenditures for the Children's Oral Health Prevention Program are approximately \$1.7 million.

Leveraging Medicaid to Expand Dental Coverage

OOH was mandated by House Memorial 96 to convene a task force to study ways to expand Medicaid coverage to provide additional dental care for children. This task force comprises several oral health advocates representing the various dental associations, the University of New Mexico, the New Mexico Oral Health Coalition, Health Action New Mexico, Federal Qualified Health Center Dental Directors, Indian Health Services, and others. After several meetings, the committee developed a list of actions to increase access to care, and its recommendations were submitted to and accepted by the Legislative Health and Human Services (LHHS) Committee. To date, the Human Services Department (HSD) has approved a provider reimbursement increase of 2% and has approved a reimbursement code for fluoride varnish applications. The Department is currently developing a code for reimbursing the application silver diamide fluoride varnish, which will reduce the number of fillings as well as the pain associated with fillings. OOH and HSD continue to work together to address the recommendations of the task force in order to improve the oral health status of Medicaid children.

Tobacco Cessation and Prevention Program

The State of New Mexico Indian Affairs Department (IAD) is focused on building tribal capacity to implement culturally appropriate tobacco cessation and prevention initiatives that recognize the unique ceremonial uses of tobacco while reducing the use of commercial tobacco use and its harmful effects. In FY20 IAD received a \$249,300 appropriation from the New Mexico Legislature for Tobacco Cessation and Prevention Programs. This is funded out of the Tobacco Settlement Fund and is used for direct tobacco cessation and prevention campaigns in Native American communities. The three components are health, education, and community involvement.

The following organizations partnered with IAD to provide youth tobacco cessation activities:

- **Albuquerque Area Indian Health Board, Inc.:** Conducted tobacco cessation outreach in tribal communities through a three-day digital storytelling workshop, produced 10 brief videos to continue to assist with tribal communities and outreach to schools (50% of the funding benefited children).
- **Albuquerque Indian Center (AIC), Inc.:** Distributed information on chronic disease from commercial tobacco use, cultural tobacco sacred use, cessation secondhand smoke, e-cig, prevention, quit-line and information on secondhand smoke to AIC clients; produced quarterly newsletter.
- **Pueblo of Acoma:** Two community forums were held on commercial tobacco cessation using community-based digital storytelling and other methods to provide tobacco cessation outreach in their community.
- **Pueblo of Pojoaque:** The Department of Healing Arts' six tribal staff members attended training and received their American Lung Association facilitator certificates. During the pandemic, the staff partnered with the Community Health Representative to create and deliver 100 anti-smoking boxes to help tribal members quit smoking and also provide outreach at community events.
- **Keres Consulting, Inc.:** Research findings identified the greatest tobacco use disparities within the state region. In addition to providing technical assistance and outreach, Keres developed a presentation and learning guide for emerging tobacco projects to be delivered to five tribal communities.
- **Tobacco Free - Capacity Builders:** A youth art contest was held with a theme of tobacco cessation. The resulting colorful posters were hung in the community and used as an outreach tool in tribal communities.
- **Mescalero Apache Tribe:** The Tribe used the CDC's curriculum to educate the community on commercial tobacco cessation while teaching the importance of traditional tobacco usage to youth by demonstrating how to build a traditional tobacco bag and providing materials to participants to sew their own traditional tobacco bag. During Covid-19, the program continues to share educational messages through Facebook live on "What's in Tobacco smoke?"
- **Native American Community Academy:** Completed The Sacred Circle of Tobacco lesson plans for middle school youth in 5th – 8th grade, including peer mentorship with high school grades 9 and 11, and trained staff through a virtual presentation on Covid-19 & Commercial Tobacco Use: General Education and Cessation Resources provided by Dr. Patricia Nez



HEALTHY REPORT CARD

Henderson, Vice-President, Black Hills Center for American Indian Health. In addition, the Tobacco team continued to post positive educational messaging on traditional tobacco and commercial tobacco to their social media. During Covid-19, the Tobacco team was able to put together 300 resource bags with every food box.

- **Oso Vista Ranch Project:** Invited comedian Ernest Tsoie to deliver educational messages on the risks of commercial tobacco usage to children in Navajo, Pueblo, and Apache communities.
- **Acoma Pueblo Youth Diabetes Project:** Developed a diabetes prevention curriculum and delivered the curriculum in tribal communities. Also provided outreach and technical assistance related to diabetes awareness.
- **Apache Tribe:** Assisted the Mescalero Apache Tribe community center to provide a summer meals program.

Fitness and Nutrition

The Obesity, Nutrition, and Physical Activity (ONAPA) and Healthy Kids Healthy Communities (HKHC) programs build state and local partnerships to expand children's and low-income adults' opportunities for healthy eating and physical activity where they live, learn, play, work, eat, and shop. Healthy eating and physical activity are two major

lifestyle behaviors that can help prevent obesity and subsequent chronic disease. Launched in October 2011, HKHC creates sustainable policy, systems, and environmental changes through multi-sector community-led coalitions to prevent childhood and adult obesity in 14 high-need (based on poverty and chronic disease burden) communities across New Mexico.

Key partners include: Public Education Department; Children, Youth and Families Department; Early Care and Education Department; Human Services Department; Department of Transportation; Women, Infants, and Children Program; New Mexico Department of Health (NMDOH) regional health promotion teams; Farm to Table New Mexico; University of New Mexico; New Mexico State University Cooperative Extension Service; schools and districts; state planning organizations; tribal and municipal governments; and parks and recreation.

In FY20, HKHC communities included: Chaves County, Cibola County, Colfax County, Curry County, Dona Ana County, Grant County, Guadalupe County, Hidalgo County, Roosevelt County, San Juan County, Socorro County, San Ildefonso Pueblo, Zuni Pueblo, and Ohkay Owingeh Pueblo. HKHC collects data on the number of increased healthy eating and/or physical activity opportunities in the school setting, built environment, and food system.

ONAPA also collects and reports on annual Body Mass Index (BMI) data on kindergarten and third grade students in randomly-selected public elementary schools across the state to monitor childhood obesity prevalence over time by grade, race/ethnicity, and gender.



Promoting Healthy Births

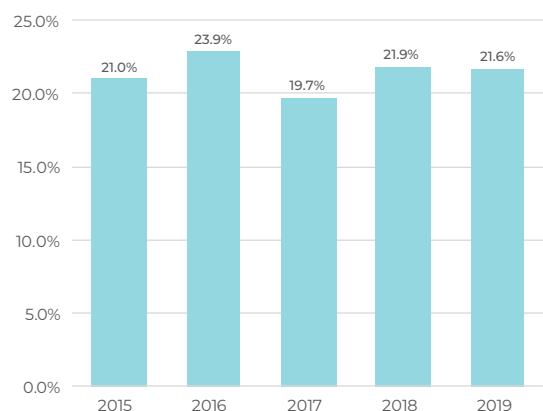


Figure 9: The percentage of new mothers who had all characteristics of a healthy birth composite indicator (i.e. Had enough food to eat during pregnancy, reported no cigarette smoking during pregnancy, were a healthy weight before pregnancy, had an intended pregnancy)

Data Source: NM Pregnancy Risk Assessment Monitoring System (PRAMS), 2015-2019 births

How is New Mexico Doing?

About 1 in 5 NM women giving live birth from 2015-2019 (22%) were prepared for a healthy birth, including all four factors measured: prenatal food security, abstaining from tobacco use during pregnancy, having a healthy preconception weight (BMI) and intending their pregnancy. That prevalence has not improved or worsened significantly over the period of 2015 to 2019. From 2015-2019, about 63% of women in New Mexico who smoked cigarettes before pregnancy quit smoking during pregnancy, and, overall, 94% of NM pregnant women abstained from smoking cigarettes during pregnancy. Fewer than half (42%) of NM women were a healthy weight (a BMI of 18.5 to 24.9) prior to pregnancy, and 91% said they had enough food to eat during pregnancy. About 57% of women giving birth had an intended (wanted at conception or sooner) pregnancy.

How does New Mexico compare to the nation?

In 2019, the percentage of women who did not smoke before pregnancy was 85.3% in NM and averaged 83.1% in other states. The percentage of women who did not smoke during pregnancy was 94.2% in NM compared to 91.9%, nationally. A similar percentage of NM mothers were at healthy (normal) pre-pregnancy weight (44.1%) compared to those in other states (44.4%).

What does this mean?

Smoking during pregnancy increases the risk of poor birth outcomes including preterm birth, low birth weight and birth defects of the mouth and lips. Mothers who are overweight or obese during the preconception period are more likely to develop gestational diabetes, high blood pressure and the need for cesarean delivery than mothers who are of normal weight. Women with intended pregnancies (those wanted when conception occurred) are more likely to abstain from smoking tobacco or using other substances, are more likely to seek timely prenatal care and have better birth outcomes compared to women whose pregnancy is unintended (unwanted or mistimed).



Teen Births

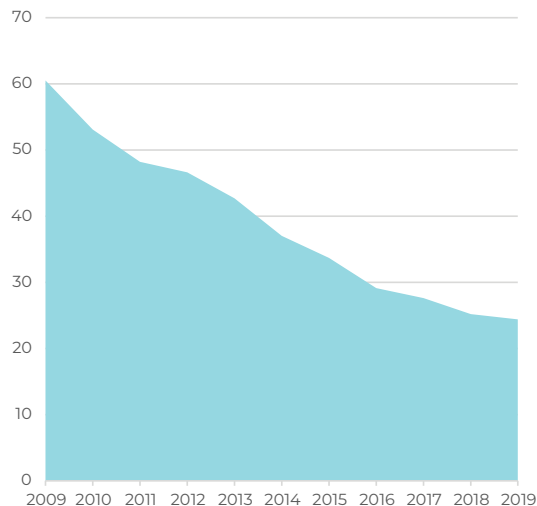


Figure 10: The rate of births to teens per 1,000 population, 15-19 years.

Data Source: NM Vital Records, and population estimates, NM-IBIS, 2021

How is New Mexico Doing?

In 2019 there were an estimated 24.4 live births for every 1,000 teens, ages 15-19 in NM. Although the rate has decreased steadily, there are significant disparities by subpopulation. In NM and the US, birth rates are higher for Hispanic (27.5) and Native American (32.2) teens compared to the state average.

How does New Mexico compare to the nation?

The NM rate has shown a steeper decline in contrast to the National rate which has gradually declined since 2010.

What does this mean?

The United States has seen profound declines in all 50 states and among all racial/ethnic groups over the last two decades. Service learning and education through the Teen Outreach Program (TOP) has also contributed to the decline in the teen birth rate for our state. Among teen clients of the NM Department of Health, Family Planning Program, the use of long-acting reversible contraceptives (LARCs) has increased from 3% in 2011 to 31% in 2019. This means that more teens are choosing more effective birth control methods over time.

Educational services through the NM Department of Health Family Planning Program are provided by community-based providers to over 500 students across NM. The two curricula focus on issues around values, community involvement/connection, sense of purpose, healthy behaviors, relationships with family and peers, life skills, and sexuality, including sexual health lessons. Matched pre-/post-tests indicate that 99% of teen participants report not getting or causing a pregnancy in the year after programming. Curricula that use the positive youth development framework (the theory that forms the evidence base of TOP) show that participants have a 53% lower risk of teen pregnancy, a 52% lower risk of school suspension, a 60% lower risk of academic failure, and a 60% lower risk of school dropout.



Childhood Immunizations

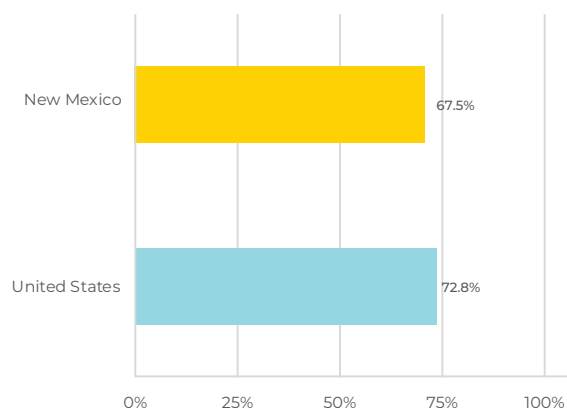


Figure 11: The percentage of children 19-35 months of age who were up-to-date for immunizations in 2019.

Data source: National Immunization Survey, 2019-public use data file.

How is New Mexico Doing?

In 2019, 67.5% of NM children age 19-35 months of age were up to date for the vaccine combination of 4:3:1:0:3:1:4, a series made up of immunizations for 4 Diphtheria-Tetanus-Pertussis shots, 3 Polio, 1 Measles-Mumps-Rubella, 0 doses H-Influenza b*, 3 Hepatitis B, 1 dose of Varicella (chicken pox) and 4 doses of Pneumococcal Virus vaccine. The prevalence of fully immunized children has increased significantly in NM and in the U.S. since 2009 when the coverage was under 50%.

While the prevalence of up- to -date immunizations for this series in New Mexico was below the national average in 2019, the prevalence varied significantly by age group. The percentage of 30-35 month-old children with up to date immunization series was 73.4%, the percentage of 24-29 month old children was 70.6%, and the percent among those 19-23 months was just 57.5% in 2019.

How does New Mexico compare to the nation?

In the United States, 72.8% of the nation's children were up-to-date for the 4:3:1:0:3:1:4 immunizations in 2019. New Mexico had a lower prevalence of immunization coverage in 2019, but in most report years since 2009 the prevalence has been statistically comparable to the U.S. average.

What does this mean?

Keeping children safe from disease by immunizing them is a critical mission for the Department of Health and healthcare providers around the state. The Vaccine Purchase Act, which passed in 2015, asked the Immunization Program to bill insurers for the cost of vaccines for privately insured children. As a result, the \$18-\$20 million annual budget for the Immunization Program is self-funded, with no cost or impact to the General Fund. New Mexico is a "universal vaccine" state, which means that vaccines are free for any child birth through 18.

Immunizations are the best way to protect children from serious, preventable diseases. NM is doing well compared to the U.S. but there is still room for improvement. Some diseases, such as measles, require a vaccination rate as high as 95% in order to fully protect those who are immune-compromised or otherwise cannot be vaccinated.



Children's Weight

Background

In 2009, state agencies with Women, Infants and Children (WIC) programs were required to implement redesigned WIC food packages to better align with the U.S. Dietary Guidelines for Americans and infant feeding practice guidelines of the American Academy of Pediatrics. This change led to increased availability of healthier foods and beverages in authorized WIC stores and improved dietary quality among families who enrolled in WIC. In addition to the food packages, WIC helps to establish successful long-term breastfeeding, provides participants with a wider variety of food, and offers WIC state agencies greater flexibility in prescribing food packages to adapt to participants with cultural food preferences.

How is New Mexico Doing?

Sixteen percent of NM children participating in WIC were obese in 2018. The rate has declined by a prevalence of almost three percent since 2010.

Breastfeeding also continues to increase in New Mexico, and this is a protective factor, independently predictive of healthier weight across the life course. Among WIC program participants, over 83% breastfed in 2019, and this compares favorably to the statewide rate of 89.5% for all NM births (NM PRAMS, 2019).

In 2019, 20.7% of NM youth ages 10-17 years were overweight compared to 16.2% in 2015; 13.3% were obese, lower than the 15.7% reported in 2015. "Overweight" means the 85th-95th percentile on a growth chart, and "obese" means at or above the 95th percentile. NM ranked 23rd among all states in for childhood obesity, 2018-2019
<https://stateofchildhoodobesity.org/states/nm/>

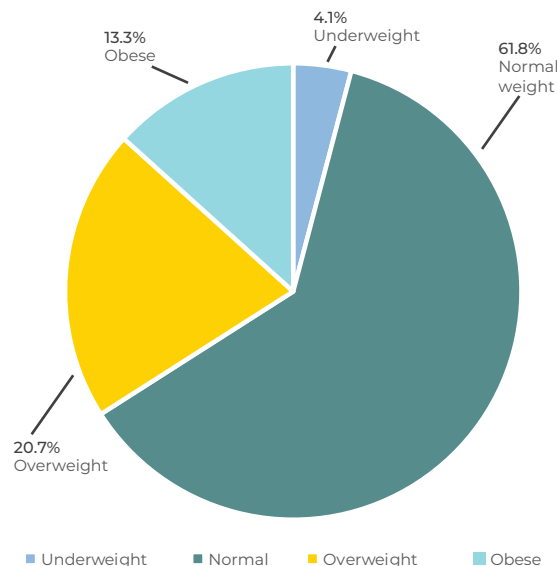


Figure 12: BMI for children age 10-17 years.

Data Source: National Survey of Children's Health, 2019.

How does New Mexico compare to the nation?

In 2019, 15.2% of the nation's youth were overweight and 16.0% were obese. NM youth were more likely to be overweight (20.7%) and less likely to be obese (13.3%) compared to U.S. youth.

What does this mean?

Increases in childhood obesity have resulted in dramatic increases in youth-onset diabetes. Nearly 60% of overweight children ages 5-10 years had at least one metabolic risk factor for heart disease and stroke, including elevated total cholesterol, triglycerides, insulin and high blood pressure. Overweight and obese children are also more likely to be overweight as adults and suffer from chronic diseases such as heart disease, certain cancers and diabetes. Obesity also affects the mental health of children with some studies reporting that severely obese children report a lower quality of life and obese children are more likely than non-obese children to feel sad, lonely and nervous.

Child Health Insurance

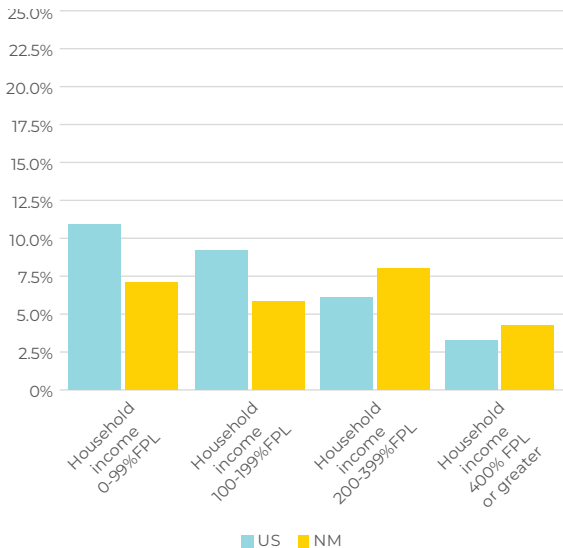


Figure 13: The percentage of uninsured children by federal poverty level.

Data Source: National Survey of Children's Health, 2019

How is New Mexico Doing?

From 2013-2019, the percentage of uninsured children living at or below 200% of poverty decreased from nearly 10% to 6.5%. This decline may be attributed to the state's improved retention efforts & coverage initiatives, including implementation of the Affordable Care Act. The Department of Health, through the Children's Medical Services program, partially covers approximately 2000 additional low-income children who are ineligible for Medicaid. The program utilizes the NM Medical Insurance Pool for those with high-cost medical conditions.

How does New Mexico compare to the nation?

The NM and U.S. uninsured rate for children was the same for 2019 (almost 7%). About 92% of both populations were consistently insured throughout the year.

What does this mean?

Families with health care coverage are more likely to access preventive health care services which results in better health outcomes. Child enrollment in Medicaid remains high with approximately 356,703 children enrolled as of November 2019. Years of aggressive enrollment efforts, a simplified renewal process, and ACA implementation all contribute to the increase in coverage.



HEALTHY BUDGET REPORT

Programs Supporting Healthy Outcome by Agency (\$1,332,284,866 in Total Funding for FY20)

	FY19	FY20
Children Youth and Families Department		
Community Behavioral Health Clinicians	\$ 2,395,400	\$ 2,858,284
Adolescent Substance Use Effort	\$ 1,166,650	\$ 950,909
Infant Mental Health	\$ 2,247,556	\$ 1,704,606
Community Based Services	\$ 8,009,000	\$ 8,193,433
Early Childhood Development	\$ 296,900	\$ -
Family Nutrition	\$ 42,697,900	\$ 46,664,405
Home Visiting	\$ 20,677,800	\$ 19,377,364
Medical	\$ 4,120,944	\$ 4,497,802
CYFD agency total	\$ 81,612,150	\$ 84,246,803
Department of Health		
Children's Medical Services	\$ 11,821,472	\$ 11,558,100
Families First	\$ 1,135,800	\$ 1,811,700
Family Planning Program	\$ 2,648,100	\$ 6,719,000
Immunizations - Vaccines for Children (VFC)	\$ 22,733,800	\$ 30,528,830
Maternal Child Health	\$ 2,331,900	\$ 1,393,000
New Mexico WIC Program	\$ 52,736,600	\$ 53,208,244
Newborn Genetic Screening	\$ 3,100,000	\$ 2,783,910
Newborn Hearing Screening Program	\$ 300,000	\$ 250,000
Office of School and Adolescent Health	\$ 5,808,600	\$ 8,321,600
Rural Primary Health Care Act	\$ 9,958,900	\$ 11,214,500
Sequoyah Adolescent Treatment Center	\$ 3,609,707	\$ 4,721,200
Tobacco Abuse Prevention and Control	\$ 6,399,800	\$ 6,108,300
Autism Programs	\$ 3,431,040	\$ 3,481,000
Developmental Disabilities Waiver	\$ 108,232,300	\$ 121,332,300
Family, Infant Toddler Program	\$ 23,481,400	\$ 28,750,100
Medically Fragile Waiver	\$ 1,400,000	\$ 1,400,000
DOH agency total	\$ 259,129,419	\$ 293,581,784
Human Services Department		
Behavioral Health Prevention Services/Substance Abuse Prevention Treatment Block Grant	\$ 9,057,500	\$ 10,295,000
Centennial Care	\$ 843,832,805	\$ 938,679,773
HSD agency total	\$ 852,890,305	\$ 948,974,773
Indian Affairs Department		
Tobacco Cessation & Prevention Program	\$ 249,300	\$ 249,300
Special Projects Grant Program- Youth Diabetes Project		\$ 32,206
Mescalero Apache Summer Food Program		\$ 50,000
IAD agency total	\$ 249,300	\$ 331,506
Office of African American Affairs		
Infant Mortality	\$ 10,000	\$ -
OAAA agency total	\$ 10,000	\$ -
Public Education Department		
USDA Elementary Breakfast	\$ 1,600,000	\$ 1,600,000
After School & Summer Enrichment Programs	\$ 325,000	\$ -
New Mexico Grown Fresh Fruits & Vegetables	\$ 200,000	\$ 200,000
School based health centers	\$ -	\$ 1,350,000
Community Schools Initiatives	\$ -	\$ 2,000,000
PED agency total	\$ 2,125,000	\$ 5,150,000
HEALTHY OUTCOME TOTAL:	\$ 1,196,016,174	\$ 1,332,284,866

Total funding trend by healthy outcome

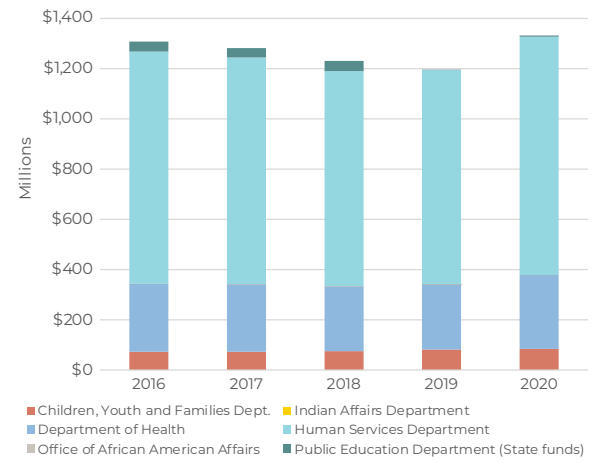


Figure 14: Reflects total state, federal and other funding for all agency programs supporting healthy outcomes for New Mexico's children and youth from FY16-FY20.

Medical Screening

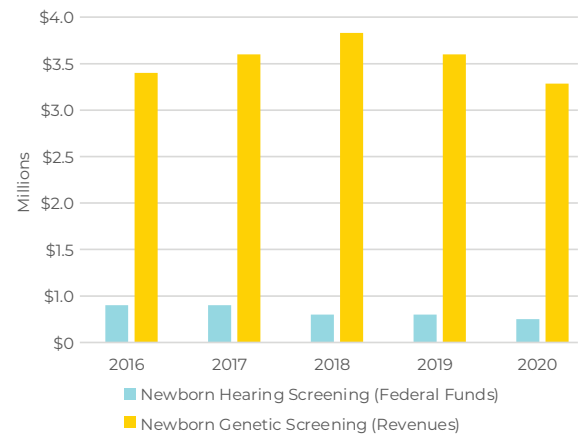


Figure 15: Medical Screening Funding for Newborn Hearing and Genetic screening, FY16-20.

School-based Services

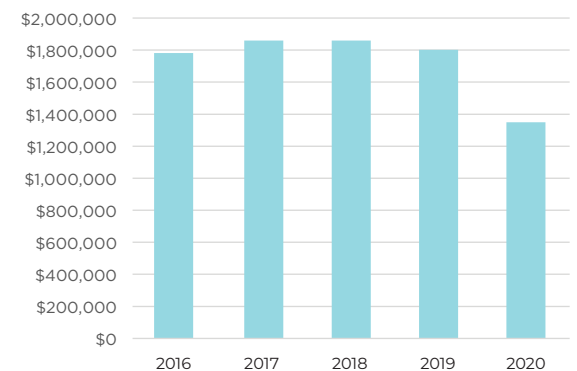


Figure 16: School-based Services Funding, FY16-20.

Centennial Care 2.0 (Medicaid)

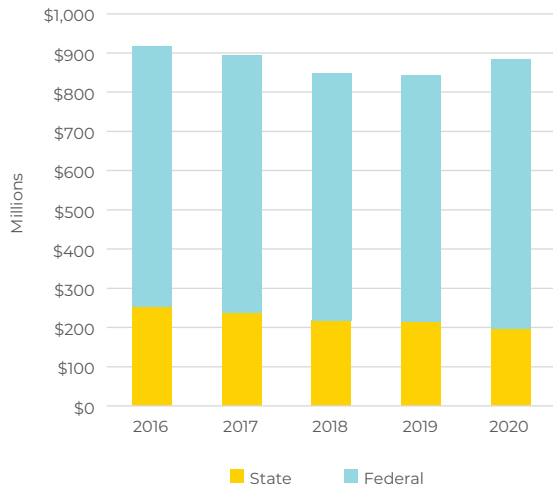


Figure 17: Displays state and federal funding streams for the Centennial Care 2.0 (Medicaid) health insurance program between FY16 and FY20.

In FY20 the estimated aggregate state and federal funding directed toward Centennial 2.0 was around \$900 million. Centennial Care entered its seventh year in 2020 with a transition from Centennial Care 1.0 to Centennial Care 2.0, moving towards a modernized healthcare delivery system that focuses on improved access to care, integrated care, care coordination, and quality of services.

Home Visiting

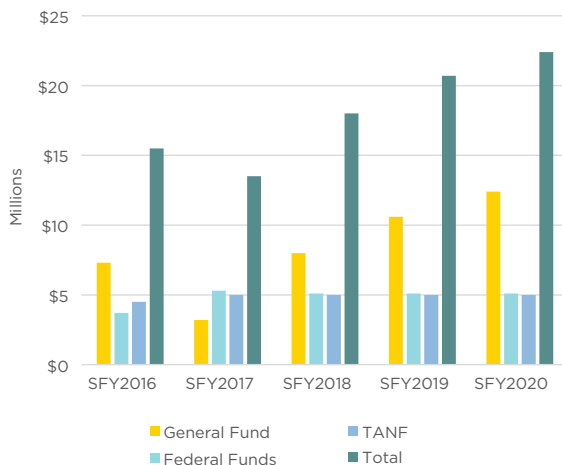


Figure 18: Home Visiting Funding by source, SFY2016 - 20.

Centennial Care 2.0 Estimated number of children served and average per-child expenditure FY16 – FY20

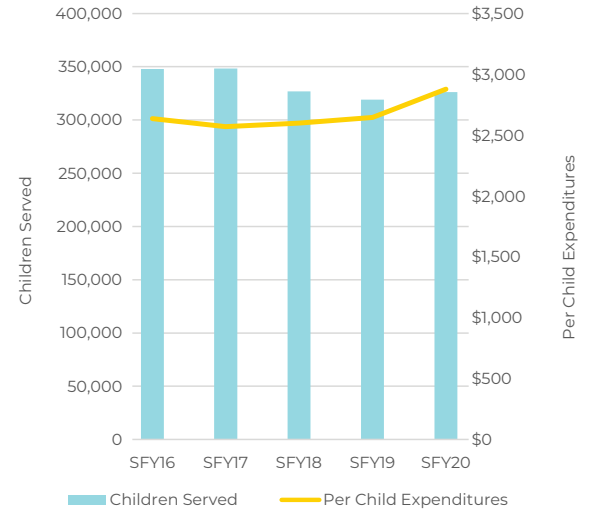


Figure 19: Displays the approximate number of children, as well as the estimated average expenditure per child, who participated in the Centennial Care 2.0 program between FY16 and FY20.

Family Planning Services

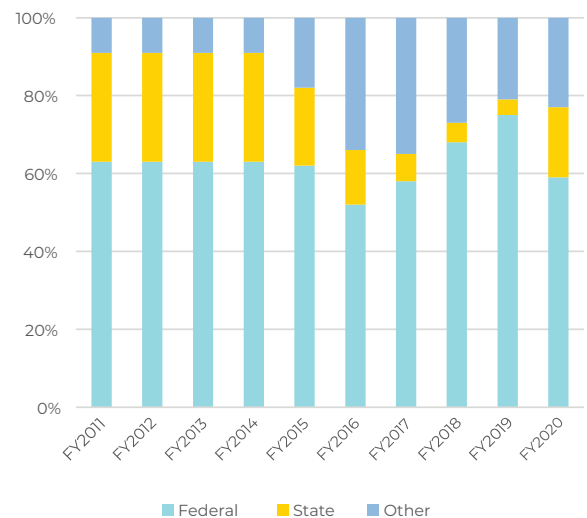


Figure 20: The funding for Family Planning Services is a combination of state, federal and billing from Medicaid. These graphs show funding levels and the percentage of total funding.

Introduction, Trends & Considerations

The mission of the New Mexico Public Education Department (NMPED) is to partner with educators, communities, and families to ensure all students are healthy, secure in their identity, and holistically prepared for college, career, and life. NMPED's vision is that all students in New Mexico are engaged in a culturally and linguistically responsive educational system that meets the social, emotional, and academic needs of all students. NMPED administers state and federal education laws, allocates state and federal resources, and provides guidance to over 877 schools in 89 districts and 52 state-authorized charter schools.

Governor Lujan Grisham and PED ushered into law key public education reforms including: significant funding increases for evidence-based programs like K-5 Plus and Extended Learning Time; raising educator salary levels in the state's three-tier licensure system; instituting an assets-oriented accountability system; developing a new teacher evaluation system; and establishing a framework for community schools across New Mexico to provide crucial wraparound health and wellbeing services to children and families.

Administration Initiatives and Interagency Collaboration

Access to Quality Early Learning

A child's brain develops at a rapid pace in the first five years of life, especially before they turn 3. Access to high-quality child care with an experienced and well-trained workforce can have a significant impact on this brain development, especially for at-risk children, narrowing school readiness gaps. At the same time, high-quality child care promotes family economic security and bolsters the state's economic output.

New Mexico defines High-Quality Child Care programs as those that successfully meet and maintain the criteria at FOCUS STAR-Levels 3, 4, and 5. FOCUS on Young Children's Learning is New Mexico's Tiered Quality Rating and Improvement System (TQRIS). Having moved out of the pilot phase in 2016, FOCUS has been fully implemented since 2018. FOCUS provides early childhood program personnel with the criteria, tools, and resources they need to improve the quality of their programs. This includes training, resources, and on-site support through consultation. Since the implementation of FOCUS the number of programs in STAR levels 3-5 has increased by 285%.

There are currently 453 quality providers participating in FOCUS across New Mexico: 340 centers, 99 Family Child Care Homes, 27 Out-of-School Time programs, and 4 Tribal programs. To date, 99 providers have reached FOCUS 3-STAR, 58 have reached 4-STAR, and 296 have reached 5-STAR. The rest are nationally accredited and participating through New Mexico PreK or are currently working toward earning their FOCUS 3-STAR rating.

The Public Education Department (PED) Preschool Scholarship Program also funded 153 scholars from 40 school districts and 3 state charter schools over the past year. Of these scholars, 33 were in alternative licensure programs, 87 were in AA degree programs, 32 in BA programs, and 1 scholar was completing her doctoral dissertation.

NUMBER OF PROVIDERS PER QUALITY LEVEL	
2 Star Licensed Homes and Centers	399
2 + Star Licensed Homes and Centers	89
3 Star FOCUS Licensed Homes and Centers	99
4 Star FOCUS Licensed Homes and Centers	58
5 Star FOCUS Licensed Homes and Centers	296
Total	941
Total Quality Providers (3 Star Focus, 4 Star Focus and 5 Star Focus Only):	453

Figure 21: The number of licensed and STAR-quality child care providers

State and Federal Funding Early Childhood Education

In FY20, PED PreK received an appropriation of \$42.5 million, \$3.5 million of which was from federal TANF funds. PED PreK also transferred \$2.6 million from the Public PreK Fund in order to support the enrollment of additional children.

How is New Mexico Doing?

New Mexico is defining High Quality Child Care programs as those successfully completing the criteria at FOCUS Levels 3, 4, and 5. FOCUS on Young Children's Learning, New Mexico's TQRIS, moved out of the pilot phase in 2016 and was fully implemented in 2018. FOCUS provides early childhood program personnel with the criteria, tools, and resources they need to improve the quality of their programs. Since the implementation of FOCUS the number of programs in STAR level 3–5 has increased by 285%.

What does this mean?

- High-quality child care narrows school readiness gaps and has a strong return on investment because children are less likely to need remedial education and more likely to graduate high school, attend college, and be employed as adults. Access to reliable, affordable, high-quality child care promotes family economic security – increased child care investments subsidizes the cost of working and boosts take home pay.
- Child care investments support the economy by improving productivity and labor force participation, especially for mothers.
- National research shows families with access to child care subsidies are more likely to be employed or in school, and experience fewer work disruptions related to child care.
- Access to affordable child care would boost the New Mexico economy by an estimated \$1.26 billion annually. (Source: Center for American Progress)

When families need to use child care, it is important that their children are enrolled in the highest quality care possible. Children who have spent time in high quality child care environments have lasting benefits from the experience. Research indicates that children who receive a high quality early childhood education have better math, language and social skills as they enter school, and as they grow older require less special education, progress further in school, have fewer interactions with the justice system and have higher earnings as adults (Barnett, 1995).

How does New Mexico compare to the nation?

New Mexico's child care system has made marked gains in the nearly 20 years since the state adopted the nation's first TQRIS. High-quality practices are now more widespread than ever before, and more low-income children are able to access this improved quality. Not all states have a Quality Rating and Improvement System (QRIS). In some states the QRIS is statewide and in other areas, the QRIS is regionally-based. In addition, some states attached their QRIS to their basic license and it is mandatory. Not all states have a tiered system attached to their reimbursement level. With the purpose of incentivizing child care programs serving low income children to increase their quality, New Mexico has implemented a voluntary Tiered Quality Rating and Improvement system, similar to rating systems for restaurants and hotels. Programs earn their rating by undergoing a comprehensive verification process against set standards.

Performance at Grade Level

The public health emergency caused by the COVID-19 pandemic has resulted in the cancellation of achievement testing for the spring of 2020. The New Mexico Public Education Department received a waiver from certain assessment and accountability requirements from the U.S. Department of Education on March 27, 2020. Hence, testing for achievement in reading, mathematics, and science was cancelled statewide.



Fully State Certified Teachers (FSCT)

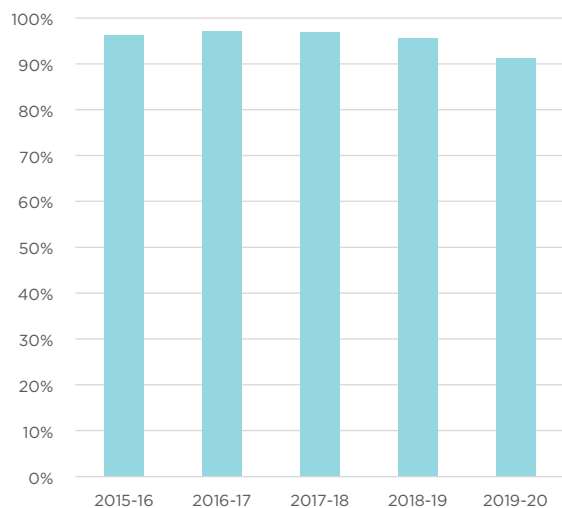


Figure 22: The percentage of core classes taught by Fully State Certified Teachers (FSCT) in public schools.

How is New Mexico Doing?

In the 2019-20 school year, the overall percentage of classes taught by Fully State Certified Teachers (FSCT) was 91.3%--down 4.4 points from last year.

What does this mean?

Fully state certified teachers have a bachelor's degree and meet other licensure requirements. Many school districts in New Mexico have 100% FSCT or are very close to 100% FSCT, with the smaller rural districts having greater success at achieving this value. Challenges facing schools with less than 100% are: 1) English Learners who require teachers with bilingual and/or TESOL endorsements; and 2) not enough special education teachers at the secondary level are mandated to meet requirements for an endorsement for each subject area that they teach. This is very difficult because many of these teachers teach all core subjects, meaning that they must be endorsed in all the core areas.



Graduation

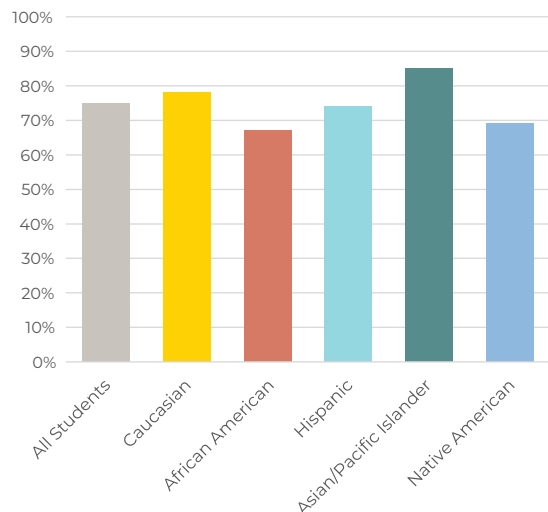


Figure 23: The percentage of students by ethnicity who graduated high school within 4 years for SFY19-20.

How is New Mexico Doing?

In 2018-19, overall 73.9% of NM students graduated high school within four years, a 2.8% increase from 2017-18. Although disparities by racial and ethnic groups persist, there was strong improvement for Hispanic and American Indian students.

What does this mean?

Educational systems implement meaningful change with data-driven decisions. The 4-year cohort rate provides schools with a rich source of information by which to gauge their effectiveness. The U.S. Department of Education approved New Mexico's cohort graduation method in 2010, so data systems are in place and cohort trajectories established. New Mexico has set an ambitious goal for the 5-year graduation rate of 85% in the year 2020. All high schools with a 12th grade will be held to that standard.



Disparities in College Enrollment

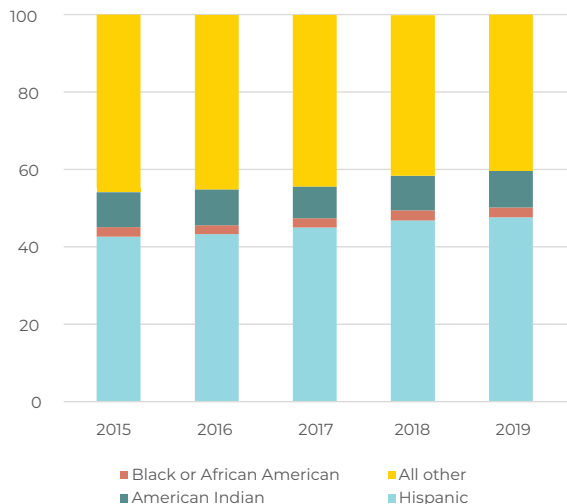


Figure 24: The percentage of minority group students and all other students enrolled in post-secondary institutions.

How is New Mexico Doing?

Enrollment at New Mexico's public colleges and universities decreased from 140,093 in the fall of 2014 to 121,966 in 2019. The increase in Hispanic and American Indian students ages 18-24 years toward a percentage of enrollment more reflective of the State's ethnic population is encouraging. In 2019, among youth 18-24 years of age, Hispanic student enrollment was 46.9%.

What does this mean?

New Mexico is a minority majority state, meaning that minority groups—Hispanic, Black and American Indian—have become the majority in the population (73.0% of the population ages 18-24 years in 2019). The ethnic distribution of students aged 18 to 24 closely matches the distribution of the New Mexico population for all groups except Hispanic students with a statewide percentage of 58% compared to 48% of enrollment (2019).

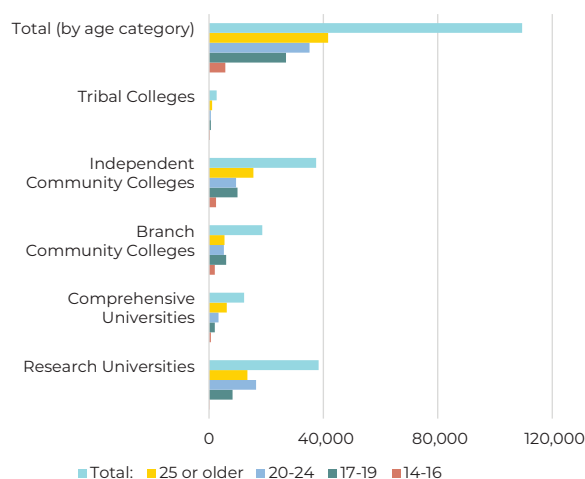


Figure 25: This graph shows the overall enrollment trend in higher education. The majority of enrollment is under 34. Many of the older students would be non-degree or in graduate school.*

*Note that these totals only include the 24 public higher education institutions funded by the state funding formula.



EDUCATED BUDGET REPORT

Programs Supporting Educated Outcome by Agency (\$3,753,073,351 in Total Funding for FY20)

	FY19	FY20
Children Youth and Families Department		
Child Care Scholarships and Wage Incentives	\$ 1,028,900	\$ 1,722,469
Community Based Family Resources	\$ 378,548	\$ 468,149
Head Start	\$ 69,557,700	\$ 72,603,349
NM Pre-K Scholarships	\$ 203,800	\$ 323,468
Pre-K	\$ 31,291,000	\$ 43,966,494
Teen Parent Services	\$ 120,675	\$ 150,000
CYFD Agency Total	\$ 102,580,623	\$ 119,233,929

	FY19	FY20
Department of Cultural Affairs		
NM State Library		
Reading/Library programming	\$ 65,400	\$ 79,007
NM Arts		
K-12 Grants Program - Arts learning in schools	\$ 88,167	\$ 148,720
Preservation & Archaeology		
Educational programming	\$ 32,550	\$ 31,065
Museums & Historic Sites		
Farm and Ranch Heritage Museum: Educational Programs**	\$ 17,100	\$ 101,695
Historic Sites: Educational Programs	\$ 500	\$ 286,620
History Museum/Educational Programs	\$ 63,160	\$ 63,811
Museum of Art: Educational Programs	\$ 18,150	\$ 44,209
Museum of Indian Arts & Culture: Educational Programs	\$ 27,000	\$ 81,208
Museum of Indian Arts & Culture: WoW exhibit (2019 only)	\$ 160,000	\$ -
Museum of International Folk Art: Educational Programs	\$ 42,475	\$ 148,678
Museum of Natural History & Science: Educational Programs	\$ 88,500	\$ 89,000
Museum of Natural History & Science: Sandia Mountain Center	\$ 80,000	\$ 80,000
Museum of Space History: Educational Programs	\$ 142,692	\$ 133,406
National Hispanic Cultural Center: Educational Programs	\$ 22,653	\$ 98,900
National Hispanic Cultural Center: Summer Institutes	\$ 98,091	\$ 114,215
Wonder on Wheels Mobile Museum Program	\$ 119,560	\$ 171,892
DCA Agency Total	\$ 1,065,998	\$ 1,672,426

	FY19	FY20
Department of Health		
Family Planning Program	\$ 1,425,100	\$ 1,469,592
Sequoyah Adolescent Treatment Center	\$ 1,846,756	\$ 3,501,500
DOH Agency Total	\$ 3,271,856	\$ 4,971,092

	FY19	FY20
Higher Education Department		
College Affordability Scholarship	\$ 100,000	\$ 2,998,999
Legislative Lottery Scholarship	\$ 42,000,000	\$ 45,096,641
Math, Engineering and Science Achievement (MESA) Program	\$ 1,189,300	\$ 1,189,300
Firefighters and Police Officers Survivors Scholarship	\$ 25,000	\$ 49,794
New Mexico Scholars	\$ 250,000	\$ 108,912
Grow Your Own Teachers	\$ -	\$ 509,940
Teacher Loan Repayment Program	\$ -	\$ 961,000
Teacher Preparation Affordability	\$ -	\$ 2,969,008
HED Agency Total	\$ 43,564,300	\$ 53,883,594

	FY19	FY20
Indian Affairs Department		
Pueblo of Acoma- Keres Language Dictionary & Curriculum Project	\$ -	\$ 65,000
Pueblo of Acoma- Language Retention Project	\$ -	\$ 150,000
Santa Fe Indian School Youth Leadership Project	\$ -	\$ 125,000
Special Project Grant Program- Language and Native MESA Projects	\$ 146,000	\$ 99,375
IAD Agency Total	\$ 146,000	\$ 439,375

	FY19	FY20
Public Education Department		
Advanced Placement Framework	\$ 1,000,000	\$ 1,500,000
After School & Summer Enrichment Programs	\$ 325,000	\$ -
Bilingual and Multicultural Education Support	\$ -	\$ 2,500,000
Breakfast for Elementary Students	\$ 1,600,000	\$ -
Career Technical Education Pilot	\$ -	\$ 3,000,000
College Preparation, Career Readiness & Dropout Prevention	\$ 1,500,000	\$ -
Early Reading Initiative	\$ 8,837,000	\$ -
GRADS- Graduation, Reality, & Dual-Role Skills Program	\$ 400,000	\$ 400,000
Indian Education Fund	\$ 1,824,600	\$ 6,000,000
Indigenous Education Initiatives	\$ -	\$ 1,000,000
Interventions & Support for Students, Struggling Schools & Parents	\$ 4,000,000	\$ -
Kindergarten Three Plus Fund	\$ 30,200,000	\$ -
New Mexico Grown Fresh Fruits & Vegetables	\$ 200,000	\$ -
Pre- Kindergarten Program	\$ 32,500,000	\$ 42,500,000
Principals Pursuing Excellence	\$ 2,000,000	\$ 2,500,000
Science, Technology, Engineering and Math Initiative	\$ 3,000,000	\$ 5,000,000
Teacher & Administrator Evaluation System - NM Teach	\$ 2,000,000	\$ 2,000,000
Teacher & School Leader Preparation	\$ 1,000,000	\$ -
Teachers Pursuing Excellence	\$ 2,000,000	\$ 2,500,000
Truancy & Dropout Prevention	\$ 4,000,000	\$ -
PED Supporting Educated Outcome, State Funding	\$ 96,386,600	\$ 68,900,000

	FY19	FY20
21st Century	\$ 9,728,000	\$ 9,728,302
CARL PERKINS	\$ 9,206,169	\$ 9,206,169
Homeless Education	\$ 747,000	\$ 746,679
IDEA B	\$ 96,223,277	\$ 96,223,277
IDEA B-Preschool	\$ 3,277,000	\$ 3,299,716
Rural & Low Income	\$ 1,869,000	\$ 1,869,061
State Assessments	\$ 4,386,000	\$ 4,386,494
TITLE I - Migrant	\$ 848,000	\$ 847,977
TITLE I - Neglect & Delinquent	\$ 325,000	\$ 324,884
TITLE I - School Improvement	\$ 129,745,118	\$ 129,745,118
TITLE I Migrant Consortium	\$ 136,000	\$ 136,363
TITLE II - Teacher Quality	\$ 16,431,291	\$ 16,431,291
TITLE III - Language Acquisition	\$ 4,645,000	\$ 4,644,572
TITLE IV - SSAE	\$ 9,373,000	\$ 9,372,868
USDA Equipment Grant	\$ -	\$ 263,355
USHHS Expectant and Teen Parenting Grant	\$ 970,000	\$ 970,000
Comprehensive Literacy Development	\$ -	\$ 8,000,001
Charter School Program	\$ -	\$ 5,378,241
Striving Readers	\$ -	\$ 6,666,667
PED Supporting Educated Outcome, Federal Funding	\$ 287,909,855	\$ 308,241,035

PED Agency Total	\$ 384,296,455	\$ 377,141,035
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Total State Equalization Guarantee (SEG)		
State Equalization Guarantee (SEG)	\$ 2,524,880,051	\$ 2,891,410,000
K-5	\$ -	\$ 119,895,900
SEG - Extended Learning Day	\$ 62,497,500	\$ 62,497,500
SEG Total	\$ 2,587,377,551	\$3,073,803,400

	FY19	FY20
Non-SEG Public School Support		
Dual-credit instructional materials		\$ 1,000,000
Emergency Supplemental		\$ 1,000,000
Out of State Tuition		\$ 300,000
State Assessments		\$ 6,000,000
Trans - Extended Learning Day		\$ 2,745,600
Trans - K5		\$ 3,744,000
Transportation Distribution 5		\$ 107,138,900
Non-SEG Public School Support Total		\$ 121,928,500

EDUCATED OUTCOME TOTAL:	\$ 3,122,302,783	\$ 3,753,073,351
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Total funding trend by educated outcome

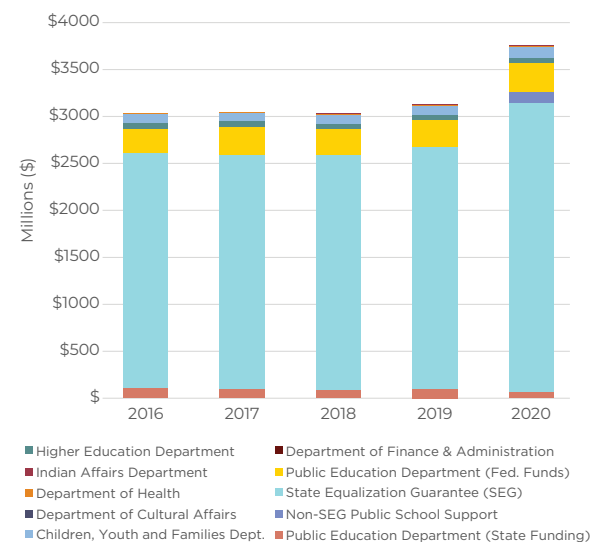


Figure 26: Depicts total state funding that supports educational outcomes for NM's children and youth between FY16 and FY20. Although PED initiatives make up the majority of education related programs, New Mexico's children benefit from other education services provided through different state agencies. Readers are referred to figure 28 for an illustration of total recurring appropriations for public education (PreK-12).



EDUCATED BUDGET REPORT

State and Federal Funding Early Childhood Education

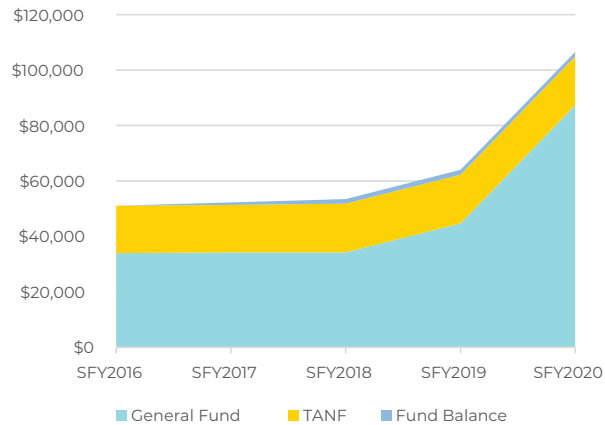


Figure 27: Shows the five-year trend of state funding for PreK and available federal TANF funds (data in thousands).

While all children gain from high quality early education, the greatest benefits are often seen in children who come from economically disadvantaged backgrounds. To these ends, New Mexico PreK has contributed to enhanced school readiness for an approximate 47,592 4-year-olds between FY06-FY19. In turn, these children enter Full Day Kindergarten, which serves over 98% of 5-year-olds, better prepared to succeed.

Total recurring public school appropriations

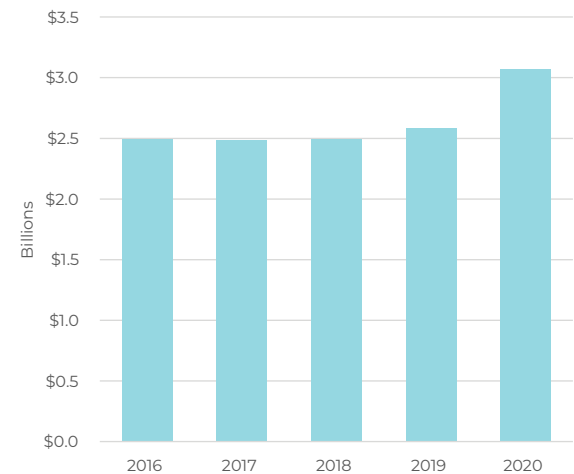


Figure 28: Shows the five-year trend of recurring public school appropriations.

The State Equalization Guarantee (SEG) increased 19 percent for FY20, from \$2.582 billion to \$3.073 billion. This included \$113 million to fund an increase in the at-risk factor, \$62 million for extended learning time programs, and nearly \$120 million to expand the K-5 Plus program. More than \$160 million went toward pay increases for education personnel and to increase minimum salaries for teachers. The appropriation also included \$7 million to increase the number of bilingual and multicultural education programs. Additionally, the SEG included \$30 million for districts to purchase instructional materials.



Nutrition and physical education, grades K-5

Children involved in the elementary physical education program and nutrition and obesity awareness initiatives are provided a coordinated approach to improve their overall health and increase the likelihood they will continue these positive behaviors and habits well into adulthood. The program has significant importance because as the CDC reports, “obesity has been recognized as a national health threat and a major public health challenge.” Funding for these initiatives has remained at a level of \$16 million (embedded in the SEG) per year since FY 09.

K-5 Plus

In FY 20, the K-3 Plus program transitioned to the K-5 Plus Program after a successful pilot year including grades 4 and 5. Funding for this program moved above the line to public school support funding in FY 20.

The K-5 Plus Program was created to: (1) extend the school year in participating public schools by at least twenty-five additional days for students in kindergarten through fifth grade; and (2) measure the effect of the provided additional time on literacy and numeracy. The purpose of K-5 plus is to demonstrate that increased time in kindergarten through fifth grade: (1) narrows the achievement gap between certain disadvantaged students and other students; (2) better prepares elementary students for success in middle and high school; (3) improves truancy rates at all school levels and improves dropout rates in high school; and (4) increases students' cognitive skills and leads to higher test scores for participants. This emphasis on early childhood education serves to further prepare New Mexico students as it has been noted, through a 2012 study by Utah State University, that students who participated in the program significantly outperformed their peers in reading.

State funding for higher education scholarships

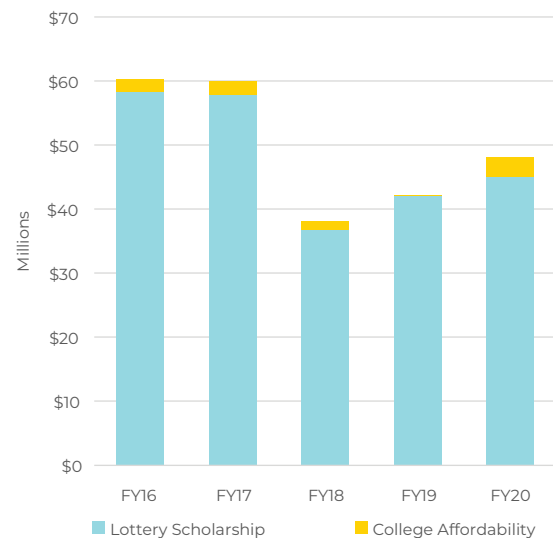


Figure 29: Shows state funding for the Legislative Lottery Success Scholarship (LLSS) FY16 to FY20 and the College Affordability Scholarship (CAS) FY16 to FY20.

The LLSS, which provides up to 100% of tuition support through the Lottery Tuition Fund, is offered to NM high school graduates beginning with their second semester in a NM institution of higher education. Students who do not qualify for the LLSS can access the CAS as need-based financial aid to attend NM public colleges and universities. The CAS increased to \$3 million for FY20.



EDUCATED BUDGET REPORT

School Meals

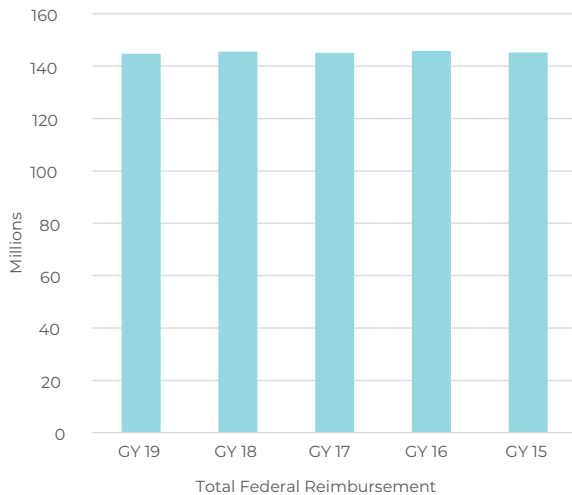


Figure 30: Federal Reimbursements for School Meals, GY15-19.

CYFD and PED have led efforts to expand federal food programs including At Risk and summer meals in order to eliminate gaps throughout the year, particularly during summer and holiday breaks. The USDA At Risk program provides funding for snacks and supper for children after school as well as when schools aren't in session. CYFD and PED have worked collaboratively with program sponsors to increase the number of sites especially in underserved areas of the state. CYFD increased the At-Risk Meal Program by 8.5% for a total of 90,318 additional meals from Sept 2019 to December 2019.

CYFD is currently collaborating with the USDA to pilot the Meals to You Demonstration Project. The project provides crucial nutrition during the summer months to children in rural and frontier areas. The Meals to You project ships breakfast and lunch meals directly to children's homes who are income eligible. The pilot will be implemented during the 2020 summer with expansion planned in future years.

New Mexico school children are served by two federally funded nutrition programs under the United States Department of Agriculture (USDA) Food and Nutrition services (FNS) and administered by the Student Success and Wellness Bureau (SSWB). The National School Lunch Program (NSLP) provides free and reduced-price meals to approximately 900 schools, 215 School Food Authorities (SFAs), and over 335,000 students across New Mexico. The SSWB serves breakfast, lunch and snacks under the NSLP. In the summer and in emergency situations, children and students are provided meals under the Seamless Summer Option (SSO). During the Covid-19 emergency and school closures, the SSWB and USDA provided free meals to all students across New Mexico under SSO to all children who seek them, no questions asked.

New Mexico switched to the SSO on March 16th, with SFA's offering grab-and-go-meals in school cafeterias, congregate food drop-off sites and food deliveries by school bus drivers along remote transportation routes. The SSWB served over 13.1 million meals from March through July. This summer, every district and charter school in New Mexico was required to submit a school re-entry plan that includes a description of how meals will continue to be provided in various scenarios, including remote learning. All school food authorities will continue to offer meals to students utilizing the NSLP once the school year begins.

PED has been working closely with Breakfast after the Bell (BATB) legislative funds as many free breakfasts to students and schools that participate in the National School Lunch Program (NSLP). The allocation provides funding to reduced and paid students. The allocation for BATB for FY20 is \$1.6 million. In addition to BATB, the PED got a bill passed in the GY 19 legislative session for a state appropriation for 600 hundred thousand dollars to reimburse districts funds so all reduced students eat meals for free.



Educator Professional Development Title II Funds

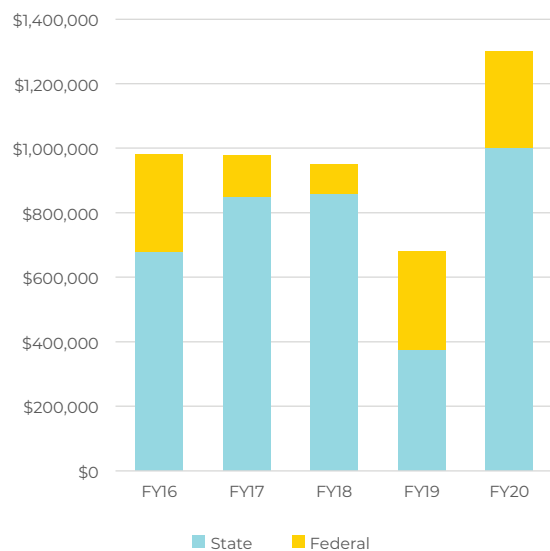


Figure 31: Illustrates state and federal funding spent to support an increase in teacher effectiveness.

The effectiveness of the classroom teacher has long been established as the single most important factor in determining a child's success in the classroom. One of the most important factors for influencing teacher effectiveness is professional development. Professional development services are provided through various agencies and contribute to improved education outcomes statewide.

Approximately 95% of these Title II monies are allocated directly to districts and state charter schools based on a formula provided to the NMPED by the U.S. Department of Education. Districts with local charters and private schools then allocate a portion of their award to these entities based on a per pupil amount determined by the local education agency. The additional 5% of the award is used by the NMPED to provide training and technical support to teachers and school leaders throughout the state.

Math & Science Bureau

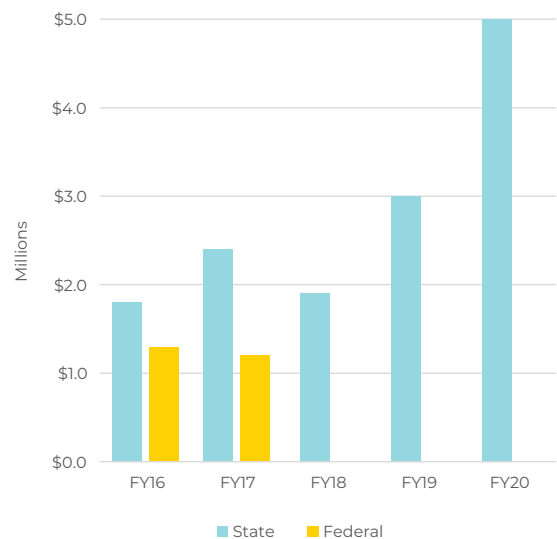


Figure 32: State & Federal funding for Math and Science Bureau, FY16-20.

The Math and Science Bureau oversees the Science, Technology, Engineering, Arts and Mathematics (STEAM) Initiatives for NM. The bureau's charge is to provide high-quality professional learning opportunities to educators focused on the integration of high-quality instructional materials; improving educators' pedagogical practices and content knowledge; and supporting a balanced assessment system aligned to state standards. Funding has increased since FY18 to support the adoption and implementation of the New Mexico K-8 Computer Science Standards, the New Mexico Instructional Scope (NMIS) for Mathematics and supporting school reentry for mathematics due to the COVID health emergency.

Literacy

In FY 20, an appropriation of \$714,000 (two junior bill appropriations of \$357,000) was allocated to provide a dyslexia screener for grade 1 students and to provide teacher professional development, planning and training. In addition, a one time special appropriation of \$875,000 was awarded for an early literacy summer professional development program and other early literacy initiatives. Total allocation for FY 20 was, \$1,589,000.00

Introduction, Trends & Considerations

In FY20, CYFD investigated a total of 23,696 total child maltreatment reports. Of these, 5,951 were substantiated. In comparison, CYFD conducted 20,519 investigations in FY19 with 5,970 substantiations. Caseloads for Protective Services (PS) investigators have decreased, with the number per investigator this year meeting national Child Welfare League of America standards. CYFD Protective Services has also succeeded in reducing its backlog and number of pending investigations. For example, Bernalillo County had 2,347 pending investigations in January 2020, and reduced them by 88% to 261 by July 2020. CYFD has also increased caseworker visits with children in foster care in efforts to keep children safe during COVID, increasing required worker visits increased to 142% and 297% in March and April 2020, respectively, while maintaining the percent of children visited at least once per month between 97.5% and 99% from March through June 2020.

The Children, Youth and Families Department (CYFD) saw an increase in FY20 funding to Protective Services intake and investigations, a large portion of which is due to Child Advocacy Centers and Forensic Interviewing moving under the Protective Services umbrella from Behavioral Health. Funding for training and technical assistance was also increased to better equip staff in

serving the safety needs of New Mexico children and families according to research and best practice for addressing child maltreatment. CYFD implemented a new safety assessment tool in April 2019 to better capture safety and risk for children in foster care related to allegations of abuse or neglect by foster parents. Continued training and coaching are coordinated by the new CYFD Training Bureau to ensure consistent application of the safety and risk tool. This tool focuses on the expectations that exist in safely caring for children in foster care.

CYFD also increased spending to expand community based, contracted services for Family Support Services (FSS) and In-Home Services (IHS) for families referred to Protective Services and are at high risk for future referrals to the agency or incidents of abuse or neglect. These programs work directly with parents and families to reduce the risk of future maltreatment while preventing removal and maintaining children at home with their caregivers. CYFD further expanded its Time-Limited Reunification (TLR) services which provide essential supportive services to parents and children to support successful and long-term transitions home from foster care. The FSS, IHS, and TLR expansions also involve greater collaboration with community partners and organizations who contract with CYFD to provide these essential services for families.

One of CYFD's strategies for keeping children safe is through the expansion of housing supports, as well as providing more resources and support to families and relatives of children who are at risk of maltreatment. This year CYFD increased spending on shelter services to prevent homelessness, including facility-based shelter, family-based shelters, multi-service facilities, and maternity homes.

Another of CYFD's priorities is to create more appropriate placements that are stable as well as culturally and linguistically appropriate. Ensuring supportive and stable placements is essential, not only for children's safety, but also for their physical, emotional, and social well-being and for family connection. CYFD has also reduced the number of youths placed out of state to less than 150 in FY20.



Administration Initiatives and Interagency Collaboration

Identifying Relative and Culturally Appropriate Placements

Children placed with kin experience fewer placements, more frequent and consistent contact with birth parents and siblings, fewer negative emotions about being in foster care than children in non-relative placements and are less likely to run away. CYFD continuously increased the percentage of foster children placed with relatives from 26.3 % between January 2019 and April 2020 to 36.3% in April 2020. As of July 1, 2020, about 250 Juvenile Justice (JJ)-involved youth on formal supervision (28%) were living with relatives other than biological parents. CYFD has also allocated funds toward creating basic community support services for relatives and kin at Relative Success Centers, developed a subsidized guardianship program, and increased staff who specialize in supporting kinship caregivers and programs. CYFD established a Kinship unit to provide additional training and support to the field offices, in 2020.

In FY20, CYFD saw a 13% increase in placements of Native American children in custody with relatives. There are 117 ICWA children in Bernalillo County alone. Out of the 117 children on this list, all but 33 are placed with relatives. CYFD has revitalized prioritization of culturally appropriate placements as well.

In FY20, CYFD and the Second Judicial District also developed the state's first ICWA court. The court has a dedicated hearing office, District Court Judge, Children's Court Attorney, and Permanency Planning Unit. The ICWA unit will start working directly with the Tribal ICWA workers to collaborate on the recruitment and retention of Native resource families.

There are currently six cases in preferred ICWA homes and four cases in non-ICWA compliant home in the ICWA court. CYFD has also requested that two additional cases be transferred to ICWA court. We currently have 10 cases with 18 children in the ICWA Unit. The tribes are: Cherokee Nation, Navajo, Ysleta Del Sur, Zuni, Isleta Pueblo, Standing Rock, Blackfoot, Santo Domingo, Gila Tribe and Jemez Pueblo.

There are 11 cases in the ICWA Unit that are not in ICWA court. The ICWA Unit is also assisting with processing SS card requests, birth certificates, disclosures, carrying 16 providers for placement, and assisting with Investigations for relative placements, for relative placements, case decision meetings, and family centered meetings.

In FY20, CYFD changed foster care licensing policies to allow licensing of and subsidies to immigrant relative caregivers. Immigrant relatives now receive the same supports to care for their relative children as other caregivers. In FY20, CYFD created an Immigration Unit to assist with locating, assessing, and placing children with relatives in other countries.

In 2020, CYFD created a Tribal Affairs division to include the expansion of the role of the Tribal Liaison to a Director of Tribal Affairs and the addition of Tribal Coordinators within the Behavioral Health Services, Juvenile Justice Services, and Protective Services divisions. This new division specializes in addressing needs of tribal families, identifying culturally relevant services, developing intergovernmental agreements, providing technical assistance to Tribes, and providing consultation and training for CYFD staff in their interactions with tribal children, youth, and families, the use of cultural compacts, and cultural considerations. This division is conducting a compliance review of all ICWA cases and developing procedures to ensure preferred placement, while also having out-of-preferred-placement reviews every 30 days until a child is in a preferred placement.

Supporting Transitioning Foster Youth

Youth who age out of foster care are more likely to experience homelessness, criminal behaviors, and mental health disorders than youth in the general population. Improving services to keep youth safe and prevent homelessness is a top CYFD priority. On July 1, 2020, CYFD launched Fostering Connections, the state's first program for youth ages 18 to 21 to expand foster care services to support older youth in safe, supported, and successful transitions to adulthood, specifically by offering housing and behavioral health services.

Sex Trafficking Survivors

CYFD also established an initiative to provide safe placements for youth under the age of 18 who are survivors of child sex trafficking. CYFD staff are receiving training on the Commercial Sexual Exploitation-Identification Tool (CSE-IT) to assess for risk or experience of sex trafficking of minors. CYFD is collaborating with Bernalillo County to develop a Safe Home in that community for youth survivors of trafficking.

Services to Child Survivors and Witnesses of Domestic Violence

The CYFD Domestic Violence Unit funds 28 survivor programs and monitors 33 offender treatment programs statewide. Of the 12,135 individuals served in FY20, 2,036 were children (0-12); 419 were teenagers (13-17); and 1,579 children and youth were placed in shelter or safe housing with their non-abusive/protective parents. Domestic violence service providers reported conducting 4,784 counseling sessions with children; 1,776 advocacy interventions; and 1,057 crisis interventions in FY20.

In 2014, the New Mexico Coalition Against Domestic Violence (NMCADV) partnered with CYFD to increase trauma-informed services to families exposed to domestic violence. The goals of the Children's Capacity Building Project (CCBP) are to assist and support children exposed to domestic violence in healing from the trauma they have experienced and to repair and rebuild the relationship between the non-abusing/protective parent and the child impacted by the abuse. The number of CCBP Sites providing domestic violence survivor service programs have increased from seven in FY15 to 16 in FY21. In FY20, 348 children and 275 parents were served through this program.



Adverse Childhood Experiences

Adverse Childhood Experiences (ACEs) are potentially traumatic experiences faced by children in the household, including abuse and neglect, divorce, substance abuse, domestic violence, and bullying. The experience of ACEs can have long-term negative impacts, including lower educational success; higher rates of physical and psychological illness and developmental problems; higher health care costs; higher rates of risk behaviors including depression, obesity and smoking; and more interactions with the criminal justice system. New Mexico children experience higher rates of ACEs than the general U.S. population. In New Mexico 23.4% of children ages 0 to 17 have experienced one ACE, and more than one-quarter (25.6%) have experienced two or more ACEs, compared to 18% of children, nationwide.

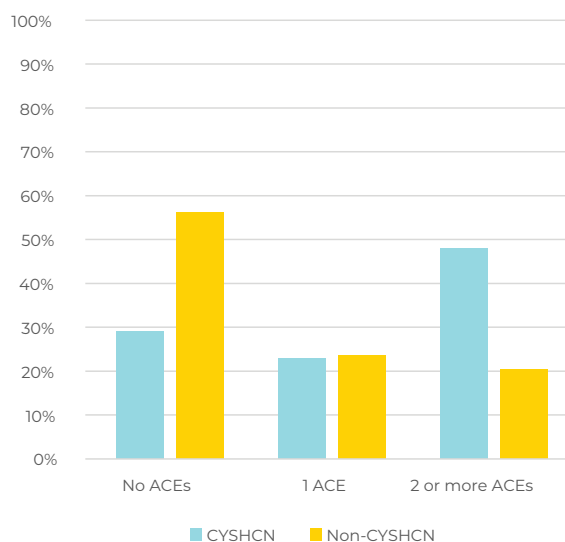


Figure 33: Percent of NM Children with adverse childhood experiences, by status of special healthcare needs, 2018-2019

Prevalence of Adverse Child Experiences, NM and US, 2018-2019

The prevalence of ACEs is substantially higher for children and youth with special health care needs (CYSHCN) compared to other children. Forty-eight percent of New Mexico CYSHCN experienced two or more ACEs compared to 20.4% of non-CYSHCN.

Adverse Child Experiences, NM and US, 2018-2019

Adverse Child Experiences by Indicator, New Mexico 2018-2019 (National Survey of Children's Health)

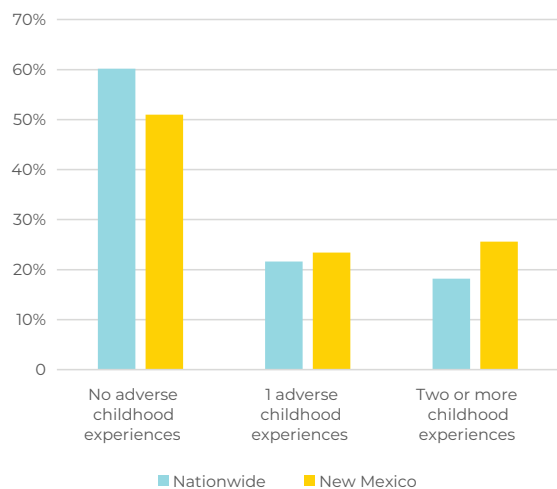


Figure 34: NM to US Comparison, ACEs Prevalency

Data source: Child and Adolescent Health Measurement Initiative. 2018-2019 National Survey of Children's Health (NSCH) data query. Data Resource Center for Child and Adolescent Health supported by Cooperative Agreement U59MC27866 from the U.S. Department of Health and Human Services, Health Resources and Services Administration's Maternal and Child Health Bureau (HRSA MCHB). Retrieved 12/17/2020 from www.childhealthdata.org. CAHMI: www.cahmi.org.

The NSCH includes nine ACEs items: hard to cover basics on family's income (ACE1); parent or guardian divorced or separated (ACE3); parent or guardian died (ACE4); parent or guardian served time in jail (ACE5); saw or heard parents or adults slap, hit, kick punch one another in the home (ACE6); was a victim of violence or witnessed violence in neighborhood (ACE7); lived with anyone who was mentally ill, suicidal, or severely depressed (ACE8); lived with anyone who had a problem with alcohol or drugs (ACE9); and treated or judged unfairly due to race/ethnicity (ACE 10). A response of 'somewhat often' or 'very often' to the question "Since this child was born, how often has it been very hard to cover the basics, like food or housing, on your family's income?" (ACE1) was coded as an adverse childhood experience. The remaining survey items ACE3-ACE10 are dichotomous with 'Yes/No' response options.

Resilience Factors

There are positive factors that help buffer the effects of ACEs. The National Survey of Children's Health measures "resiliency factors" (talking together about problems, working together to solve problems, staying hopeful in difficult times, and knowing they have family strengths in the face of problems), which are important in modifying the impact of ACEs on a child and family. About 77% of NM children age six and over lived in a household with all four family resilience characteristics.

The Epidemiology and Response Division at DOH reports that sponsorship of the NM Safe Kids Coalition was transferred to the UNM Department of Emergency Medicine in 2017. This increased the profile and influence of the coalition, given that it became a project of the UNM Children's Hospital Child Ready program, which has a team of pediatricians upgrading both skills and equipment specific to pediatric emergencies statewide.

DOH has a representative on the Safe Kids Coalition and his specialty in the group is developing and supporting bicycle helmet distribution programs, including traffic safety training, as well as pedestrian safety, which is a growing problem nationwide. He is also the State Designee for the national Consumer Product Safety Commission.



Bullying in NM Public Schools

The percentage of students who report being bullied on school grounds

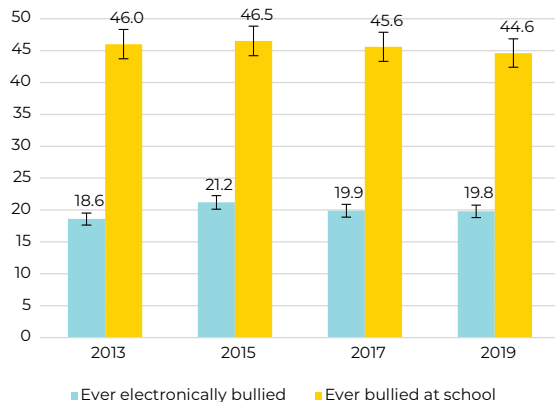


Figure 35: Grades 6-8 (Middle School), NM

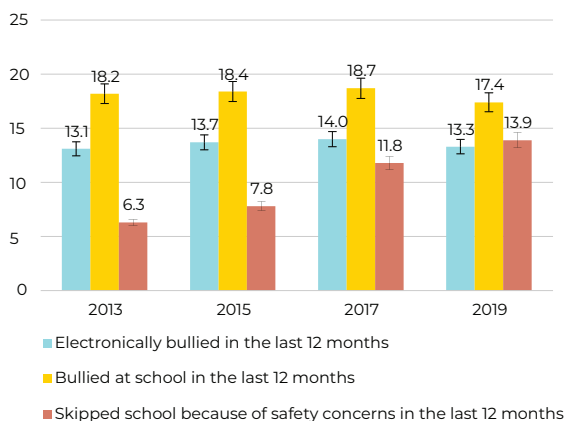


Figure 36: The percentage of high school students who were bullied in the last 12 months

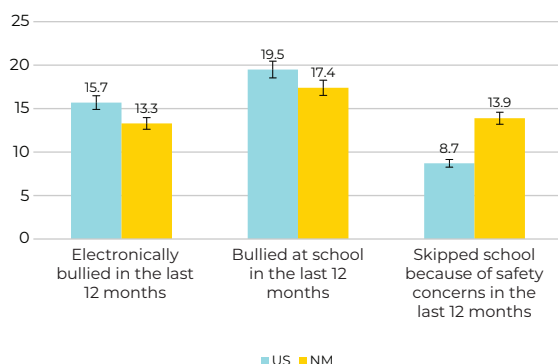


Figure 37: Bullied in the last 12 months, NM and US, 2019

How is New Mexico Doing?

Overall, 44.6% of middle school students report ever being bullied on school property, and 17.4% of high school students were bullied on school property during the past 12 months. 19.8% of middle school students have ever been electronically bullied through texting or social media, while 13.3% of high school students had been electronically bullied in the past 12 months. There has been no recent trend in bullying in recent years. However, skipping school because of safety issues increased by more than 100% among high school students from 2013 to 2019.

How does New Mexico compare to the nation?

At the high school level, NM students (13.9%) were 37% more likely to skip school because they felt unsafe at school or on their way to or from school than were US students (8.7%). The difference between NM and the US for being bullied on school property (17.4% vs. 19.5%) and being electronically bullied (13.3% vs. 15.7%) were not statistically significant. There was no national comparison for middle school data.

What does this mean?

School bullies or their victims are at risk of school dropout, poor psychosocial adjustment, criminal activity and other negative long-term consequences. Prevention and early intervention programs need to begin at preschool and elementary school; and continue through middle and high school. This is not a situation of “kids will be kids” but something parents and schools need to learn to deal with for the bullying child as well as the victim. Schools with easily understood rules of conduct, smaller class sizes and fair discipline practices report less violence. A positive school climate will reduce bullying and victimization. Statewide there are rules to address bullying but no funding for programs to address risk, including cyberspace bullying.

Childhood Injury

The rate of unintentional fatal injuries in children age 1-4 years per 100,000 population

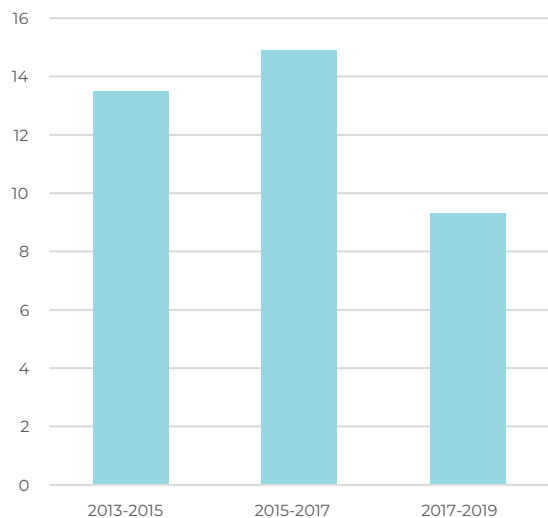


Figure 38: The rate of unintentional fatal injuries in children age 1-4 years per 100,000 population in New Mexico

How is New Mexico Doing?

There were 28 unintentional injury deaths in this age group during the three-year period 2017-2019.

How does New Mexico compare to the nation?

The 2018 NM rate is the same as the 2017 national rate (7.9/100,000 population).

What does this mean?

Motor vehicle fatalities continue to be the leading cause of death for this age group. Factors such as poverty, single parent households, education level of parents, race and ethnicity, access to health care, and safe communities are associated with overall child wellbeing and may contribute to high rates of unintentional injury deaths in this age group.



Youth Suicidal Ideation

The percentage of high school students who seriously considered suicide

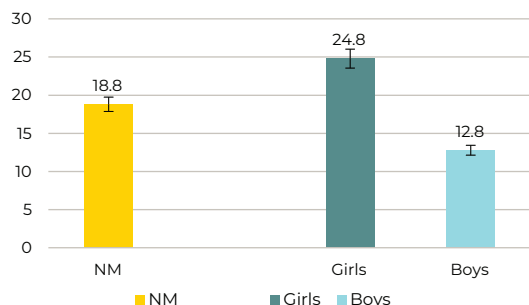


Figure 39: The percentage of high school students who seriously considered suicide

How is New Mexico Doing?

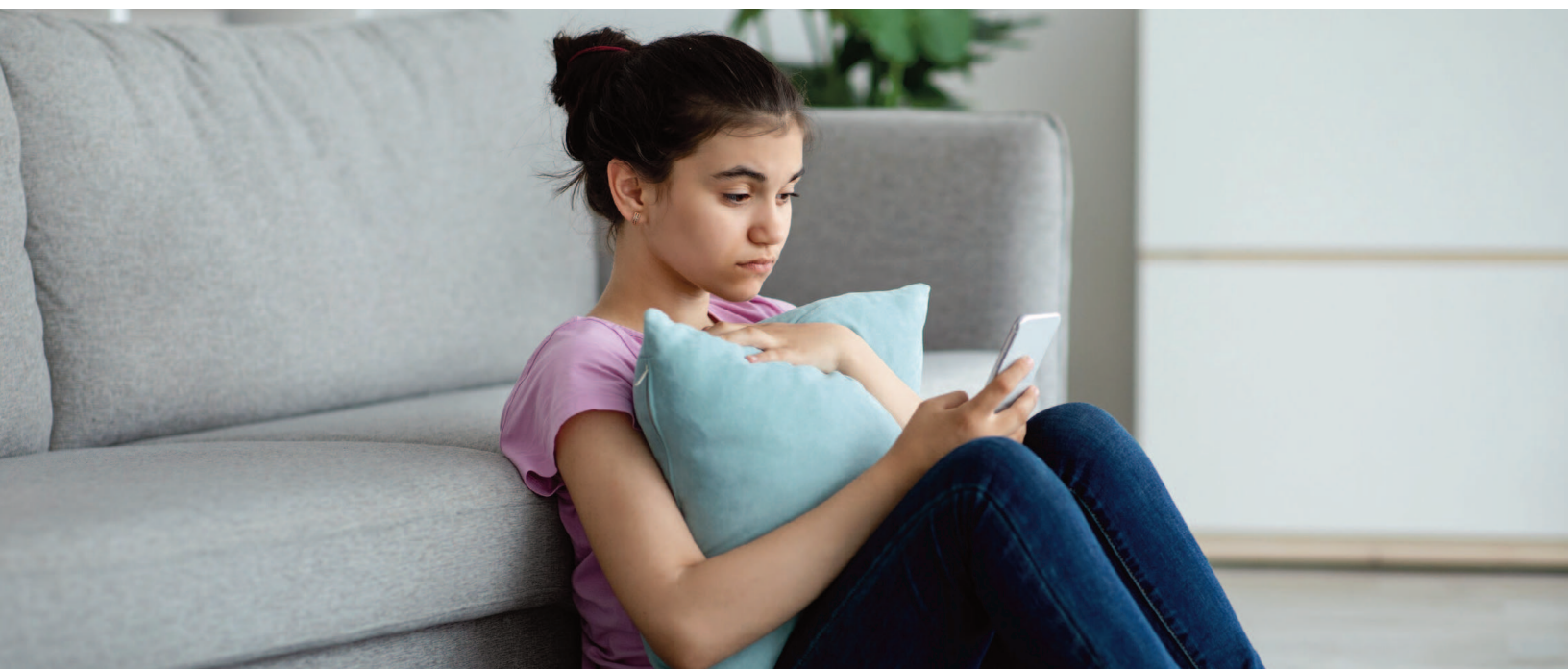
In 2019, 18.8% of NM public high school students seriously considered attempting suicide in the past 12 months. This was nearly twice as common among females (24.8%) than males (12.8%). While females were more likely than males to seriously consider suicide, males were more likely to die from suicide. This rate of seriously considering suicide has increased slightly over the past decade, from 15.9% in 2009 to 18.8% in 2019.

How does New Mexico compare to the nation?

In 2019, 18.8% of US high school youth said they had seriously considered suicide, which was identical to the NM rate. Across all participating states, the percentage ranged from 12.7% to 26.6%.

What does this mean?

When teens experience tough problems or strong feelings, suicide can seem like the only solution. In NM, health education standards include mental health and suicide prevention, and school-based health centers work to reduce the stigma of seeking mental health care. After a suicide, team approaches are key. Successful prevention and intervention in the juvenile justice setting require rigorous screening and diagnosis coordinated with initiatives to address the risk factors that increase impulse and decrease hope in distressed youth. Research shows that youth who feel highly connected to their family, peers, schools and community are less likely to engage in risky behavior.



Child Abuse

Percentage of child abuse cases by maltreatment type, NM & US

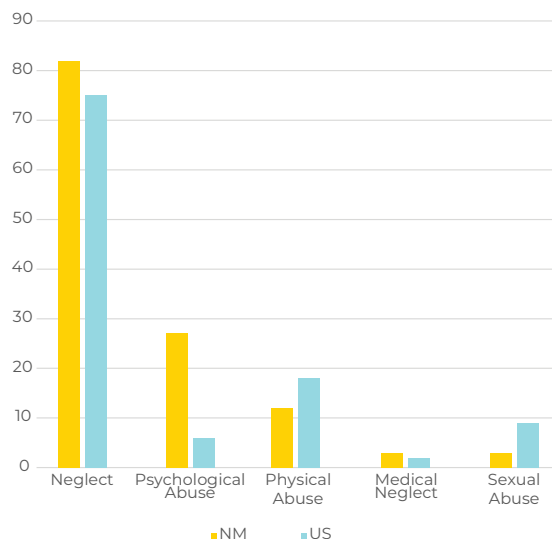


Figure 40: Percentage of child abuse cases by maltreatment type, NM and US. Total may exceed 100% as children who experienced more than one type of maltreatment are counted in each applicable category.

How is New Mexico Doing?

There were 86.6 child abuse referrals per 1,000 children in NM for 2019, and about half of those were referred for an investigation. An estimated 31% of investigated cases were found to be substantiated victims. The highest proportion of maltreatment type was neglect for both NM and the US. In NM, the prevalence of psychological maltreatment was about 4.5 times higher in NM than in the US, while physical and sexual abuse were relatively less prevalent among maltreatment types in NM.

How does New Mexico compare to the nation?

The rate of substantiated victims was 16.9 per 1,000 children in NM compared to 8.9 per 1,000 in the U.S. The NM rate has not changed significantly in a positive or negative direction over the last five years.

What does this mean?

Maltreatment includes abuse and neglect and can place children at risk of learning, developmental, and behavioral problems, affecting some for a lifetime. CYFD programming supports prevention strategies such as home visiting program referrals and parenting programs.



SAFE REPORT CARD

Domestic Violence

Percentage of women who were physically abused during pregnancy

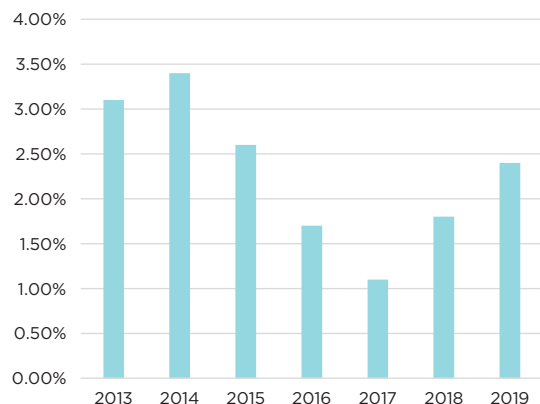


Figure 41: The percentage of new mothers who were physically abused (pushed, hit, slapped, kicked, choked or physically hurt in any other way) by a husband, boyfriend or partner during pregnancy, 2013-2019.

Data source: NM Pregnancy Risk Assessment Monitoring System (PRAMS)

How is New Mexico Doing?

An estimated 2.4% of women who had a live birth in 2019 reported that they were physically abused by an intimate partner during their pregnancy

How does New Mexico compare to the nation?

Among all PRAMS states in 2016-2017, 2.0% of women reported physical abuse during pregnancy, which indicates that New Mexico is close to the national average on this indicator.

What does this mean?

Women who are abused during pregnancy may be more likely to delay entry to prenatal care or other health services. Emotional and physical abuse in the perinatal period are associated to maternal depression, substance abuse, smoking during pregnancy, anemia, insufficient gestational weight gain, and unhealthy eating patterns. Intimate partner violence during pregnancy is also associated with a reduction in birth weight.

SAFE BUDGET SUMMARY

Programs Supporting Safe Outcome by Agency (\$67,729,938 in Total Funding for FY20)

Children Youth and Families Department

Behavioral Health Services	FY19	FY20
Licensing and Certification Authority	\$ 810,200	\$ 947,652
Shelter	\$ 4,272,150	\$ 4,713,778
Juvenile Justice Services		
Juvenile Justice Facilities	\$ 23,417,935	\$ 23,108,067
Juvenile public Safety Advisory Board	\$ 10,826	\$ 4,537
Protective Services		
Abuse & Neglect	\$ 343,947	\$ 321,993
Child Protective Services (CPS) Intake	\$ 2,846,853	\$ 2,956,267
CPS Investigations	\$ 12,466,853	\$ 15,193,156
Family Support Services	\$ 640,574	\$ 1,227,457
In-Home Services	\$ 2,556,134	\$ 3,084,380
Permanency Planning	\$ 9,472,487	\$ 11,483,528
Training & Technical Assistance	\$ 1,081,076	\$ 4,689,121
CYFD agency total	\$ 57,919,035	\$ 67,729,938

SAFE BUDGET REPORT

Total funding trend for safe outcome

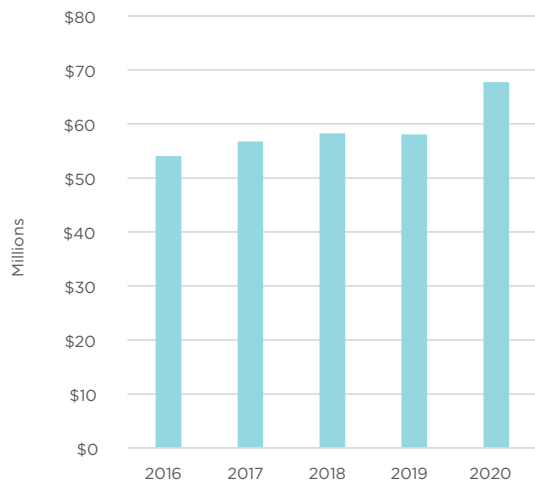


Figure 42: Illustrates total state, federal and other funding between FY16 and FY20 for programs supporting safe outcomes for NM children and youth. Secure settings for children in their homes, schools and communities provide the key purpose of those programs focused on safe outcomes

Child abuse and neglect prevention and intervention

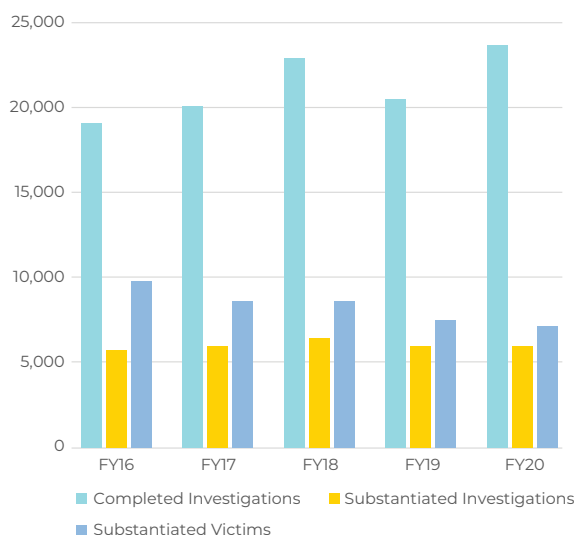


Figure 43: CYFD investigations by metric, FY16-20

Domestic violence intervention and services

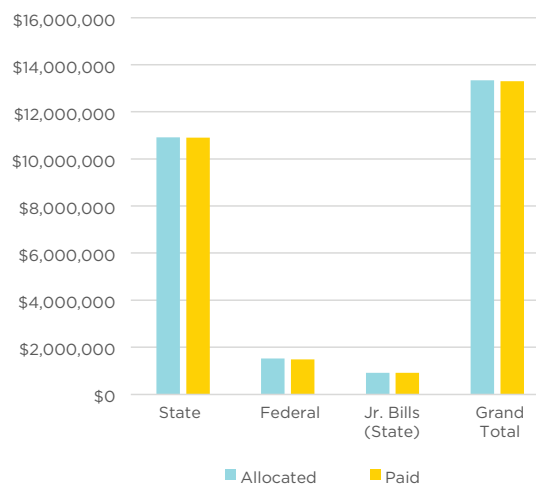


Figure 44: Funding for Domestic Violence Intervention & Services, by source and status.

Juvenile justice facilities

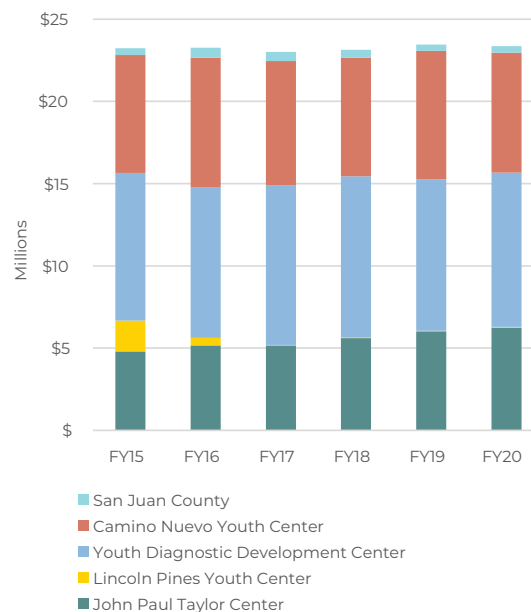


Figure 45: Juvenile Justice Facilities funding, by facility, FY15-20

For over a decade the Juvenile Justice and Child Services Division has been involved in a progression of reform efforts that have helped hem to mature from a correctional/punitive to a rehabilitative one that encompasses a continuum of services to meet the needs of the individual client.

Introduction, Trends & Considerations

The New Mexico Children, Youth and Families Department (CYFD) oversees a range of programs designed to promote healthy child and youth development, strengthen families, and improve the quality of life for the state's residents. Making a deliberate shift toward a trauma aware mindset that starts with asking, "What happened and how can we help?," rather than, "What went wrong?," CYFD has focused on groups most at risk and in need of support. This includes homeless youth, those who identify as LGBTQ+, immigrant children, and children within the tribal communities. Strengthening relationships, collaboration, and support with the tribes and across New Mexico's agencies, makes it possible to approach those in need holistically and tailor services to the unique needs of individuals.

Administration Initiatives and Interagency Collaboration

The Children, Youth and Families Department (CYFD) has increased its funding for several programs that contribute significantly to supporting children and youth in New Mexico, including several housing programs, the Independent Living Services program, Adoption Subsidy Maintenance, Foster Care Maintenance, Guardianship Subsidy Maintenance, and Kinship Guardianship Subsidies.

Supporting Children and Youth Experiencing Homelessness

CYFD's Community Shelter Program provides facility-based shelters to serve any youth or child in New Mexico who needs housing. Priority populations served by the shelters are youth and children involved with CYFD Protective Services or Juvenile Justice. CYFD also provides community-based and multi-service home shelter programming.

The Humphrey House Maternity Home is a unique program that has a capacity to serve six young expectant or parenting mothers from the ages of 13 to 21 and their minor children. It provides mothers with clinical services including individual and group therapeutic treatment and case management, and refers small children and babies to appropriate services when needed. The Transitions Supportive Housing program of the Behavioral Health Services (BHS) is designed to provide rental subsidies and supportive services for transition-age youth ages 18 to 21. This program is based on the Housing First Model and provides 20 vouchers in Bernalillo County to transition-age youth involved with CYFD.

In an effort to provide additional support to young adults aging out of the New Mexico foster care system, on July 1, 2020, CYFD launched the Fostering Connections extended foster care program. This program seeks to address the challenges (e.g., substance abuse, trauma, homelessness, and other behavioral or mental health struggles) that disproportionately impact youth aging out of foster care. The program empowers youth ages 18 to 21 to build relationships and support systems; connect to services such as housing, medical, and behavioral health; and access resources related to life skills—education, employment, transportation, parenthood, and more—essential for a successful transition into adulthood.

CYFD's Youth Motivating Others through Voices of Experience New Mexico (Youth MOVE NM) chapter is a youth leadership and advocacy group of Youth MOVE National, consisting of youth who have successfully navigated the child welfare system. Youth MOVE NM members have been CYFD's partners in advocacy, including during the successful 2020 Behavioral Health Week at the Legislature, for which they helped plan and execute the first ever Youth MOVE NM Day. In 2020, CYFD

has hosted Youth MOVE NM virtual hang-out sessions aimed at engaging youth who are currently receiving or have recently received services from the child welfare system.

Specific Protections for Children and Youth Identifying as LGBTQ+

CYFD has also engaged in various initiatives to support and elevate LGBTQ issues. In June 2020, CYFD announced a new non-discrimination directive, one of the most inclusive in the country. This directive stipulates that CYFD will not discriminate against any child or youth involved with any aspect of its system on the basis of: race; creed; religion; sex or gender; gender identity; gender expression; sexual orientation; marital status or partnership; familial or parental status; pregnancy and breastfeeding or nursing; disability; school districts and charter schools; HIV/AIDS status; survivor of domestic violence, sexual assault, or stalking; and housing status, including homelessness; or any other non-merit factor. The directives apply across all CYFD divisions and bureaus, as well as to contracted services and programs. The directive was significantly informed by input from youth and community stakeholders, including Lambda Legal, NMCAN, True Colors United, Family Equality, and Equality New Mexico. CYFD also worked with these groups to draft changes to language in the New Mexico Administrative Code to make it more inclusive. Some of those changes have already been promulgated while others are pending.

Serving Immigrant Children and Families

In FY20, CYFD established an Immigration Unit within the Department that is providing support to children, parents, and relatives with immigration issues. With this unit's work, CYFD has been able to

partner with legal services organizations who help eligible children in CYFD custody to screen and apply for legal relief, and to connect children to their parents who have been detained or deported by immigration authorities.

Dedicated Supports for Tribes

CYFD also launched an Indian Child Welfare Act (ICWA) Unit in FY20, born from strengthened partnerships between CYFD, the NM Tribal Indian Children Welfare Consortium, the NM Partners and the Tribal-State Judicial Consortium. The unit is staffed with a supervisor, attorney, and four ICWA Specialists who work to ensure that protective services cases have tribal involvement, children are in preferred placement, and culturally appropriate services are identified and implemented throughout the duration of the case. Currently, 21 Protective Services cases are in the ICWA unit, 17 of which have ICWA compliant placements. The cases assigned to the unit have involved the Cherokee Nation, the Navajo Nation, Ysleta del Sur, Pueblo of Isleta, Standing Rock Sioux, Blackfoot Tribe, Kewa Pueblo, Jemez Pueblo, and the Gila River Tribe. Cases in the ICWA unit have consistently exceeded an 80% rate of placement with a relative. Bernalillo County is piloting the very first ICWA Court in NM, which began taking cases January 1, 2020. The court has a specialized focus on compliance with the federal Indian Child Welfare Act (enacted in 1978 by Congress) and involves Tribes throughout the legal process of the case. The presiding judge, Special Master Catherine Begaye, is the first Native American to preside over an ICWA Court. Currently, there are 11 cases in ICWA court. The CYFD Juvenile Justice Division and Tribal partners recently implemented the Tribal Notification law, which requires earlier notification and continuous collaboration with Tribes on juvenile justice cases.

SUPPORTED REPORT CARD

Kinship Care

CYFD initiatives related to kinship care include the creation of kinship guardianship subsidies as well as community-based support services for relatives and kin via the new Relative Success Centers and Statewide Legal Services. CYFD has also increased staff to specialize in supporting kinship caregivers and programs.

Meanwhile, the Aging and Long-Term Services Department (ALTSD) supports grandparents throughout New Mexico in a variety of capacities. Grandparents are served via the Aging Network through senior centers and through the agency directly with the Legal Resources for the Elderly Program (LREP) and Pegasus Legal Services to provide kinship guardianship representation and other legal services for grandparents raising grandchildren.

Pegasus Legal Services provides an array of legal services for grandparents and other adults who are caring for children when their biological parents are unable to. In FY20, 221 kinship caregivers were provided some form of legal assistance. Attorneys at Pegasus represented 170 grandparents, and 62 of those were awarded guardianship of their grandchildren.

ALTSD also contracts with the Legal Resources for the Elderly Program through the New Mexico State Bar to ensure that services are provided directly to grandparents who are caring for grandchildren and to preserve their ability to make decisions on behalf of the grandchild. LREP, CYFD and ALTSD work closely to ensure appropriate referral in order to ensure grandparents' needs are met.

The Aging Network also works with many grandparents raising their grandchildren across the state, providing support in many different capacities including meals, respite vouchers, counseling,

The following summary is a scenario in which LREP was able to provide assistance to a grandparent.

Client called LREP because she wanted a power-of-attorney granting her authority to make decisions for her grandchildren. The client's daughter died a few weeks ago and the father cannot be located, thus the grandchildren are now living with the client. The client is frantic because she cannot take them to the doctor or enroll them in school. The LREP attorney informed the client that, since the mother is deceased and the father abandoned the family, there is no parent to grant her authority in a power-of-attorney. The LREP attorney advised the client that she needs a Caregiver Authorization Affidavit. Pursuant to New Mexico law, once the client signs the Caregiver Authorization Affidavit and has her signature notarized, the client has the same authority to authorize medical care, dental care, and mental health care for the child as a kinship guardian. The Caregiver Authorization Affidavit was sent to the client. The client was very happy with this information.

trainings, and other supportive services. In FY20, 387 respite vouchers were issued to grandparents raising grandchildren. Respite care services are extremely important for grandparents as they can provide a much-needed break from caregiving responsibilities. Respite vouchers have a positive impact on grandparents in that respite reduces their stress and helps them feel better rested and renewed. Sometimes feelings of guilt or anxiety about leaving grandchildren may keep people from seeking respite in a timely way. Grandparents and relative caregivers are encouraged to use respite on a regular basis to avoid feelings of guilt, exhaustion, isolation, and burnout.

ALTSD also supported CYFD in its efforts to revise the Kinship Guardianship Act in the 2020 Legislative Session. The revisions allowed for grandparents to have access to subsidized guardianships funds in order to assist in the expenses related to raising grandchildren. Finally, the Older Americans Act was reauthorized in mid-2020 and includes extension of the RAISE Family Caregiver Act and the Supporting Grandparents Raising Grandchildren Act by one additional year. ALTSD is looking forward to expanding its work with CYFD to ensure effective outreach and appropriate resources are provided to New Mexico's grandparents raising grandchildren.

Services for Families Involved with the Justice System

The New Mexico Corrections Department (NMCD) supports children and families in a variety of ways through multiple programs stemming from the Adult Prison Division, the Recidivism Reduction Division, and Probation and Parole. NMCD approaches each individual under its care and custody in a holistic manner. Institutional programs are aimed at providing individuals with parenting tools, methods of coping with disciplinary issues, and enhancing communication skills. These programs are designed to facilitate positive role modeling and also include opportunities for family reunification efforts. NMCD also supports children and families through visitation and family days which help maintain relationships and continued contact with loved ones.

Upon transition into the community, NMCD supports individuals and their families each step along the way. NMCD offers parenting and family counseling support services as well as housing and treatment options as needed. NMCD offers treatment options which allows mothers to have their children onsite, thus enabling reunification efforts and supporting healthy communication and parenting skills in a structured environment.

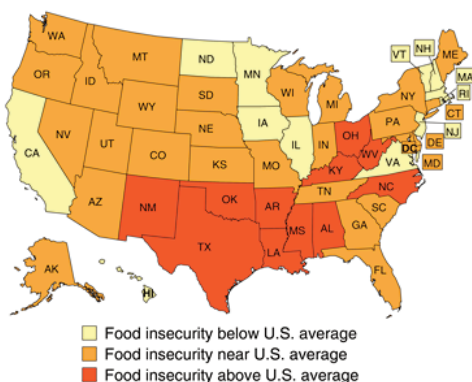
NMCD supports the overall well-being of children and families in New Mexico by collecting food, jackets, school supplies, toys, and gift cards throughout the year. These items are donated to organizations statewide that assist families in need through schools, homeless shelters, food banks, and counseling agencies. NMCD also takes part in gift card drives which help provide shoes, transportation, utilities, clothing, and more. These are collaborative efforts with many nonprofit organizations and social service agencies. NMCD also collaborates with CYFD throughout the year to ensure children are protected and safe while in foster care. Partnerships with other state agencies such as the Department of Workforce Solutions and the Department of Health ensure that parents get the assistance they need in order to be in their children's lives.



Food Security

Prevalence of food insecurity, average 2017-19

Prevalence of food insecurity, average 2017-19



Source: USDA, Economic Research Service using data from the December 2017, 2018, and 2019 Current Population Survey Food Security Supplements.

Figure 46: The percentage of households with low and very low food security

How is New Mexico Doing?

Over 14% (almost 300,000) of all New Mexicans had problems getting enough food in 2019. Over 15% of people in at least 16 counties were food insecure, and close to one quarter of people in four counties experienced food insecurity in NM. Food insecurity during childhood is a threat to early childhood health, well-being and learning. One in five NM children faces hunger, and the COVID-19 pandemic has challenged families even more.

How does New Mexico compare to the nation?

New Mexico has higher rates of Food Insecurity compared to the nation (10.9%) and was the state with the highest rate of food insecurity from 2016-2018. Still above the national average for 2017-2019, NM struggles with poverty and access to nutritious foods.

What does this mean?

Food security—access by all people at all times to enough food for an active, healthy life—is necessary for a healthy, well-nourished population. Safety net programs addressing this issue include state and tribal WIC programs serving over half of pregnant women and children under age 5, the Supplemental Nutrition Assistance Program (SNAP) serving very low-income eligible families, childcare and school-based meal programs for low-income children; as well as community-based food pantries, emergency kitchens and food banks. Many programs teach cooking to stretch the food dollar.⁴⁰



Reading to Children

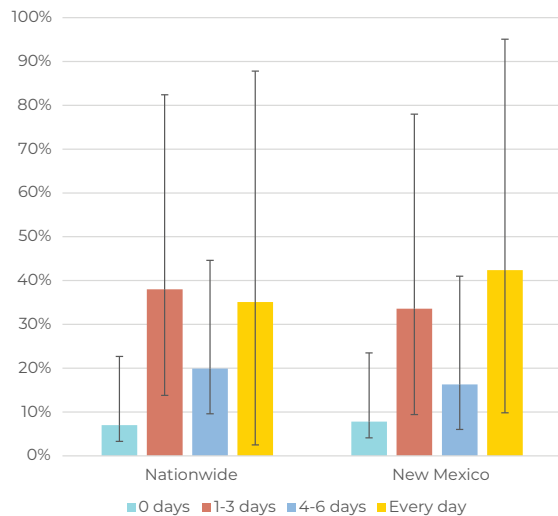


Figure 47: NM children, 0-5 years who were read to every day of the week by a family member

Data Source: National Survey of Children's Health, 2019

How is New Mexico Doing?

About 42.0% of NM children 0-5 years of age are read to by a family member every day of the week, an increase from 37% in 2017-18 and higher than the national average (35.1%). About 8% are never read to during the week (2019). Sixty-four percent of NM children are also told stories or sung to by family members every day of the week (2019).

How does New Mexico compare to the nation?

New Mexico exceeds the national estimate for this indicator. Children in NM are significantly more likely to be sung to or told stories as well (63.6% v. 48.7%).

What does this mean?

The single most important activity for building knowledge for eventual success in reading is reading aloud to children, as stressed by the Commission on Reading. Reading aloud to children of all ages is important because it presents books as exciting and relatable experiences. Reading aloud to children helps them make sense of what they see, hear and read. Parents and teachers are role models and reading aloud lets children use their imaginations to explore people, places, times and events beyond their own experiences and supports the development of thinking skills.³⁹



SUPPORTED BUDGET REPORT

Programs Supporting Supported Outcome by Agency (\$468,339,308 in Total Funding for FY20)

	FY19	FY20
Aging and Long Term Services Department		
Foster Grandparent Program	\$ 1,629,921	\$ 1,823,237
Grandparents Raising Grandchildren (Title III-E)	\$ 70,882	\$ 33,163
Legal Services for Kinship Caregivers	\$ 248,000	\$ 298,000
ALTSD agency total	\$ 1,948,803	\$ 2,154,400
Children Youth and Families Department	FY19	FY20
Early Childhood Services		
Training & Technical Assistance		\$4,029,722
Child Care	\$139,000,000	\$145,397,045
Independent Living Services	\$ 774,907	\$ 2,017,070
Adoption Subsidy Maintenance	\$ 5,397,706	\$ 30,237,592
Foster Care Maintenance		\$ 17,944,198
Guardianship Subsidy Maintenance		\$ 949,192
Kinship Guardianship Subsidies		\$ 224,230
CYFD agency total	\$ 145,172,613	\$200,799,049
Corrections Department	FY19	FY20
Fathers as Readers		
Inside Out Dads		
24/7 Dads		
Moms from the Inside		
Moral Recognition Therapy (MRT)-Parenting		\$ 31,924
Wings for Life		\$ 92,888
Probation/Parole Support		\$ 5,103,970
CD agency total	\$ 152,138	\$ 5,228,782
Department of Health	FY19	FY20
State General Funded Children's Respite	\$ 1,107,000	\$ 1,107,000
DOH agency total	\$ 1,107,000	\$ 1,107,000
Human Services Department		
Child Support Enforcement	\$ 29,476,377	\$ 32,307,979
Food and Nutrition Services Bureau	\$ 25,537,173	\$ 31,915,064
TANF Child Care	\$ 33,527,500	\$ 36,527,500
TANF Cash Assistance Program	\$ 43,096,487	\$ 44,075,419
HSD agency total	\$ 131,637,537	\$ 144,825,962
Public Education Department (Federal Funding)	FY19	FY20
Fresh Fruits and Vegetables	\$ 2,247,810	\$ 2,535,894
State Administrative Expenditures	\$ 1,689,752	\$ 1,540,221
Support for Improving Health and Academic Success		\$ 365,000
National School Lunch program	\$ 144,884,381	\$ 109,783,000
PED Supporting Supported Outcome Federal Funding Total	\$ 148,821,943	\$ 114,224,115
TOTAL SUPPORTED:	\$ 428,840,034	\$ 468,339,308

Total funding trend by supported outcome

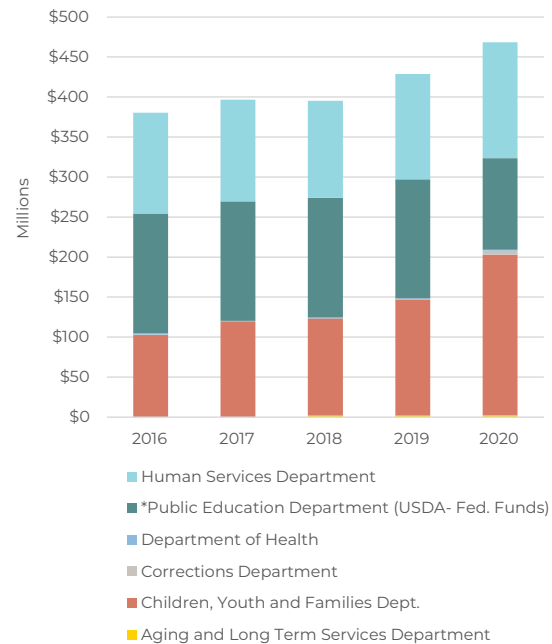


Figure 48: Supported Outcome funding, by agency, FY16-20

NM youth have benefitted from state and federal funds supporting the New Mexico Graduation Reality and Dual-Role Skills (GRADS) programs located at 26 sites within New Mexico school districts and charter schools across the state. GRADS facilitates dropout recruitment of expectant and parenting teens, graduation, and the pursuit of higher education and/or employment for both young mothers and fathers. GRADS initiatives have resulted in 83% of teen mothers enrolled in GRADS graduating in 2019 compared to a 53% national average for teen mothers (<http://nmgrads.org/>).

INVOLVED REPORT CARD

Introduction, Trends & Considerations

Involved outcomes promote positive engagement between children and their schools, their families, and their communities. From FY2016 to 2020, the number of programs centered on Involved outcomes have increased from 9 to 11. Funding across Involved programs has similarly increased from \$8.2m to \$10.5m, with the majority of FY2020 funding (\$8.7m) allocated to the Department of Workforce Solutions (NMDWS).

NMDWS strives to be a leader in improving employment and poverty rates through workforce development, enhanced services for employers, and ensuring fair labor practices and workforce protections for New Mexicans. Four pillars guide the work of NMDWS to ensure families can secure a living wage — Educate, Empower, Employ, and Enforce.

The administration has prioritized developing academic and career pathways, focusing on cross-department programs. The NMDWS academic and career pathways are opportunities for youth to explore careers through a New Mexico specific lens, using online resources. This opportunity opens doors for youth involvement with friends, families, and community members, as they look at options for future careers. Further, the work of Involved departments automatically includes the building of mentors and strengthening of family support. Internships and apprenticeships not only build career-readiness, but provide direct mentorship, allowing youth to be meaningfully supported & taught by those already in the career.

A strong component of the Involved activities is the attention to culturally specific, positive youth development. The programs of INA, DCA, EDD, IAD, and OAAA, all provide for youth to engage in academic and career readiness that uses their passions and interests, centers their cultural strengths, and allows them to be leaders as well as learners.



Administration Initiatives and Interagency Collaboration

Developing Academic and Career Pathways for Youth

In 2018, the court ordered the State of New Mexico to provide educational programs, services, and funding to schools to prepare students so they are college- and career-ready. For the last two years NMDWS has increased its statewide outreach efforts to promote and educate community leaders, partners, organizations, and young people about available career readiness and exploration tools and resources.

Career Exploration: <https://www.nmcareersolutions.com/vosnet/Default.aspx>

This website provides career exploration tools to help individuals identify careers they're interested in so they can get started on the right path to employment.

Year	Number of Users
July 1, 2017 – June 30, 2018	1,000 per week
July 1, 2018– June 30, 2019	1,250 per week
July 1, 2019 – June 30, 2020	1,625 per week

Why I Work: <https://www.dws.state.nm.us/WhyIWork/>

Why I Work is a financial literacy and career exploration tool designed and developed for youth. This unique tool enables youth to create fiscal scenarios about how they envision their future and provides them with an overall budget, career choices, and training programs to plan their future.

Year	Number of Users
July 1, 2017 – June 30, 2018	171
July 1, 2018– June 30, 2019	2,737
July 1, 2019 – June 30, 2020	6,733

Internships: <https://www.dws.state.nm.us/internships>

NMDWS supports an internship portal designed for youth, employers, and experienced professionals as a career pathway planning and workforce development tool. The portal enables employers to announce internship opportunities and provides information for youth seeking placements to enhance their skills and experience. The portal also provides guidance for employers on how to successfully adapt the workplace for an internship and provides tips for youth on how to prepare and find the right placement.

Year	Number of Users
July 1, 2017 – June 30, 2018	3,403
July 1, 2018– June 30, 2019	5,739
July 1, 2019 – June 30, 2020	8,333

DWS Apprenticeships: <https://www.dws.state.nm.us/en-us/Job-Seekers/Explore-Career-Options/Apprenticeship>

Apprenticeship programs combine paid on-the-job training with related classroom instruction. The Apprenticeship webpage allows students to explore “earn and learn” career pathways available statewide and provides guidance on how to apply and prepare for an apprenticeship opportunity.

DWS Cross-Agency Partnerships and Collaboration

New Mexico Commission on Volunteerism

(AmeriCorps): NMDWS provides operational support for AmeriCorps, which provides opportunities for adult individuals with a high school diploma or an equivalency certificate to make an intensive commitment to a service project for a minimum of two years. AmeriCorps members have a 27% higher likelihood of finding a job after being out of work than non-volunteers. There were 449 AmeriCorps members between the ages of 17 and 30 serving the state of New Mexico from July 1, 2019 – June 20, 2020.

New Mexico Public Education Department

(NMPED): During FY20, NMPED and NMDWS created and funded a shared position, Youth Work-Based Learning Coordinator, to better align the goals of both departments to improve and enhance career technical education and increase work-based learning opportunities for youth. The partnership works with the following entities currently in their third and final year of direct salary support through the Work-Based Learning Initiative to design, develop and implement work-based learning strategies:

- Aldo Leopold Charter
- Grant-Cibola County Schools
- Farmington Municipal Schools
- Media Arts Collaborative Charter School
- Monte Del Sol Charter
- Roswell Independent School District
- Vista Grande High School
- Las Cruces Public Schools
- Region 9 Education Cooperative (2 positions)

Additionally, NMPED and NMDWS are collaborating to develop joint training and technical assistance for academic and career advisors who provide career exploration and job readiness to high school and community college students statewide.

Children, Youth and Families (CYFD): Through a partnership with NMCAN, NMDWS participates in a multi-agency team of youth-serving organizations that work together to provide services to young people impacted by the foster care and/or juvenile justice systems. The goal is to improve participants'

transition to adulthood by expanding communication across organizations, building relationships, and ensuring that programming involves youth voice. The team emphasizes trauma-informed practice and a commitment to authentic youth engagement. NMDWS contributes expertise in workforce development practices and shares tools and resources designed for young people.

Early Childhood Education and Care Department

(ECECD): NMDWS will engage ECECD in an effort to create a registered apprenticeship program for Early Childhood Educators. The goal will be to establish two pilot projects within the state, engaging providers in the process of building a career pathway for these educators.

Indian and Native American Programs (INA):

Funded to support employment and training activities for pueblo and tribal communities, NMDWS is working collaboratively with INAs to align workforce system development activities within their communities. Partnership activities include technical assistance and training; coordination of economic development activities; and specific sector strategies to ensure that tribal and pueblo members are included in employment and training services.



INVOLVED REPORT CARD

Department of Cultural Affairs (DCA): DCA's commitment to youth extends to Poetry Out Loud, a program of New Mexico Arts, sponsored by the National Endowment for the Arts and the Poetry Foundation. This was the 15th year of the program, with over 12,000 students participating. This year's final, won by Zoe Sloan Callan, a student at Native American Community Academy in Albuquerque, included special performances by the new State Poet Laureate Levi Romero and Senator Bill O'Neill. Also, in 2020 the State Library sponsored New Mexico's participation in National History Day in partnership with the New Mexico Humanities Council.

Economic Development Department (EDD): The mission of the New Mexico Economic Development Department is to improve the lives of New Mexico families by increasing economic opportunities and providing a place for businesses to thrive. Since January 2019 when Gov. Michelle Lujan Grisham assumed office, the EDD has focused on increasing wages and benefits throughout the state by using the State of New Mexico financing and business assistance programs. Incentivizing jobs in the state with higher wages and full benefits is one way the EDD is able to improve and support the well-being of New Mexico's children. The EDD intends that individuals who are able to work have the opportunity to find quality work with good wages and benefits more easily as a result of the department's efforts, thus providing a better quality of life for New Mexico's children. Part of EDD's mission statement reads "to improve the lives of New Mexico families," and the administration continues to actively seek new ways to improve the well-being of children and their parents throughout the state.

Outdoor Recreation Division: Access to the outdoors is a basic human right – yet it's one that has often proved elusive for many of our youth. As a result, youth in many underrepresented communities in the state do not have the chance to experience some of the best of New Mexico: its natural world. In May 2020, the Outdoor Equity Fund opened to applications for the first time, supporting transformative outdoor experiences that foster stewardship and respect for our lands, waters, and cultural heritage. The response was overwhelming. The Outdoor Recreation Division received almost

100 applications from nonprofits, Tribes, Pueblos, and local governments across the state to give New Mexico children and teenagers a tremendous opportunity. In September, an independent evaluation committee will announce over \$250,000 in funding.

Job Training and Incentive Program: The Job Training Incentive Program (JTIP) recently created enhanced incentives for businesses that employ foster youth to promote workforce training for this vulnerable population. Working with advisers from the Governor's office, the JTIP board elected to include the employment of trainees who have graduated out of the New Mexico Foster Care System as one criteria making businesses eligible for an additional 5% reimbursement above the standard JTIP rate. This became effective July 1, 2020, and will remain in JTIP policy for at least two years, at which time the board will assess the utilization and success in order to determine whether to sunset, amend, or make it a permanent policy item. This new criteria incentivizes New Mexico businesses to hire and train former foster children to be successful in the workforce.

Indian Affairs Department (IAD)

The following organizations partnered with IAD in FY20 to conduct youth involvement activities:

- Native American Children in Foster Care Project - New Mexico Kids Matter: The grantee hired a part-time Court Appointed Special Advocate to coach and work with Native American foster children.
- Pojoaque Youth Employment & Resilience Project: The grantee employed Native American youth in a 320-hour internship program working in departments at the Pueblo. The youth were also tutored in cultural, physical, and recreational subjects.

Office of African American Affairs (OAAA)

The State Office of African American Affairs (OAAA) serves the community in a multitude of ways. When addressing mobilization pertaining to children and youth, OAAA has implemented three initiatives in FY20. These three initiatives include the Inner Beauty Total Me (Inner Beauty) Educational Summit, the Victory in Black Empowerment (V.I.B.E.) Educational Summit, and the OAAA Mentorship program. Through these initiatives, OAAA aims to improve the lives of African American children throughout New Mexico.

Inner Beauty has been established since 2016. The program's purpose is to provide young women of color an opportunity to embrace themselves, achieve greater inner strength, and support one another along their journey. This summit was geared toward middle school female students of color. This summit reached all Albuquerque Public Schools, charter and public schools districtwide.

The purpose of V.I.B.E., starting its inaugural year in 2020, is to provide young boys of color an opportunity to embrace themselves, achieve greater inner strength, and support one another along their journey. The goal was to reach 300+ middle-school-age boys. In addition to the summit, OAAA is developing mentorship programs to support our youth as they transition to the high school level.

The OAAA Mentorship Program acts as a bridge between the students and Black professionals in the community. Originally stemming from the Inner Beauty Summit, the Mentorship Program is the continued intervention created to continuously serve students throughout the school year, concentrating on Cleveland and Wilson Middle Schools. By connecting Black professionals and students, the program enhances the students' personal, social, and educational development.



Supportive Relationships for Youth

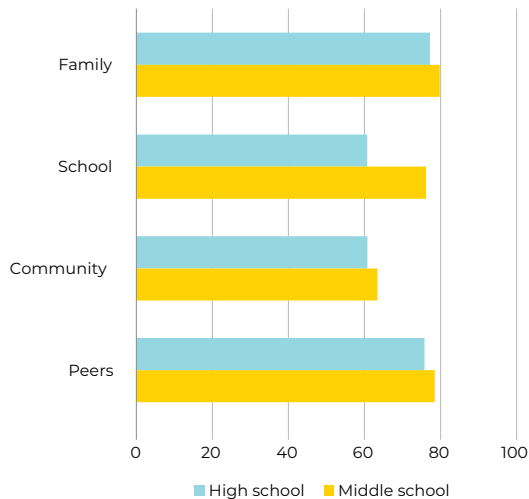


Figure 49: The percentage of youth who have caring and supportive relationships at home, school, community and with peers

How is New Mexico Doing?

Among youth in public high school and middle school students, most students reported having caring and supportive relationships across the domains of the family, the school, adults in the community, and with peers. These indicators from the 2019 Youth Risk and Resiliency Survey (YRRS) were generated from a number of survey questions from each of these domains. Students were considered to have these relationships if they indicated that the following statements were “Very much true” or “Pretty much true”.

Family

- In my home, a parent or some other adult is interested in my school work.
- In my home, parent or some other adult believes that I will be a success.
- When I am not at home, one of my parents/guardians knows where I am and who I am with.
- A teacher or other adult listens to me when I have something to say.
- Outside of home and school, there is an adult who really cares about me.
- I have a friend my own age who helps me when I'm having a hard time.

School

- At my school, there is a teacher or some other adult who listens to me when I have something to say.
- At my school, there is a teacher or some other adult who believes that I will be a success.
- In my school, there are clear rules about what students can and cannot do.
- At school I am involved in sports, clubs, or other extra-curricular activities (such as band, cheerleading, or student council).

Community

- At my school, there is a teacher or some other adult who believes that I will be a success.
- Outside of my home and school, there is an adult who really cares about me.
- Outside of my home and school, there is an adult who tells me when I do a good job

Peers

- I plan to go to college or some other school after high school.
- Outside of my home and school, I am involved in music, art, literature, sports, or a hobby.

There is no national comparison data for these data.

What does this mean?

Youth who have a high level of support from a caring and responsible adult in the home, in the school, or in the community, and those who have a caring relationship with a friend their own age, are less likely to engage in high risk behaviors than youth who do not have these strong relationships with adults or peers. Some of these high-risk behaviors are smoking cigarettes, drinking alcohol or binge drinking, and using drugs like cocaine, heroin, or marijuana. These positive relationships are also associated with lower rates of risky sexual behaviors and increased physical activity. For most risk behaviors, protective factors in the home have a stronger protective effect than protective relationships in the school, community, or with peers.

INVOLVED BUDGET REPORT

Total funding trend by involved outcome

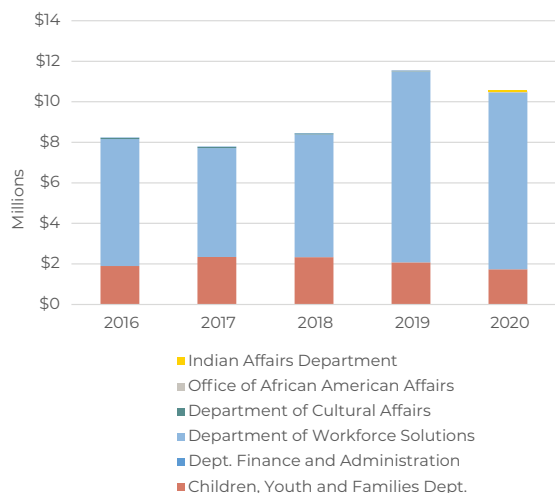


Figure 50: Reflects the total state, federal and other funding for programs devoted to providing involved outcomes for NM's children and youth between FY16 and FY20. Involved outcomes include those that promote positive engagement between children and their schools, families and communities.

Programs Supporting Involved Outcome by Agency

	FY19	FY20
Children Youth and Families Department		
Juvenile Community Corrections	\$ 2,077,355	\$ 1,730,539
CYFD agency total	\$ 2,077,355	\$ 1,730,539
Department of Cultural Affairs		
Poetry Out Loud Statewide Contest	\$ 17,500	\$ 17,500
DCA agency total	\$ 17,500	\$ 17,500
Department of Finance and Administration		
State-wide Teen Court	\$ 17,700	\$ 17,700
DFA agency total	\$ 17,700	\$ 17,700
Department of Workforce Solutions		
Americorps	\$ 2,373,644	\$ 1,820,826
Workforce Innovation and Opportunity Act	\$ 6,954,597	\$ 6,797,248
Work Permits	\$ 85,454	\$ 86,500
DWS agency total	\$ 9,413,695	\$ 8,704,574
Office of African American Affairs		
Christmas with CYFD	\$ 7,000	
Inner Beauty Summit	\$ 15,000	\$ 11,900
Mentorship	\$ 15,000	\$ 10,000
V.I.B.E.		\$ 12,500
OAAA agency total	\$ 37,000	\$ 34,400
Indian Affairs Department		
Special Projects Grant Program- Native American		
Children in Foster Care Project		\$ 33,379
Special Projects Grant Program- Pueblo of Pojoaque		
Youth Employment & Resilience Project		\$ 47,864
IAD agency total		\$ 81,243
INVOLVED TOTAL:	\$ 11,563,250	\$ 10,585,956



FAMILY & CHILD TAX CREDITS

The Working Families Tax Credit is based on the federal Earned Income Tax Credit (EITC), considered one of the most effective anti-poverty programs of the federal government.

The Working Families Tax Credit is intended to amplify the effect of the EITC. It is designed to support New Mexico families who are working hard but still struggling to afford basic necessities. As a refundable credit, it not only reduces tax liability, but can result in a cash refund even after tax liability has been reduced to zero.

The Low Income Comprehensive Tax Rebate similarly is designed to help the state's most at-risk taxpayers by offsetting sales taxes which tend to take up a larger proportion of low-income family's wages, putting more money into their hands for basic needs.

The Child Day Care credit lowers the cost of child care for lower income families, making employment and educational opportunities more attainable.

New Mexico Personal Income Tax Credits and Rebates

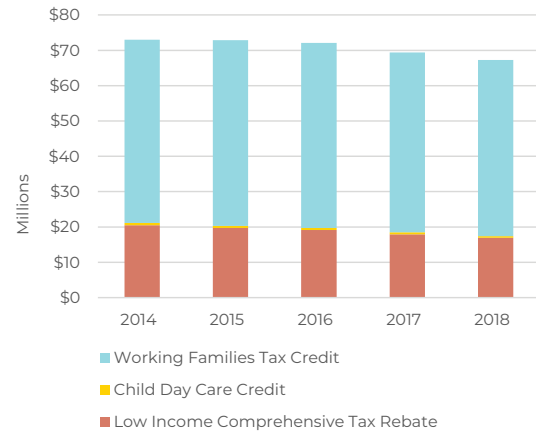


Figure 51: Indicates that from 2014 to 2018 state tax credits and rebates ranged from \$500,000 for the Child Day Care Credit to \$52.4 million for the Working Families Tax Credit.

Data source: New Mexico Taxation and Revenue Department (TRD), Tax Analysis, Research and Statistics Office

1. Tax Years 2014-2018, NM Personal Income Tax (PIT) Return data

Federal Tax Credits

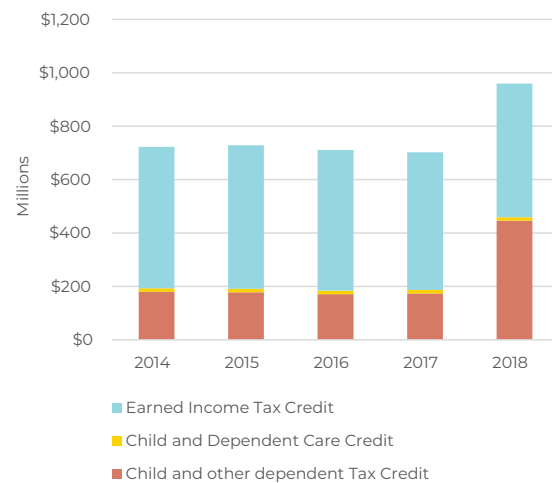


Figure 52: Shows that federal tax credits for New Mexico tax payers raising children ranged from \$12.8 million for the Child and Dependent Care Credit in 2017 to \$537.8 million for the Earned Income Tax Credit in 2018.

Data source: IRS Statistics Of Income (SOI), Tax Years 2014-2018

1. With the Tax Cuts & Jobs Act (TCJA), the maximum amount of the Child Tax Credit doubled from \$1,000 to \$2,000. In addition, a new credit for other qualifying dependents was added. The SOI statistics list the aggregate amount for both credits.

2. Per SOI notes, this reported amount is both the refundable and non-refundable portions.



REPORT CARD & BUDGET REPORT NOTES

Profile

1. Census Data: The 2018 Intercensal estimate from BBER at UNM shows smaller numbers for children ages 0-4 years and 5-9 years than expected.
2. Children's relationship to householder and percent of children living in poverty by type of household: 2016-18 American Community Survey, New Mexico Children Characteristics. <http://factfinder.census.gov>
3. Current federal poverty guidelines can be checked in monthly HSD report at <https://www.hsd.state.nm.us/public-information-and-communications/monthly-statistical-reports/>
4. Poverty by Education Achievement: 2015-17 American Community Survey, New Mexico Children Characteristics. <https://data.census.gov/cedsci/>
5. Children in Poverty by NM County: County level poverty data from <https://data.census.gov/cedsci/>

Children's Cabinet Budget Summary

6. Total funding by outcome for children birth–21 including total recurring education appropriations: provides a detail of funding per Children's Cabinet Outcome area for FY16 – FY20 with the educated outcome showing total recurring education appropriations as well as all programs other agencies indicate as supporting that outcome.
7. Total funding by outcome: Healthy refers to physical fitness and mental health. Educated refers to preparedness for and success in school. Safe refers to family and community safety and support. Supported refers to successful transition to purposeful adulthood and employment. Involved refers to valued contributions to and active participation in communities.
8. Total spending by outcome including total education appropriations: Total education appropriations include the state equalization

guarantee, total public school support, and related recurring appropriations as defined by the NM Department of Finance and Administration.

Healthy

9. Healthy Birth Index: New Mexico Pregnancy Risk Assessment Monitoring System (PRAMS), an ongoing survey of new mothers; NM Department of Health; <https://www.nmhealth.org/about/phd/fhb/prams>
10. Teen births: from NM Vital Records and Health Statistics.
11. Immunization: National immunization survey of the Centers for Disease Control and Prevention (CDC), New Mexico sample. www.cdc.gov/vaccines/stats-surv/nis/data/tables_2018.htm
12. Children's weight: Youth New Mexico Youth Risk Resiliency Survey 2019, NM Department of Health and Public Education Department; and the CDC Youth Risk Behavior Survey 2018.(HSD) https://www.hsd.state.nm.us/uploads/FileLinks/5bc82a76689a437682dbd68988331f79/November___All_Children_under_21_by_Managed_Care_Organization_Fee_for_Service.pdf
13. Child health insurance: US Census Bureau; Current Population Survey, Annual Social and Economic Supplement, 2019.
14. Medical screening: programs reflected in this graph include: DOH – Newborn Genetic Screening, and Newborn Hearing Screening Program.
15. School-based health services: The SBHCs offer an array of services by a multidisciplinary team, including primary care for injuries and illness, well-child exams, immunizations and laboratory tests, over-the-counter medications and prescriptions, telehealth services, as well as referrals to other providers. Behavioral health services include: awareness and outreach, including suicide prevention; counseling for alcohol and substance abuse; crisis intervention; depression screening; individual, group and family therapy. Prevention services focus on health promotion and risk reduction programs;

HIV/AIDS and STD awareness and education; nutrition; sports, and physical activity. Equity, opportunity and access for all children to health care make SBHCs an integral part of the state's health care delivery system.

16. Nutrition/obesity awareness and prevention program: Programs include: DOH – NM WIC Program, Office of School & Adolescent Health; HSD – Food and Nutrition Services Bureau; PED – After School Enrichment, Elementary Physical Education and Obesity Prevention.
17. Home visiting: Programs identified as having a home visiting component include: CYFD: Home Visiting; DOH: Maternal Child Health, and Families First. Source: ECECD.
18. Family planning services: NMDOH, Family Planning Program – Teen Pregnancy Site: <https://www.nmhealth.org/about/phd/fhb/fpp/>
19. Centennial Care 2.0: Medicaid expenditure and enrollment numbers are subject to revision for up to 30 months from the date originally released. Centennial Care 2.0 (Medicaid) estimated number of children served and average per child expenditure (avg. exp)

Educated

20. Figure – T.E.A.C.H.® Scholars: New Mexico Association for the Education of Young Children, NM T.E.A.C.H.® 2018. The data are inclusive of all funding sources for T.E.A.C.H.® scholarships; Pass rates for competency testing were from NM PED. Higher numbers related to increased funding for the reporting year.
21. Star Quality Child Care: Children, Youth and Families Department, Family Services. Stars Report July 2015-July 2019
22. Reading & Math at 4th Grade: New Mexico Public Education Department, Assessment and Accountability Division. There are no comparable US data. Each state develops their assessment based on locally designed content and performance standards.
23. Core classes, highly qualified teachers: Report of Core Classes Taught by Highly Qualified Teachers by Elementary, Middle and High Schools, NM Public Education Department; for

definitions see http://www.teachnm.org/docs/highly_qualified.pdf

24. High school graduation: The NGA cohort rate requires that students be given 4 full years to graduate, including the summer following their 12th grade year. New Mexico implemented its first 4-year graduation rate in 2009, and is part of an elite group of 20 states that publicly report the data prior to the federally mandated date of 2011. New Mexico's Shared Accountability model, which apportions student outcomes across all high schools for mobile students, is being studied by the National Governor's Association (NGA) as an innovative solution for other states. In this baseline year, 60% of students in public education are known to graduate in 4 years. Since this rate includes students who would normally be allowed longer under the NGA guidelines, it serves as a rigorous reference point from which to depart.
25. Disparities in college enrollment: Percentage of youth enrolled in higher education by race-ethnicity, age 18-24 from the NM Department of Higher Education. Percentage of youth by race ethnicity in the population from the UNM BBER inter-census estimates for 2018. All Public Higher Education institutions in New Mexico offer early childhood education programs, childcare, and/or summer programs for kids.

An example for each institution is listed below:

Central New Mexico Community College, CNM, Tres Manos – Child Care – <https://www.cnm.edu/depts/financial-aid/tres-manos-child-care>
 Clovis Community College, CCC, Child Development Lab School – <https://www.cloviscollege.edu/student-services/child-development-lab-school.html>

Eastern New Mexico University, ENMU, Child Development Center – <https://www.enmu.edu/academics/colleges-departments/college-of-education-and-technology/child-development-center>

ENMU-Roswell, Early Childhood Education program – <https://www.roswell.enmu.edu/early-childhood-education/>

ENMU-Ruidoso, Early Childhood Education program – <https://ruidoso.enmu.edu/academics/associate/early-care-education/>

Luna Community College, LCC, Early Childhood Program – <https://luna.edu/departments/education>

Mesalands Community College, MCC, Summer Adventure Camp – <https://www.mesalands.edu/community/community-education/summer-adventurecamp/>

New Mexico Highlands University, NMHU, has a lead role in developing statewide early childhood learning needs assessment – <https://www.nmhu.edu/highlands-to-help-develop-statewide-early-childhood-learning-needs-assessment/>

New Mexico Junior College, NMJC, Early Childhood Education – https://www.nmjc.edu/program/early_child/index.aspx

New Mexico State University, NMSU, Myrna's Children's Village – <https://tpal.nmsu.edu/academics/graduate-programs/concentrations/eced/mcvi/>

NMSU-Alamogordo, Early Childhood Associate Degree – <https://nmsua.edu/career-and-technology/areas-of-study/education-department/>

NMSU-Carlsbad, Early Childhood Education degree – <https://catalogs.nmsu.edu/carlsbad/associate-degree-certificate-programs/early-childhood-education/#text>

NMSU-Dona Ana, Early Childhood Education – <https://dacc.nmsu.edu/educ/>

NMSU-Grants, Small Wonders Child Care – <https://grants.nmsu.edu/community/small-wonders/>

New Mexico Tech, NMT, Children's Center – <https://www.nmt.edu/childcare/index.php>

Northern New Mexico College, NNMCC, Early Childhood Associate and Bachelor's Programs – <https://nnmc.edu/home/academics/colleges-and-departments/college-of-education/ece-ee/>

University of New Mexico, UNM, Children's Campus – <https://childcare.unm.edu/>

UNM-Gallup, Early Childhood and Family Center – https://childcarecenter.us/provider_detail/unm_gallup_early_childhood_family_center_gallup_nm

UNM-Los Alamos, Summer Program for Youth – <http://losalamos.unm.edu/community-education/for-younger-students.html>

UNM-Taos, Kids Campus – <http://taos.unm.edu/kids-campus/index.html>

UNM-Valencia, Child Care Center – <https://www.greatschools.org/new-mexico/los-lunas/1697-Unm-Valencia-Child-Care-Center/>

San Juan College, SJC, Community / Child and Family Development Center – <https://www.sanjuancollege.edu/community/departments/child-and-family-development-center/>

Santa Fe Community College, SFCC, Kids Campus – <http://kidscampus.sfcc.edu/>

Western New Mexico University, WNMU, Child Development Center – <https://ecp.wnmu.edu/programs/cdc/cdc/>

26. Total funding trend by educated outcome: Graph reflects all Children's Cabinet agency programs identified as supporting the educated outcome.
27. State and federal funding for early childhood education: Programs include: PED – Full Day Kindergarten, Kindergarten three plus, William F. Goodling Even Start; combined PED & CYFD – NM PreK; CYFD – Early Childhood Development,

Head Start; DOH – NM SAFE Kids Coalition; and HSD – TANF Child Care.

28. State funding early childhood education: The Executive and Legislature share a key policy goal of reducing the achievement gap between ethnic groups and advantaged and disadvantaged children. High-quality early education – including options such as Head Start, state-funded PreK, or full-day kindergarten, all reflected in this graph – contribute to realizing this and improving school readiness and long-term outcomes for children in New Mexico.
29. Nutrition and physical education, grades K-5: CDC, MMWR.
30. Educator professional development: displays state and federal funding information for programs devoted toward professional development that impact NM children and youth. Primarily these programs are directed towards educators. These programs include: DCA: Art is Fine, Digital Storytelling, Project Astro-NM, Statewide Classroom, Teacher Training; IAD: Financial Literacy Program; PED: Advanced Placement, Career-Technical Education, Charter School, Comprehensive School Reform, Core Curriculum, Domestic Violence Curriculum Educational Technology, NM PreK, Partnership in Character Education, Priority Schools Bureau, Professional Development Fund, Reading First, State Bilingual Education Title III, Summer Reading, Math & Science Institutes, Math & Science Partnership (MSP), T.E.A.C.H.® Early Childhood NM—NM PreK Scholarships, Tech Prep, Three Tier Teacher Licensure, Title II-Part A, Transition to Teaching; CYFD: T.E.A.C.H.®- Child Care & PreK, and Training and Technical Assistance (TTAP).

Safe

31. Bullying: The New Mexico Youth Risk and Resiliency Survey. New Mexico Department of Health and Public Education Department, Middle School and High School 2009, and the CDC YRBS Centers for Disease Control and Prevention. The 2009 Youth Risk Behavior Surveillance Report Surveillance Summaries.
32. Childhood injury: <http://ibis.health.state.nm.us/query/result/mort/MortInjCntyICD10/Count.html> NM data are 3-year averages due to small numbers; most current for US data is 2017. US data suggest a decreasing trend while NM data show variability with an increasing trend for the period.
33. Youth who seriously consider suicide: New Mexico Youth Risk Resiliency Survey 2018, NM Department of Health and Public Education Department; and the CDC Youth Risk Behavior Survey 2009, see www.cdc.gov/mmwr/pdf/ss/ss5905.pdf
34. CYFD completed investigations and substantiated victims. Reported “child victims” reflects substantiation of one or more allegation of maltreatment for each child. “Investigations” summarizes all cases whether maltreatment was substantiated for one or more child in the investigation. Calendar year NM data may differ from federal due to method differences and reporting timeframes.
35. Abuse of pregnant women - National data <http://www.cdc.gov/mmwr/PDF/ss/ss5509.pdf>
36. Child abuse and neglect prevention and intervention: Programs include: CYFD – Permanency Planning, Domestic Violence Services, In-home Services, CPS Investigations, and CPS Intake.

37. Domestic violence prevention & services: Programs represented in this graph include: CYFD: Domestic Violence Services; PED: Domestic Violence Curriculum. Juveniles exposed to domestic violence are disproportionately represented in the juvenile justice system. Consequently, programs directed toward the prevention of domestic violence are a critical aspect in the reduction of juvenile incarceration. Domestic violence services must be made available to help parents improve interactions with their children. Services include health care, child protective services, mental health, and law enforcement agencies, as well as courts and community-based domestic violence programs. For an overview of efforts to prevent violence at the federal level, see: Dahlberg LL, Mercy JA. History of violence as a public health issue. AMA Virtual Mentor, February 2009. Volume 11, No. 2: 167-172.

Supported

38. Food Security, Source: USDA, Economic Research Service using data from the December 2017, 2018, and 2019 Current Population Survey Food Security Supplements
39. Reading to young children: 2019 National Survey of Children's Health, Health Resources and Services Administration, Maternal and Child Health Bureau.
<https://mchb.hrsa.gov/data/national-surveys>
40. Child food security in NM: programs that address food security issues range from school meals to food stamps, including: CYFD – Family Nutrition; DOH – NM WIC Program, Healthier Kids Fund, SNAP E&T Childcare, TANF Cash Assistance Program; PED – Obesity Prevention, Elementary Breakfast, Elementary Physical Education, and After School Enrichment.

Involved

41. Child and Adolescent Health Measurement Initiative: 2017 National Survey of Children's Health (NSCH), Data Resource Center for Child and Adolescent Health website.
42. Youth with supportive relationships: 2019 New Mexico Youth Risk and Resiliency Survey. New Mexico Department of Health and Public Education Department.

Family and Child Tax Credits

NM aggregate tax credits: The data given in Figures 51 & 52 were supplied by the NM Tax and Revenue Department.

For further information, visit the Internal Revenue website at <http://www.irs.gov/> or the NM Tax and Revenue Department at <http://www.tax.state.nm.us/>.

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