



2015 New Mexico Regional Mental Health Report

NORTHWEST HEALTH REGION

Epidemiology & Response Division

CONTENTS

Contents.....	i
Preface: The Importance of Mental Health	ii
Mental Health Data in New Mexico.....	iii
1 Mental Health in the General Population.....	1
1.1 Youth Sadness or Hopelessness in the Past Year.....	1
1.2 Adult Frequent Mental Distress.....	4
1.3 Adult Depression.....	7
2 Youth Non-Suicidal Self Harm.....	10
3 Acute Mental Illness.....	13
3.1 Hospital Discharges for Mood Disorders	13
3.2 Hospital Discharges for Alcohol-Related Mental Disorders.....	17
3.3 Hospital Discharges for Schizophrenic Disorders.....	21
3.4 Hospital Discharges for Drug-Related Mental Disorders	25
4 Youth Suicidal Behavior	29
4.1 Youth Who Seriously Considered Suicide	29
4.2 Youth Who Made a Suicide Plan.....	32
4.3 Youth Who Attempted Suicide	35
4.4 Youth Injured in a Suicide Attempt.....	38
4.5 Youth Suicide	41
5 Suicidal Behavior	44
5.1 Adult Suicidal Ideation	44
5.2 Adult Suicide Attempts	47
5.3 Emergency Department Encounters for Self Injury	50
5.4 Suicide	54
6 Public Resources for Mental Health Promotion	58
7 Acknowledgements.....	59

PREFACE: THE IMPORTANCE OF MENTAL HEALTH

According to the World Health Organization (WHO) there is "no health without mental health."¹ Mental health is part of the WHO's definition of health as a state of complete physical, mental and social well-being, and not merely the absence of disease. It is a state of well-being in which an individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and is able to make a contribution to his or her community.² "Mental health [promotion] refers to a broad array of activities directly or indirectly related to the mental well-being component."

Mental health is an integral aspect of well-being and is essential for maintaining healthy family and interpersonal relationships, and helps enable an individual to live a full and productive life. Globally and in the U.S. mental health has the highest burden of all diseases.³ Mental disorders also have a serious impact on physical health and are associated with the prevalence, progression, and outcome of some of today's most pressing chronic diseases, including diabetes, heart disease, and cancer. They have long-lasting effects that not only include high psychosocial and economic costs for people living with the disorder, but also for their families, schools, workplaces, and communities.⁴

Mental health disorders are a concern for people of all ages (children to older adults) and are associated with age, gender, education, income level, race and ethnicity, geographical location and sexual orientation.⁵ The clearest evidence for risk of mental illness has been shown with indicators of poverty and low levels of education.⁶

The purpose of this report is to describe the regional and statewide burden of mental illness and related outcomes in New Mexico. For questions about the information presented, please contact:

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1. WHO. Mental health: facing the challenges, building solutions. Report from the WHO European Ministerial Conference. Copenhagen, Denmark: WHO Regional Office for Europe, 2005.
2. Healthy People 2020, accessed on 8/11/2014 from <http://www.healthypeople.gov/2020/LHI/mentalHealth.aspx>.
3. Healthy People 2020, accessed on 8/11/2014 from <http://www.healthypeople.gov/2020/LHI/mentalHealth.aspx>.
4. Prince M, Patel V, Saxena S, Maj M, Maselko J, Phillips MR, Rahman A. Global Mental Health 1 - No health without mental health. *Lancet*. 2007 September 4. DOI:10.1016/S0140-6736(07)61238-0.
5. Prince M, Patel V, Saxena S, Maj M, Maselko J, Phillips MR, Rahman A. Global Mental Health 1 - No health without mental health. *Lancet*. 2007 September 4. DOI:10.1016/S0140-6736(07)61238-0.
6. Healthy People 2020, accessed on 8/11/2014 from <http://www.healthypeople.gov/2020/LHI/mentalHealth.aspx>.

MENTAL HEALTH DATA IN NEW MEXICO

Data Sources

Mental health data can be obtained from survey, morbidity, and mortality data sources. The following datasets were used to obtain the information presented in this report, and are available on New Mexico's Indicator-Based Information System (NM-IBIS):

<https://ibis.health.state.nm.us/home/Welcome.html>

Behavioral Risk Factor Surveillance System (BRFSS)

The BRFSS is an ongoing random-digit-dialed telephone survey of adults 18 years and older regarding their health related risk behaviors, chronic health conditions, and use of preventive services. Data are collected in all 50 states, the District of Columbia and U.S. territories. It is conducted annually by the NM Department of Health Survey Section in collaboration with the Centers for Disease Control and Prevention (CDC). Responses are weighted to reflect the general NM adult population by age, sex, ethnicity, geographic region, marital status, education level, home ownership and type of phone. These data exclude institutionalized NM residents, such as those living in nursing homes or prisons. The survey was conducted using only landline phone numbers from 1986 through 2010, and expanded to cellular phone numbers in 2011. For this reason, measurements prior to 2011 should not be directly compared to measurements during and after 2011. The denominator for all of these indicators are all adults who answered the question.

Bureau of Vital Records and Health Statistics (BVRHS) Data

The BVRHS dataset contains information from death certificates for all deaths occurring in NM. Death certificates are usually filed by funeral directors who obtain demographic information from an informant, such as a close family member of the decedent. The denominator is the NM population estimate generated by the University of New Mexico Geospatial and Population Studies (GPS) Program.

Emergency Department (ED) Visit Data

The ED dataset is derived from data provided by individual non-federal EDs in NM. Data are available for 2010 through 2013. Only NM residents are included in this report. The denominator is the NM population estimate generated by the University of New Mexico GPS Program.

Hospital Inpatient Discharge Dataset (HIDD)

The HIDD includes inpatient discharges from non-federal hospitals located in NM. Inpatient discharges are defined as departures from a hospital after overnight stay, regardless of the destination after departure. Only NM residents are included in this report. The denominator is the NM population estimate generated by the University of New Mexico GPS Program.

Youth Risk and Resiliency Survey (YRRS)

The NM YRRS is administered in odd years and is part of the national Youth Risk Behavior Surveillance System (YRBSS) coordinated and designed by CDC. Each state, territorial, tribal, and large urban school district participating in YRBSS employs a two-stage, cluster sample design to produce a representative sample of students in grades 9–12 in its jurisdiction. In the first sampling stage schools are selected with probability proportional to school enrollment size. In the second sampling stage, intact classes of a required subject or intact classes during a required period (e.g., second period) are selected randomly. All students in sampled classes are eligible to participate. A weight is applied to each student record to adjust for student nonresponse and the distribution of students by grade, sex, and race/ethnicity in each jurisdiction. The denominator for each of these indicators is all students who answered the question.

Statistical Stability

The statistical stability of each percentage or rate is indicated in the tables that accompany each measure of mental health status. Statistical stability is based on a statistic called "Relative Standard Error," which is calculated as the standard error of the estimate divided by the estimate. A hyphen (-) indicates that the estimate is stable. "Unstable" is displayed when the RSE=0.30 to 0.50. An unstable count or rate may fluctuate widely across time periods due to random variation (chance). "Very Unstable" is displayed when the RSE is greater than 0.50. A very unstable count or rate should not be used to inform decisions. To achieve a more stable count or rate, the population size may be increased by combining years, for example. "No Variance" is displayed when the rate is zero and the RSE cannot be calculated.

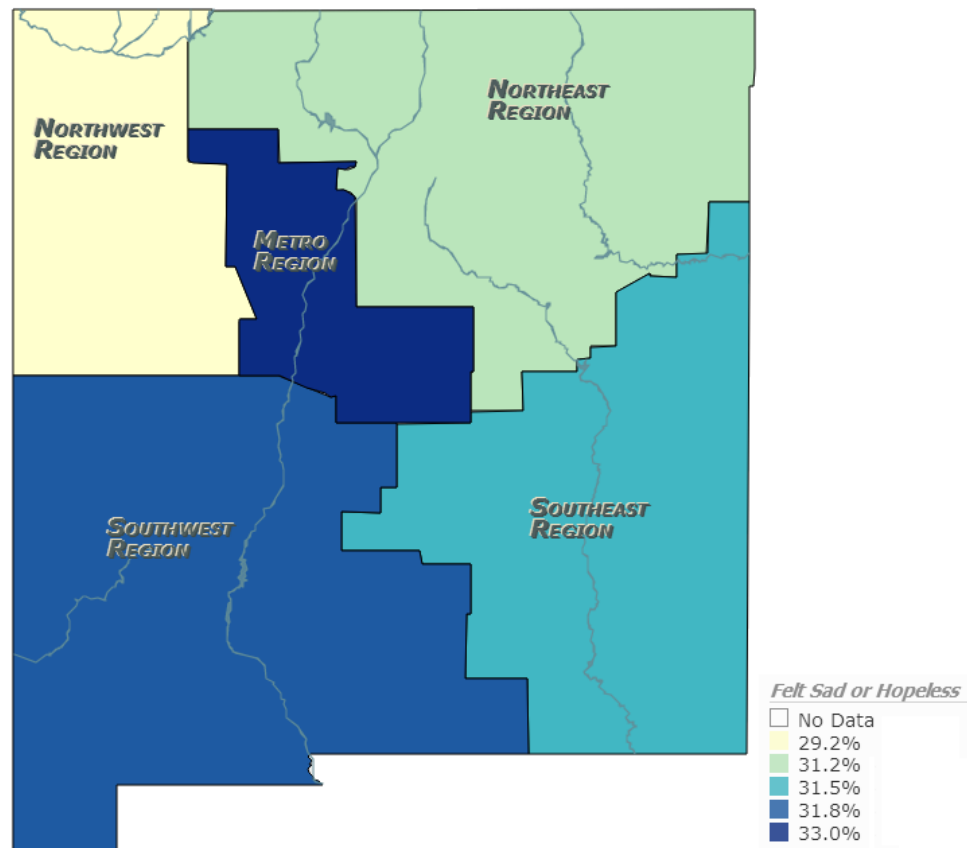
1 MENTAL HEALTH IN THE GENERAL POPULATION

1.1 YOUTH SADNESS OR HOPELESSNESS IN THE PAST YEAR

Persistent feelings of sadness or hopelessness are a risk factor for depression. Students who report persistent feelings of sadness or hopelessness are more likely than other students to report suicide attempts, cigarette smoking, binge drinking and illicit drug use. According to the National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention’s Division for Adolescent and School Health (DASH), the prevalence of persistent feelings of sadness or hopelessness among youth in NM and the US have remained relatively stable since 2001. In 2013, the NM rate (30.5%) was similar to the US rate (29.9%). In the same year, NM had the fourth highest prevalence of persistent feelings of sadness or hopelessness among youth out of the 42 states that asked this question in the YRBSS. NM has ranked among the top ten states for this indicator since beginning the survey.

Students with persistent feelings of sadness or hopelessness were identified by answering "Yes", to the question, "During the past 12 months, did you ever feel so sad or hopeless almost every day for two weeks or more in a row that you stopped doing some usual activities?" More information: https://ibis.health.state.nm.us/indicator/view/MentHlthYouth.Year.NM_US.html.

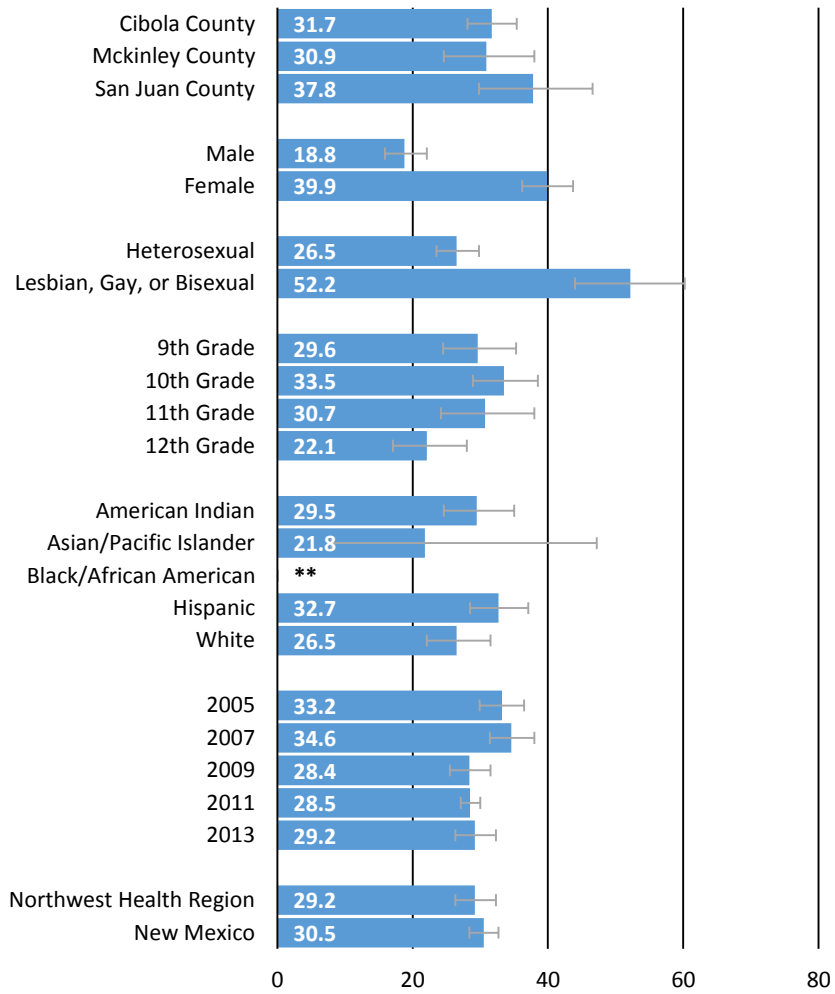
Percentage of Students Who Felt Sad or Hopeless by Health Region, New Mexico, 2013



Percentage of Students Who Felt Sad or Hopeless During the Past 12 Months

Northwest Health Region

2013



Source: New Mexico Youth Risk and Resiliency Survey, New Mexico Department of Health and Public Education Department and National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention, Division of Adolescent and School Health.

[Back to Table of Contents](#)

Northwest Health Region**Percentage of Students Who Felt Sad or Hopeless During the Past 12 Months****2013**

	Count	Sample Size	Percentage	LCL	UCL	Statistical Stability
Cibola County	269	853	31.7	28.1	35.4	-
Mckinley County	194	666	30.9	24.6	38.0	-
San Juan County	106	296	37.8	29.8	46.6	-
Male	332	1,538	18.8	15.9	22.1	-
Female	561	1,500	39.9	36.2	43.7	-
Heterosexual	684	2,584	26.5	23.5	29.8	-
Lesbian, Gay, or Bisexual	153	290	52.2	44.0	60.2	-
9th Grade	314	1,018	29.6	24.5	35.3	-
10th Grade	243	771	33.5	28.9	38.5	-
11th Grade	184	674	30.7	24.2	38.0	-
12th Grade	148	555	22.1	17.1	28.0	-
American Indian	455	1,619	29.5	24.6	35.0	-
Asian/Pacific Islander	17	51	21.8	8.0	47.2	Very Unstable n/a
Black/African American	**	**	**	**	**	
Hispanic	274	834	32.7	28.5	37.1	
White	129	463	26.5	22.1	31.5	-
2005	398	1,237	33.2	29.9	36.5	-
2007	556	1,607	34.6	31.4	38.0	-
2009	632	2,178	28.4	25.5	31.5	-
2011	1,472	5,264	28.5	27.1	30.0	-
2013	893	3,039	29.2	26.3	32.3	-
Northwest Health Region	893	3,039	29.2	26.3	32.3	-
New Mexico	1,655	5,432	30.5	28.4	32.7	-
United States		13,495	29.9	28.3	31.6	-

Source: New Mexico Youth Risk and Resiliency Survey, New Mexico Department of Health and Public Education Department and National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention, Division of Adolescent and School Health.

Percentage of students who felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities during the past 12 months

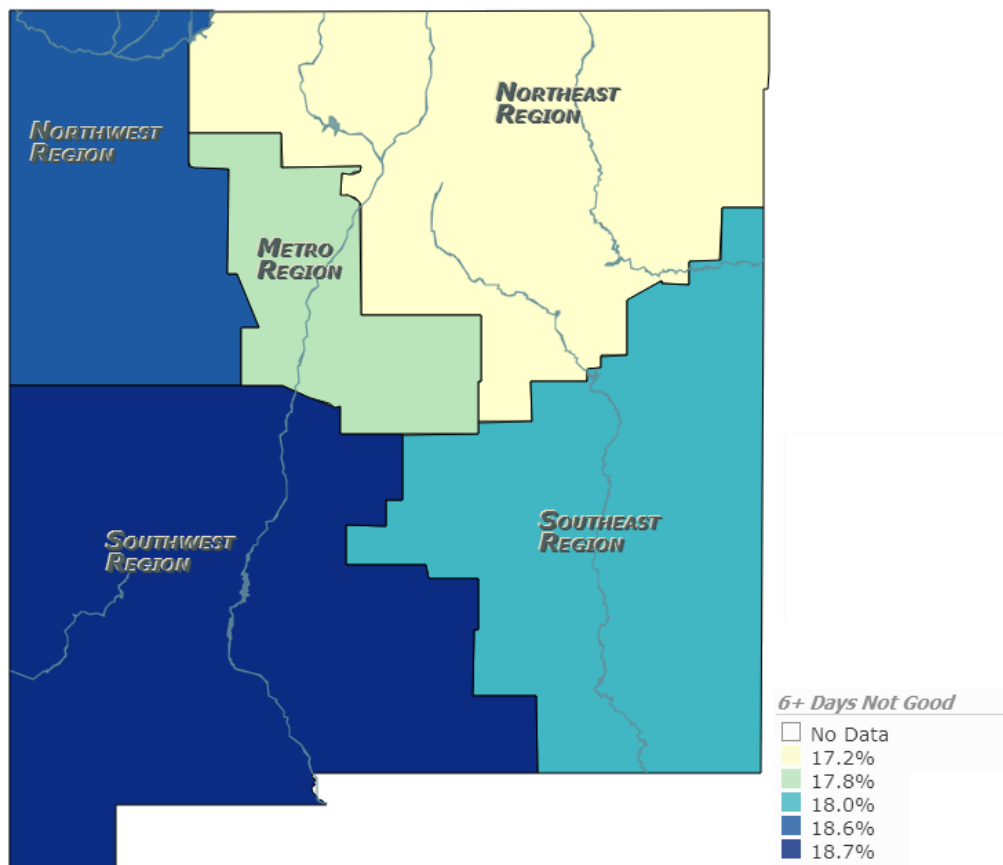
** The values in these cells have been suppressed because there were fewer than 50 survey responses.

1.2 ADULT FREQUENT MENTAL DISTRESS

Mental health and mental disorders can be influenced by numerous factors including biologic and genetic vulnerabilities, acute or chronic physical dysfunction, and environmental conditions and stresses. According to the Substance Abuse and Mental Health Services Administration (SAMHSA), approximately 1 in 5 people in the US population is affected by mental illness in any given year. The BRFSS frequent mental distress question is an attempt to obtain a global measure of recent mental and emotional distress. According to the National Center for Chronic Disease Prevention and Health Promotion’s Division of Population Health, the prevalence of frequent mental distress in NM has consistently been similar to the overall US prevalence from 2011 through 2013. Over this time period, the prevalence in NM has remained relatively stable. In 2013, 17.9% of NM adults reported frequented mental distress, compared to 16.9% of US adults.

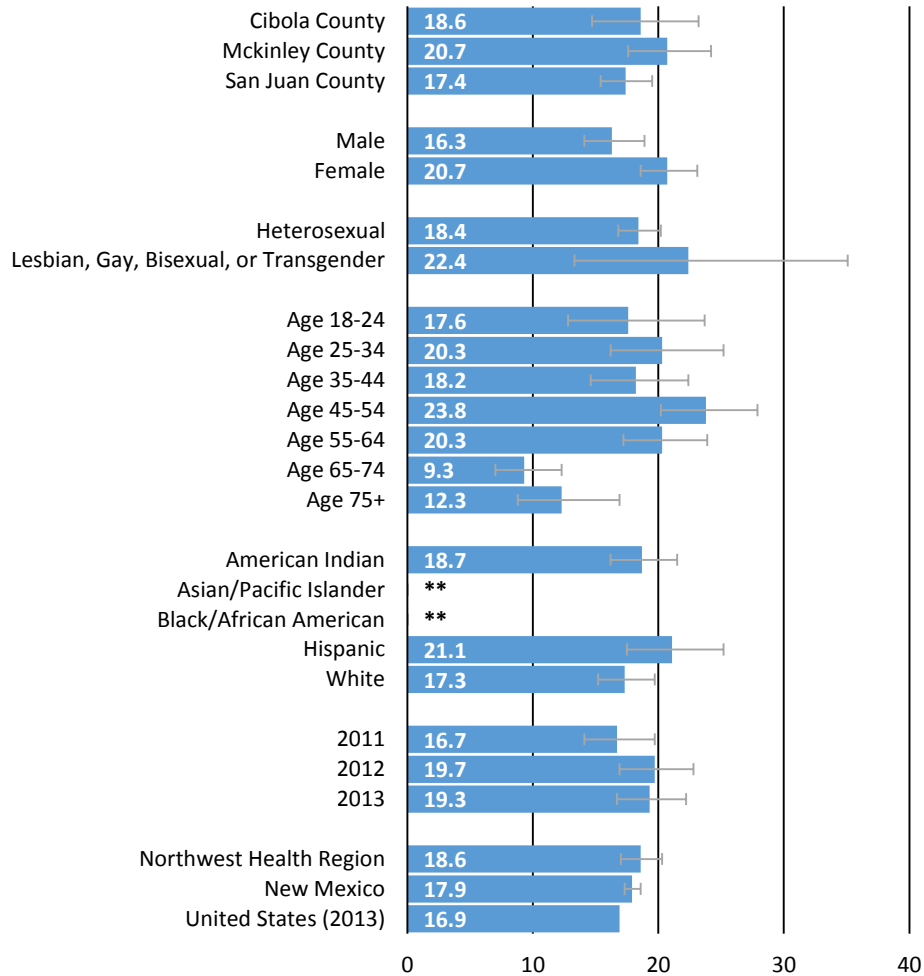
Frequent mental distress was identified by answering six or more to the question “Now, thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health not good?”

Percentage of Adults with Mental Health "Not Good" 6 or More of the Past 30 Days by Health Region, New Mexico, 2011-2013



Percentage of Respondents with Mental Health "Not Good" 6 or More of the Past 30 Days

Northwest Health Region
2011-2013



Source: New Mexico Department of Health, Behavioral Risk Factor Surveillance System (BRFSS) and National Center for Chronic Disease Prevention and Health Promotion, Division of Population Health.

[Back to Table of Contents](#)

Northwest Health Region**Percentage of Respondents with Mental Health "Not Good" 6 or More of the Past 30 Days****2011-2013**

	Count	Sample Size	Percentage	LCL	UCL	Statistical Stability
Cibola County	105	582	18.6	14.7	23.2	-
Mckinley County	217	1,168	20.7	17.6	24.2	-
San Juan County	399	2,551	17.4	15.4	19.5	-
Male	242	1,691	16.3	14.1	18.9	-
Female	479	2,610	20.7	18.6	23.1	-
Heterosexual	678	4081	18.4	16.8	20.2	-
Lesbian, Gay, Bisexual, or Transgender	21	74	22.4	13.3	35.1	-
Age 18-24	48	251	17.6	12.8	23.7	-
Age 25-34	94	464	20.3	16.2	25.2	-
Age 35-44	100	550	18.2	14.6	22.4	-
Age 45-54	170	730	23.8	20.2	27.9	-
Age 55-64	175	1,016	20.3	17.2	23.9	-
Age 65-74	77	704	9.3	7.0	12.3	-
Age 75+	52	542	12.3	8.8	16.9	-
American Indian	238	1,210	18.7	16.2	21.5	-
Asian/Pacific Islander	**	24	**	**	**	n/a
Black/African American	**	20	**	**	**	n/a
Hispanic	159	836	21.1	17.5	25.2	-
White	314	2,138	17.3	15.2	19.7	-
2011	216	1,359	16.7	14.1	19.7	-
2012	214	1,100	19.7	16.9	22.8	-
2013	291	1,842	19.3	16.7	22.2	-
Northwest Health Region	721	4,301	18.6	17.0	20.3	-
New Mexico	4,625	26,734	17.9	17.3	18.6	-
United States (2013)	73,024	483,138	16.9	16.7	17.1	-

Source: New Mexico Department of Health, Behavioral Risk Factor Surveillance System (BRFSS) and National Center for Chronic Disease Prevention and Health Promotion, Division of Population Health.

Now thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health not good?

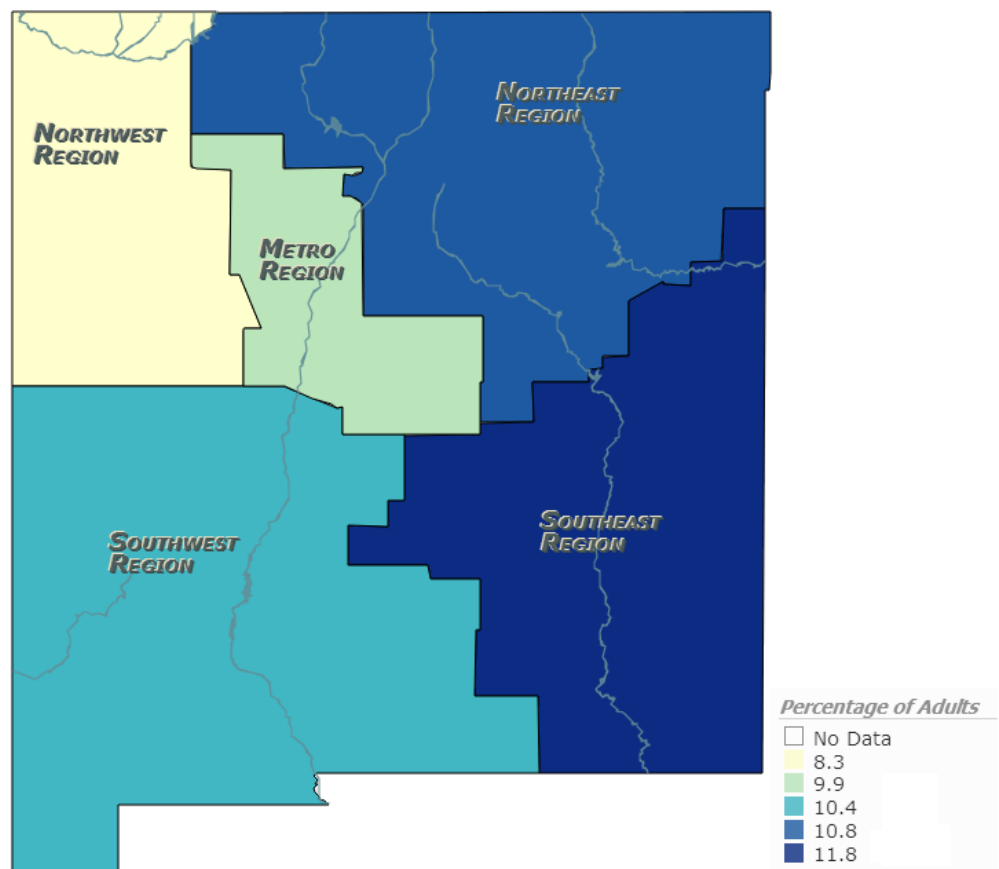
1.3 ADULT DEPRESSION

Depression is one of the most prevalent and treatable mental disorders. Major depression is usually associated with co-morbid mental disorders, such as anxiety and substance use disorders, and impairment of a person's ability to function in work, home, relationships, and social roles. Depression is also a risk factor for suicide and attempted suicide. In addition, depressive disorders have been associated with an increased risk of chronic medical conditions, such as heart disease, stroke, asthma, arthritis, cancer, diabetes, and obesity. In 2011, 10.2% of NM adults reported symptoms of current depression.

The Anxiety and Depression Module in the 2011 NM BRFSS included the first eight questions from the Patient Health Questionnaire, an instrument that can establish a provisional depressive disorder diagnosis using Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition criteria. Patients were asked about symptoms occurring within the two weeks prior to the survey. For some regions, sexual orientation data are not available due to the low number of respondents. US data are not available because this was an optional module. More Information:

<https://ibis.health.state.nm.us/indicator/view/MentHlthAdultDepression.Age.SexRacEth.html>.

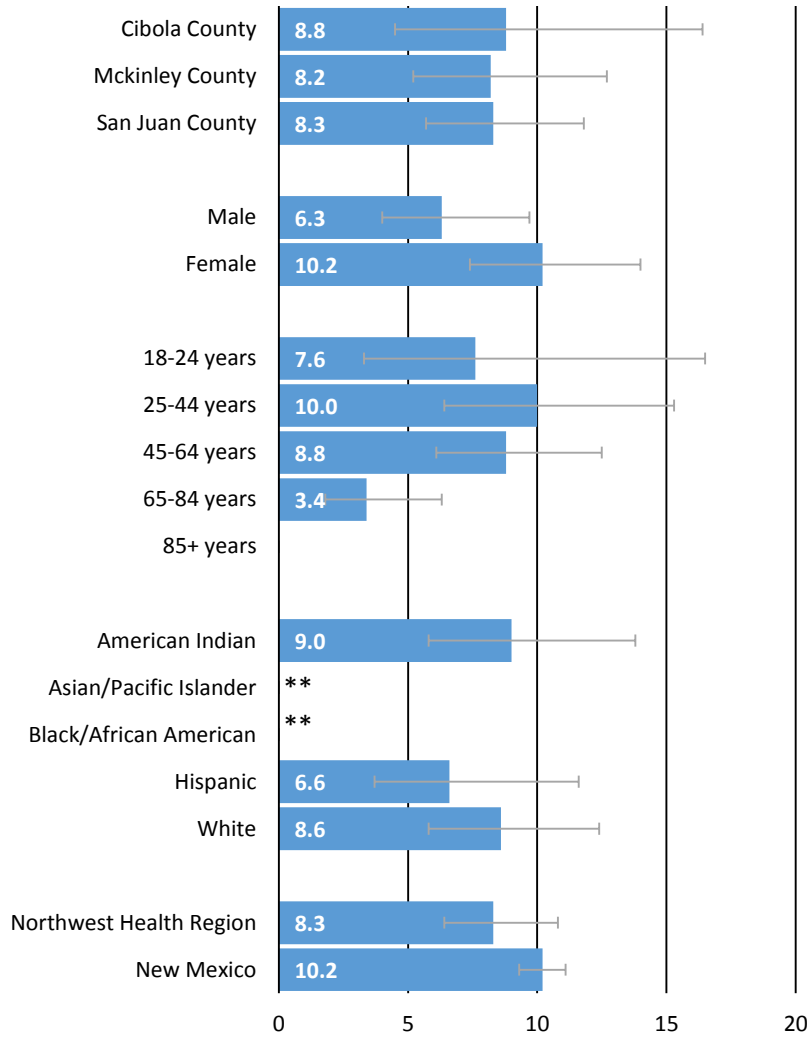
Percentage of Adults with Current Depression by Health Region, New Mexico, 2011



Percentage of Adults with Current Depression

Northwest Health Region

2011



Source: New Mexico Department of Health, Behavioral Risk Factor Surveillance System (BRFSS)

[Back to Table of Contents](#)

Northwest Health Region
Percentage of Adults with Current Depression
2011

	Count	Sample Size	Percentage	LCL	UCL	Statistical Stability
Cibola County	12	152	8.8	4.5	16.4	Unstable
Mckinley County	27	363	8.2	5.2	12.7	-
San Juan County	54	634	8.3	5.7	11.8	-
Male	30	454	6.3	4.0	9.7	-
Female	63	695	10.2	7.4	14.0	-
18-24 years	7	63	7.6	3.3	16.5	Very Unstable
25-44 years	27	278	10.0	6.4	15.3	-
45-64 years	46	490	8.8	6.1	12.5	-
65-84 years	12	277	3.4	1.8	6.3	Unstable
85+ years	**	**	**	**	**	n/a
American Indian	28	297	9.0	5.8	13.8	-
Asian/Pacific Islander	**	**	**	**	**	n/a
Black/African American	**	**	**	**	**	n/a
Hispanic	19	248	6.6	3.7	11.6	Unstable
White	45	568	8.6	5.8	12.4	-
Northwest Health Region	93	1,149	8.3	6.4	10.8	-
New Mexico	753	7,923	10.2	9.3	11.1	-

Source: New Mexico Department of Health, Behavioral Risk Factor Surveillance System (BRFSS)

Adult depression was assessed using the Patient Health Questionnaire, which establishes a provisional depressive disorder diagnosis using Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition criteria.

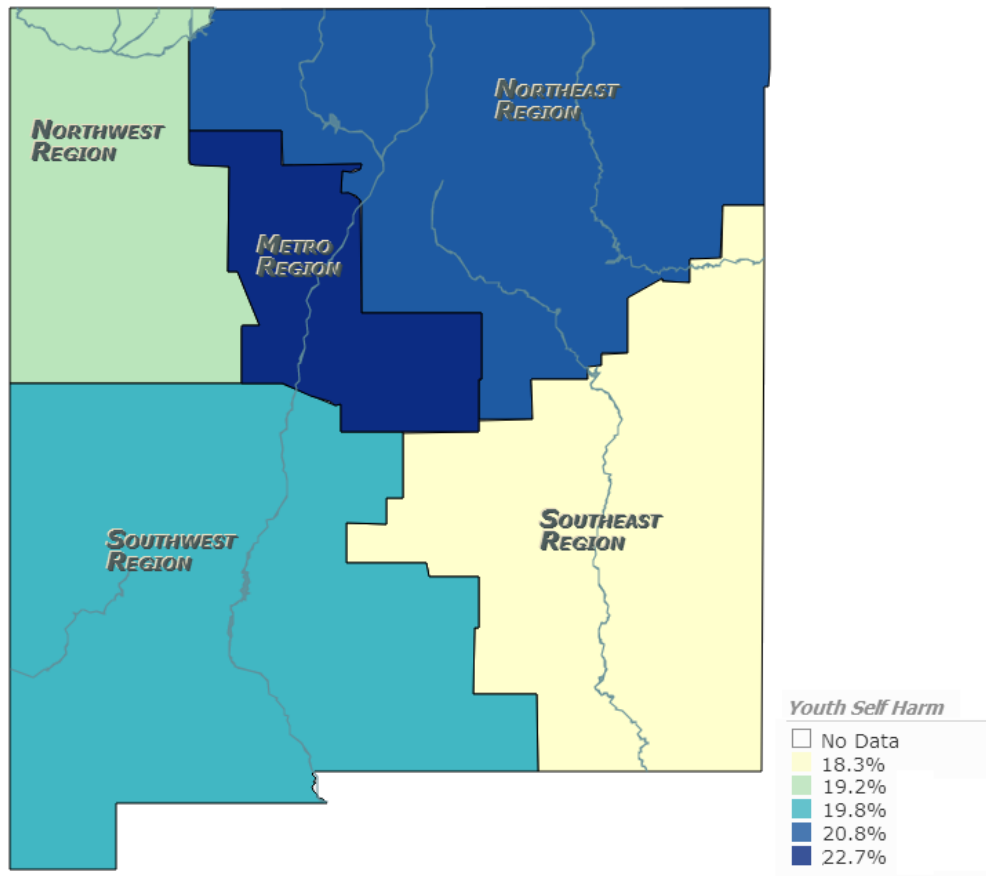
** The values in these cells have been suppressed because there were fewer than 50 survey responses.

2 YOUTH NON-SUICIDAL SELF HARM

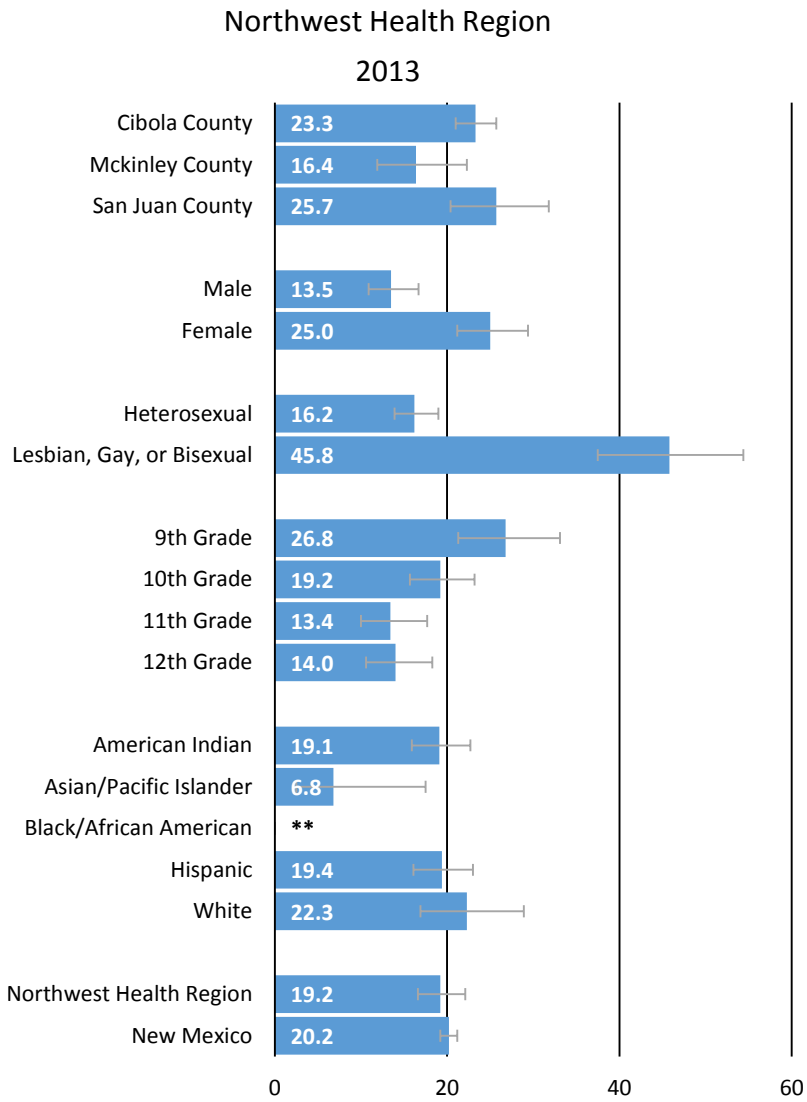
Anxiety and depression, as well as a range of stressful life events, are correlated with non-suicidal self harm. Self harm is a strong predictor of suicide and attempted suicide. In 2013, 20.2% of NM high school students reported non-suicidal self harm in the past year.

Non-suicidal self harm was identified by answering one or more to the question “During the past 12 months, how many times did you do something to purposely hurt yourself without wanting to die, such as cutting or burning yourself on purpose?” Only one year of data is available because this question was added in 2013. US data are not available because this question was not asked by all participating states.

Percentage of Students Who Intentionally Hurt Themselves in the Past 12 Months by Health Region, New Mexico, 2013



Percentage of Students Who Intentionally Hurt Themselves in the Past 12 Months



Source: New Mexico Youth Risk and Resiliency Survey, New Mexico Department of Health and Public Education Department.

[Back to Table of Contents](#)

Northwest Health Region**Percentage of Students Who Intentionally Hurt Themselves in the Past 12 Months
2013**

	Count	Sample Size	Percentage	LCL	UCL	Statistical Stability
Cibola County	198	853	23.3	21.0	25.7	-
Mckinley County	147	665	16.4	11.9	22.3	-
San Juan County	76	296	25.7	20.4	31.8	-
Male	253	1,536	13.5	10.9	16.7	-
Female	401	1,500	25.0	21.2	29.4	-
Heterosexual	464	2585	16.2	13.9	19	-
Lesbian, Gay, or Bisexual	135	289	45.8	37.5	54.4	-
9th Grade	270	1,017	26.8	21.3	33.1	-
10th Grade	175	774	19.2	15.7	23.2	-
11th Grade	114	673	13.4	10.0	17.7	-
12th Grade	91	553	14.0	10.6	18.3	-
American Indian	358	1,619	19.1	15.9	22.7	-
Asian/Pacific Islander	9	50	6.8	2.5	17.5	Very Unstable
Black/African American	**	**	**	**	**	n/a
Hispanic	181	833	19.4	16.1	23.0	-
White	91	464	22.3	16.9	28.9	-
Northwest Health Region	654	3,037	19.2	16.6	22.1	-
New Mexico	1,123	5,434	20.2	19.2	21.2	-

Source: New Mexico Youth Risk and Resiliency Survey, New Mexico Department of Health and Public Education Department.

Percentage of students who actually attempted suicide one or more times during the past 12 months.

** The values in these cells have been suppressed because there were fewer than 50 survey responses.

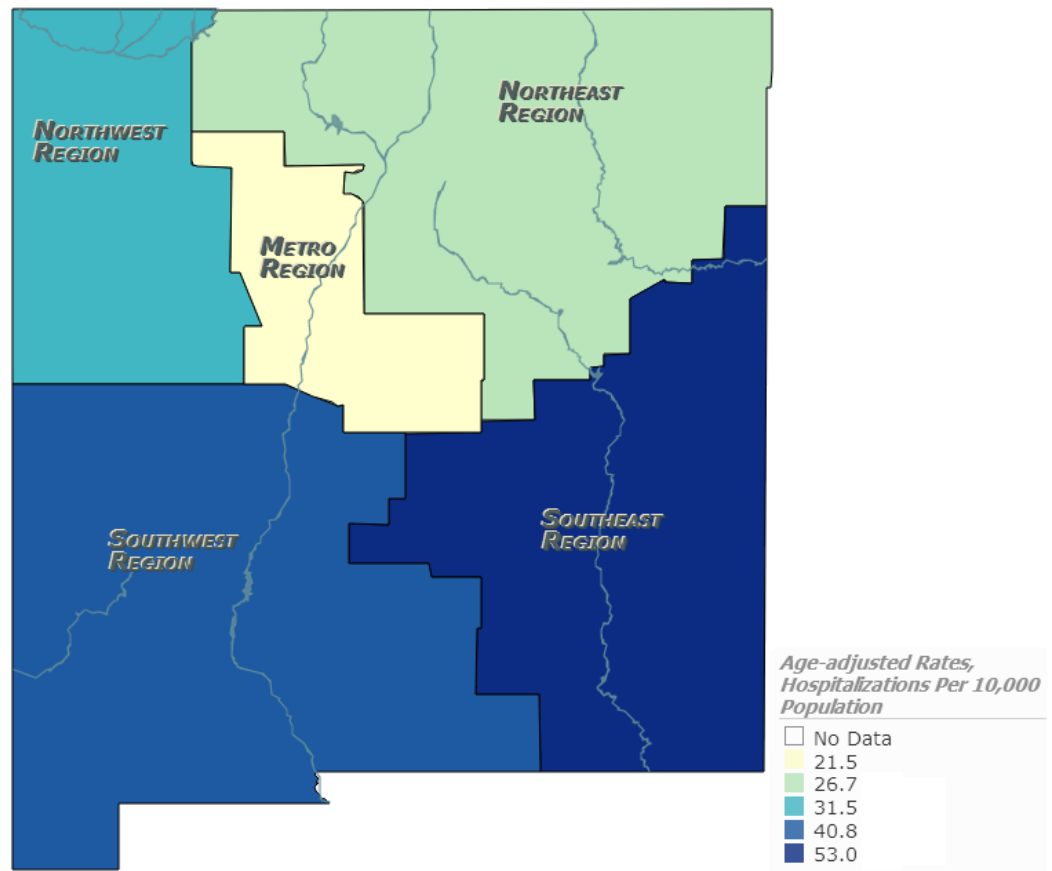
3 ACUTE MENTAL ILLNESS

3.1 HOSPITAL DISCHARGES FOR MOOD DISORDERS

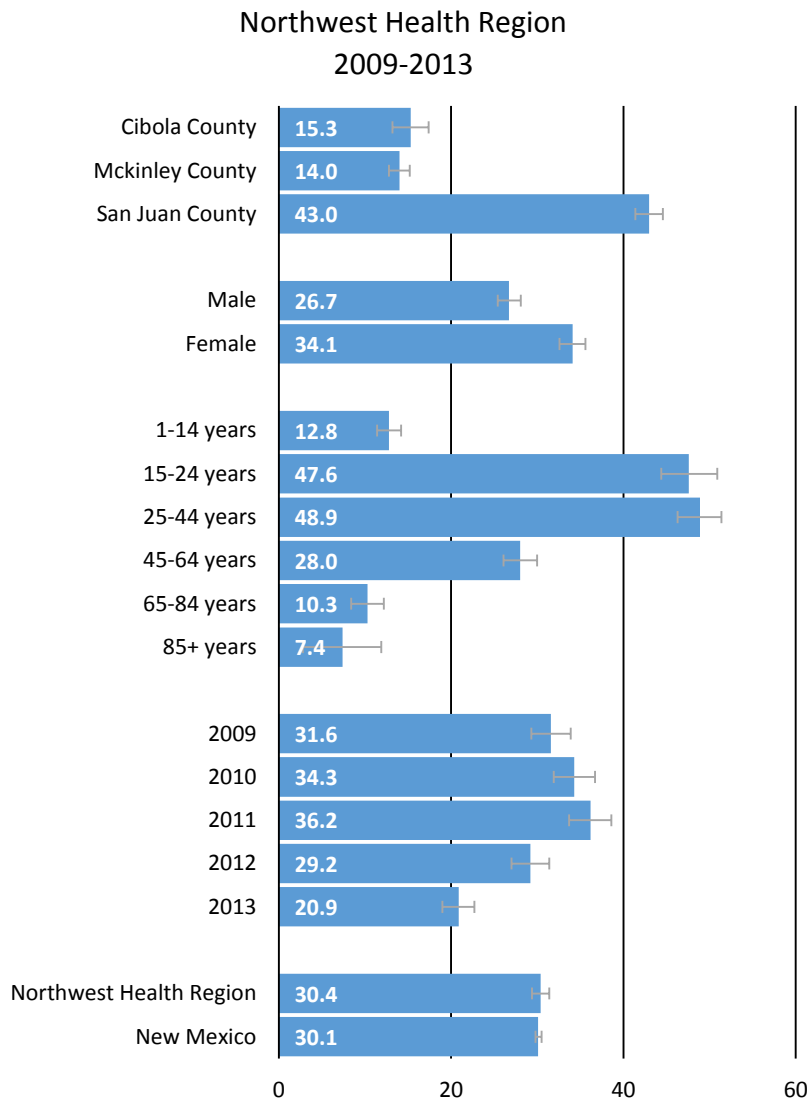
Mental disorders cause changes in thinking, mood, and behavior and can affect decision-making and quality of life. Acute episodes of mental illness often result in hospitalizations. In 2013, mood disorders were the most common reason for psychiatric hospital admission in NM. Approximately 126,000 NM residents 12 years or older have a major depressive disorder each year (SAMHSA). In a 2012-2013 survey of all fifty states and the District of Columbia, NM ranked 23rd for prevalence of major depressive disorder among adults, and 9th for prevalence among adolescents 12-17 years. From 2009-2013, there were 30.1 hospital discharges for mood disorders per 10,000 NM residents.

Hospital discharges for mood disorders include inpatient hospital records with a primary diagnosis of ICD-9 codes 296 (episodic mood disorders) or 311 (depressive disorder). Sexual orientation data are not submitted to the HIDD dataset. Race/ethnicity data are not reported due to the high prevalence of missing entries. US hospital data are not available for this timeframe.

Hospital Discharges for Episodic Mood and Depressive Disorders per 10,000 Population by Health Region, New Mexico, 2009-2013



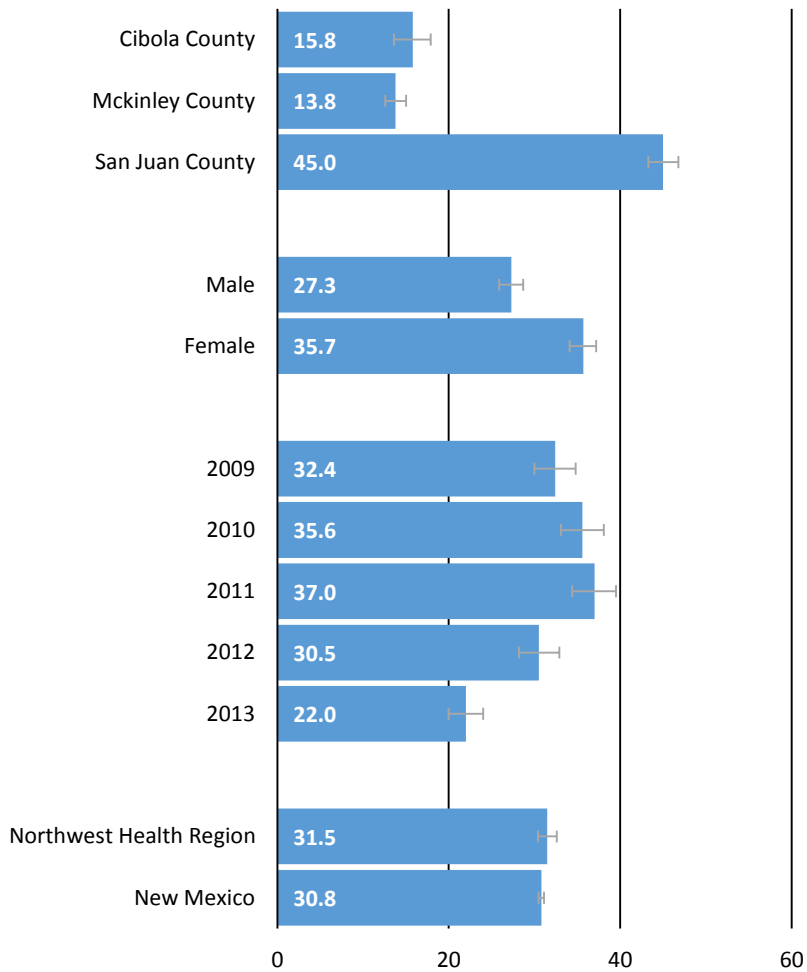
Hospital Discharges for Episodic Mood and Depressive Disorders per 10,000 Population



Source: Hospital Inpatient Discharge Data, New Mexico Department of Health, Health Systems Epidemiology Program

Hospital Discharges for Episodic Mood and Depressive Disorders per 10,000 Population *

Northwest Health Region
2009-2013



Source: Hospital Inpatient Discharge Data, New Mexico Department of Health, Health Systems Epidemiology Program

* Age-adjusted to the U.S. 2000 standard population.

[Back to Table of Contents](#)

Northwest Health Region

Hospital Discharges for Episodic Mood and Depressive Disorders per 10,000 Population

2009-2013

	Number of Discharges	Person-Years	Crude Rate	LCL	UCL	Statistical Stability	AA Rate*	LCL	UCL	Statistical Stability
Cibola County	209	136,494	15.3	13.2	17.4	-	15.8	13.6	17.9	-
Mckinley County	510	364,351	14.0	12.8	15.2	-	13.8	12.6	15.0	-
San Juan County	2762	642,732	43.0	41.4	44.6	-	45.0	43.3	46.8	-
Male	1,509	564,734	26.7	25.4	28.1	-	27.3	25.9	28.7	-
Female	1,972	578,843	34.1	32.6	35.6	-	35.7	34.1	37.2	-
1-14 years	329	257,025	12.8	11.4	14.2	-				
15-24 years	832	174,652	47.6	44.4	50.9	-				
25-44 years	1,410	288,566	48.9	46.3	51.4	-				
45-64 years	787	280,714	28.0	26.1	30.0	-				
65-84 years	113	110,180	10.3	8.4	12.2	-				
85+ years	10	13,593	7.4	2.8	11.9	Unstable				
2009	718	227,364	31.6	29.3	33.9	-	32.4	30.0	34.8	-
2010	786	229,157	34.3	31.9	36.7	-	35.6	33.1	38.1	-
2011	830	229,368	36.2	33.7	38.6	-	37.0	34.4	39.5	-
2012	671	229,584	29.2	27.0	31.4	-	30.5	28.2	32.9	-
2013	476	228,104	20.9	19.0	22.7	-	22.0	20.0	24.0	-
Northwest Health Region	3,481	1,143,577	30.4	29.4	31.4	-	31.5	30.4	32.6	-
New Mexico	31,242	10,371,635	30.1	29.8	30.5	-	30.8	30.5	31.1	-

Source: Hospital Inpatient Discharge Data, New Mexico Department of Health, Health Systems Epidemiology Program
ICD-9 Codes 296 & 311

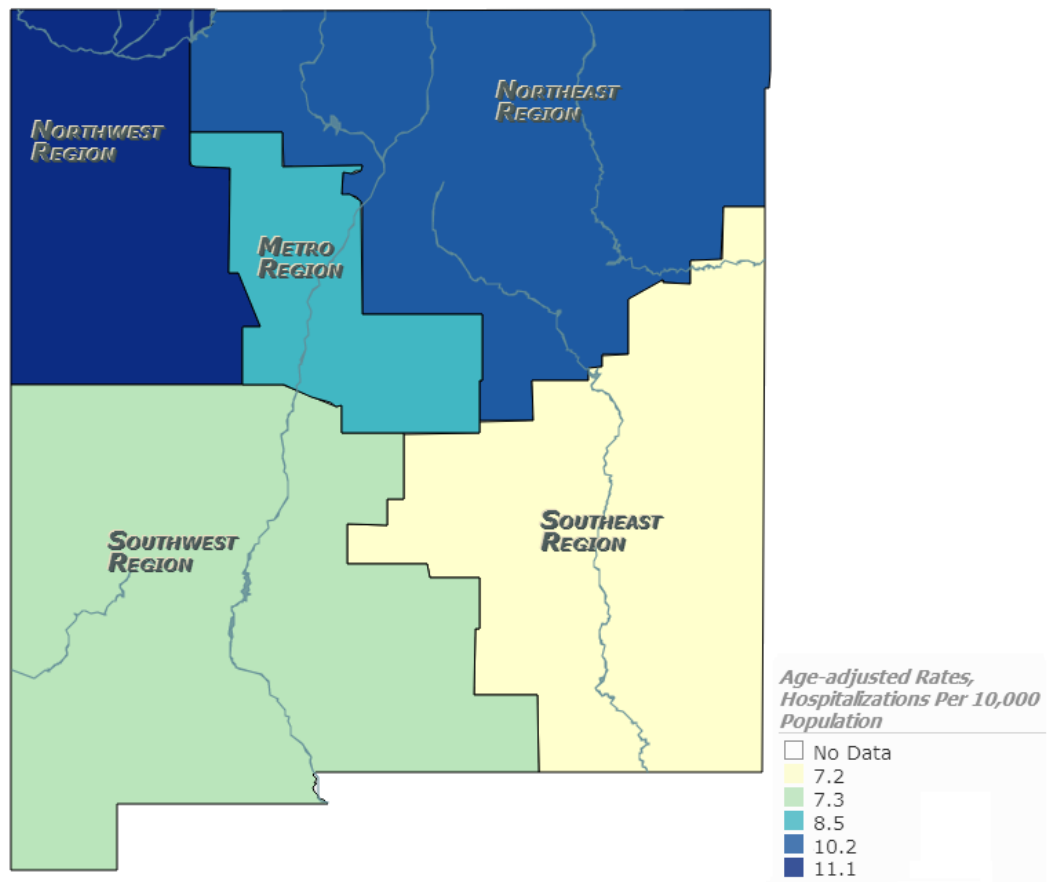
* Age-adjusted to the U.S. 2000 standard population.

3.2 HOSPITAL DISCHARGES FOR ALCOHOL-RELATED MENTAL DISORDERS

Alcohol-related mental disorders include alcohol-induced mental disorders and alcohol dependence. Acute episodes of alcohol-related mental disorders often result in hospitalizations. In 2013, alcohol-related mental disorders were the second most common reason for psychiatric hospital admission in NM. Approximately 133,000 NM residents 12 years or older experience alcohol abuse or dependence each year (Source: SAMHSA). In a 2012-2013 survey of all fifty states and the District of Columbia, NM ranked 15th for prevalence of alcohol abuse or dependence among adults, and 6th for prevalence among adolescents 12-17 years. From 2009-2013, there were 8.3 hospital discharges for alcohol-related mental disorders per 10,000 NM residents.

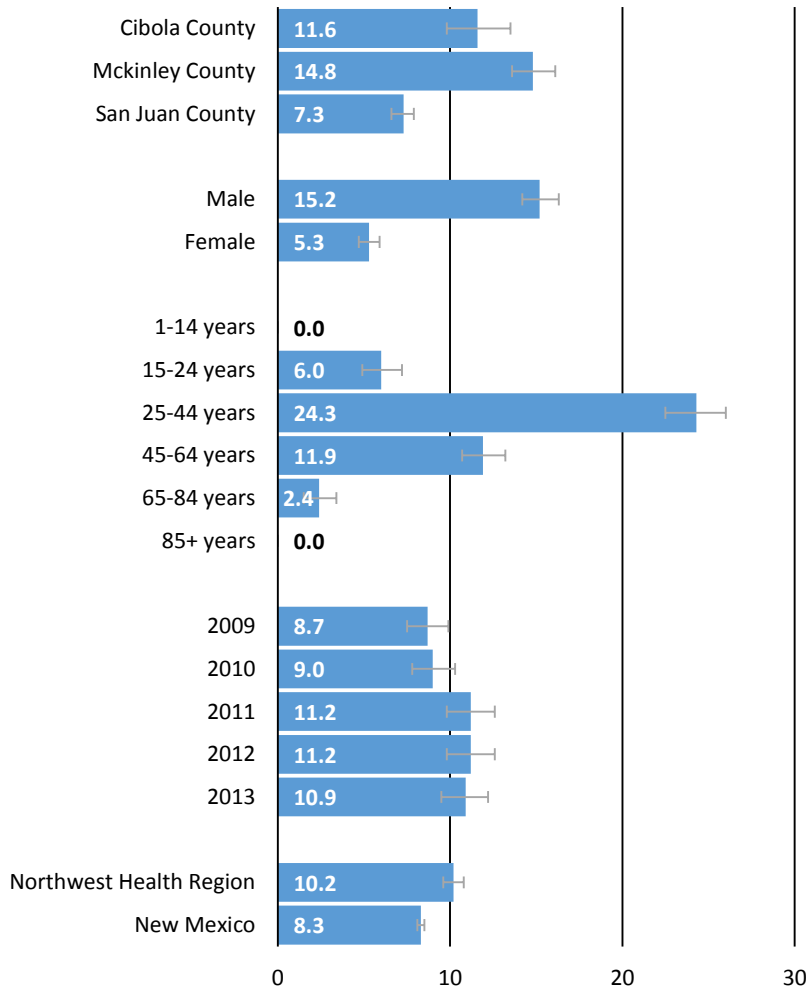
Hospital discharges for alcohol-related mental disorders include inpatient hospital records with a primary diagnosis of ICD-9 codes 291 (alcohol-induced mental disorder) or 303 (alcohol dependence). Sexual orientation data are not submitted to the HIDD dataset. Race/ethnicity data are not reported due to the high prevalence of missing entries. US hospital data are not available for this timeframe.

Hospital Discharges for Alcohol-Related Mental Disorders per 10,000 Population by Health Region, New Mexico, 2009-2013



Hospital Discharges for Alcohol-Related Mental Disorders per 10,000 Population

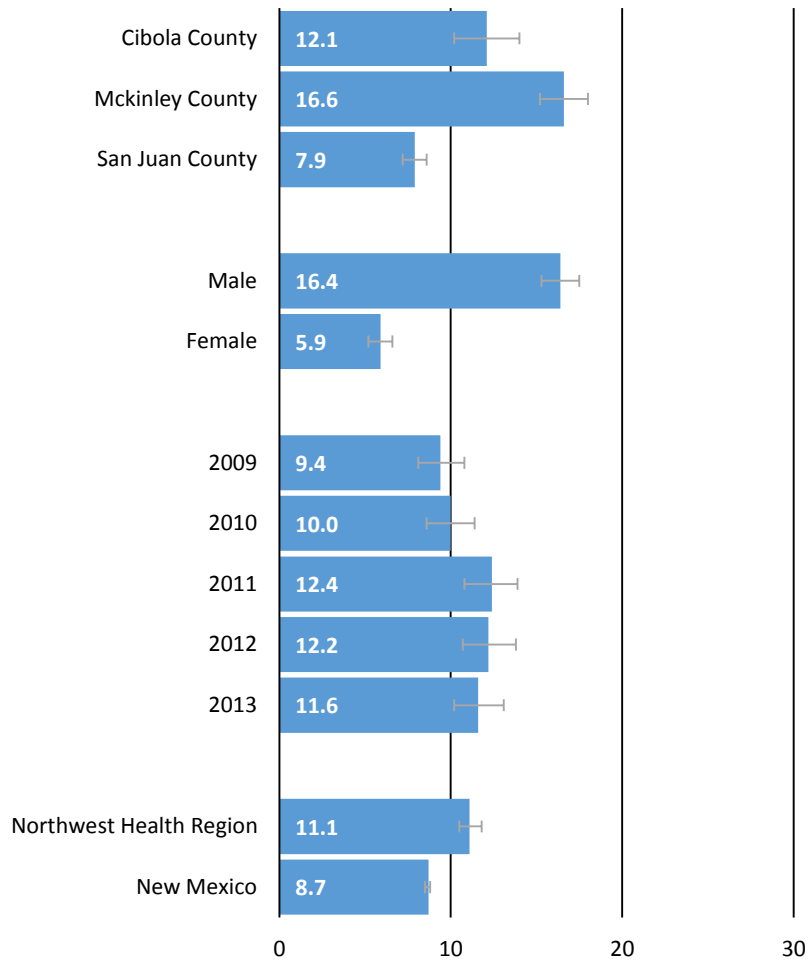
Northwest Health Region
2009-2013



Source: Hospital Inpatient Discharge Data, New Mexico Department of Health, Health Systems Epidemiology Program

Hospital Discharges for Alcohol-Related Mental Disorders per 10,000 Population*

Northwest Health Region
2009-2013



Source: Hospital Inpatient Discharge Data, New Mexico Department of Health, Health Systems Epidemiology Program

* Age-adjusted to the U.S. 2000 standard population.

[Back to Table of Contents](#)

Northwest Health Region
Hospital Discharges for Alcohol-Related Mental Disorders per 10,000 Population
2009-2013

	Number of Discharges	Person-Years	Crude Rate	LCL	UCL	Statistical Stability	AA Rate	LCL	UCL	Statistical Stability
Cibola County	159	136,494	11.6	9.8	13.5	-	12.1	10.2	14.0	-
Mckinley County	541	364,351	14.8	13.6	16.1	-	16.6	15.2	18.0	-
San Juan County	467	642,732	7.3	6.6	7.9	-	7.9	7.2	8.6	-
Male	861	564,734	15.2	14.2	16.3	-	16.4	15.3	17.5	-
Female	306	578,843	5.3	4.7	5.9	-	5.9	5.2	6.6	-
1-14 years	0	257,025	0.0	-	-	No Variance				
15-24 years	105	174,652	6.0	4.9	7.2	-				
25-44 years	700	288,566	24.3	22.5	26.0	-				
45-64 years	335	280,714	11.9	10.7	13.2	-				
65-84 years	27	110,180	2.4	1.5	3.4	-				
85+ years	0	13,593	0.0	-	-	No Variance				
2009	198	227,364	8.7	7.5	9.9	-	9.4	8.1	10.8	-
2010	207	229,157	9.0	7.8	10.3	-	10.0	8.6	11.4	-
2011	257	229,368	11.2	9.8	12.6	-	12.4	10.8	13.9	-
2012	257	229,584	11.2	9.8	12.6	-	12.2	10.7	13.8	-
2013	248	228,104	10.9	9.5	12.2	-	11.6	10.2	13.1	-
Northwest Health Region	1,167	1,143,577	10.2	9.6	10.8	-	11.1	10.5	11.8	-
New Mexico	8,614	10,371,635	8.3	8.1	8.5	-	8.7	8.5	8.8	-

Source: Hospital Inpatient Discharge Data, New Mexico Department of Health, Health Systems Epidemiology Program
 ICD-9 Codes 291 & 303

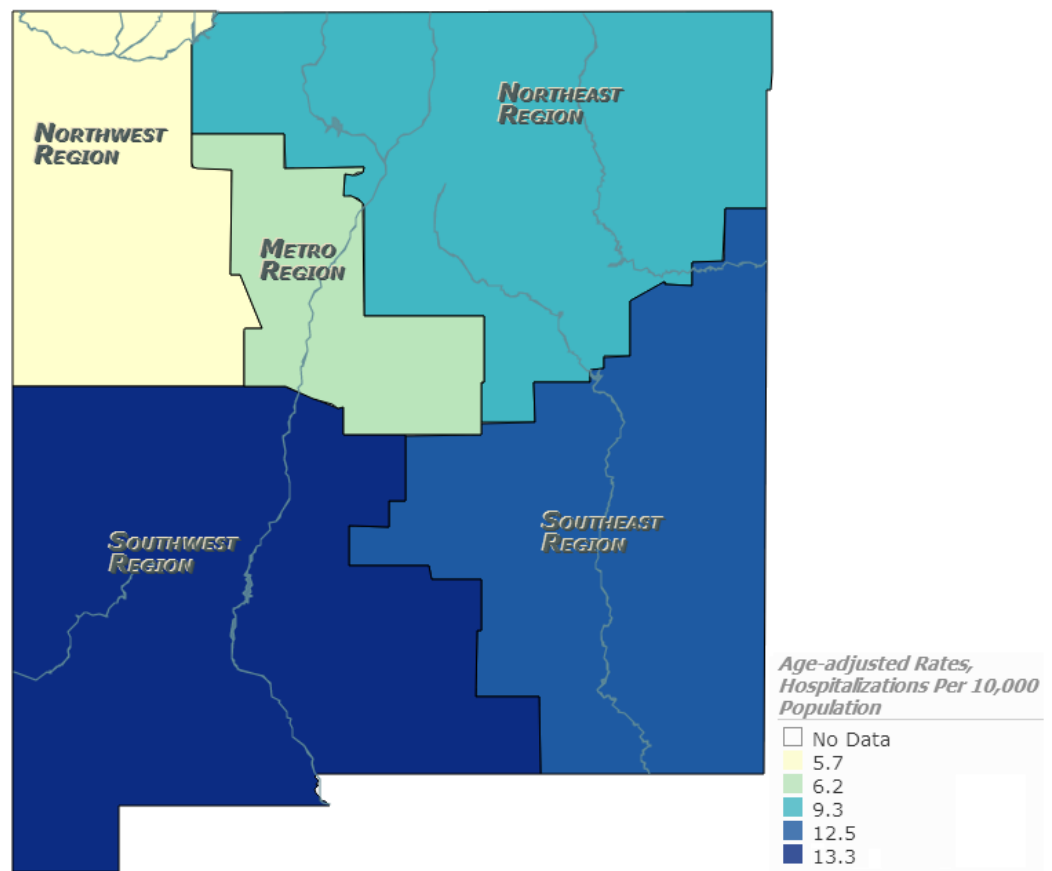
* Age-adjusted to the U.S. 2000 standard population.

3.3 HOSPITAL DISCHARGES FOR SCHIZOPHRENIC DISORDERS

Schizophrenic disorders are a group of disorders that cause a person to have trouble telling the difference between real and unreal experiences, thinking logically, having normal emotional responses, and behaving normally in social situations. Acute episodes of schizophrenia often result in hospitalizations. In 2013, schizophrenic disorders were the third most common reason for psychiatric hospital admission in NM. From 2009-2013, there were 8.4 hospital discharges for schizophrenic disorder per 10,000 NM residents.

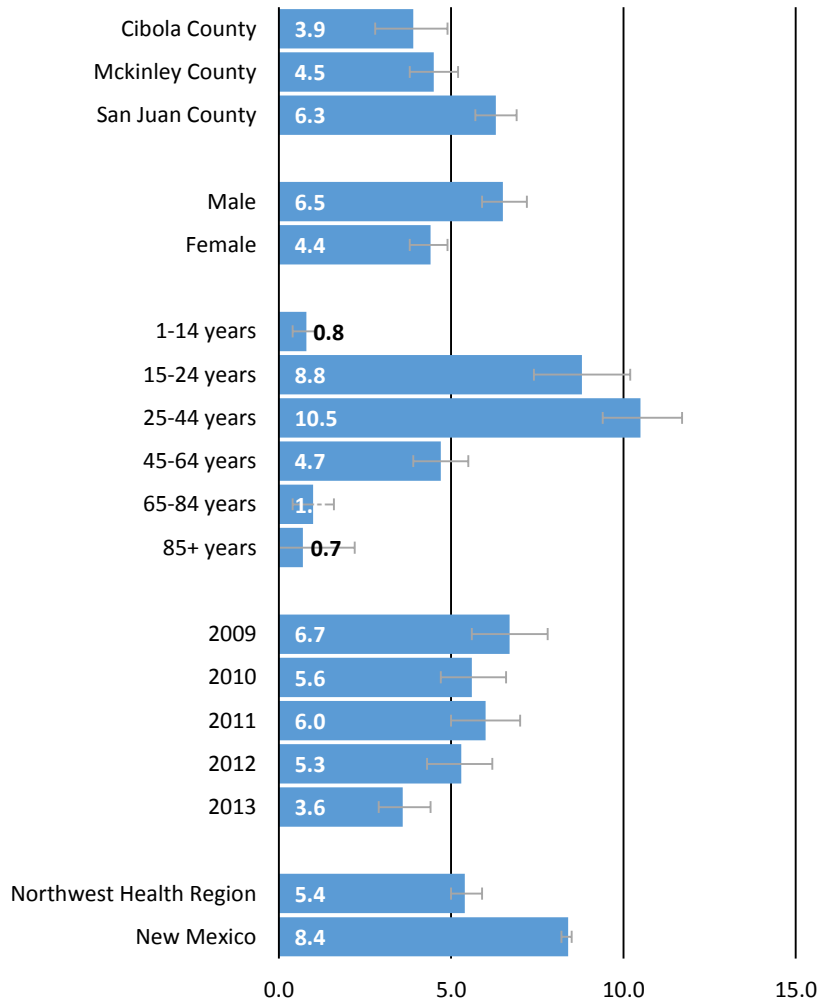
Hospital discharges for schizophrenic disorders include inpatient hospital records with a primary diagnosis of ICD-9 code 295. Sexual orientation data are not submitted to the HIDD dataset. Race/ethnicity data are not reported due to the high prevalence of missing entries. US hospital data are not available for this timeframe.

Hospital Discharges for Schizophrenic Disorders per 10,000 Population by Health Region, New Mexico, 2009-2013



Hospital Discharges for Schizophrenic Disorders
per 10,000 Population

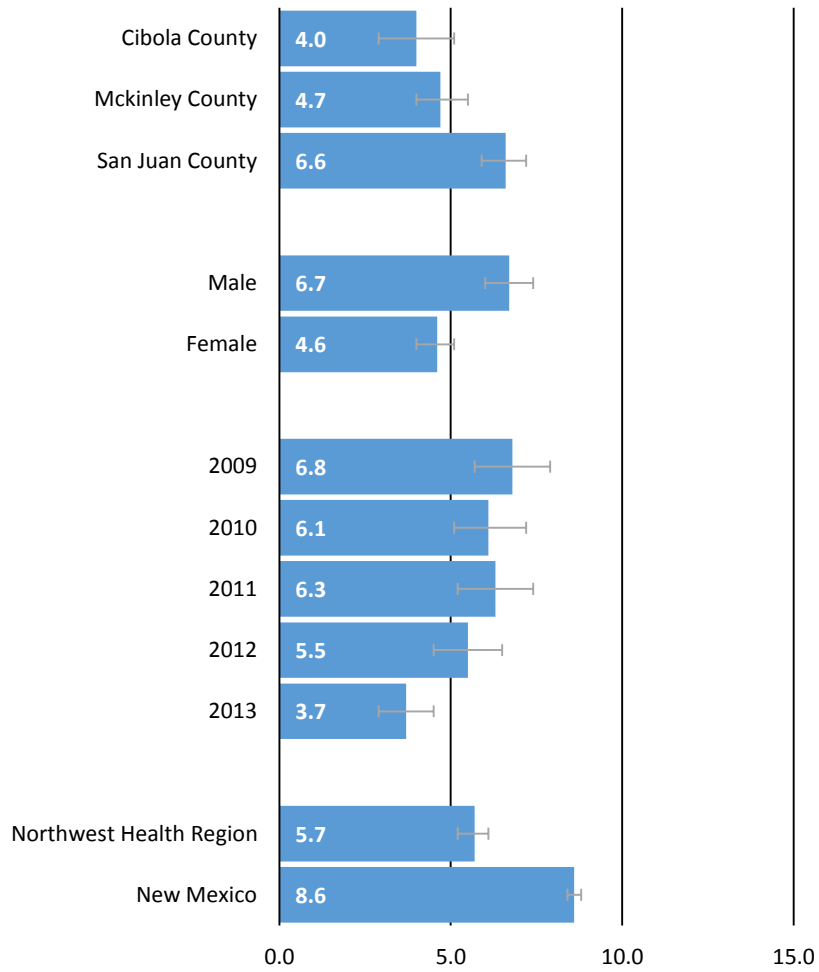
Northwest Health Region
2009-2013



Source: Hospital Inpatient Discharge Data, New Mexico Department of Health, Health Systems Epidemiology Program

Hospital Discharges for Schizophrenic Disorders
per 10,000 Population *

Northwest Health Region
2009-2013



Source: Hospital Inpatient Discharge Data, New Mexico Department of Health, Health Systems Epidemiology Program

* Age-adjusted to the U.S. 2000 standard population.

[Back to Table of Contents](#)

Northwest Health Region
Hospital Discharges for Schizophrenic Disorders per 10,000 Population
2009-2013

	Number of Discharges	Person-Years	Crude Rate	LCL	UCL	Statistical Stability	AA Rate	LCL	UCL	Statistical Stability
Cibola County	53	136,494	3.9	2.8	4.9	-	4.0	2.9	5.1	-
Mckinley County	165	364,351	4.5	3.8	5.2	-	4.7	4.0	5.5	-
San Juan County	404	642,732	6.3	5.7	6.9	-	6.6	5.9	7.2	-
Male	369	564,734	6.5	5.9	7.2	-	6.7	6.0	7.4	-
Female	253	578,843	4.4	3.8	4.9	-	4.6	4.0	5.1	-
1-14 years	20	257,025	0.8	0.4	1.1	-				
15-24 years	154	174,652	8.8	7.4	10.2	-				
25-44 years	304	288,566	10.5	9.4	11.7	-				
45-64 years	132	280,714	4.7	3.9	5.5	-				
65-84 years	11	110,180	1.0	0.4	1.6	Unstable				
85+ years	1	13,593	0.7	0.0	2.2	Very Unstable				
2009	152	227,364	6.7	5.6	7.8	-	6.8	5.7	7.9	-
2010	129	229,157	5.6	4.7	6.6	-	6.1	5.1	7.2	-
2011	137	229,368	6.0	5.0	7.0	-	6.3	5.2	7.4	-
2012	121	229,584	5.3	4.3	6.2	-	5.5	4.5	6.5	-
2013	83	228,104	3.6	2.9	4.4	-	3.7	2.9	4.5	-
Northwest Health Region	622	1,143,577	5.4	5.0	5.9	-	5.7	5.2	6.1	-
New Mexico	8,677	10,371,635	8.4	8.2	8.5	-	8.6	8.4	8.8	-

Source: Hospital Inpatient Discharge Data, New Mexico Department of Health, Health Systems Epidemiology Program
 ICD-9 Code 295

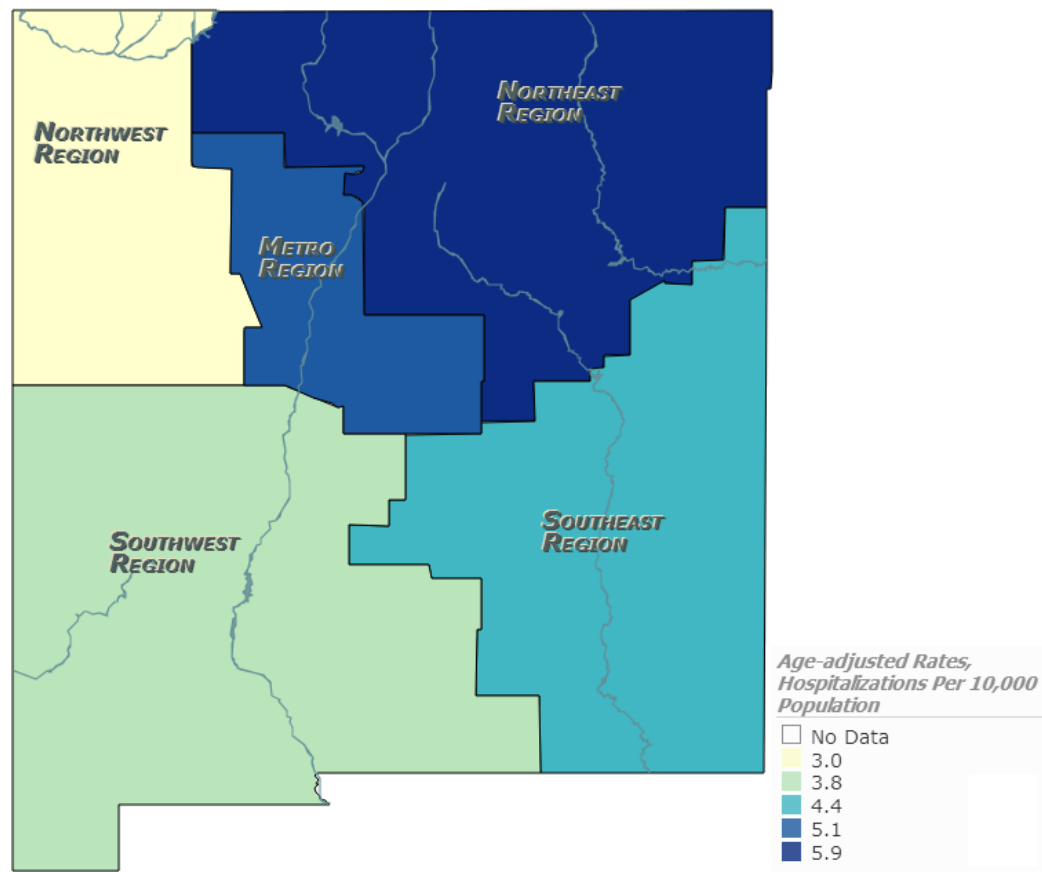
* Age-adjusted to the U.S. 2000 standard population.

3.4 HOSPITAL DISCHARGES FOR DRUG-RELATED MENTAL DISORDERS

Mental disorders cause changes in thinking, mood, and behavior and can affect decision-making and quality of life. Acute episodes of mental illness often result in hospitalizations. In 2013, drug-related mental disorders were the fourth most common reason for psychiatric hospital admission in NM. From 2009-2013, there were 4.5 hospital discharges for drug-related mental disorders per 10,000 NM residents.

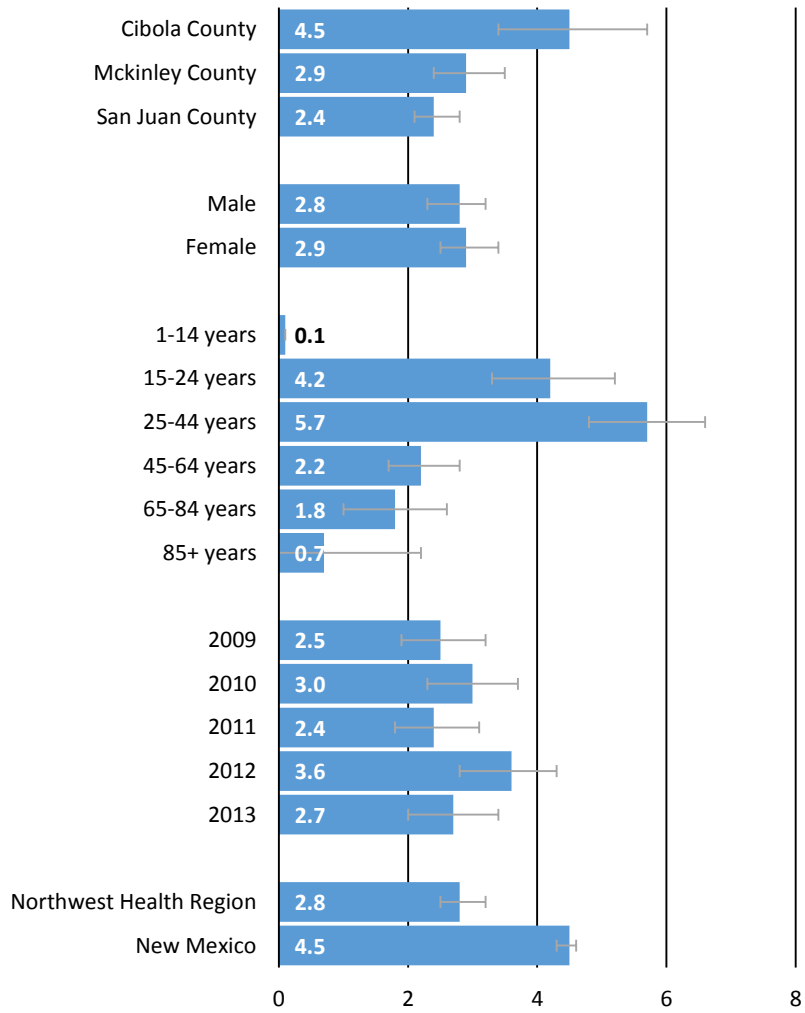
Hospital discharges for drug-related mental disorders include inpatient hospital records with a primary diagnosis of ICD-9 codes 292 (drug-induced mental disorder) or 304 (drug dependence). Sexual orientation data are not submitted to the HIDD dataset. Race/ethnicity data are not reported due to the high prevalence of missing entries. US hospital data are not available for this timeframe.

Hospital Discharges for Drug-Related Mental Disorders per 10,000 Population by Health Region, New Mexico, 2009-2013



Hospital Discharges for Drug-Related Mental Disorders per 10,000 Population

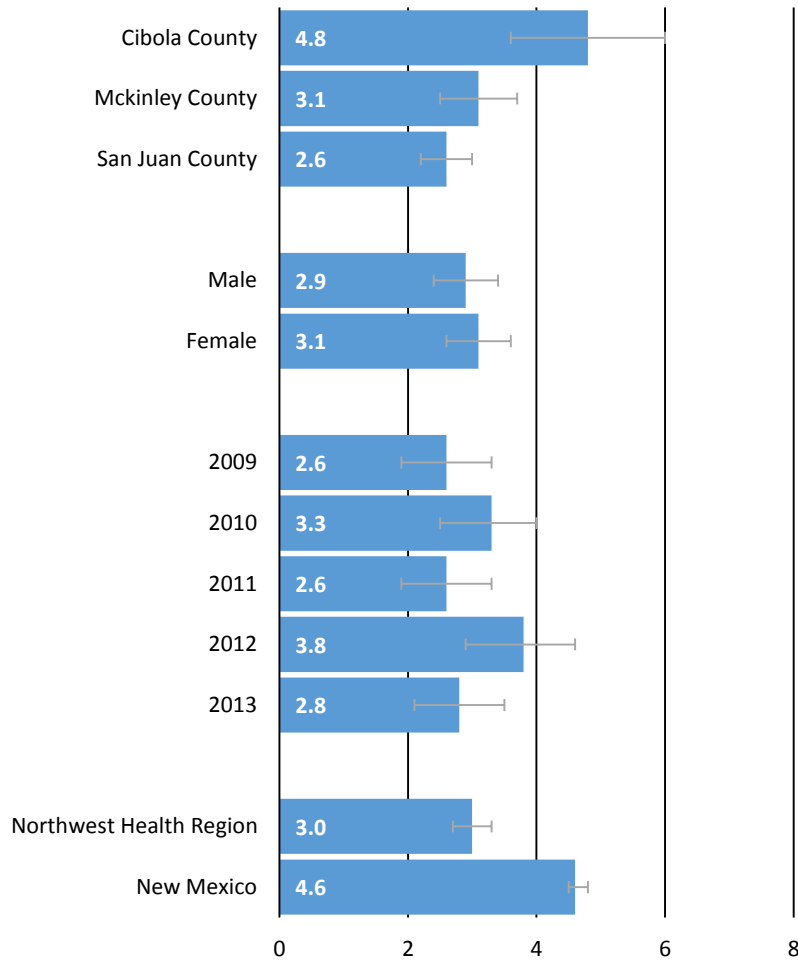
Northwest Health Region
2009-2013



Source: Hospital Inpatient Discharge Data, New Mexico Department of Health, Health Systems Epidemiology Program

Hospital Discharges for Drug-Related Mental Disorders per 10,000 Population*

Northwest Health Region
2009-2013



Source: Hospital Inpatient Discharge Data, New Mexico Department of Health, Health Systems Epidemiology Program

* Age-adjusted to the U.S. 2000 standard population.

[Back to Table of Contents](#)

Northwest Health Region
Hospital Discharges for Drug-Related Mental Disorders per 10,000 Population
2009-2013

	Number of Discharges	Person-Years	Crude Rate	LCL	UCL	Statistical Stability	AA Rate*	LCL	UCL	Statistical Stability
Cibola County	62	136,494	4.5	3.4	5.7	-	4.8	3.6	6.0	-
Mckinley County	106	364,351	2.9	2.4	3.5	-	3.1	2.5	3.7	-
San Juan County	157	642,732	2.4	2.1	2.8	-	2.6	2.2	3.0	-
Male	156	564,734	2.8	2.3	3.2	-	2.9	2.4	3.4	-
Female	169	578,843	2.9	2.5	3.4	-	3.1	2.6	3.6	-
1-14 years	2	257,025	0.1	-	-	Very Unstable				
15-24 years	74	174,652	4.2	3.3	5.2	-				
25-44 years	165	288,566	5.7	4.8	6.6	-				
45-64 years	63	280,714	2.2	1.7	2.8	-				
65-84 years	20	110,180	1.8	1.0	2.6	-				
85+ years	1	13,593	0.7	0.0	2.2	Very Unstable				
2009	57	227,364	2.5	1.9	3.2	-	2.6	1.9	3.3	-
2010	68	229,157	3.0	2.3	3.7	-	3.3	2.5	4.0	-
2011	56	229,368	2.4	1.8	3.1	-	2.6	1.9	3.3	-
2012	82	229,584	3.6	2.8	4.3	-	3.8	2.9	4.6	-
2013	62	228,104	2.7	2.0	3.4	-	2.8	2.1	3.5	-
Northwest Health Region	325	1,143,577	2.8	2.5	3.2	-	3.0	2.7	3.3	-
New Mexico	4,626	10,371,635	4.5	4.3	4.6	-	4.6	4.5	4.8	-

Source: Hospital Inpatient Discharge Data, New Mexico Department of Health, Health Systems Epidemiology Program

ICD-9 Codes 292 & 304

* Age-adjusted to the U.S. 2000 standard population.

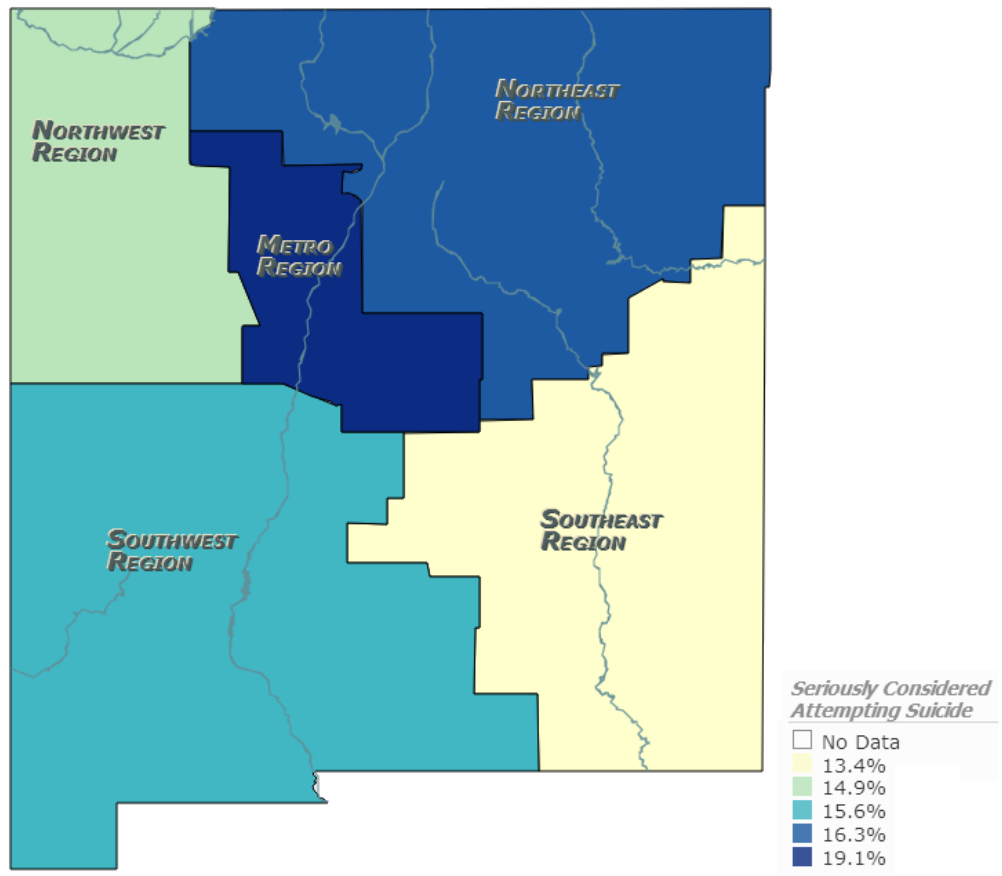
4 YOUTH SUICIDAL BEHAVIOR

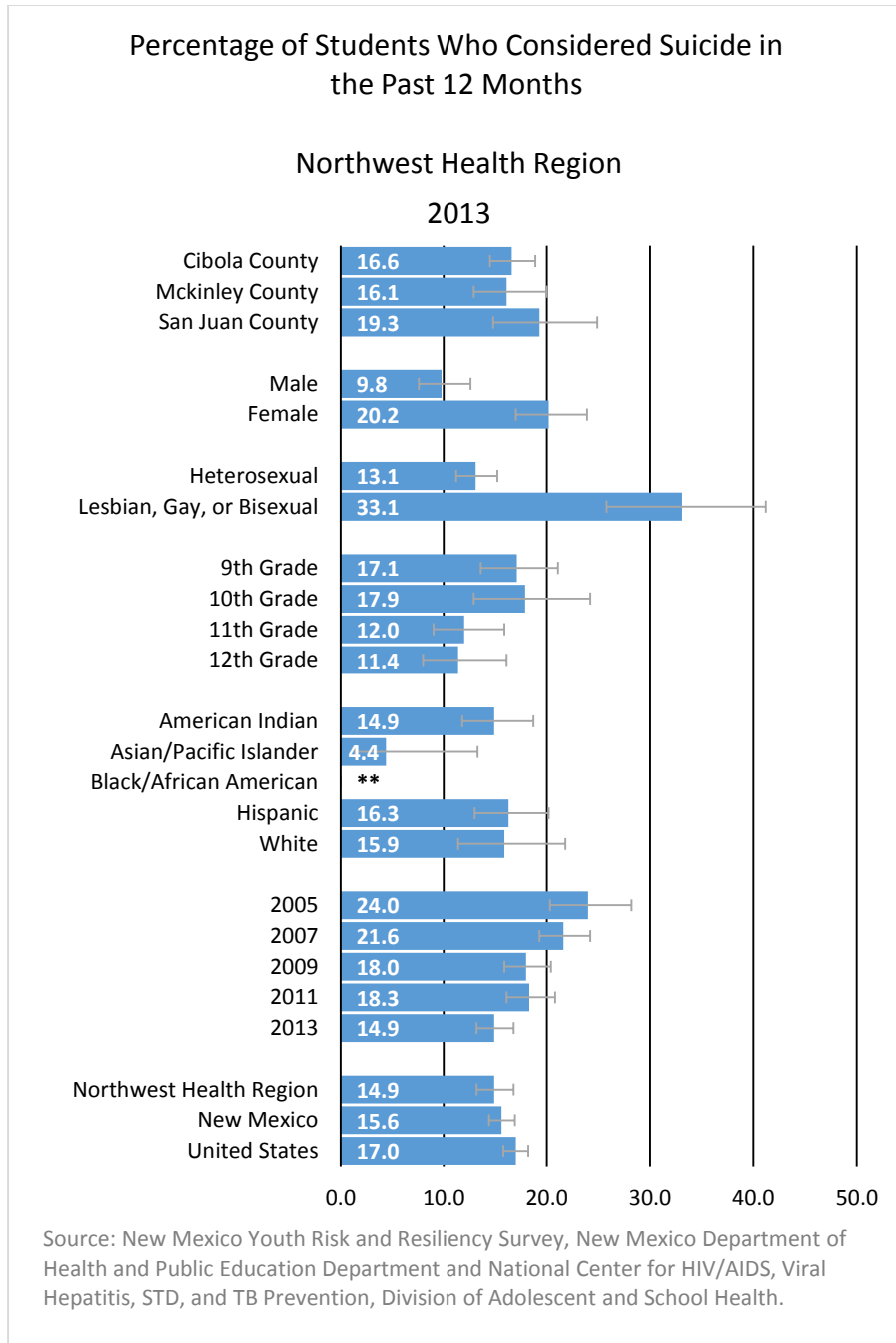
4.1 YOUTH WHO SERIOUSLY CONSIDERED SUICIDE

Suicidal ideation refers to thoughts of suicide or wanting to take one's own life, and is a risk factor for suicide or attempted suicide. Seriously considering suicide is a form of suicidal ideation. The percentage of NM high school students seriously considering suicide decreased from 22.0% in 2001 to 15.6% in 2013. 2013 was the first year since the beginning of the YRRS that the NM percentage fell below the US percentage, although the NM rate (15.6%) is statistically similar to the US rate (17.0%) (DASH). In 2013, NM ranked 21st of the 41 states that asked this question in 2013.

Students who had seriously considered suicide were identified by answering "Yes", to the question, "During the past 12 months, did you ever seriously consider attempting suicide?" More information: https://ibis.health.state.nm.us/indicator/view/MentHlthYouthSuicConsider.Year.NM_US.html.

Percentage of Students Who Considered Suicide in the Past 12 Months by Health Region, New Mexico, 2013





[Back to Table of Contents](#)

Northwest Health Region**Percentage of Students Who Considered Suicide in the Past 12 Months****2013**

	Count	Sample Size	Percentage	LCL	UCL	Statistical Stability
Cibola County	145	853	16.6	14.5	18.9	-
Mckinley County	101	665	16.1	12.9	20.0	-
San Juan County	55	295	19.3	14.8	24.9	-
Male	165	1,538	9.8	7.6	12.6	-
Female	302	1,498	20.2	17.0	23.9	-
Heterosexual	341	2585	13.1	11.2	15.2	-
Lesbian, Gay, or Bisexual	98	290	33.1	25.8	41.2	-
9th Grade	171	1,016	17.1	13.6	21.1	-
10th Grade	128	771	17.9	12.9	24.2	-
11th Grade	87	674	12.0	9.0	15.9	-
12th Grade	79	555	11.4	8.0	16.1	-
American Indian	234	1,617	14.9	11.8	18.7	-
Asian/Pacific Islander	6	51	4.4	1.4	13.3	Very Unstable n/a
Black/African American	**	**	**	**	**	
Hispanic	148	834	16.3	13.0	20.2	-
White	71	464	15.9	11.4	21.8	-
2005	285	1,234	24.0	20.3	28.2	-
2007	345	1,620	21.6	19.3	24.2	-
2009	358	2,180	18.0	15.9	20.4	-
2011	923	5,251	18.3	16.1	20.8	-
2013	467	3,037	14.9	13.2	16.8	-
Northwest Health Region	467	3,037	14.9	13.2	16.8	-
New Mexico	858	5,430	15.6	14.4	16.9	-
United States		13,491	17.0	15.8	18.2	-

Source: New Mexico Youth Risk and Resiliency Survey, New Mexico Department of Health and Public Education Department and National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention, Division of Adolescent and School Health.

Percentage of students who seriously considered attempting suicide during the past 12 months.

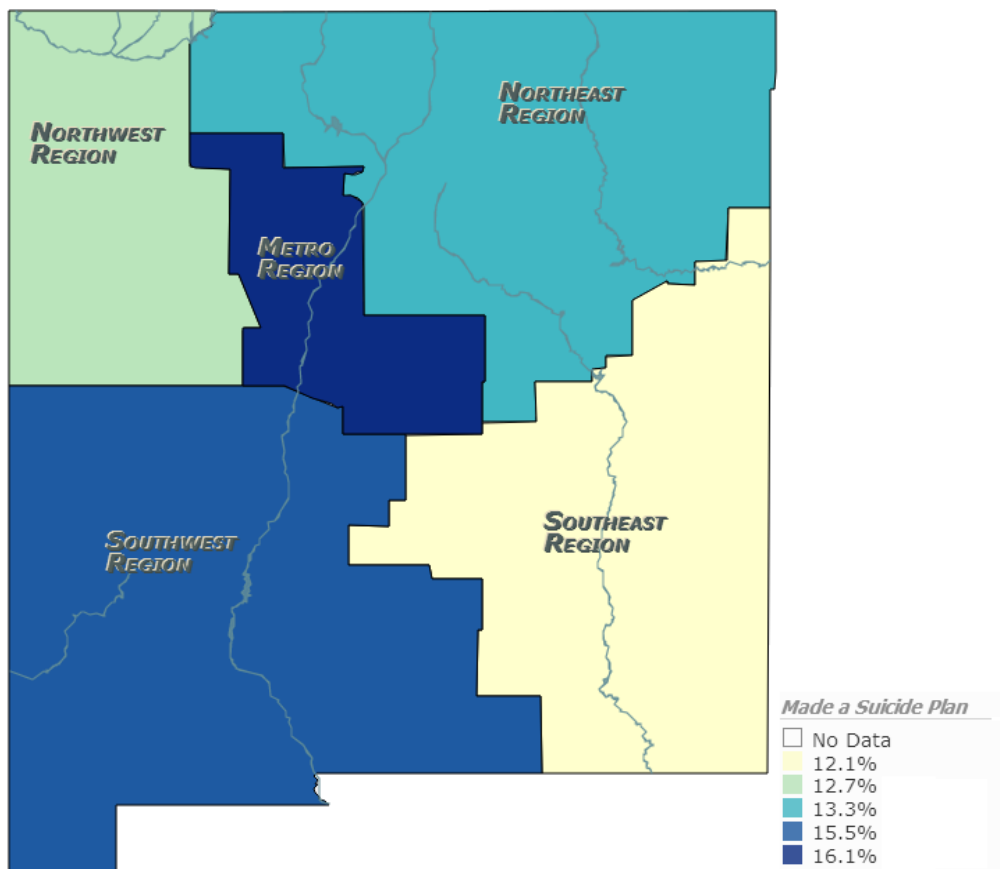
** The values in these cells have been suppressed because there were fewer than 50 survey responses.

4.2 YOUTH WHO MADE A SUICIDE PLAN

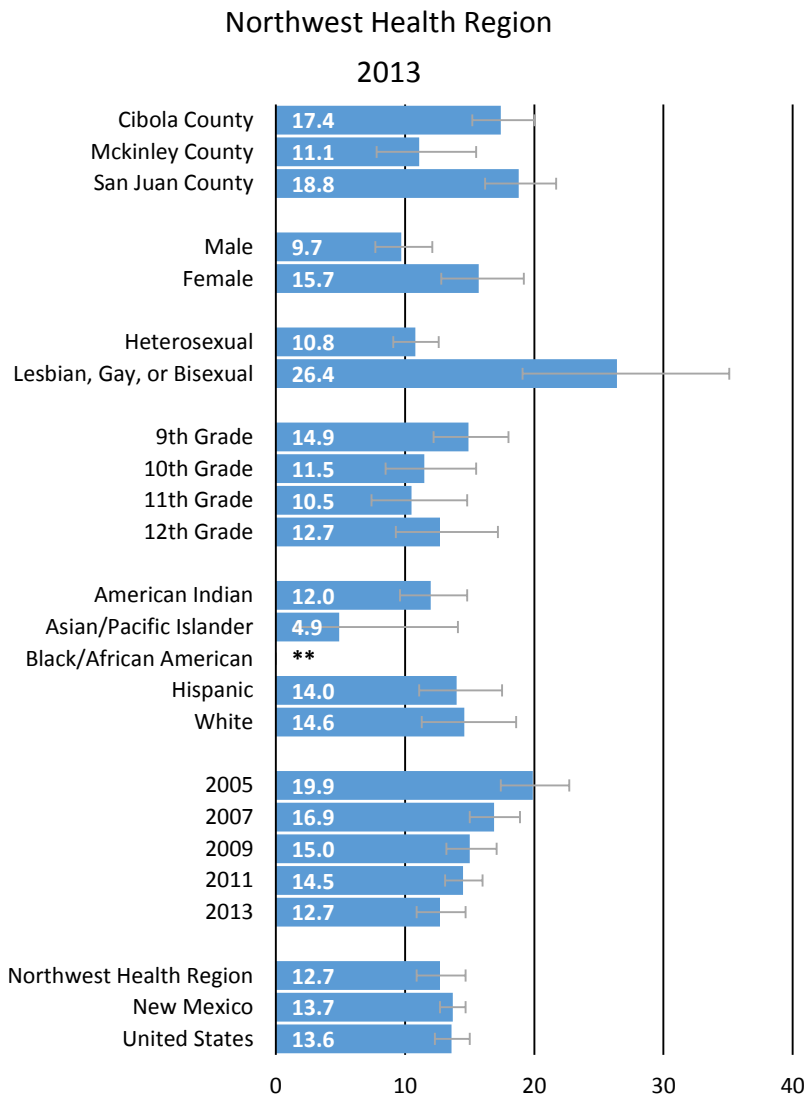
Suicidal ideation refers to thoughts of suicide or wanting to take one's own life, and is a risk factor for suicide or attempted suicide. Making a suicide plan is a form of suicidal ideation. In 2013, 13.7% of high school students in NM made a suicide plan, similar to the US prevalence (13.6%) (DASH). NM ranked 14th of 39 states that asked this question in 2013.

Students who had made plans to attempt suicide were identified by answering “Yes” to the question “During the past 12 months, did you make a plan about how you would attempt suicide?”

Percentage of Students Who Made a Suicide Plan in the Past 12 Months by Health Region, New Mexico, 2013



Percentage of Students Who Made a Suicide Plan in the Past 12 Months



Source: New Mexico Youth Risk and Resiliency Survey, New Mexico Department of Health and Public Education Department and National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention, Division of Adolescent and School Health.

Northwest Health Region**Percentage of Students Who Made a Suicide Plan in the Past 12 Months****2013**

	Count	Sample Size	Percentage	LCL	UCL	Statistical Stability
Cibola County	151	853	17.4	15.2	20.0	-
Mckinley County	82	666	11.1	7.8	15.5	-
San Juan County	53	295	18.8	16.2	21.7	-
Male	171	1,538	9.7	7.7	12.1	-
Female	262	1,500	15.7	12.8	19.2	-
Heterosexual	316	2586	10.8	9.1	12.6	-
Lesbian, Gay, or Bisexual	84	290	26.4	19.1	35.1	-
9th Grade	156	1,017	14.9	12.2	18.0	-
10th Grade	123	772	11.5	8.5	15.5	-
11th Grade	72	674	10.5	7.4	14.8	-
12th Grade	78	555	12.7	9.3	17.2	-
American Indian	221	1,618	12.0	9.6	14.8	-
Asian/Pacific Islander	6	51	4.9	1.6	14.1	Very Unstable n/a
Black/African American	**	**	**	**	**	
Hispanic	130	835	14.0	11.1	17.5	
White	66	464	14.6	11.3	18.6	-
2005	245	1,229	19.9	17.4	22.7	-
2007	269	1,619	16.9	15.0	18.9	-
2009	307	2,179	15.0	13.2	17.1	-
2011	766	5,244	14.5	13.1	16.0	-
2013	433	3,039	12.7	10.9	14.7	-
Northwest Health Region	433	3,039	12.7	10.9	14.7	-
New Mexico	766	5,433	13.7	12.7	14.7	-
United States		13,485	13.6	12.3	15.0	-

Source: New Mexico Youth Risk and Resiliency Survey, New Mexico Department of Health and Public Education Department and National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention, Division of Adolescent and School Health.

Percentage of students who made a plan about how they would attempt suicide during the past 12 months.

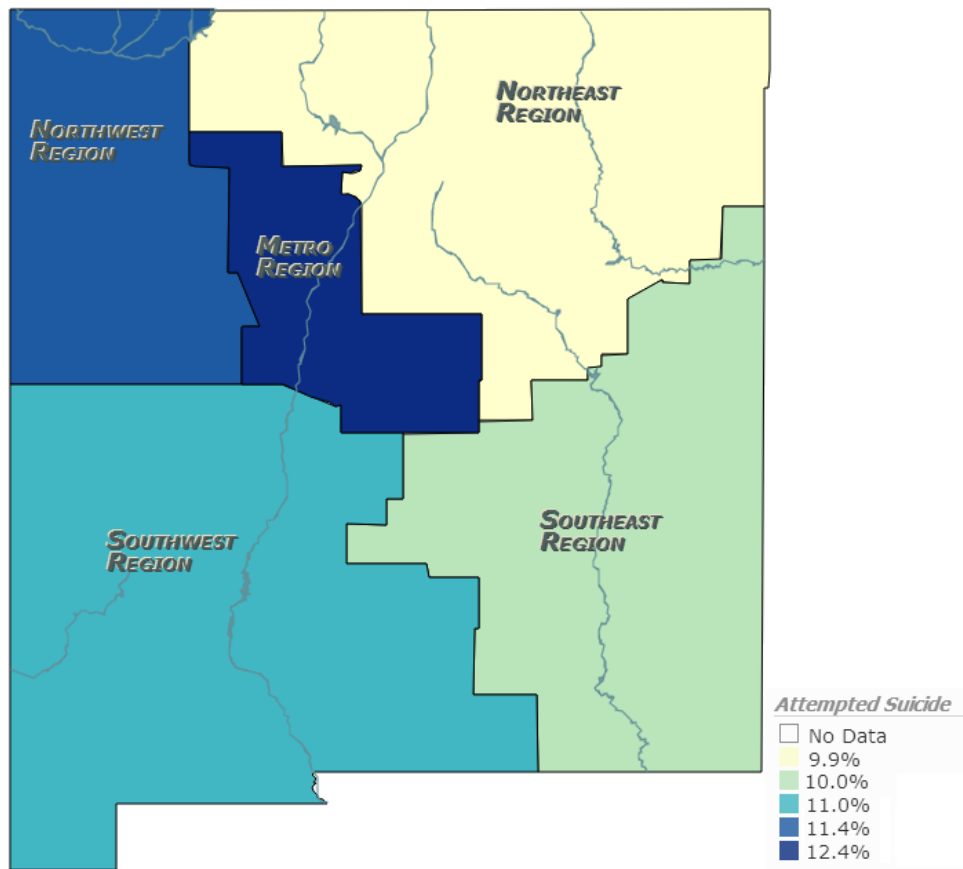
** The values in these cells have been suppressed because there were fewer than 50 survey responses.

4.3 YOUTH WHO ATTEMPTED SUICIDE

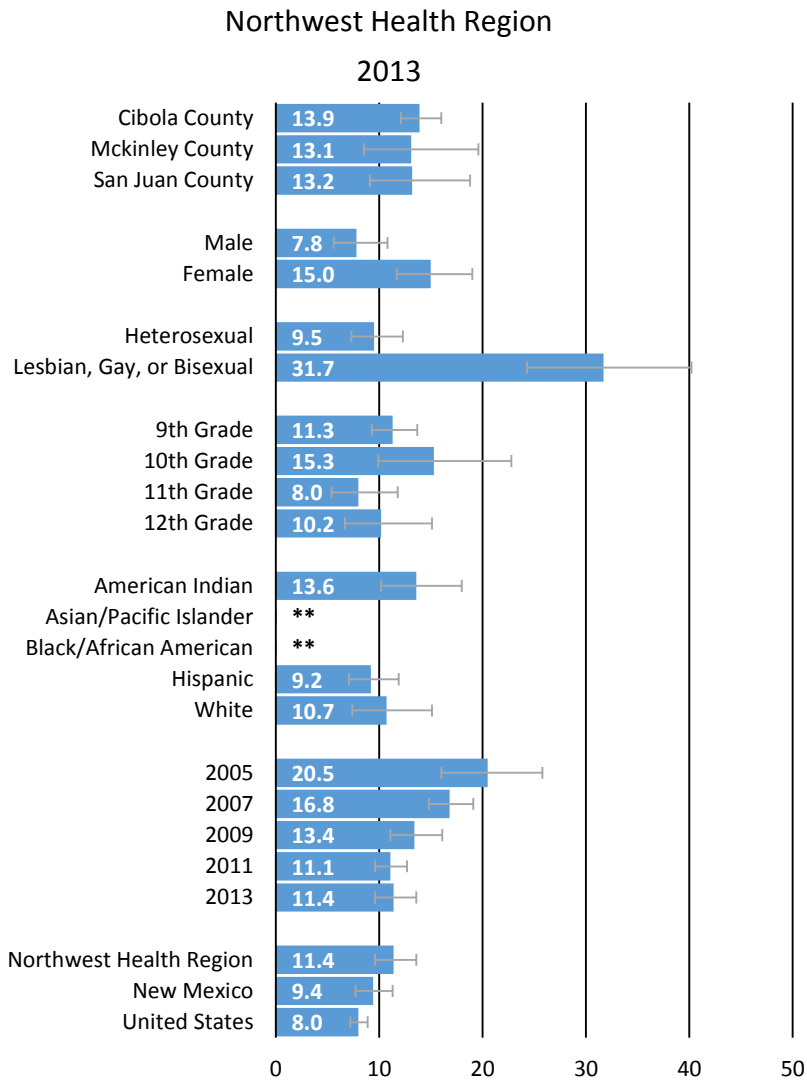
According to the National Center for Health Statistics (NCHS), suicide was the second leading cause of death in NM and in the US for youth between the ages of 10 and 24 in 2013. While girls are more likely than boys to attempt suicide, boys are more likely than girls to die of suicide. A previous suicide attempt is among the strongest risk factors for completed suicide. The percentage of US high school students who attempted suicide has remained relatively stable, while the NM rate has decreased from 12.9% in 2001 to 9.4% in 2013 (DASH). In 2013, the NM rate (9.4%) was similar to the US rate (8.0%), and NM ranked 14th of the 40 states that asked this question in the YRBSS.

Students who attempted suicide were identified by answering one or more to the question, “During the past 12 months, how many times did you actually attempt suicide?” More information: https://ibis.health.state.nm.us/indicator/view/MentHlthYouthSuicAtt.Year.NM_US.html.

Percentage of Students Who Attempted Suicide in the Past 12 Months by Health Region, New Mexico, 2013



Percentage of Students Who Attempted Suicide in the Past 12 Months



Source: New Mexico Youth Risk and Resiliency Survey, New Mexico Department of Health and Public Education Department and National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention, Division of Adolescent and School Health.

[Back to Table of Contents](#)

Northwest Health Region**Percentage of Students Who Attempted Suicide in the Past 12 Months****2013**

	Count	Sample Size	Percentage	LCL	UCL	Statistical Stability
Cibola County	98	710	13.9	12.1	16.0	-
Mckinley County	66	522	13.1	8.5	19.6	-
San Juan County	33	248	13.2	9.1	18.8	-
Male	114	1,267	7.8	5.6	10.8	-
Female	180	1,309	15.0	11.7	19.0	-
Heterosexual	200	2199	9.5	7.3	12.3	-
Lesbian, Gay, or Bisexual	70	241	31.7	24.3	40.2	-
9th Grade	108	855	11.3	9.3	13.7	-
10th Grade	82	650	15.3	9.9	22.8	-
11th Grade	47	583	8.0	5.4	11.8	-
12th Grade	53	471	10.2	6.7	15.1	-
American Indian	171	1,336	13.6	10.2	18.0	-
Asian/Pacific Islander	**	**	**	**	**	n/a
Black/African American	**	**	**	**	**	n/a
Hispanic	77	704	9.2	7.1	11.9	-
White	36	434	10.7	7.4	15.1	-
2005	197	982	20.5	16.0	25.8	-
2007	221	1,279	16.8	14.8	19.1	-
2009	230	1,791	13.4	11.1	16.1	-
2011	538	4,348	11.1	9.6	12.7	-
2013	294	2,576	11.4	9.6	13.6	-
Northwest Health Region	294	2,576	11.4	9.6	13.6	-
New Mexico	447	4,750	9.4	7.7	11.3	-
United States		11982	8.0	7.2	8.9	-

Source: New Mexico Youth Risk and Resiliency Survey, New Mexico Department of Health and Public Education Department and National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention, Division of Adolescent and School Health.

Percentage of students who actually attempted suicide one or more times during the past 12 months.

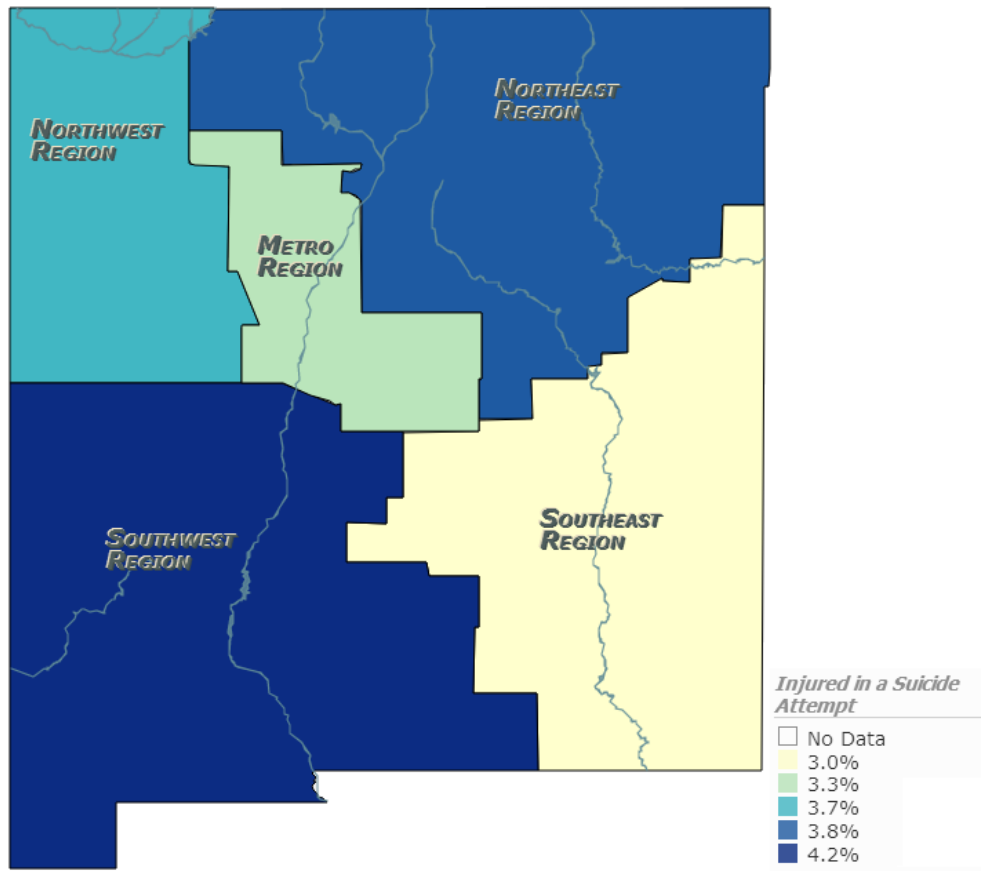
** The values in these cells have been suppressed because there were fewer than 50 survey responses.

4.4 YOUTH INJURED IN A SUICIDE ATTEMPT

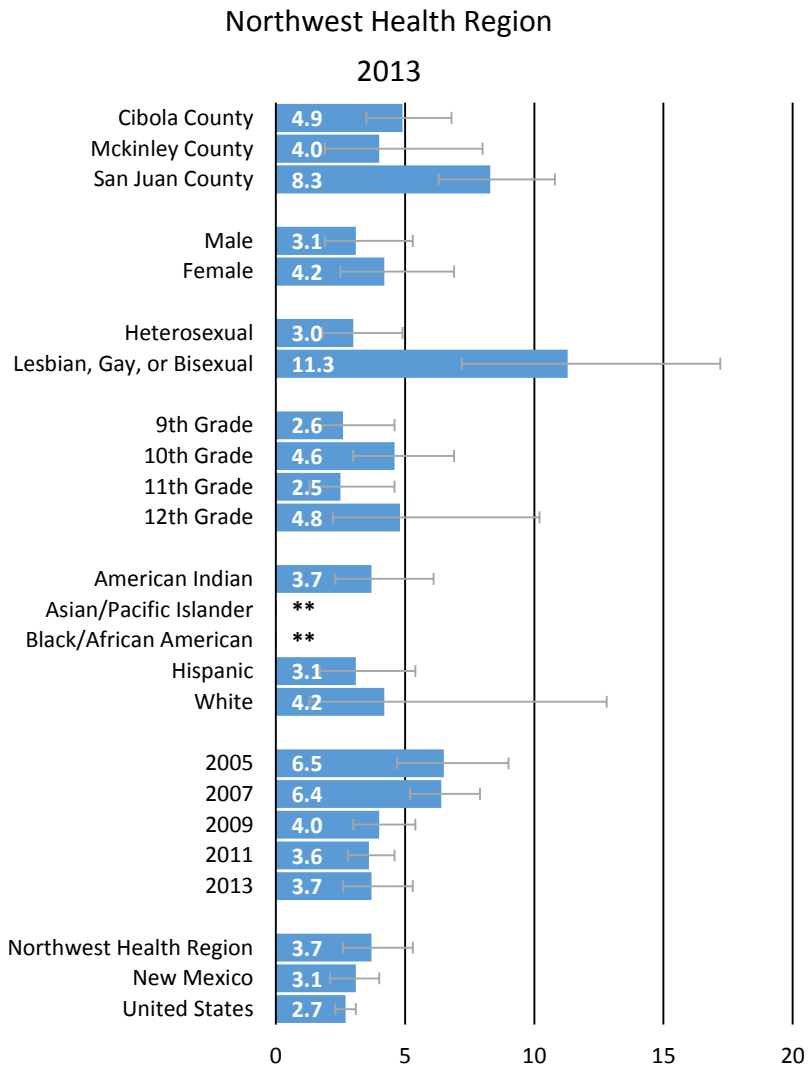
The prevalence of high school students who were injured during a suicide attempt is a Healthy People 2020 Mental Health indicator. In 2013, 3.1% of NM high school students reported being injured in a suicide attempt. This is similar to the 2013 US prevalence of injuries in suicide attempts (2.7%) (DASH). NM ranked 17th of 34 states that asked this question in 2013.

Students who were injured in a suicide attempt were identified by answering “Yes” to the question “If you attempted suicide during the past 12 months, did any attempt result in an injury, poisoning, or overdose that had to be treated by a doctor or nurse?”

Percentage of Students Injured in a Suicide Attempt in the Past 12 Months by Health Region, New Mexico, 2013



Percentage of Students Injured in a Suicide Attempt in the Past 12 Months



Source: New Mexico Youth Risk and Resiliency Survey, New Mexico Department of Health and Public Education Department and National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention, Division of Adolescent and School Health.

[Back to Table of Contents](#)

Northwest Health Region**Percentage of Students Injured in a Suicide Attempt in the Past 12 Months****2013**

	Count	Sample Size	Percentage	LCL	UCL	Statistical Stability
Cibola County	34	704	4.9	3.5	6.8	-
Mckinley County	23	520	4.0	1.9	8.0	Very Unstable
San Juan County	19	250	8.3	6.3	10.8	-
Male	41	1,261	3.1	1.9	5.3	Unstable
Female	52	1,306	4.2	2.5	6.9	Unstable
Heterosexual	57	2194	3.0	1.8	4.9	Unstable
Lesbian, Gay, or Bisexual	26	240	11.3	7.2	17.2	-
9th Grade	26	854	2.6	1.5	4.6	Unstable
10th Grade	33	645	4.6	3.0	6.9	-
11th Grade	16	580	2.5	1.3	4.6	Unstable
12th Grade	15	471	4.8	2.2	10.2	Very Unstable
American Indian	52	1,332	3.7	2.3	6.1	Unstable
Asian/Pacific Islander	**	**	**	**	**	n/a
Black/African American	**	**	**	**	**	n/a
Hispanic	23	701	3.1	1.7	5.4	Unstable
White	10	431	4.2	1.3	12.8	Very Unstable
2005	60	972	6.5	4.7	9.0	-
2007	74	1,283	6.4	5.2	7.9	-
2009	66	1,786	4.0	3.0	5.4	-
2011	192	4,330	3.6	2.8	4.6	-
2013	93	2,567	3.7	2.6	5.3	-
Northwest Health Region	93	2,567	3.7	2.6	5.3	-
New Mexico	151	4,727	3.1	2.1	4.0	-
United States		11,750	2.7	2.3	3.1	-

Source: New Mexico Youth Risk and Resiliency Survey, New Mexico Department of Health and Public Education Department and National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention, Division of Adolescent and School Health.

Percentage of students who actually attempted suicide one or more times during the past 12 months.

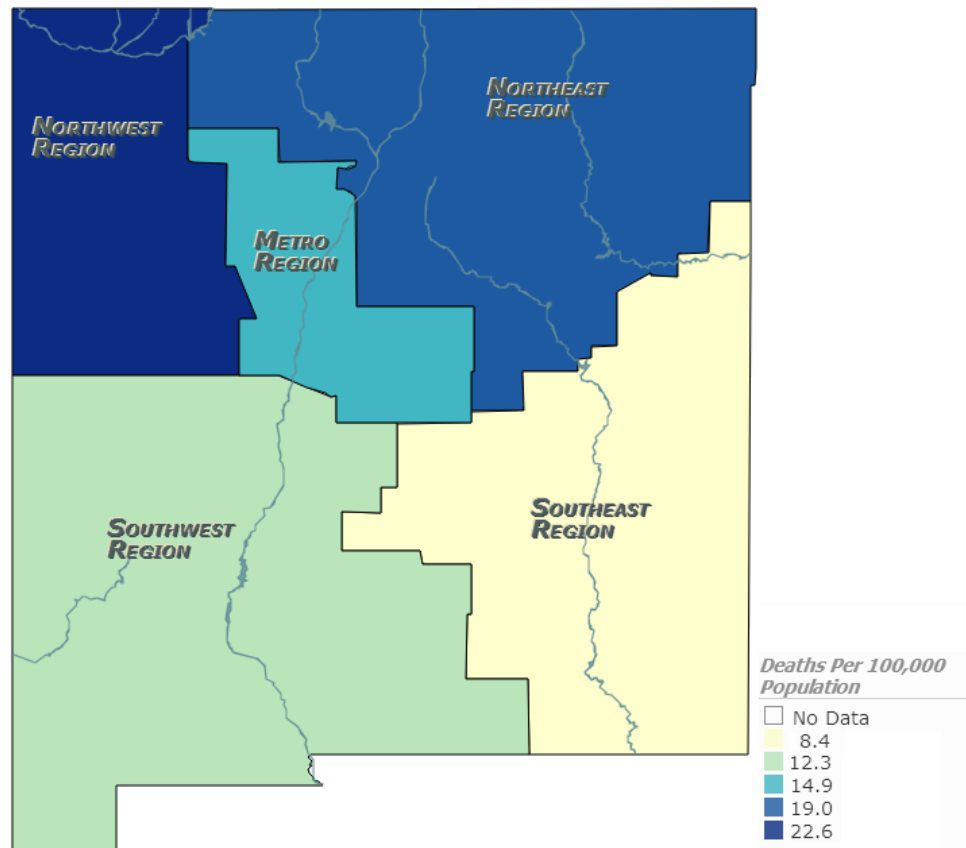
** The values in these cells have been suppressed because there were fewer than 50 survey responses.

4.5 YOUTH SUICIDE

Adolescent suicide is a public health problem of considerable magnitude in New Mexico. Suicide was the second leading cause of death in NM youth 10-24 years of age in 2013, with 62 deaths reported that year (NCHS). Mental disorders increase the risk for both attempted and completed suicide. American Indian/Alaskan Native youth have higher rates of suicide-related fatalities than Hispanic or White youth in NM. Other risk factors for completed suicide among youth include substance abuse, a family history of suicidal behavior, parental psychiatric disorders, stressful life events, and access to firearms. From 1999 to 2013, the youth suicide rate in NM has remained stable while the US rate has increased slightly (NCHS). From 2009 to 2013, the youth suicide rate in NM (14.9 per 100,000) was 91% higher than the US rate (7.8 per 100,000). In 2013, NM ranked sixth among the 50 states for suicides among adolescents (10-24 years), and has ranked among the top 10 states since 1995.

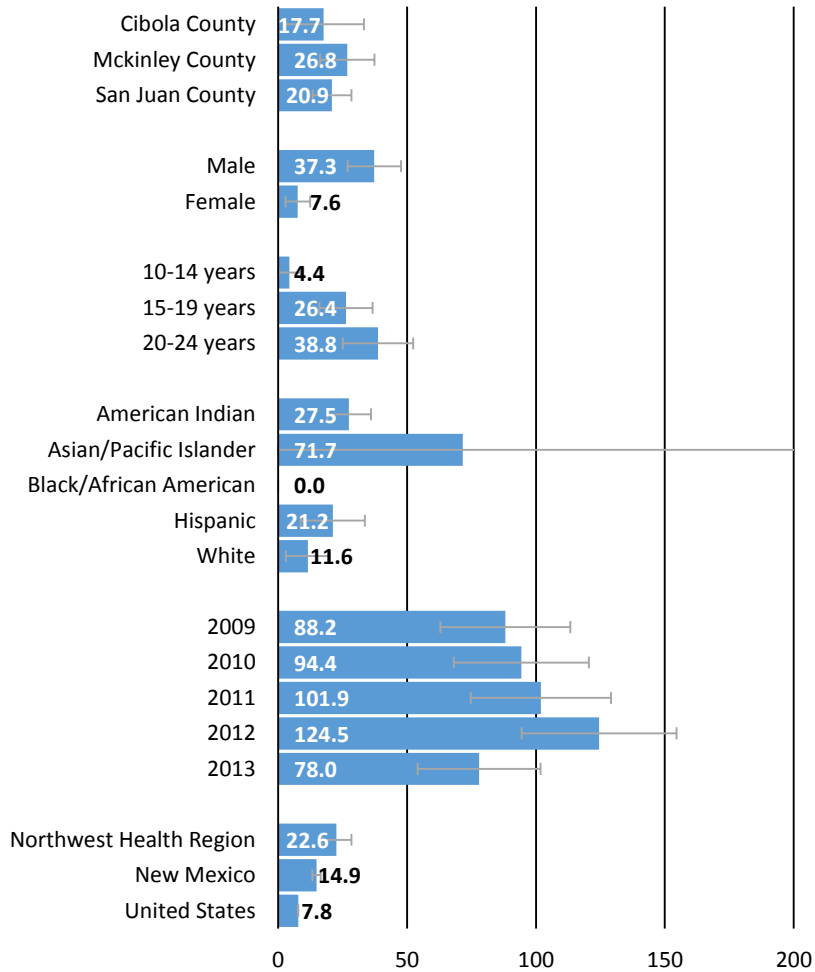
Suicides are recorded in the BVRHS dataset with the International Classification of Diseases, version 10 (ICD-10) codes X60-X84, Y87.0, and *U03. Suicides between the ages of 10 and 24 years were included in the youth suicide indicator. Sexual orientation data are not reported on death certificates. More information: https://ibis.health.state.nm.us/indicator/view/SuicDeathYouth.Year.NM_US.html.

**Suicides per 100,000 Population, Youth Age 10-24 Years
by Health Region, New Mexico, 2013**



Suicides per 100,000 Population,
Youth Age 10-24 Years

Northwest Health Region
2009-2013



Source: New Mexico Department of Health, Bureau of Vital Records and Health Statistics and Centers for Disease Control and Prevention, National Center for Health Statistics.

[Back to Table of Contents](#)

Northwest Health Region**Suicides per 100,000 Population, Youth Age 10-24 Years
2009-2013**

	Number of Deaths	Person- Years	Crude Rate	LCL	UCL	Statistical Stability
Cibola County	5	28,204	17.7	2.2	33.3	Unstable
Mckinley County	25	93,163	26.8	16.3	37.4	-
San Juan County	30	143,506	20.9	13.4	28.4	-
Male	50	133,977	37.3	27.0	47.7	-
Female	10	130,896	7.6	2.9	12.4	Unstable
10-14 years	4	90,221	4.4	0.1	8.8	Unstable
15-19 years	25	94,732	26.4	16.0	36.7	-
20-24 years	31	79,919	38.8	25.1	52.4	-
American Indian	41	148,957	27.5	19.1	36.0	-
Asian/Pacific Islander	1	1,394	71.7	0.0	212.3	Very Unstable
Black/African American	0	2,108	0.0	-	-	No Variance
Hispanic	11	51,926	21.2	8.7	33.7	Unstable
White	7	60,488	11.6	3.0	20.2	Unstable
2009	47	53,299	88.2	63.0	113.4	-
2010	50	52,977	94.4	68.2	120.5	-
2011	54	52,982	101.9	74.8	129.1	-
2012	66	53,025	124.5	94.5	154.5	-
2013	41	52,589	78.0	54.1	101.8	-
Northwest Health Region	60	264,873	22.6	16.9	28.4	-
New Mexico	324	2,172,323	14.9	13.3	16.5	-
United States	25,043	322,261,738	7.8	7.7	7.9	-

Source: New Mexico Department of Health, Bureau of Vital Records and Health Statistics and Centers for Disease Control and Prevention, National Center for Health Statistics.

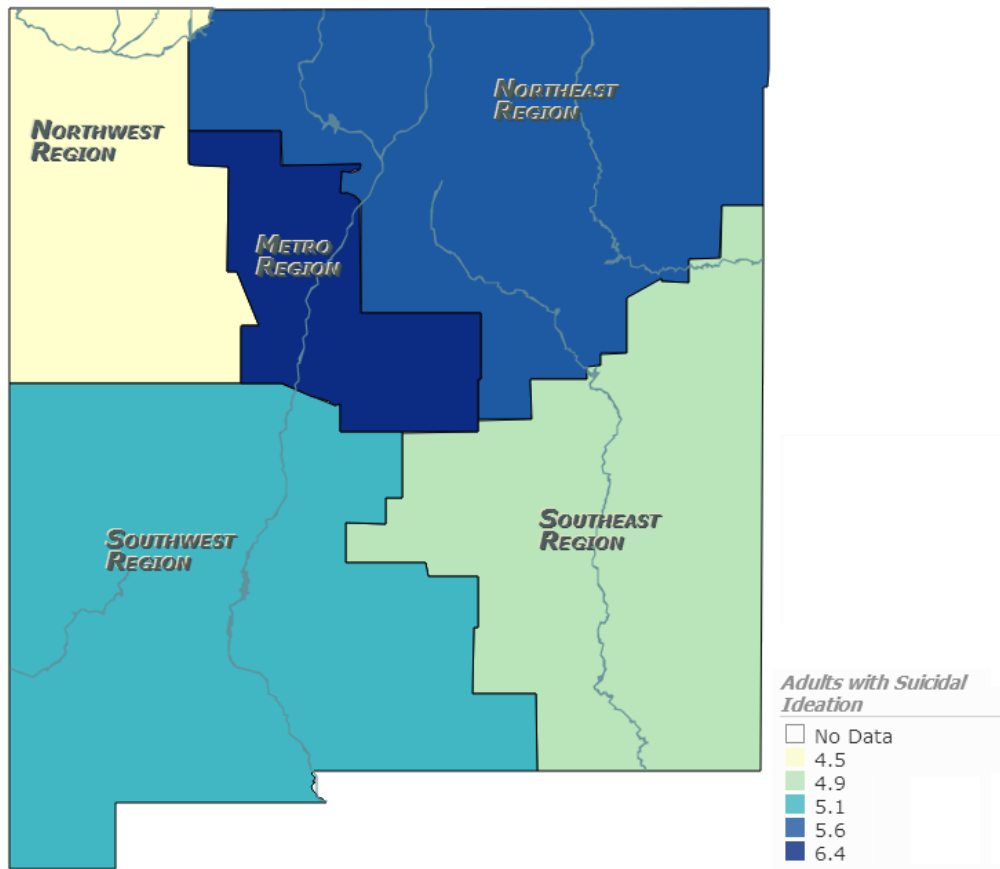
5 SUICIDAL BEHAVIOR

5.1 ADULT SUICIDAL IDEATION

Suicidal ideation refers to thoughts of suicide or wanting to take one's own life, and is a risk factor for suicide or attempted suicide. Thinking about committing suicide is a form of suicidal ideation. Each year, approximately 58,000 adults in NM (3.8%) and 9,196,000 adults in the US (3.9%) seriously consider suicide (SAMHSA). New Mexico was one of the ten states with the lowest prevalence for serious suicide consideration among adults 2012-2013. According to the 2011 BRFSS, the prevalence of thinking about suicide among adults was 5.7% in 2011.

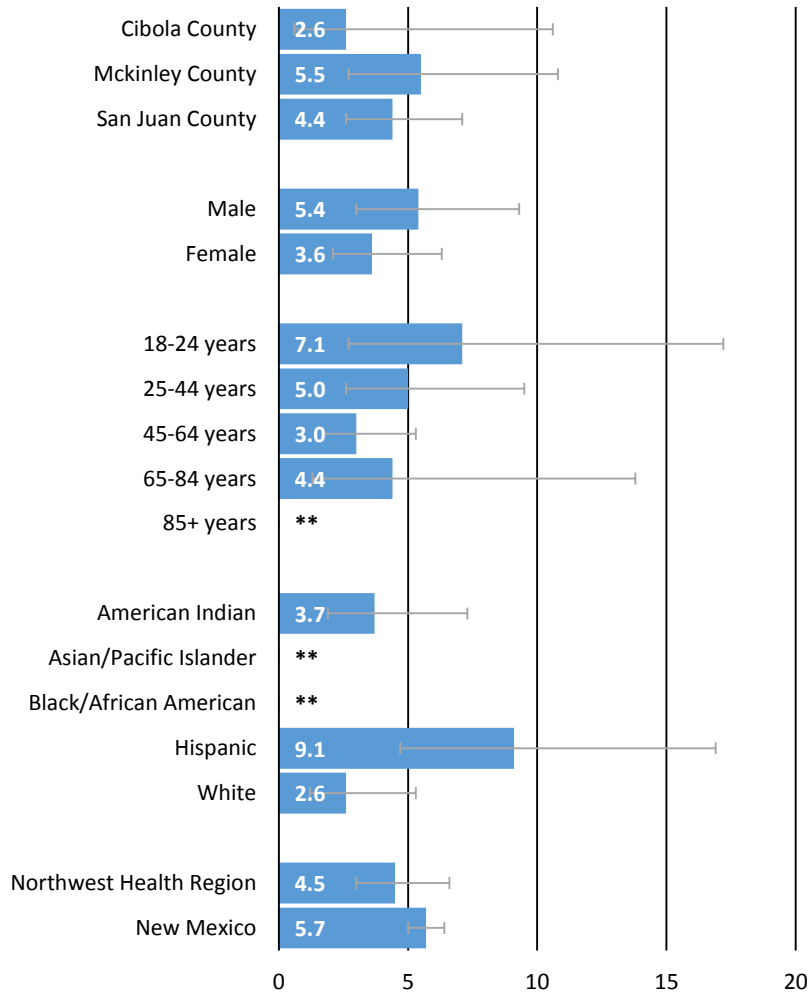
The suicidal behavior module was added to the 2011 BRFSS. Adults with suicidal ideation were identified by answering “Yes” to the question “In the past year, have you felt so low at times that you thought about committing suicide?” US data are not available because this BRFSS module was optional. For some regions, sexual orientation data are not available due to the low number of respondents.

Percentage of Adults with Suicidal Ideation in Last 12 Months by Health Region, New Mexico, 2011



Percentage of Adults with Suicidal Ideation in Last 12 Months

Northwest Health Region
2011



Source: New Mexico Department of Health, Behavioral Risk Factor Surveillance System (BRFSS)

[Back to Table of Contents](#)

Northwest Health Region**Percentage of Adults with Suicidal Ideation in Last 12 Months****2011**

	Number of Deaths	Sample Size	Crude Rate	LCL	UCL	Statistical Stability
Cibola County	3	164	2.6	0.6	10.6	Very Unstable
Mckinley County	13	391	5.5	2.7	10.8	Unstable
San Juan County	27	674	4.4	2.6	7.1	Unstable
Male	20	482	5.4	3.0	9.3	Unstable
Female	23	747	3.6	2.1	6.3	Unstable
18-24 years	6	66	7.1	2.7	17.2	Very Unstable
25-44 years	12	287	5.0	2.6	9.5	Unstable
45-64 years	20	513	3.0	1.7	5.3	Unstable
65-84 years	5	310	4.4	1.3	13.8	Very Unstable
85+ years	**	**	**	**	**	No Variance
American Indian	11	328	3.7	1.9	7.3	Unstable
Asian/Pacific Islander	**	**	**	**	**	n/a
Black/African American	**	**	**	**	**	n/a
Hispanic	16	263	9.1	4.7	16.9	Unstable
White	15	596	2.6	1.2	5.3	Very Unstable
Northwest Health Region	43	1,229	4.5	3.0	6.6	-
New Mexico	413	8,422	5.7	5.0	6.4	-

Source: New Mexico Department of Health, Behavioral Risk Factor Surveillance System (BRFSS)

Has there been a time in the past 12 months when you thought of taking your own life?

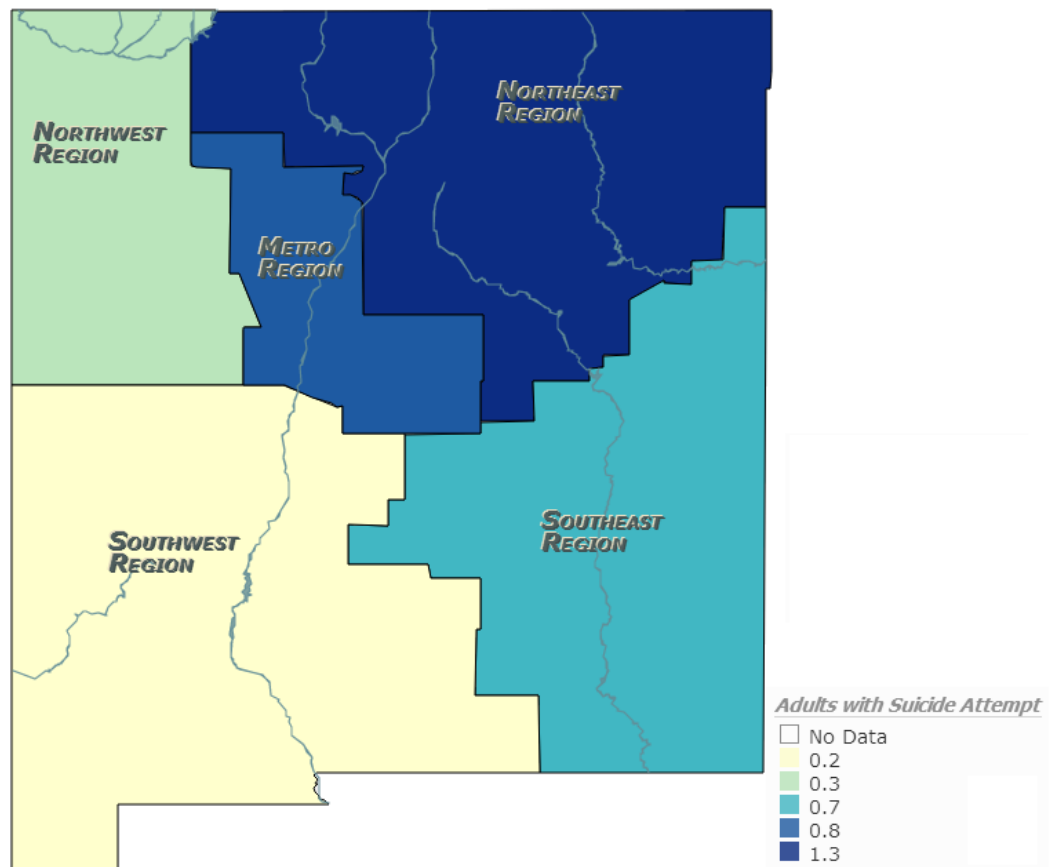
** The values in these cells have been suppressed because there were fewer than 50 survey responses.

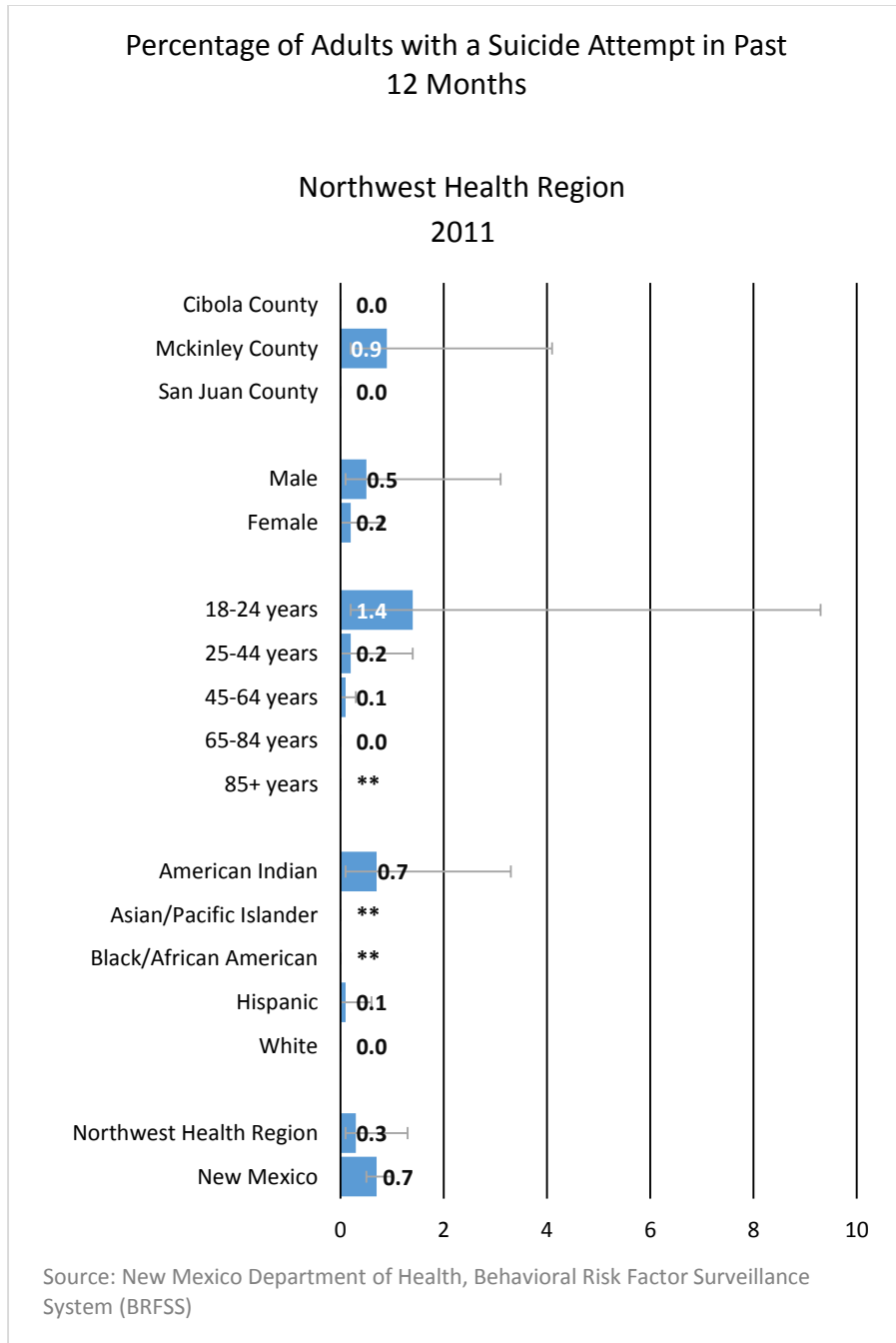
5.2 ADULT SUICIDE ATTEMPTS

A previous suicide attempt is among the strongest risk factors for completed suicide. In 2011, 0.7% of NM adults reported that they had attempted suicide in the past 12 months.

The suicidal behavior module was added to the 2011 BRFSS. Adults with a history of suicide attempt were identified by answering “Yes” to the question “In the past year, have you attempted suicide?” US data are not available because this BRFSS module was optional. For some regions, sexual orientation data are not available due to the low number of respondents.

Percentage of Adults with a Suicide Attempt in Past 12 Months by Health Region, New Mexico, 2011





[Back to Table of Contents](#)

**Northwest Health Region
Percentage of Adults with a Suicide Attempt in Past 12 Months
2011**

	Count	Sample Size	Percentage	LCL	UCL	Statistical Stability
Cibola County	0	164	0.0	-	-	No Variance
Mckinley County	3	390	0.9	0.2	4.1	Very Unstable
San Juan County	1	674	0.0	-	-	No Variance
Male	2	482	0.5	0.1	3.1	Very Unstable
Female	2	746	0.2	0.0	0.8	Very Unstable
18-24 years	1	66	1.4	0.2	9.3	Very Unstable
25-44 years	1	286	0.2	0.0	1.4	Very Unstable
45-64 years	2	513	0.1	0.0	0.3	Very Unstable
65-84 years	0	309	0.0	-	-	No Variance
85+ years	**	**	**	**	**	n/a
American Indian	2	328	0.7	0.1	3.3	Very Unstable
Asian/Pacific Islander	**	**	**	**	**	n/a
Black/African American	**	**	**	**	**	n/a
Hispanic	1	261	0.1	0.0	0.6	Very Unstable
White	1	597	0.0	-	-	No Variance
Northwest Health Region	4	1,228	0.3	0.1	1.3	Very Unstable
New Mexico	40	8,423	0.7	0.5	1.0	-

Source: New Mexico Department of Health, Behavioral Risk Factor Surveillance System (BRFSS)

During the past 12 months, did you attempt to commit suicide?

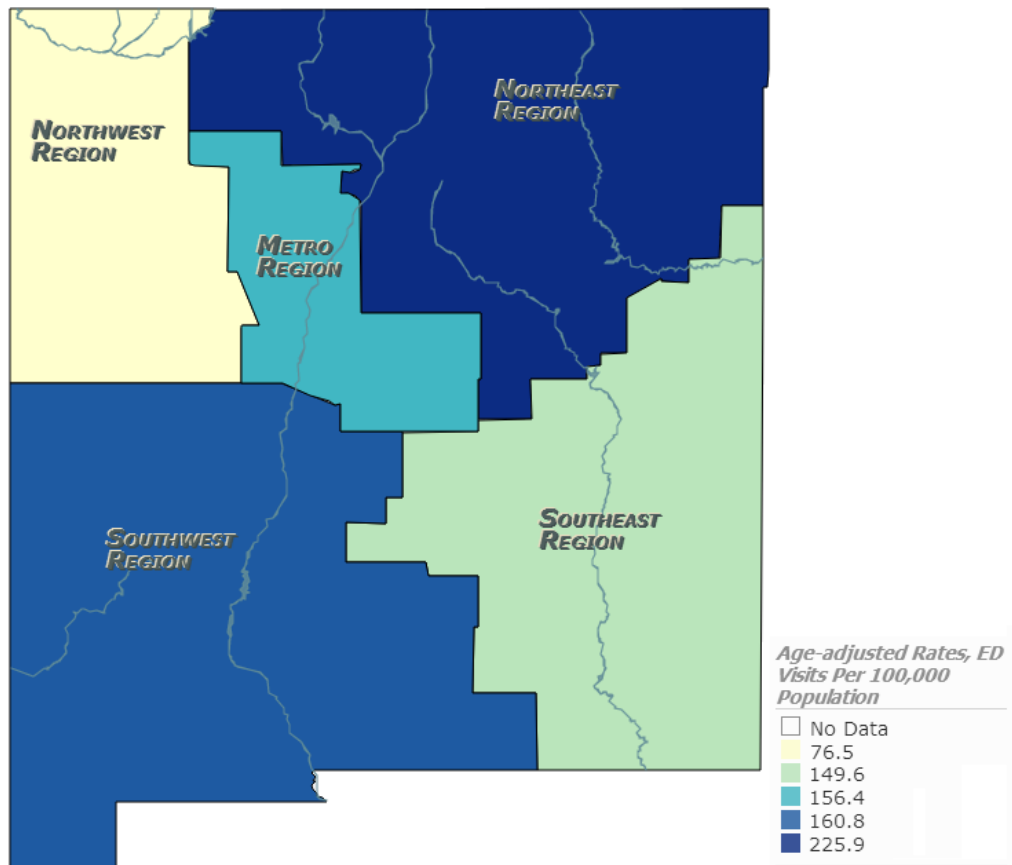
** The values in these cells have been suppressed because there were fewer than 50 survey responses.

5.3 EMERGENCY DEPARTMENT ENCOUNTERS FOR SELF INJURY

In New Mexico, suicidal behaviors are a serious public health problem and a major cause of morbidity and mortality. In 2013, suicide was the eighth leading cause of all death in New Mexico, and the second leading cause of death among youth and adults 15-44 years (NCHS). In 2013 suicide accounted for 9.8% of the total Years of Potential Life Lost (YPLL) in NM among those under 65 years of age. In a survey of the fifty states and the District of Columbia 2012-2013, NM ranked fifth of 51 for suicide deaths, and has ranked among the top 10 since 1997. The age-adjusted rate of suicide attempts resulting in emergency room visits has remained relatively stable from 2010 to 2013. From 2010 to 2013, there were 150 visits to the emergency room following self injury for every 100,000 New Mexico residents.

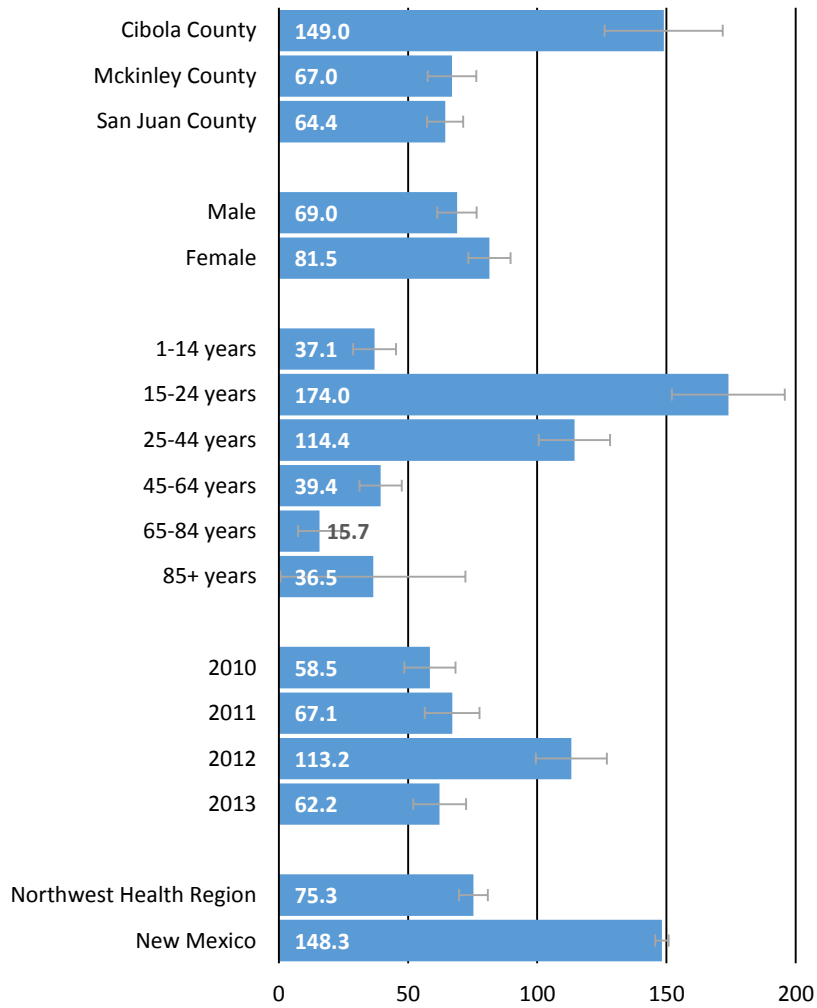
Emergency department visits for intentional self injury include primary diagnoses of ICD-9 codes E950-E959. Hospital discharges for mood disorders include inpatient hospital records with a primary diagnosis of Sexual orientation data are not submitted to the ED dataset. Race/ethnicity data are not reported due to the high prevalence of missing entries. Comparable US ED data are not available for this timeframe.

Emergency Department Encounters for Intentional Self Harm per 100,000 Population by Health Region, New Mexico, 2010-2013



Emergency Department Encounters for Intentional Self Harm per 100,000 Population

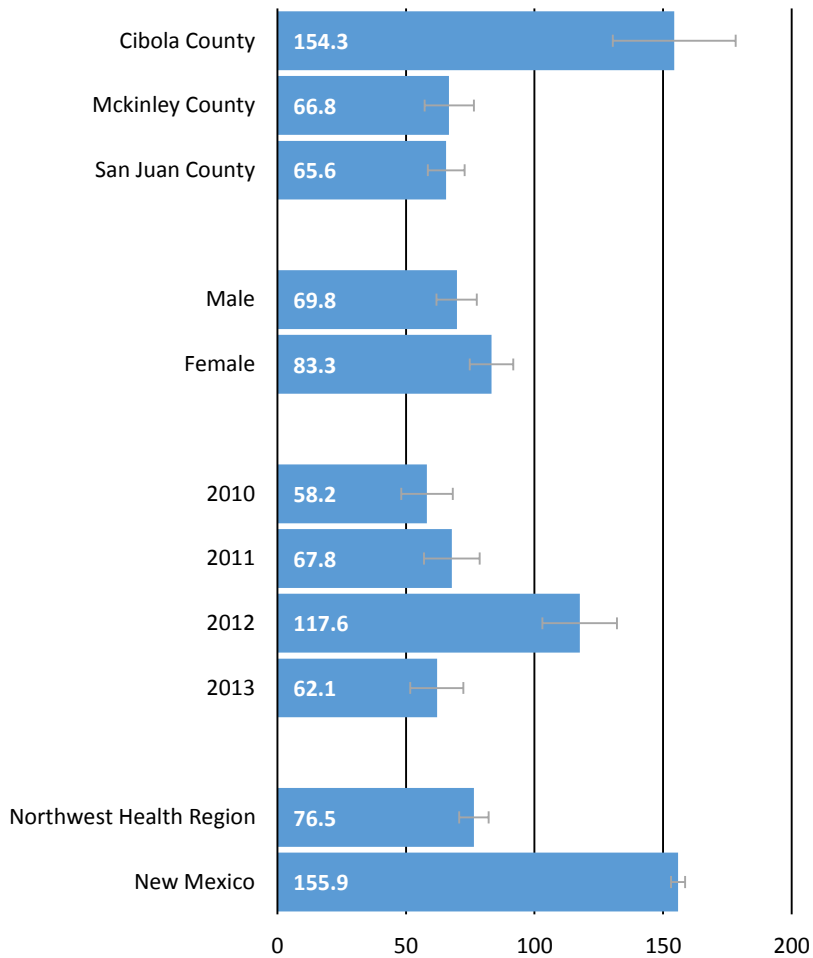
Northwest Health Region 2010-2013



Source: Emergency Department Data, New Mexico Department of Health, Health Systems Epidemiology Program

Emergency Department Encounters for Intentional Self Harm per 100,000 Population *

Northwest Health Region
2010-2013



Source: Emergency Department Data, New Mexico Department of Health, Health Systems Epidemiology Program

* Age-adjusted to the U.S. 2000 standard population.

[Back to Table of Contents](#)

Northwest Health Region
Emergency Department Encounters for Intentional Self Harm per 100,000 Population
2010-2013

	Number of Encounters	Person-Years	Crude Rate	LCL	UCL	Statistical Stability	AA Rate*	LCL	UCL	Statistical Stability
Cibola County	163	109,422	149.0	126.1	171.8	-	154.3	130.4	178.2	-
Mckinley County	196	292,499	67.0	57.6	76.4	-	66.8	57.3	76.4	-
San Juan County	331	514,293	64.4	57.4	71.3	-	65.6	58.5	72.8	-
Male	312	452,480	69.0	61.3	76.6	-	69.8	61.9	77.6	-
Female	378	463,734	81.5	73.3	89.7	-	83.3	74.8	91.8	-
1-14 years	76	205,032	37.1	28.7	45.4	-				
15-24 years	243	139,669	174.0	152.1	195.8	-				
25-44 years	264	230,755	114.4	100.6	128.2	-				
45-64 years	89	225,740	39.4	31.2	47.6	-				
65-84 years	14	88,977	15.7	7.5	24.0	-				
85+ years	4	10,962	36.5	0.7	72.2	Unstable				
2010	134	229,157	58.5	48.6	68.4	-	58.2	48.2	68.2	-
2011	154	229,368	67.1	56.5	77.7	-	67.8	57.0	78.7	-
2012	260	229,584	113.2	99.5	127.0	-	117.6	103.1	132.1	-
2013	142	228,104	62.2	52.0	72.5	-	62.1	51.7	72.4	-
Northwest Health Region	690	916,214	75.3	69.7	80.9	-	76.5	70.7	82.2	-
New Mexico	12,359	8,335,512	148.3	145.7	150.9	-	155.9	153.1	158.6	-

Source: Emergency Department Data, New Mexico Department of Health, Health Systems Epidemiology Program

ICD-9 Codes E950-E959

* Age-adjusted to the U.S. 2000 standard population.

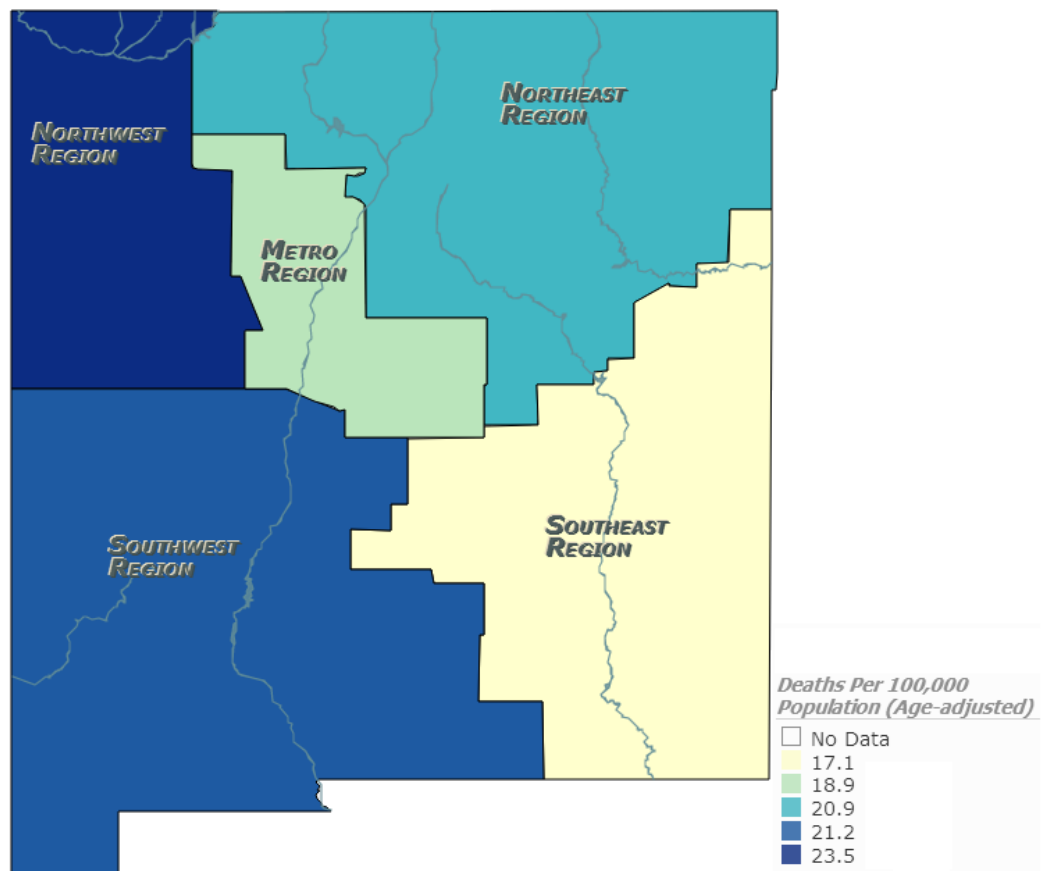
5.4 SUICIDE

In NM, suicidal behaviors are a serious public health problem and a major cause of morbidity and mortality. In 2013, suicide was the eighth leading cause of all death in NM, and the second leading cause of death for all age groups 15-44 years (NCHS). From 2009 to 2013, suicide accounted for an average of 8,898 YPLL per year in NM. Over the last 15 years, suicide rates have increased slightly in NM and the US (NCHS). The suicide rate in NM has consistently been 1.5-2 times the US rate. In 2013, the age-adjusted suicide rate in NM was 59% higher than the US age-adjusted rate. In a 2012-2013 survey of the fifty states and the District of Columbia, NM ranked fifth for suicides, and has ranked among the top 10 states since 1997.

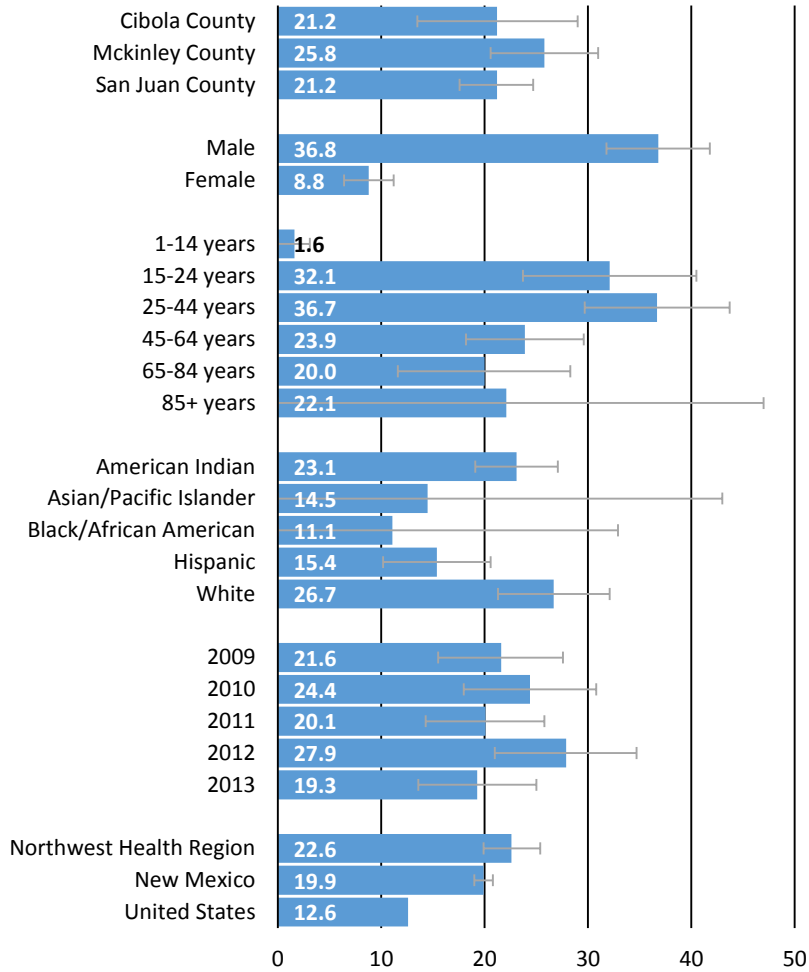
Suicides are recorded in the BVRHS dataset with the International Classification of Diseases, version 10 (ICD-10) codes X60-X84, Y87.0, and *U03. Sexual orientation data are not reported on death certificates. More information:

https://ibis.health.state.nm.us/indicator/view/SuicDeath.Year.NM_US.html.

Suicides per 100,000 Population by Health Region, New Mexico, 2009-2013

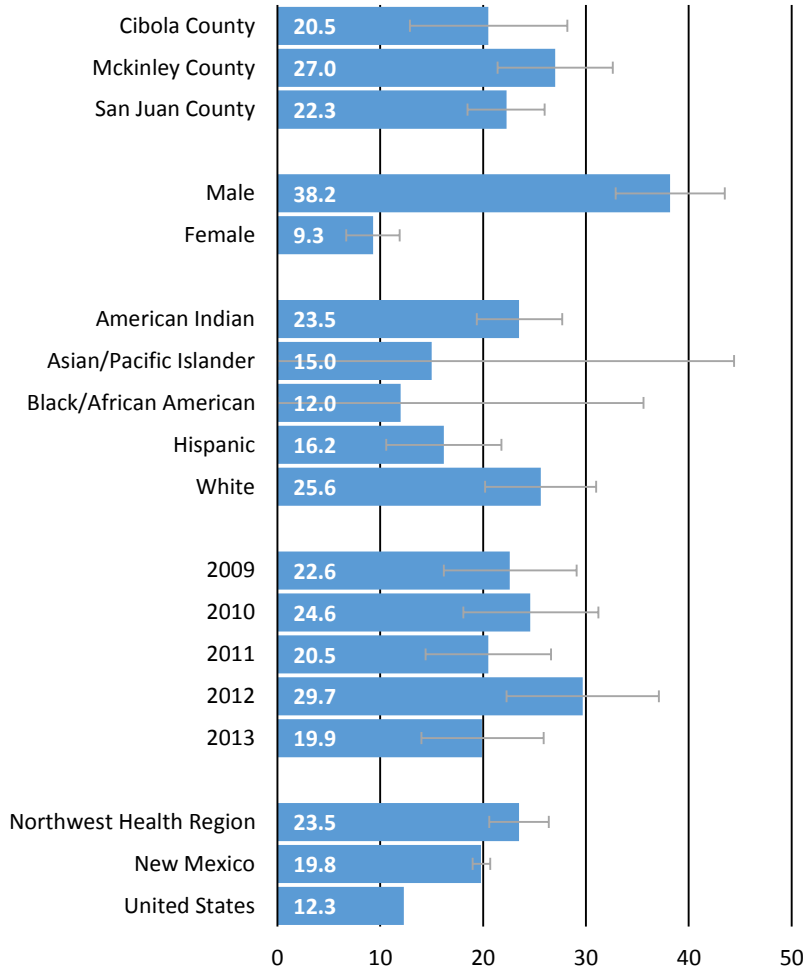


Suicides per 100,000 Population Northwest Health Region 2009-2013



Source: New Mexico Department of Health, Bureau of Vital Records and Health Statistics and Centers for Disease Control and Prevention, National Center for Health Statistics.

Suicides per 100,000 Population Northwest Health Region* 2009-2013



Source: New Mexico Department of Health, Bureau of Vital Records and Health Statistics.

* Age-adjusted to the U.S. 2000 standard population.

Northwest Health Region
Suicides per 100,000 Population
2009-2013

	Number of Deaths	Person-Years
Cibola County	29	136,494
Mckinley County	94	364,351
San Juan County	136	642,732

Crude Rate	LCL	UCL	Statistical Stability
21.2	13.5	29.0	-
25.8	20.6	31.0	-
21.2	17.6	24.7	-

AA Rate*	LCL	UCL	Statistical Stability
20.5	12.9	28.2	-
27.0	21.4	32.6	-
22.3	18.5	26.0	-

Male	208	564,734
Female	51	578,843

36.8	31.8	41.8	-
8.8	6.4	11.2	-

38.2	32.9	43.5	-
9.3	6.7	11.9	-

1-14 years	4	257,025
15-24 years	56	174,652
25-44 years	106	288,566
45-64 years	67	280,714
65-84 years	22	110,180
85+ years	3	13,593

1.6	0.0	3.1	Unstable
32.1	23.7	40.5	-
36.7	29.7	43.7	-
23.9	18.2	29.6	-
20.0	11.6	28.3	-
22.1	0.0	47.0	Very Unstable

23.5	19.4	27.7	-
15.0	0.0	44.4	Very Unstable
12.0	0.0	35.6	Very Unstable
16.2	10.6	21.8	-
25.6	20.2	31.0	-

American Indian	129	558,444
Asian/Pacific Islander	1	6,877
Black/African American	1	9,008
Hispanic	34	220,889
White	93	348,359

23.1	19.1	27.1	-
14.5	0.0	43.0	Very Unstable
11.1	0.0	32.9	Very Unstable
15.4	10.2	20.6	-
26.7	21.3	32.1	-

23.5	19.4	27.7	-
15.0	0.0	44.4	Very Unstable
12.0	0.0	35.6	Very Unstable
16.2	10.6	21.8	-
25.6	20.2	31.0	-

2009	49	227,364
2010	56	229,157
2011	46	229,368
2012	64	229,584
2013	44	228,104

21.6	15.5	27.6	-
24.4	18.0	30.8	-
20.1	14.3	25.8	-
27.9	21.0	34.7	-
19.3	13.6	25.0	-

22.6	16.2	29.1	-
24.6	18.1	31.2	-
20.5	14.4	26.6	-
29.7	22.3	37.1	-
19.9	14.0	25.9	-

Northwest Health Region	259	1,143,577
New Mexico	2,063	10,371,635
United States	196,540	1,557,151,863

22.6	19.9	25.4	-
19.9	19.0	20.8	-
12.6	12.6	12.7	-

23.5	20.6	26.4	-
19.8	19.0	20.7	-
12.3	12.2	12.3	-

Source: New Mexico Department of Health, Bureau of Vital Records and Health Statistics and Centers for Disease Control and Prevention, National Center for Health Statistics.

* Age-adjusted to the U.S. 2000 standard population.

6 PUBLIC RESOURCES FOR MENTAL HEALTH PROMOTION

Crisis and Referral Lines:

- National Suicide Prevention Lifeline (<http://www.suicidepreventionlifeline.org/>): 1-800-273-TALK (8255). En Español: 1-800-SUICIDA (784-2432)
- New Mexico Crisis and Access Line: 1-855-NMCRISIS (662-7474)
- Teen to Teen Peer Counseling Hotline: 1-877-YOUTHLINE (1-877-968-8454)
- Native Youth Crisis Hotline: 1-877-209-1266
- Veterans Peer Support Line: 1-877-Vet2Vet (1-800-877-838-2838)
- University of New Mexico Agora Crisis Line (<http://www.unm.edu/~agora/>): 505-277-3013 or 1-866-HELP-1-NM
- New Mexico State University Crisis Assistance Listening Line: 1-575-646-2255 or 1-866-314-6841
- Graduate Student Hotline: 1-800-GRADHLP (1-800-472-3457)
- Postpartum Depression Hotline: 1-800-PPD-MOMS (1-800-773-6667)

Treatment Referral Services:

- OptumHealth NM (<https://stage.optumhealthnewmexico.com/index.html>) for a complete listing of behavioral health treatment services statewide at 1-866-660-7185
- SAMHSA Treatment Referral Helpline: 1-877-SAMHSA7 (1-877-726-4727)
- The SKY Center (<http://nmsip.org/services/sky-center/>): 1-505-473-6191

Resources for veterans and their families: <http://www.mentalhealth.gov/get-help/veterans/index.html>

Community Suicide Prevention Organizations:

- New Mexico Suicide Intervention Project (<http://nmsip.org/>): 505-820-1066
- New Mexico Suicide Prevention Coalition (<http://www.nmsuicideprevention.org/>): 505-401-9382
- Southern New Mexico Suicide Prevention and Survivors Support Coalition (<http://endsuicide.net>). Free peer-led groups open to any adult survivor of suicide held twice monthly.

References and Resources:

- CDC Suicide Prevention Facts and Resources: <http://www.cdc.gov/ViolencePrevention/suicide/index.html>
- SAMHSA Suicide Prevention Facts and Resources: <http://www.samhsa.gov/suicide-prevention>
- SAMHSA Tribal Training and Technical Assistance Center: <http://www.samhsa.gov/prevention/suicide.aspx>
- World Health Organization Suicide Prevention Facts and Resources: <http://www.who.int/topics/suicide/en/>
- National Strategy for Suicide Prevention: <http://www.surgeongeneral.gov/library/reports/national-strategy-suicide-prevention/index.html>
- Suicide Prevention Resource Center: <http://www.sprc.org/>

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