



# 2015 New Mexico Regional Mental Health Report

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SOUTHEAST HEALTH REGION

Epidemiology & Response Division



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## PREFACE: THE IMPORTANCE OF MENTAL HEALTH

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According to the World Health Organization (WHO) there is "no health without mental health."<sup>1</sup> 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.<sup>2</sup> "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.<sup>3</sup> 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.<sup>4</sup>

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.<sup>5</sup> The clearest evidence for risk of mental illness has been shown with indicators of poverty and low levels of education.<sup>6</sup>

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

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## **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.

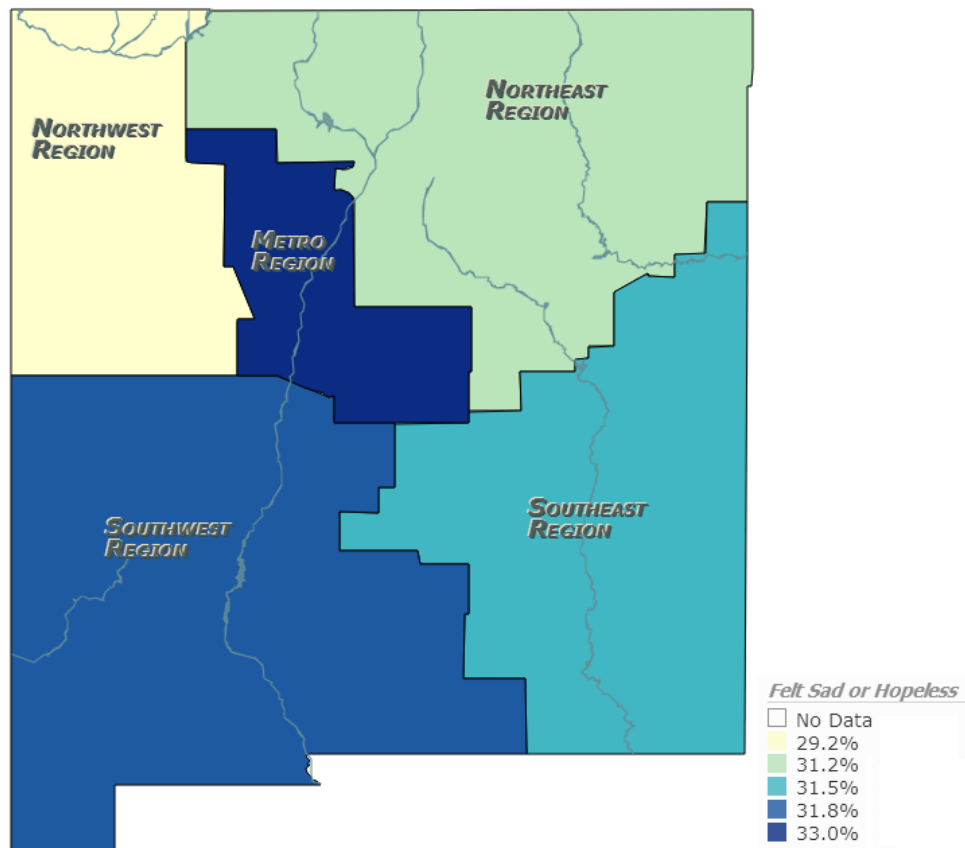
# 1 MENTAL HEALTH IN THE GENERAL POPULATION

## 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.

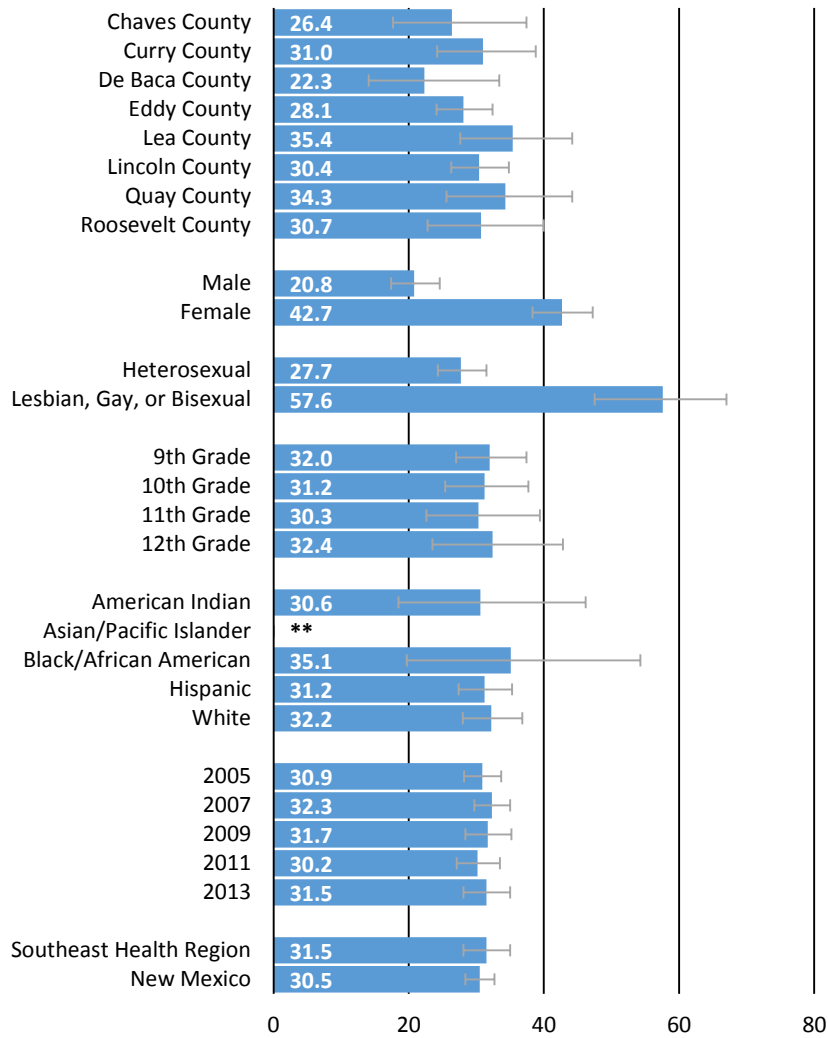
Students with persistent feelings of sadness or hopelessness were identified by answering "Yes", to the question, "During the past 12 months, did you ever feel so sad or hopeless almost every day for two weeks or more in a row that you stopped doing some usual activities?" More information: [https://ibis.health.state.nm.us/indicator/view/MentHlthYouth.Year.NM\\_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

Southeast 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.

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

	Count	Sample Size	Percentage	LCL	UCL	Statistical Stability
Chaves County	58	228	26.4	17.7	37.4	-
Curry County	95	329	31.0	24.2	38.8	-
De Baca County	15	69	22.3	14.1	33.4	-
Eddy County	184	628	28.1	24.1	32.4	-
Lea County	161	483	35.4	27.6	44.2	-
Lincoln County	136	452	30.4	26.3	34.8	-
Quay County	66	203	34.3	25.6	44.2	-
Roosevelt County	61	205	30.7	22.8	40.0	-
Male	282	1,323	20.8	17.4	24.6	-
Female	494	1,273	42.7	38.3	47.2	-
Heterosexual	611	2265	27.7	24.3	31.5	-
Lesbian, Gay, or Bisexual	123	205	57.6	47.5	67.0	-
9th Grade	270	857	32.0	27.0	37.4	-
10th Grade	221	751	31.2	25.4	37.7	-
11th Grade	142	480	30.3	22.6	39.4	-
12th Grade	138	493	32.4	23.5	42.8	-
American Indian	27	93	30.6	18.5	46.2	-
Asian/Pacific Islander	**	**	**	**	**	n/a
Black/African American	22	58	35.1	19.7	54.3	-
Hispanic	466	1,537	31.2	27.4	35.3	-
White	241	854	32.2	28.0	36.8	-
2005	644	2,157	30.9	28.2	33.7	-
2007	703	2,358	32.3	29.7	35.0	-
2009	881	2,909	31.7	28.4	35.2	-
2011	754	2,581	30.2	27.1	33.5	-
2013	776	2,597	31.5	28.1	35.0	-
Southeast Health Region	776	2,597	31.5	28.1	35.0	-
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

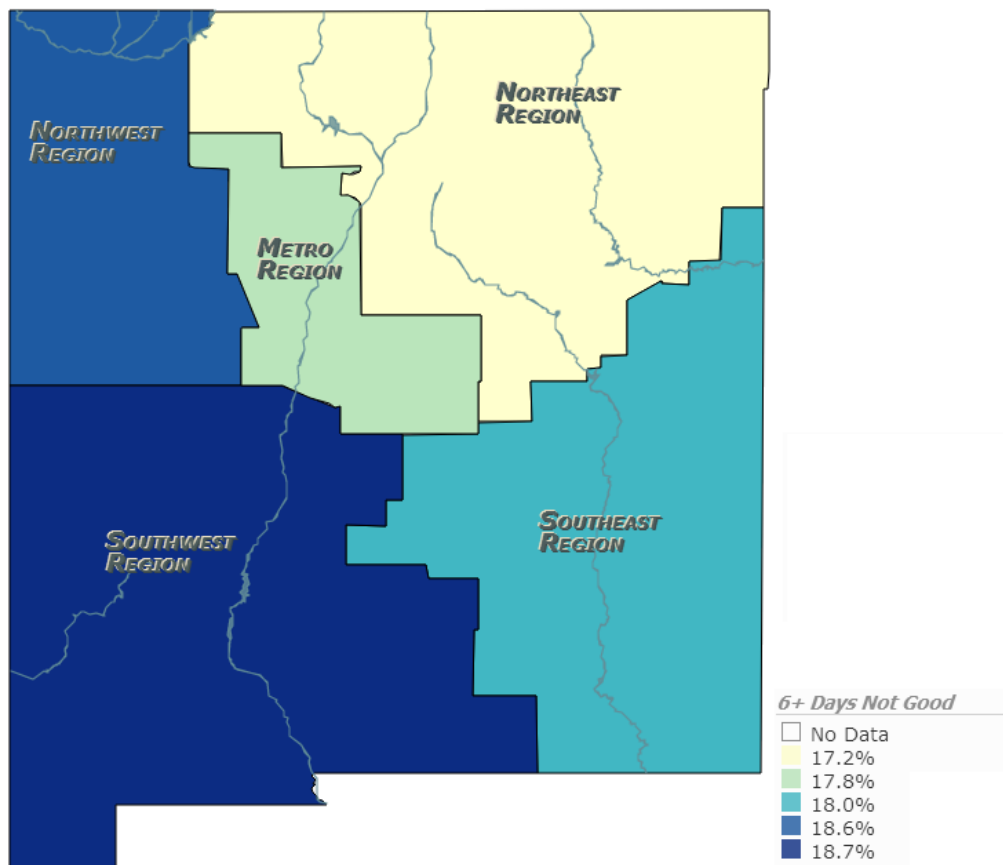
\*\* The values in these cells have been suppressed because there were fewer than 50 survey responses.

## 1.2 ADULT FREQUENT MENTAL DISTRESS

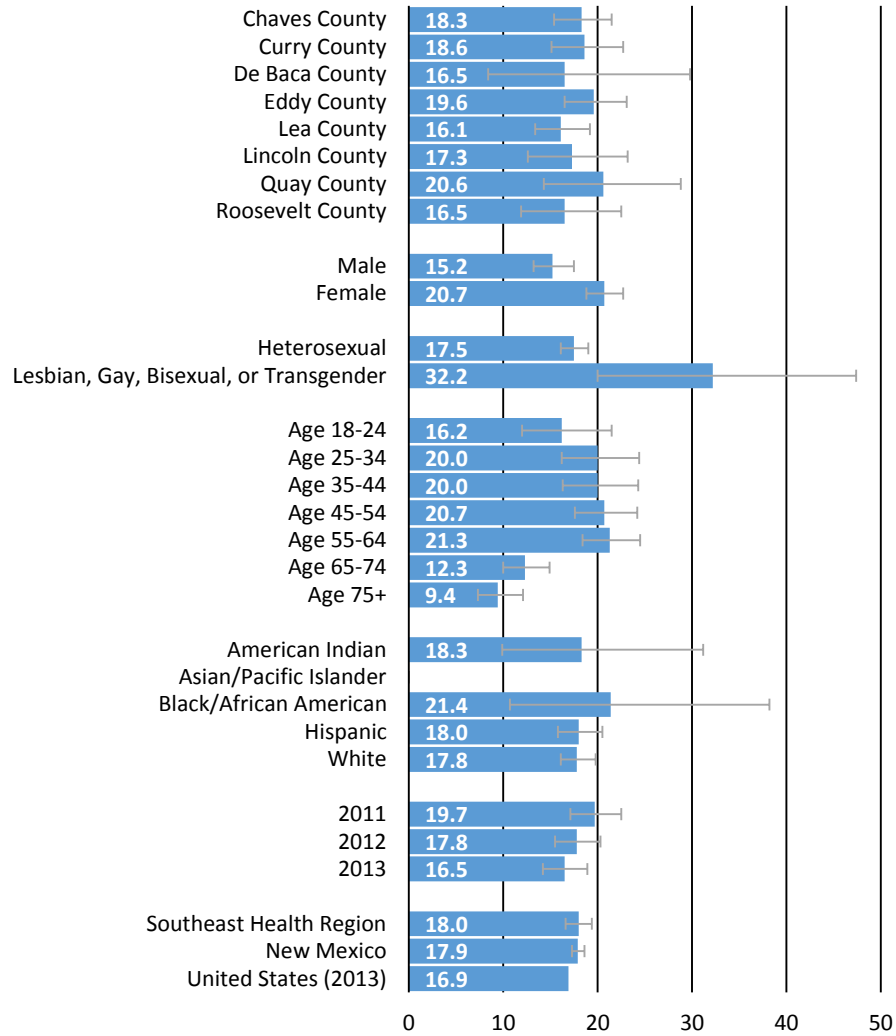
Mental health and mental disorders can be influenced by numerous factors including biologic and genetic vulnerabilities, acute or chronic physical dysfunction, and environmental conditions and stresses. According to the Substance Abuse and Mental Health Services Administration (SAMHSA), approximately 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  
Southeast 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.

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**Southeast 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
Chaves County	192	1,111	18.3	15.4	21.5	-
Curry County	119	694	18.6	15.1	22.7	-
De Baca County	13	83	16.5	8.4	29.8	-
Eddy County	176	971	19.6	16.5	23.1	-
Lea County	163	989	16.1	13.4	19.2	-
Lincoln County	62	383	17.3	12.6	23.2	-
Quay County	36	204	20.6	14.3	28.8	-
Roosevelt County	53	302	16.5	11.9	22.5	-
Male	267	1,861	15.2	13.2	17.5	-
Female	547	2,876	20.7	18.8	22.7	-
Heterosexual	770	4544	17.5	16.1	19.0	-
Lesbian, Gay, Bisexual, or Transgender	20	68	32.2	20.0	47.4	-
Age 18-24	46	262	16.2	12.0	21.5	-
Age 25-34	95	472	20.0	16.2	24.4	-
Age 35-44	103	540	20.0	16.3	24.3	-
Age 45-54	165	782	20.7	17.6	24.2	-
Age 55-64	212	1,027	21.3	18.4	24.5	-
Age 65-74	119	885	12.3	10.0	14.9	-
Age 75+	72	742	9.4	7.3	12.1	-
American Indian	15	69	18.3	9.9	31.2	-
Asian/Pacific Islander	**	20	**	**	**	n/a
Black/African American	12	81	21.4	10.7	38.2	-
Hispanic	294	1,623	18.0	15.8	20.5	-
White	478	2,883	17.8	16.1	19.8	-
2011	280	1,577	19.7	17.1	22.5	-
2012	279	1,588	17.8	15.5	20.3	-
2013	255	1,572	16.5	14.2	18.9	-
Southeast Health Region	814	4,737	18.0	16.6	19.4	-
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?

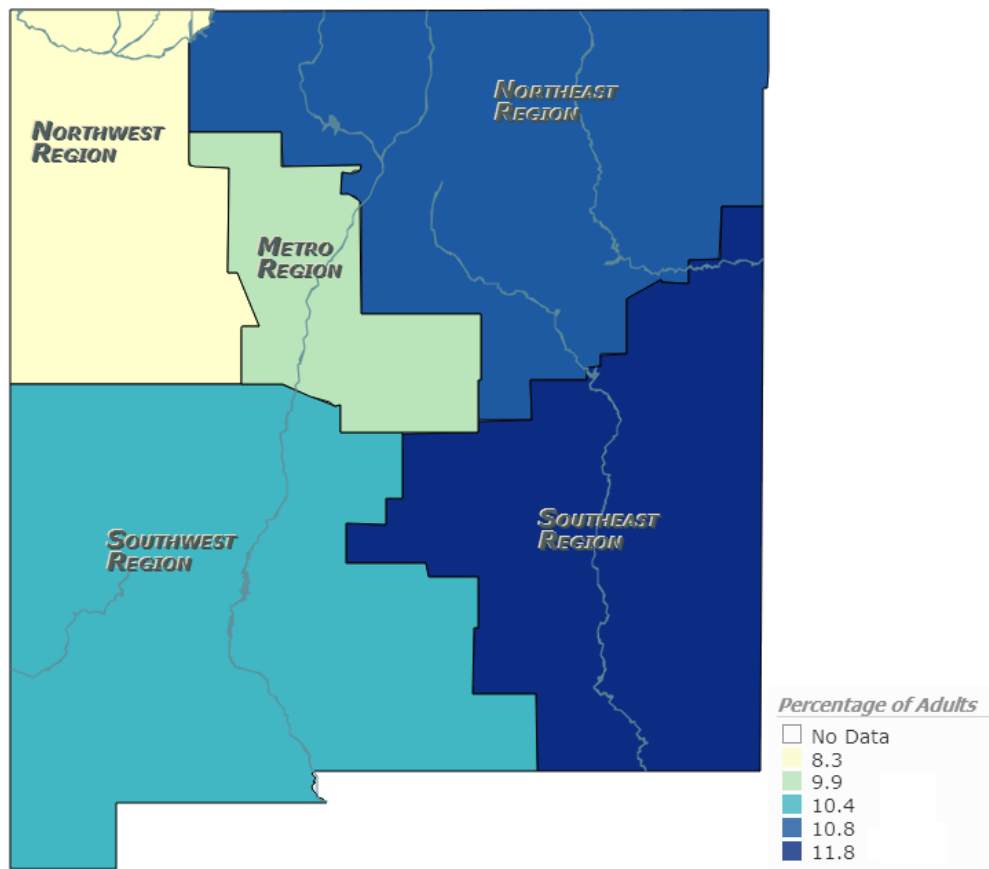
### 1.3 ADULT DEPRESSION

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.

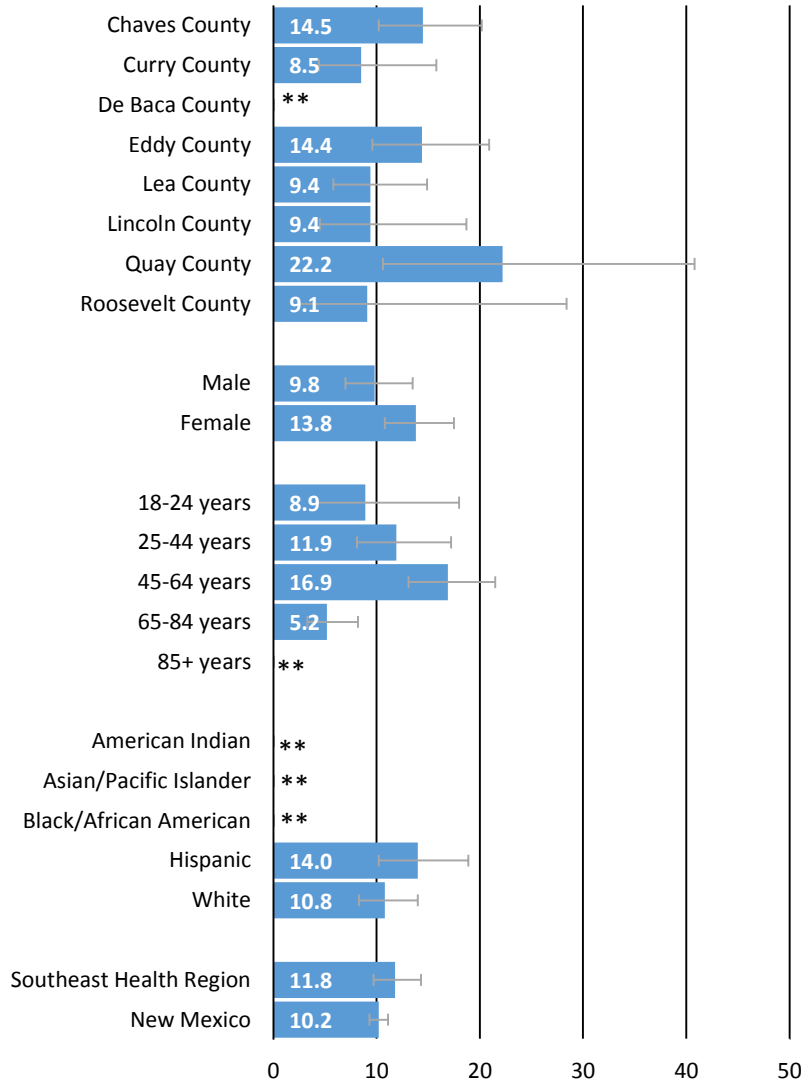
The Anxiety and Depression Module in the 2011 NM BRFSS included the first eight questions from the Patient Health Questionnaire, an instrument that can establish a provisional depressive disorder diagnosis using Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition criteria. Patients 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  
Southeast Health Region  
2011



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

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**Southeast Health Region**  
**Percentage of Adults with Current Depression**  
**2011**

	Count	Sample Size	Percentage	LCL	UCL	Statistical Stability
Chaves County	44	331	14.5	10.2	20.2	-
Curry County	14	191	8.5	4.4	15.8	Unstable
De Baca County	**	**	**	**	**	n/a
Eddy County	36	280	14.4	9.6	20.9	-
Lea County	24	276	9.4	5.8	14.9	-
Lincoln County	9	102	9.4	4.5	18.7	Very Unstable
Quay County	10	53	22.2	10.6	40.8	Unstable
Roosevelt County	6	82	9.1	2.5	28.4	Very Unstable
Male	51	516	9.8	7.0	13.5	-
Female	93	816	13.8	10.8	17.5	-
18-24 years	8	65	8.9	4.2	18.0	Very Unstable
25-44 years	31	274	11.9	8.1	17.2	-
45-64 years	80	527	16.9	13.1	21.5	-
65-84 years	23	407	5.2	3.3	8.2	-
85+ years	0	51	0.0	-	-	No Variance
American Indian	**	**	**	**	**	n/a
Asian/Pacific Islander	**	**	**	**	**	n/a
Black/African American	**	**	**	**	**	n/a
Hispanic	54	423	14.0	10.2	18.9	-
White	84	835	10.8	8.3	14.0	-
Southeast Health Region	144	1,332	11.8	9.7	14.3	-
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.

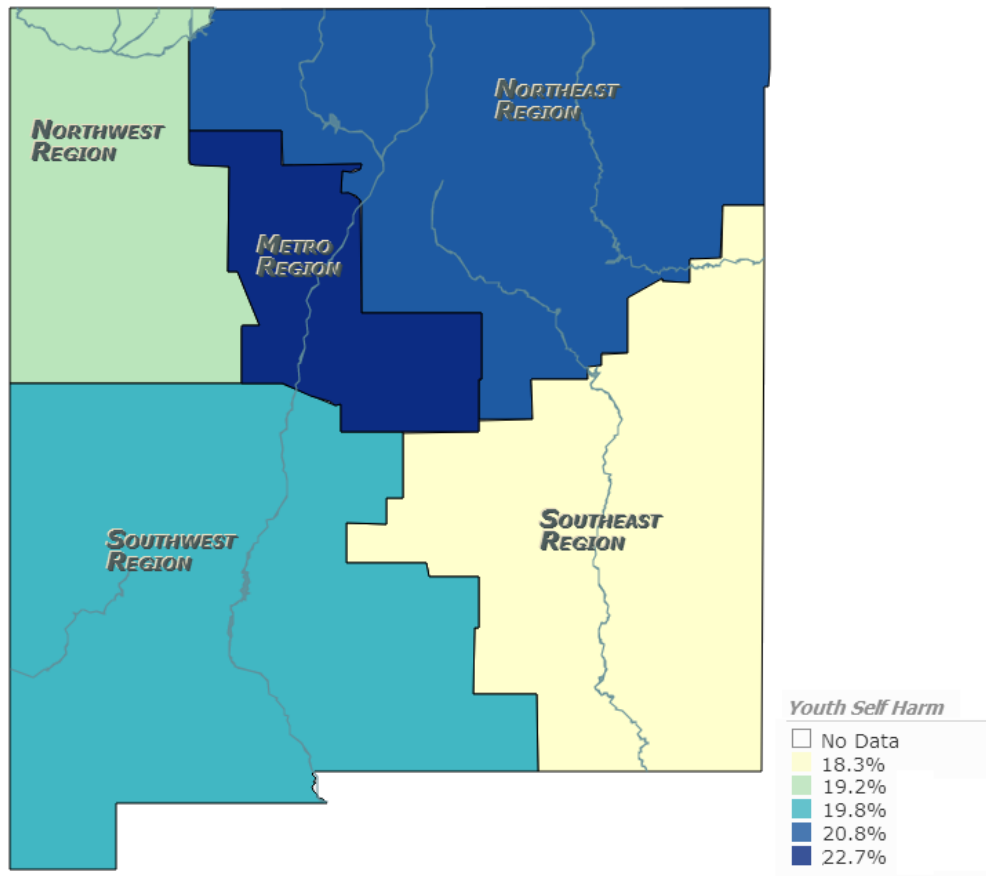
\*\* The values in these cells have been suppressed because there were fewer than 50 survey responses.

## 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.

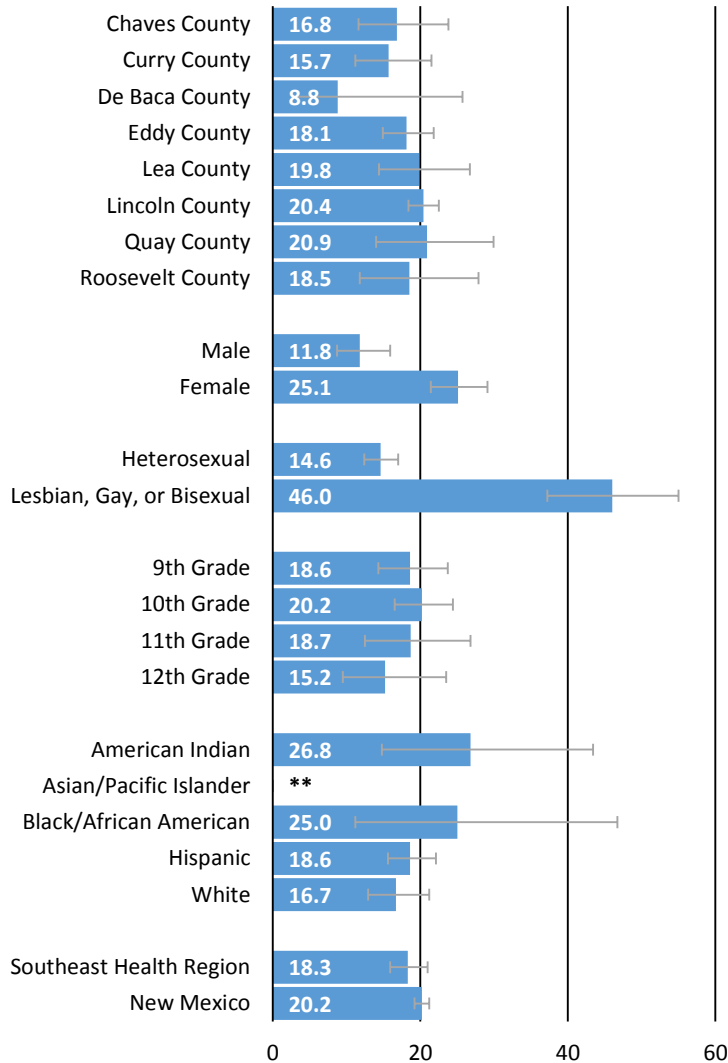
**Percentage of Students Who Intentionally Hurt Themselves in the Past 12 Months by Health Region, New Mexico, 2013**





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

Southeast Health Region  
2013



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

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

	Count	Sample Size	Percentage	LCL	UCL	Statistical Stability
Chaves County	38	228	16.8	11.6	23.8	-
Curry County	48	329	15.7	11.2	21.5	-
De Baca County	6	69	8.8	2.6	25.7	Very Unstable
Eddy County	116	626	18.1	14.9	21.8	-
Lea County	93	483	19.8	14.4	26.7	-
Lincoln County	90	452	20.4	18.4	22.5	-
Quay County	39	203	20.9	14.0	29.9	-
Roosevelt County	38	204	18.5	11.8	27.9	-
Male	161	1,322	11.8	8.7	15.9	-
Female	307	1,271	25.1	21.4	29.1	-
Heterosexual	327	2264	14.6	12.4	17.0	-
Lesbian, Gay, or Bisexual	106	204	46.0	37.2	55.0	-
9th Grade	171	854	18.6	14.3	23.7	-
10th Grade	152	752	20.2	16.5	24.4	-
11th Grade	78	481	18.7	12.5	26.8	-
12th Grade	63	492	15.2	9.5	23.5	-
American Indian	25	93	26.8	14.8	43.4	Unstable
Asian/Pacific Islander	**	**	**	**	**	n/a
Black/African American	14	58	25.0	11.2	46.7	Unstable
Hispanic	268	1,533	18.6	15.6	22.1	-
White	146	855	16.7	12.9	21.2	-
Southeast Health Region	468	2,594	18.3	15.9	21.0	-
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.

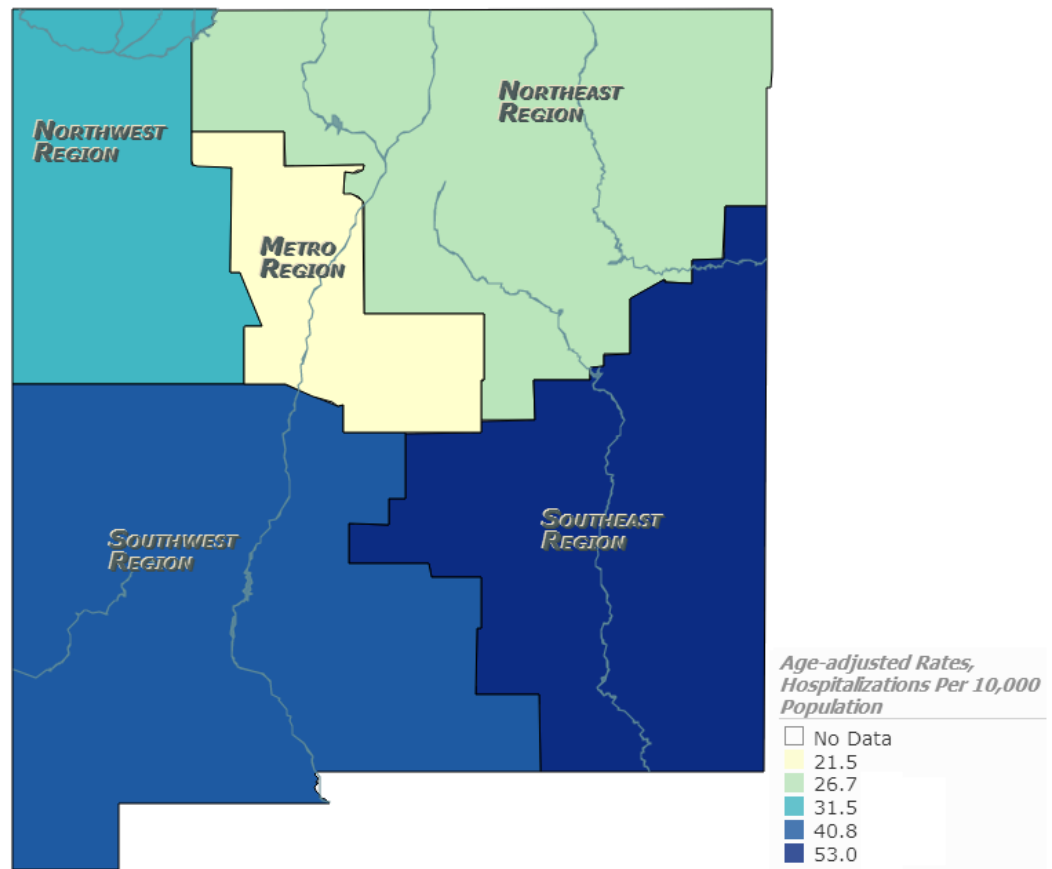
### 3 ACUTE MENTAL ILLNESS

#### 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 23<sup>rd</sup> for prevalence of major depressive disorder among adults, and 9<sup>th</sup> for prevalence among adolescents 12-17 years. From 2009-2013, there were 30.1 hospital discharges for mood disorders per 10,000 NM residents.

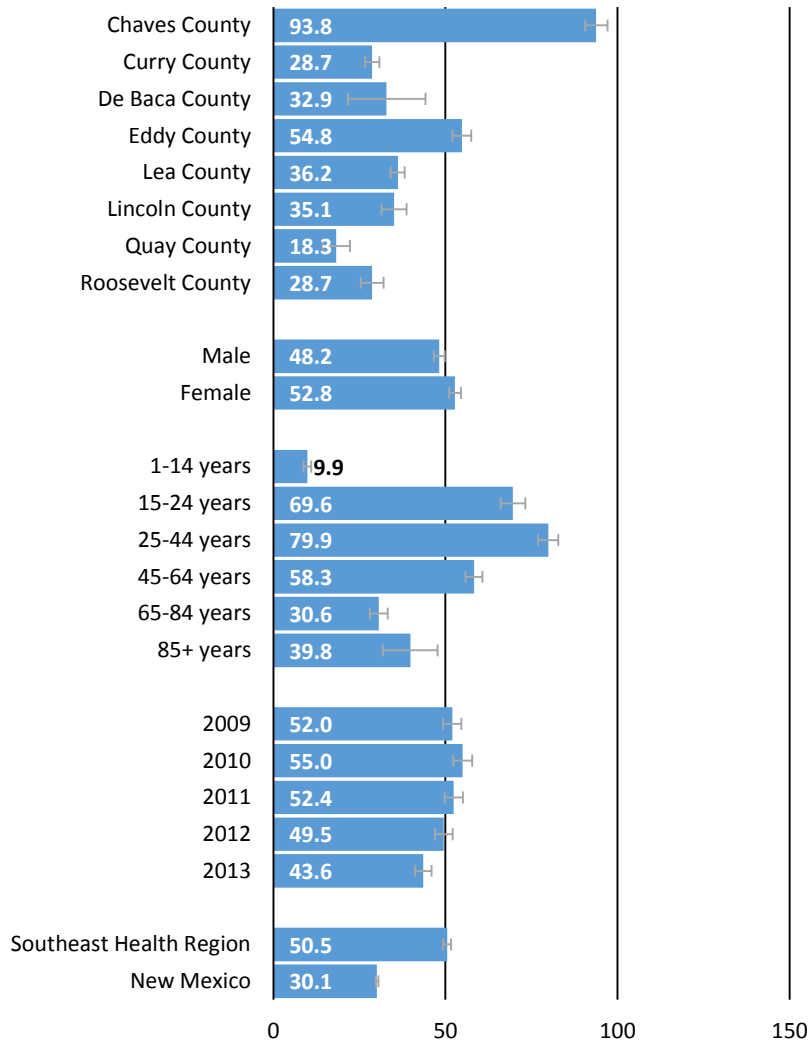
Hospital discharges for mood disorders include inpatient hospital records with a primary diagnosis of ICD-9 codes 296 (episodic mood disorders) or 311 (depressive disorder). Sexual orientation data are not submitted to the HIDD dataset. Race/ethnicity data are not reported due to the high prevalence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

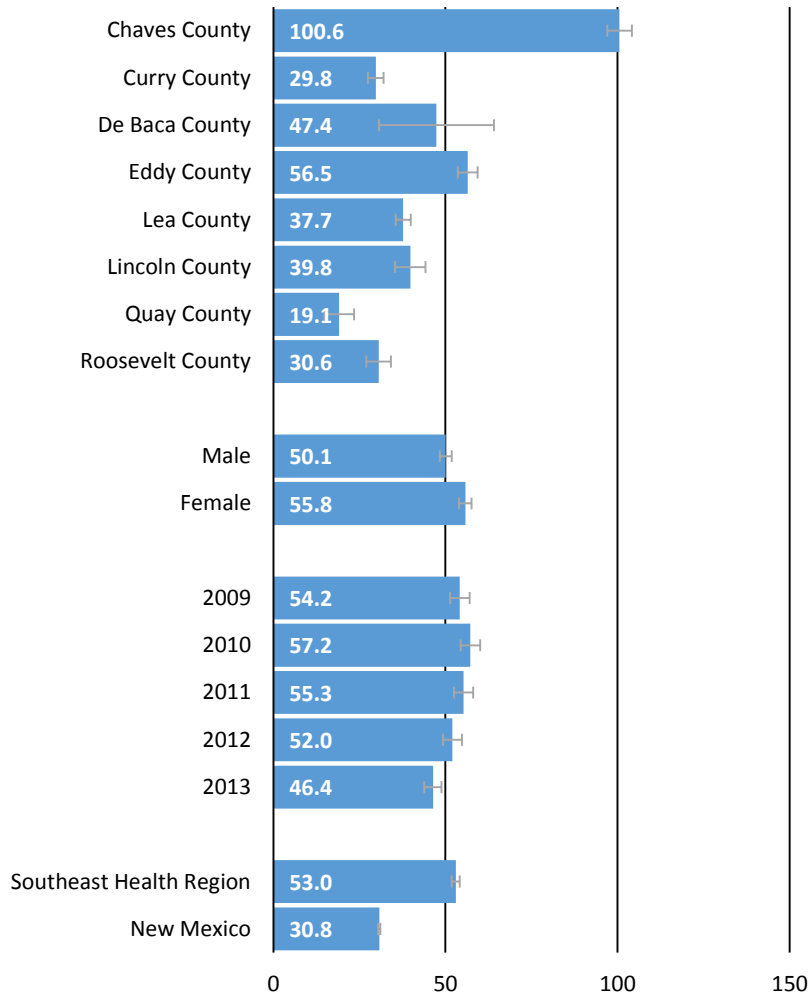
#### Southeast Health Region 2009-2013



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 \*

Southeast 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.

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**Southeast 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
Chaves County	3,091	329,349	93.8	90.6	97.1	-	100.6	97.0	104.2	-
Curry County	705	245,775	28.7	26.6	30.8	-	29.8	27.5	32.0	-
De Baca County	33	10,019	32.9	21.7	44.2	-	47.4	30.7	64.1	-
Eddy County	1,492	272,516	54.8	52.0	57.5	-	56.5	53.6	59.4	-
Lea County	1,190	329,023	36.2	34.1	38.2	-	37.7	35.6	39.9	-
Lincoln County	360	102,575	35.1	31.5	38.7	-	39.8	35.4	44.2	-
Quay County	82	44,766	18.3	14.4	22.3	-	19.1	14.8	23.5	-
Roosevelt County	289	100,818	28.7	25.4	32.0	-	30.6	27.0	34.2	-
Male	3,461	718,853	48.2	46.6	49.8	-	50.1	48.4	51.8	-
Female	3,781	715,987	52.8	51.1	54.5	-	55.8	54.0	57.6	-
1-14 years	298	301,781	9.9	8.8	11.0	-				
15-24 years	1,443	207,200	69.6	66.1	73.2	-				
25-44 years	2,809	351,639	79.9	76.9	82.8	-				
45-64 years	2,068	354,970	58.3	55.8	60.8	-				
65-84 years	528	172,440	30.6	28.0	33.2	-				
85+ years	96	24,122	39.8	31.8	47.7	-				
2009	1,467	282,165	52.0	49.3	54.6	-	54.2	51.4	57.0	-
2010	1,565	284,393	55.0	52.3	57.8	-	57.2	54.4	60.1	-
2011	1,506	287,204	52.4	49.8	55.1	-	55.3	52.5	58.1	-
2012	1,430	288,851	49.5	47.0	52.1	-	52.0	49.3	54.8	-
2013	1,274	292,227	43.6	41.2	46.0	-	46.4	43.8	48.9	-
Southeast Health Region	7,242	1,434,840	50.5	49.3	51.6	-	53.0	51.8	54.2	-
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

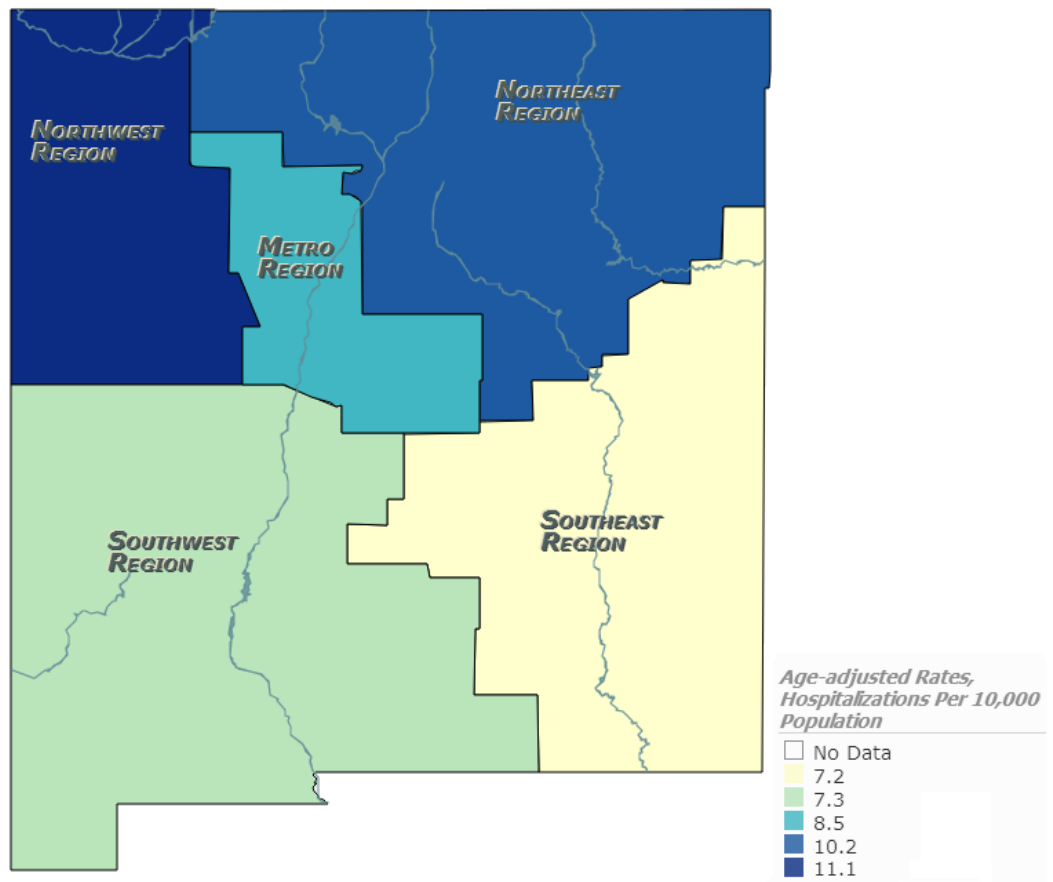
\* Age-adjusted to the U.S. 2000 standard population.

### 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 15<sup>th</sup> for prevalence of alcohol abuse or dependence among adults, and 6<sup>th</sup> 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.

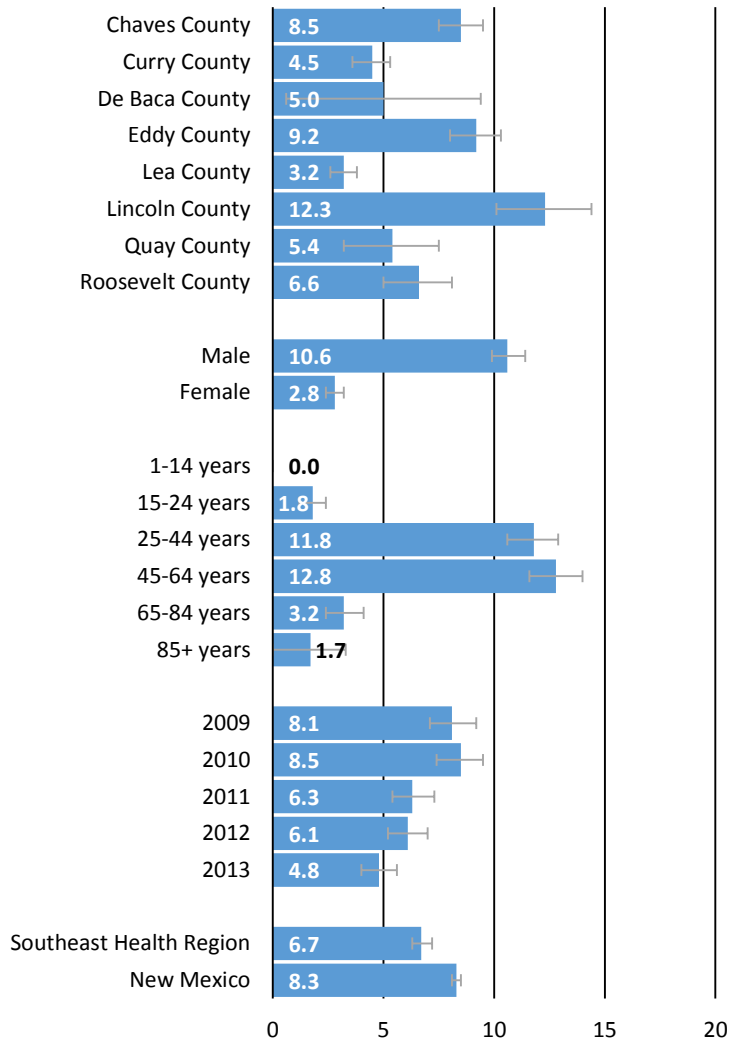
Hospital discharges for alcohol-related mental disorders include inpatient hospital records with a primary diagnosis of ICD-9 codes 291 (alcohol-induced mental disorder) or 303 (alcohol dependence). Sexual orientation data are not submitted to the HIDD dataset. Race/ethnicity data are not reported due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

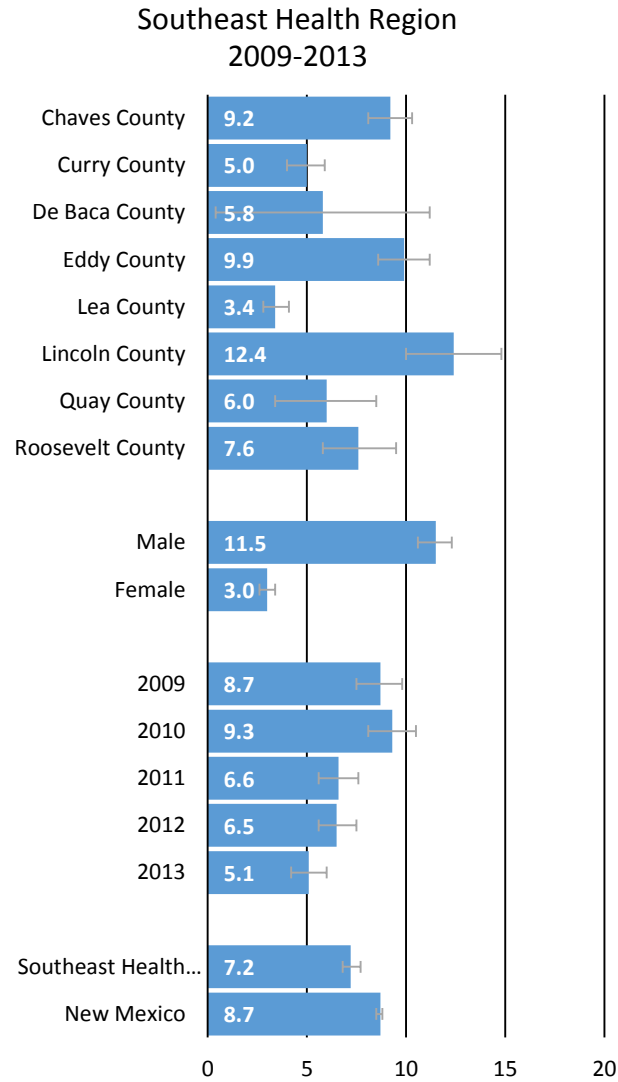
Southeast Health Region  
2009-2013



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 \*



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

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

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**Southeast 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
Chaves County	281	329,349	8.5	7.5	9.5	-	9.2	8.1	10.3	-
Curry County	110	245,775	4.5	3.6	5.3	-	5.0	4.0	5.9	-
De Baca County	5	10,019	5.0	0.6	9.4	Unstable	5.8	0.4	11.2	Unstable
Eddy County	250	272,516	9.2	8.0	10.3	-	9.9	8.6	11.2	-
Lea County	104	329,023	3.2	2.6	3.8	-	3.4	2.8	4.1	-
Lincoln County	126	102,575	12.3	10.1	14.4	-	12.4	10.0	14.8	-
Quay County	24	44,766	5.4	3.2	7.5	-	6.0	3.4	8.5	-
Roosevelt County	66	100,818	6.6	5.0	8.1	-	7.6	5.8	9.5	-
Male	764	718,853	10.6	9.9	11.4	-	11.5	10.6	12.3	-
Female	202	715,987	2.8	2.4	3.2	-	3.0	2.6	3.4	-
1-14 years	1	301,781	0.0	-	-	No Variance				
15-24 years	37	207,200	1.8	1.2	2.4	-				
25-44 years	414	351,639	11.8	10.6	12.9	-				
45-64 years	454	354,970	12.8	11.6	14.0	-				
65-84 years	56	172,440	3.2	2.4	4.1	-				
85+ years	4	24,122	1.7	0.0	3.3	Unstable				
2009	229	282,165	8.1	7.1	9.2	-	8.7	7.5	9.8	-
2010	241	284,393	8.5	7.4	9.5	-	9.3	8.1	10.5	-
2011	182	287,204	6.3	5.4	7.3	-	6.6	5.6	7.6	-
2012	175	288,851	6.1	5.2	7.0	-	6.5	5.6	7.5	-
2013	139	292,227	4.8	4.0	5.6	-	5.1	4.2	6.0	-
Southeast Health Region	966	1,434,840	6.7	6.3	7.2	-	7.2	6.8	7.7	-
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

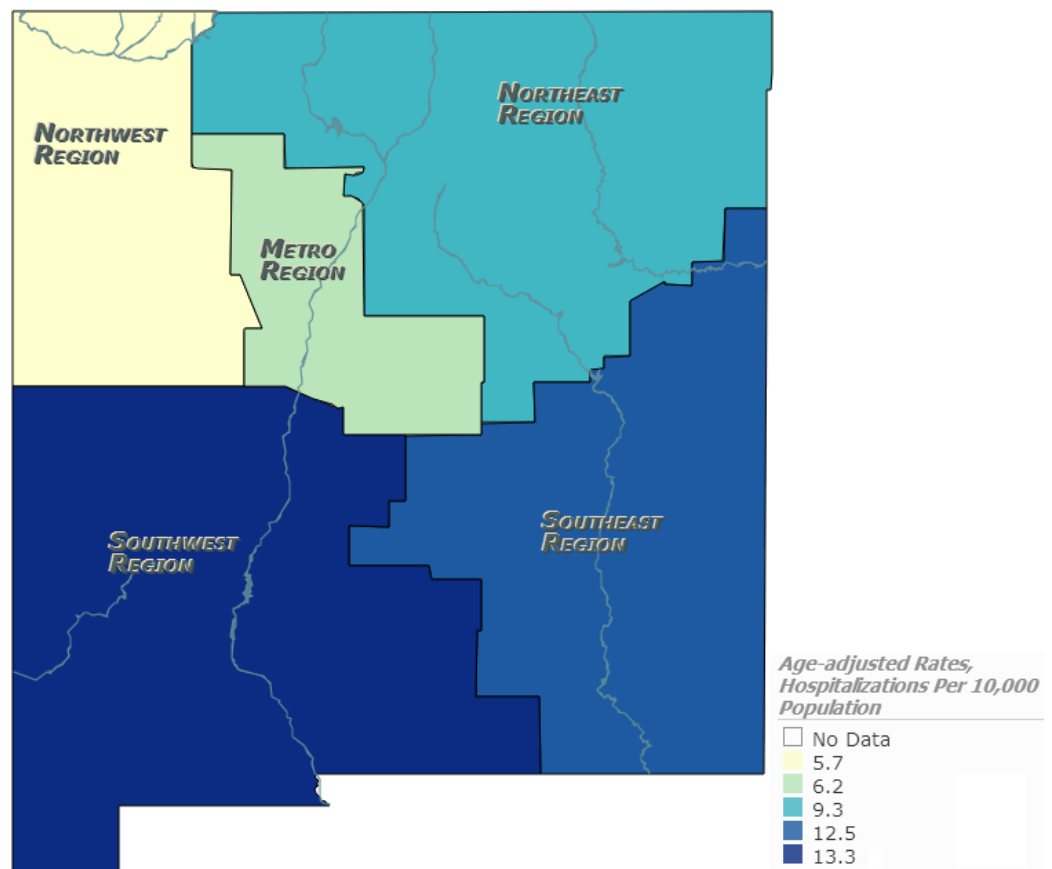
\* Age-adjusted to the U.S. 2000 standard population.

### 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.

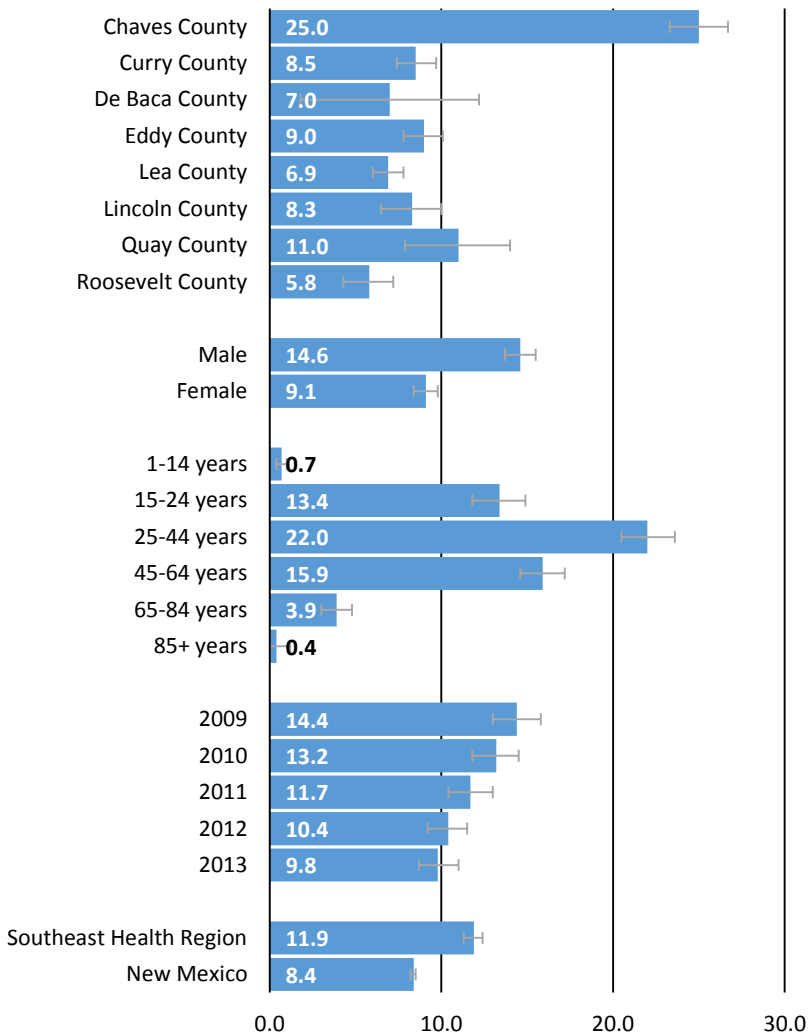
Hospital discharges for schizophrenic disorders include inpatient hospital records with a primary diagnosis of ICD-9 code 295. Sexual orientation data are not submitted to the HIDD dataset. Race/ethnicity data are not reported due to the high prevalence of missing entries. US hospital data are not available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

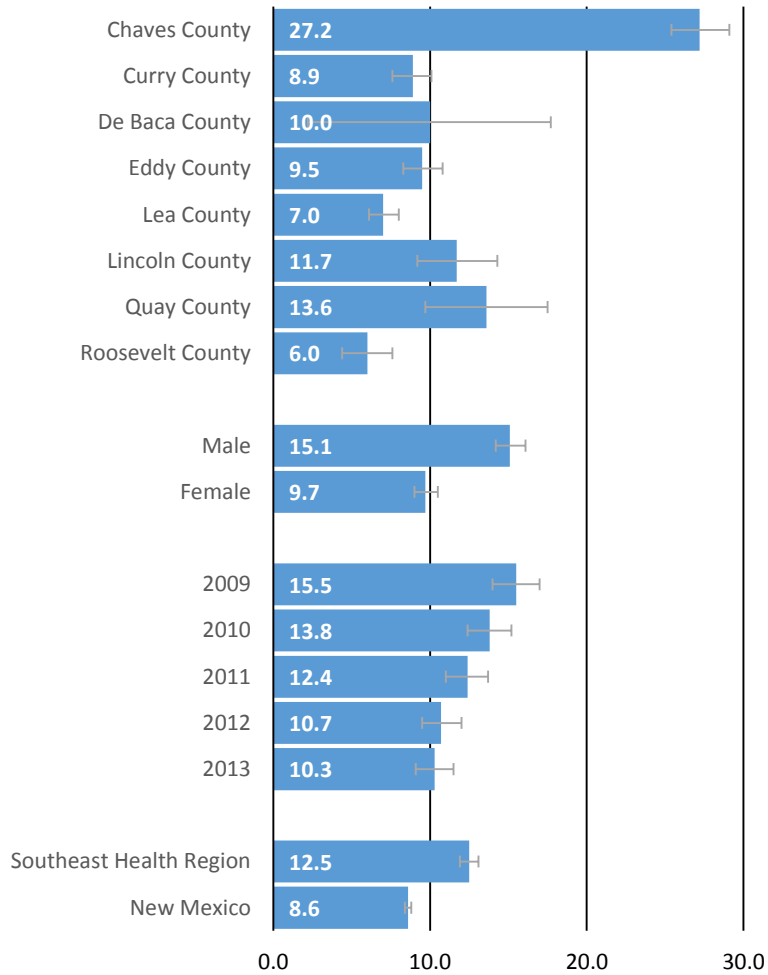
#### Southeast Health Region 2009-2013



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

Hospital Discharges for Schizophrenic Disorders  
per 10,000 Population\*

Southeast 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.

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**Southeast 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
Chaves County	824	329,349	25.0	23.3	26.7	-	27.2	25.4	29.1	-
Curry County	210	245,775	8.5	7.4	9.7	-	8.9	7.6	10.1	-
De Baca County	7	10,019	7.0	1.8	12.2	Unstable	10.0	2.2	17.7	Unstable
Eddy County	244	272,516	9.0	7.8	10.1	-	9.5	8.3	10.8	-
Lea County	226	329,023	6.9	6.0	7.8	-	7.0	6.1	8.0	-
Lincoln County	85	102,575	8.3	6.5	10.0	-	11.7	9.2	14.3	-
Quay County	49	44,766	11.0	7.9	14.0	-	13.6	9.7	17.5	-
Roosevelt County	58	100,818	5.8	4.3	7.2	-	6.0	4.4	7.6	-
Male	1,049	718,853	14.6	13.7	15.5	-	15.1	14.2	16.1	-
Female	654	715,987	9.1	8.4	9.8	-	9.7	9.0	10.5	-
1-14 years	21	301,781	0.7	0.4	1.0	-				
15-24 years	277	207,200	13.4	11.8	14.9	-				
25-44 years	774	351,639	22.0	20.5	23.6	-				
45-64 years	563	354,970	15.9	14.6	17.2	-				
65-84 years	67	172,440	3.9	3.0	4.8	-				
85+ years	1	24,122	0.4	0.0	1.2	Very Unstable				
2009	407	282,165	14.4	13.0	15.8	-	15.5	14.0	17.0	-
2010	374	284,393	13.2	11.8	14.5	-	13.8	12.4	15.2	-
2011	336	287,204	11.7	10.4	13.0	-	12.4	11.0	13.7	-
2012	299	288,851	10.4	9.2	11.5	-	10.7	9.5	12.0	-
2013	287	292,227	9.8	8.7	11.0	-	10.3	9.1	11.5	-
Southeast Health Region	1,703	1,434,840	11.9	11.3	12.4	-	12.5	11.9	13.1	-
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

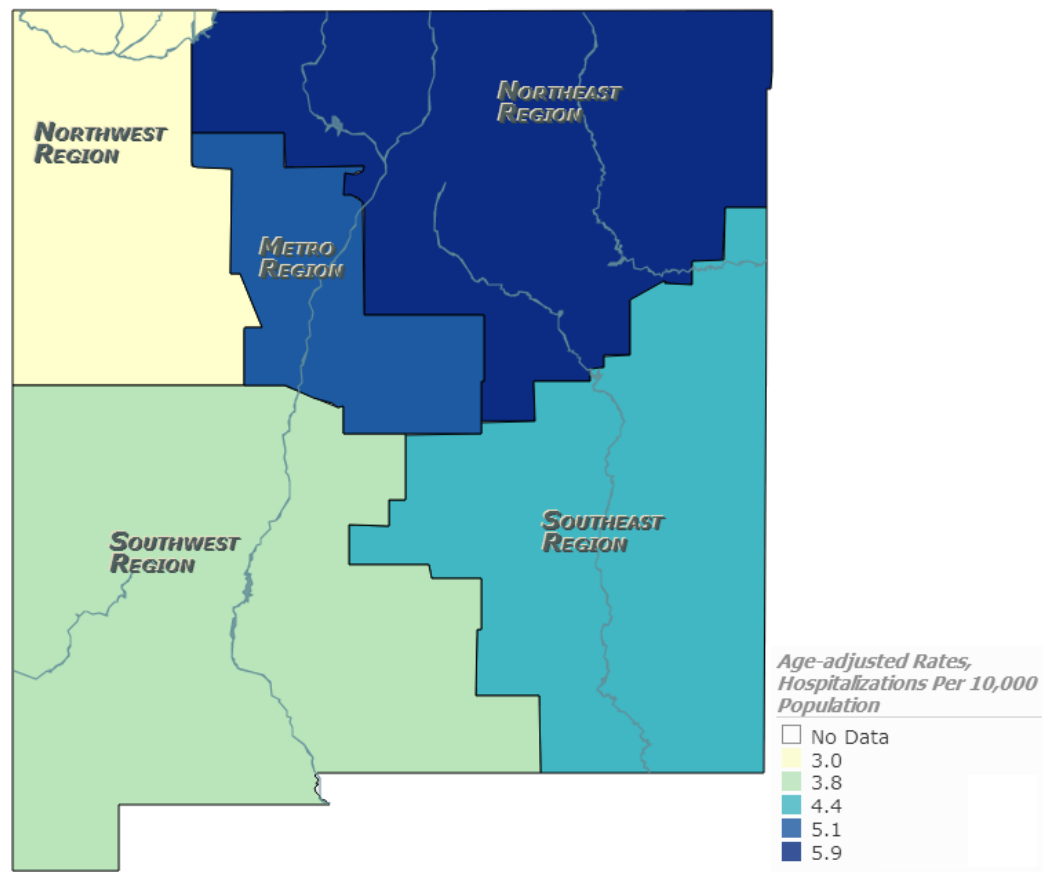
\* Age-adjusted to the U.S. 2000 standard population.

### 3.4 HOSPITAL DISCHARGES FOR DRUG-RELATED MENTAL DISORDERS

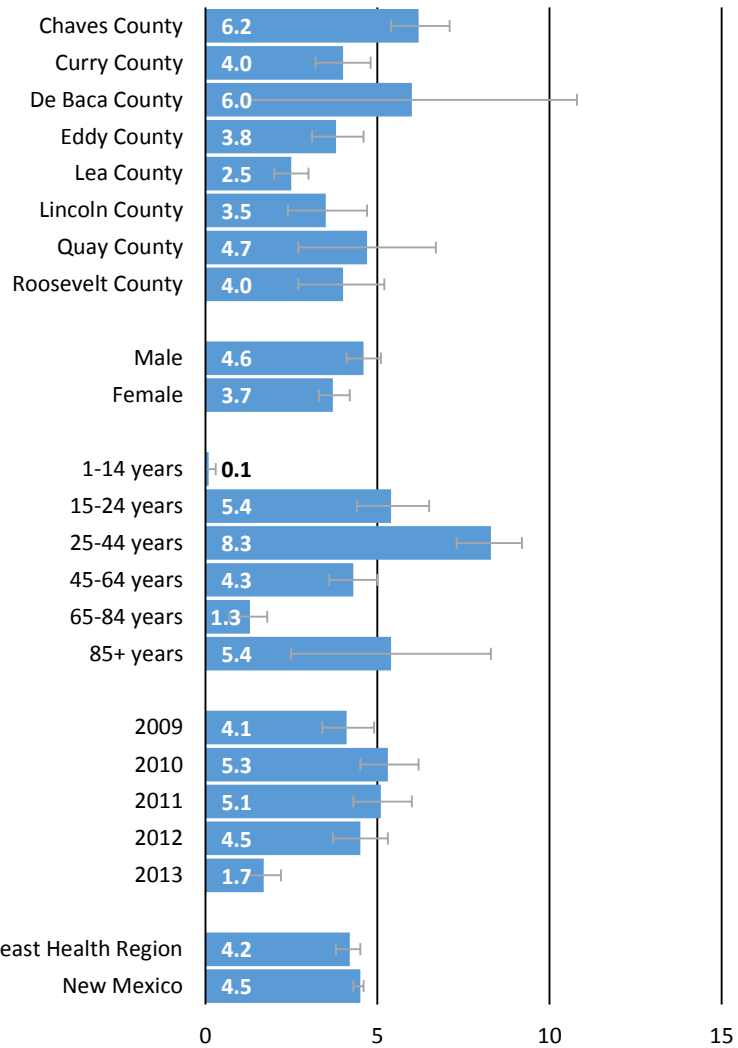
Mental disorders cause changes in thinking, mood, and behavior and can affect decision-making and quality of life. Acute episodes of mental illness often result in hospitalizations. In 2013, drug-related mental disorders were the fourth most common reason for psychiatric hospital admission in NM. From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

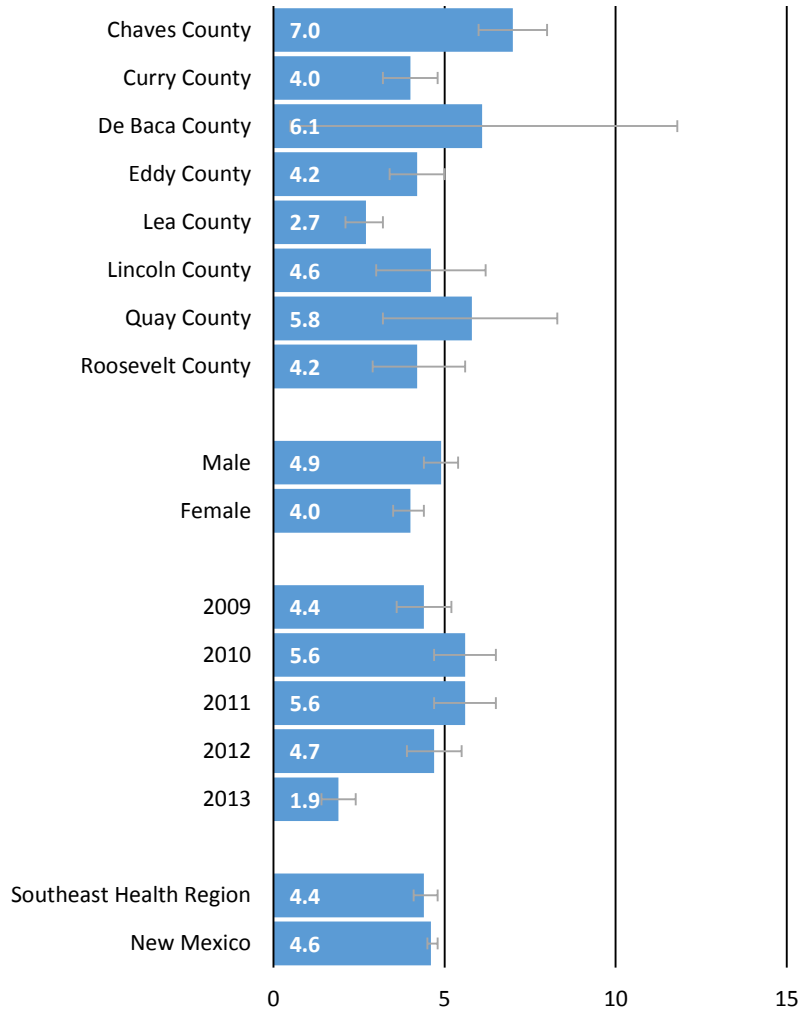


Source: Hospital Inpatient Discharge Data, New Mexico Department of Health, Health Systems Epidemiology Program



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

Southeast 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.

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**Southeast 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
Chaves County	206	329,349	6.2	5.4	7.1	-	7.0	6.0	8.0	-
Curry County	99	245,775	4.0	3.2	4.8	-	4.0	3.2	4.8	-
De Baca County	6	10,019	6.0	1.2	10.8	Unstable	6.1	0.5	11.8	Unstable
Eddy County	105	272,516	3.8	3.1	4.6	-	4.2	3.4	5.0	-
Lea County	82	329,023	2.5	2.0	3.0	-	2.7	2.1	3.2	-
Lincoln County	36	102,575	3.5	2.4	4.7	-	4.6	3.0	6.2	-
Quay County	21	44,766	4.7	2.7	6.7	-	5.8	3.2	8.3	-
Roosevelt County	40	100,818	4.0	2.7	5.2	-	4.2	2.9	5.6	-
Male	330	718,853	4.6	4.1	5.1	-	4.9	4.4	5.4	-
Female	265	715,987	3.7	3.3	4.2	-	4.0	3.5	4.4	-
1-14 years	4	301,781	0.1	0.0	0.3	Very Unstable				
15-24 years	113	207,200	5.4	4.4	6.5	-				
25-44 years	291	351,639	8.3	7.3	9.2	-				
45-64 years	152	354,970	4.3	3.6	5.0	-				
65-84 years	22	172,440	1.3	0.7	1.8	-				
85+ years	13	24,122	5.4	2.5	8.3	-				
2009	116	282,165	4.1	3.4	4.9	-	4.4	3.6	5.2	-
2010	152	284,393	5.3	4.5	6.2	-	5.6	4.7	6.5	-
2011	147	287,204	5.1	4.3	6.0	-	5.6	4.7	6.5	-
2012	130	288,851	4.5	3.7	5.3	-	4.7	3.9	5.5	-
2013	50	292,227	1.7	1.2	2.2	-	1.9	1.4	2.4	-
Southeast Health Region	595	1,434,840	4.2	3.8	4.5	-	4.4	4.1	4.8	-
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.

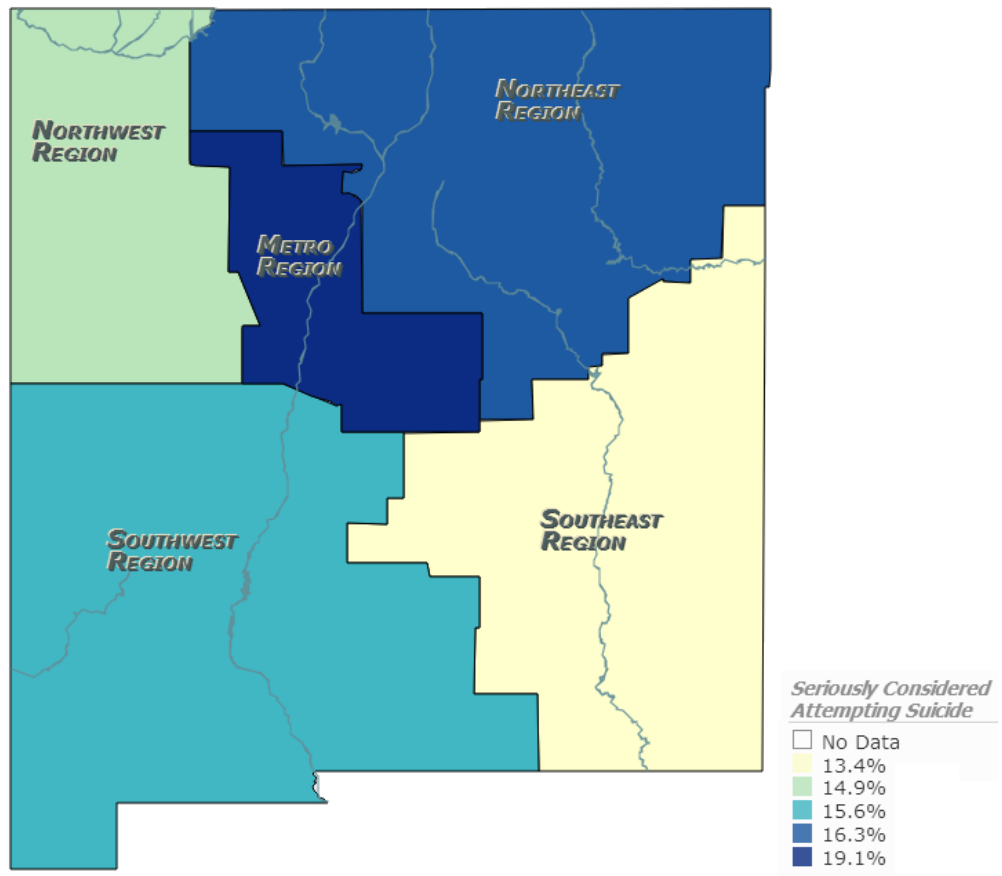
## 4 YOUTH SUICIDAL BEHAVIOR

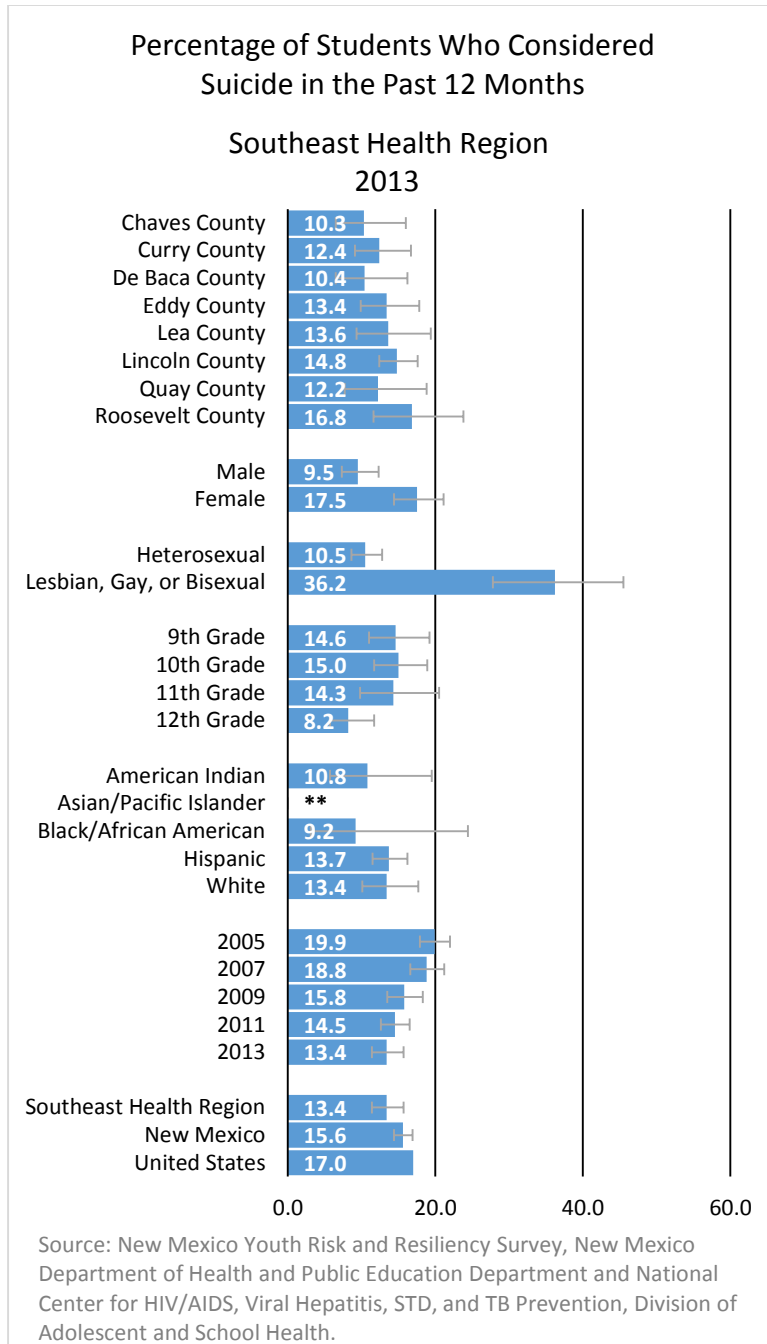
### 4.1 YOUTH WHO SERIOUSLY CONSIDERED SUICIDE

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 21<sup>st</sup> 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](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**





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

	Count	Sample Size	Percentage	LCL	UCL	Statistical Stability
Chaves County	20	228	10.3	6.5	16.0	-
Curry County	39	328	12.4	9.1	16.7	-
De Baca County	7	69	10.4	6.5	16.2	-
Eddy County	81	626	13.4	9.9	17.8	-
Lea County	76	483	13.6	9.3	19.4	-
Lincoln County	65	452	14.8	12.4	17.6	-
Quay County	25	203	12.2	7.7	18.8	-
Roosevelt County	28	205	16.8	11.6	23.8	-
Male	126	1,324	9.5	7.3	12.3	-
Female	214	1,269	17.5	14.4	21.1	-
Heterosexual	236	2,263	10.5	8.6	12.8	-
Lesbian, Gay, or Bisexual	79	204	36.2	27.8	45.5	-
9th Grade	120	857	14.6	11.0	19.2	-
10th Grade	107	751	15.0	11.7	18.9	-
11th Grade	65	479	14.3	9.8	20.5	-
12th Grade	43	492	8.2	5.7	11.7	-
American Indian	13	93	10.8	5.7	19.5	Unstable
Asian/Pacific Islander	**	**	**	**	**	n/a
Black/African American	8	58	9.2	3.1	24.4	Very Unstable
Hispanic	193	1,534	13.7	11.5	16.2	-
White	114	855	13.4	10.1	17.7	-
2005	401	2,156	19.9	17.9	22.0	-
2007	397	2,370	18.8	16.6	21.2	-
2009	436	2,906	15.8	13.5	18.3	-
2011	348	2,576	14.5	12.6	16.5	-
2013	341	2,594	13.4	11.4	15.7	-
Southeast Health Region	341	2,594	13.4	11.4	15.7	-
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.

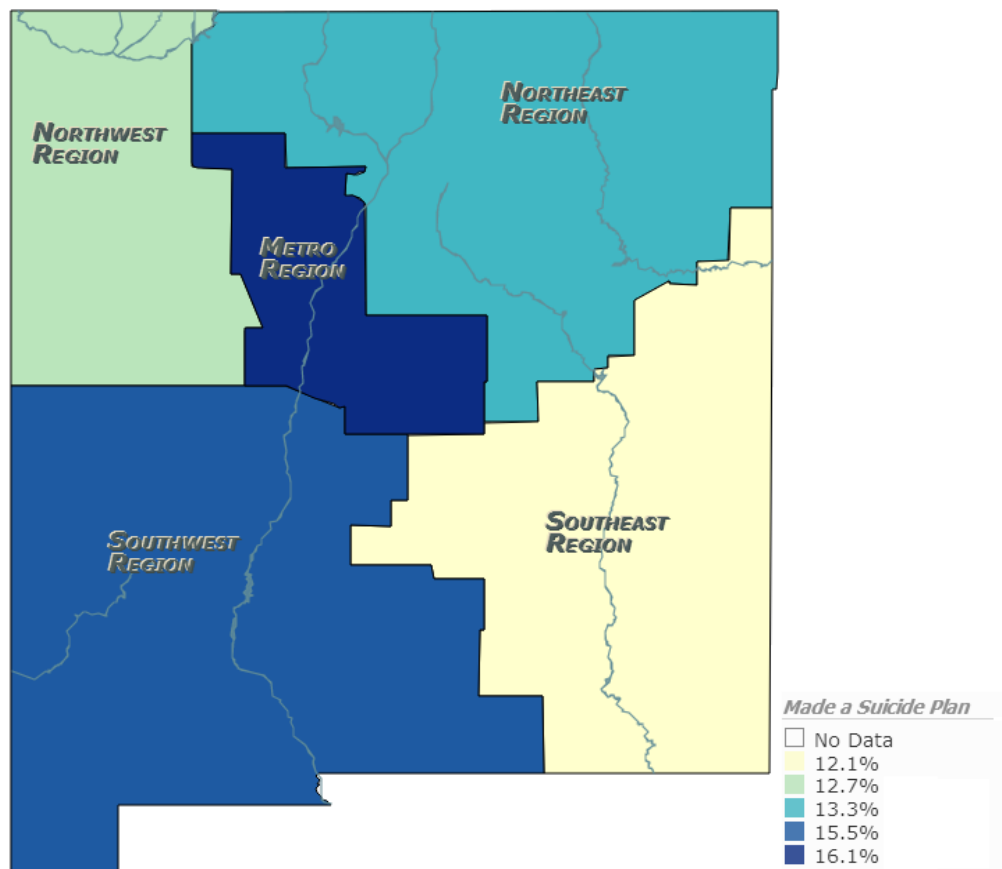
\*\* The values in these cells have been suppressed because there were fewer than 50 survey responses.

## 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 14<sup>th</sup> of 39 states that asked this question in 2013.

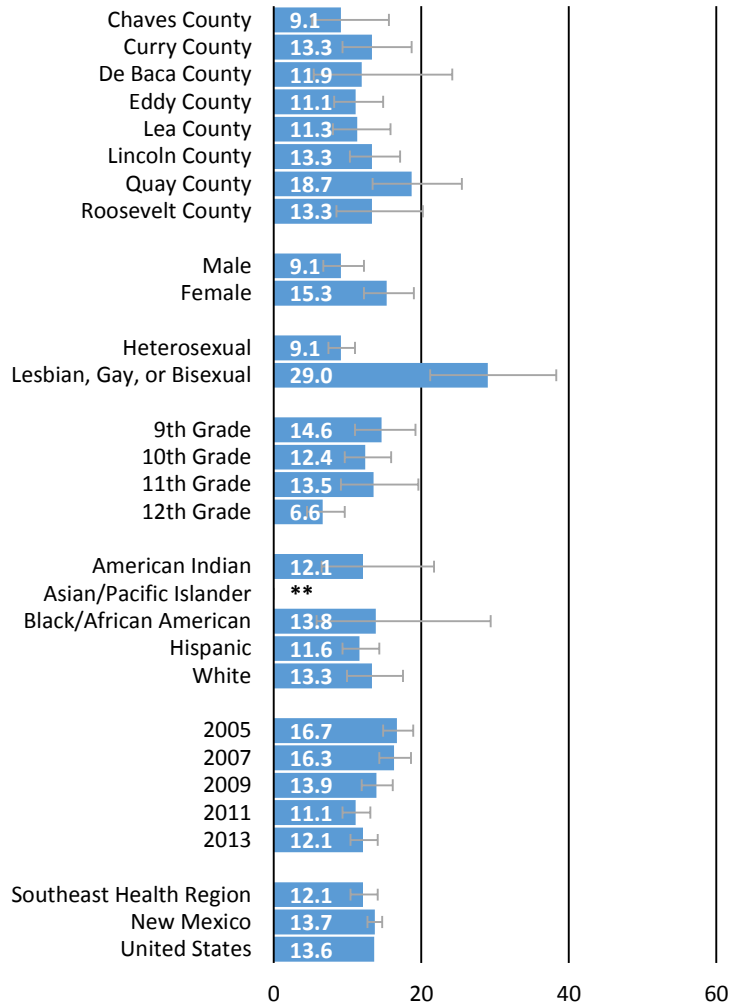
Students who had made plans to attempt suicide were identified by answering “Yes” to the question “During the past 12 months, did you make a plan about how you would attempt suicide?”

**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

Southeast 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.

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

	Count	Sample Size	Percentage	LCL	UCL	Statistical Stability
Chaves County	18	227	9.1	5.2	15.6	Unstable
Curry County	38	329	13.3	9.3	18.7	-
De Baca County	8	69	11.9	5.4	24.2	Very Unstable
Eddy County	72	627	11.1	8.2	14.8	-
Lea County	62	482	11.3	8.0	15.8	-
Lincoln County	59	449	13.3	10.3	17.1	-
Quay County	34	203	18.7	13.4	25.5	-
Roosevelt County	22	204	13.3	8.5	20.2	-
Male	115	1,319	9.1	6.7	12.2	-
Female	197	1,270	15.3	12.2	19.0	-
Heterosexual	207	2260	9.1	7.4	11.0	-
Lesbian, Gay, or Bisexual	76	203	29.0	21.2	38.3	-
9th Grade	121	857	14.6	11.0	19.2	-
10th Grade	92	749	12.4	9.6	15.9	-
11th Grade	59	479	13.5	9.1	19.6	-
12th Grade	38	491	6.6	4.5	9.6	-
American Indian	16	93	12.1	6.5	21.7	Unstable
Asian/Pacific Islander	**	**	**	**	**	n/a
Black/African American	11	58	13.8	5.8	29.4	Very Unstable
Hispanic	169	1,531	11.6	9.3	14.3	-
White	106	854	13.3	9.9	17.5	-
2005	346	2,157	16.7	14.8	18.9	-
2007	356	2,374	16.3	14.3	18.6	-
2009	359	2,906	13.9	11.9	16.1	-
2011	267	2,579	11.1	9.3	13.1	-
2013	313	2,590	12.1	10.4	14.1	-
Southeast Health Region	313	2,590	12.1	10.4	14.1	-
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.

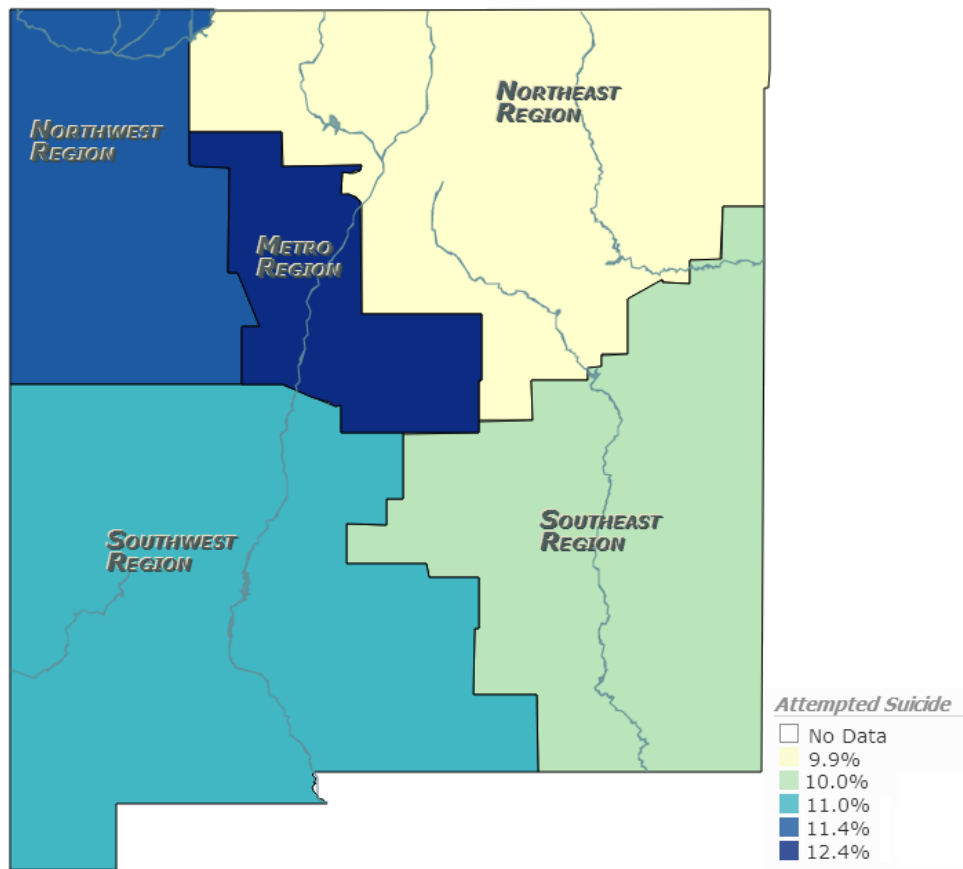


### 4.3 YOUTH WHO ATTEMPTED SUICIDE

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 14<sup>th</sup> of the 40 states that asked this question in the YRBSS.

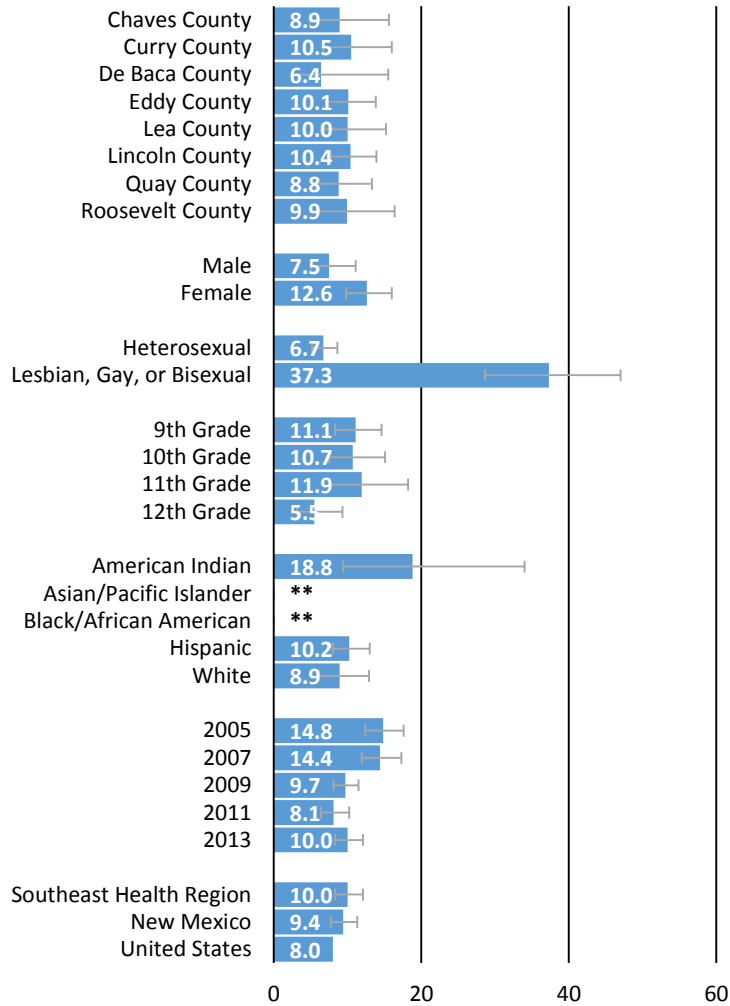
Students who attempted suicide were identified by answering one or more to the question, “During the past 12 months, how many times did you actually attempt suicide?” More information: [https://ibis.health.state.nm.us/indicator/view/MentHlthYouthSuicAtt.Year.NM\\_US.html](https://ibis.health.state.nm.us/indicator/view/MentHlthYouthSuicAtt.Year.NM_US.html).

**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

Southeast 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.

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

	Count	Sample Size	Percentage	LCL	UCL	Statistical Stability
Chaves County	13	193	8.9	4.9	15.6	Unstable
Curry County	27	276	10.5	6.7	16.0	-
De Baca County	4	64	6.4	2.5	15.5	Very Unstable
Eddy County	45	517	10.1	7.3	13.8	-
Lea County	47	411	10.0	6.5	15.2	-
Lincoln County	40	390	10.4	7.7	13.9	-
Quay County	15	187	8.8	5.7	13.3	-
Roosevelt County	14	176	9.9	5.8	16.4	Unstable
Male	76	1,104	7.5	5.0	11.1	-
Female	129	1,109	12.6	9.8	16.0	-
Heterosexual	126	1949	6.7	5.2	8.6	-
Lesbian, Gay, or Bisexual	59	167	37.3	28.6	47.0	-
9th Grade	75	723	11.1	8.3	14.6	-
10th Grade	60	642	10.7	7.5	15.1	-
11th Grade	46	426	11.9	7.6	18.2	-
12th Grade	21	408	5.5	3.2	9.3	Unstable
American Indian	14	72	18.8	9.4	34.0	Unstable
Asian/Pacific Islander	**	**	**	**	**	n/a
Black/African American	**	**	**	**	**	n/a
Hispanic	117	1,277	10.2	8.0	13.0	-
White	59	769	8.9	6.1	12.9	-
2005	249	1,768	14.8	12.4	17.6	-
2007	243	1,933	14.4	11.9	17.3	-
2009	215	2,522	9.7	8.1	11.5	-
2011	166	2,265	8.1	6.4	10.2	-
2013	205	2,214	10.0	8.3	12.1	-
Southeast Health Region	205	2,214	10.0	8.3	12.1	-
New Mexico	447	4,750	9.4	7.7	11.3	-
United States		11,982	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.

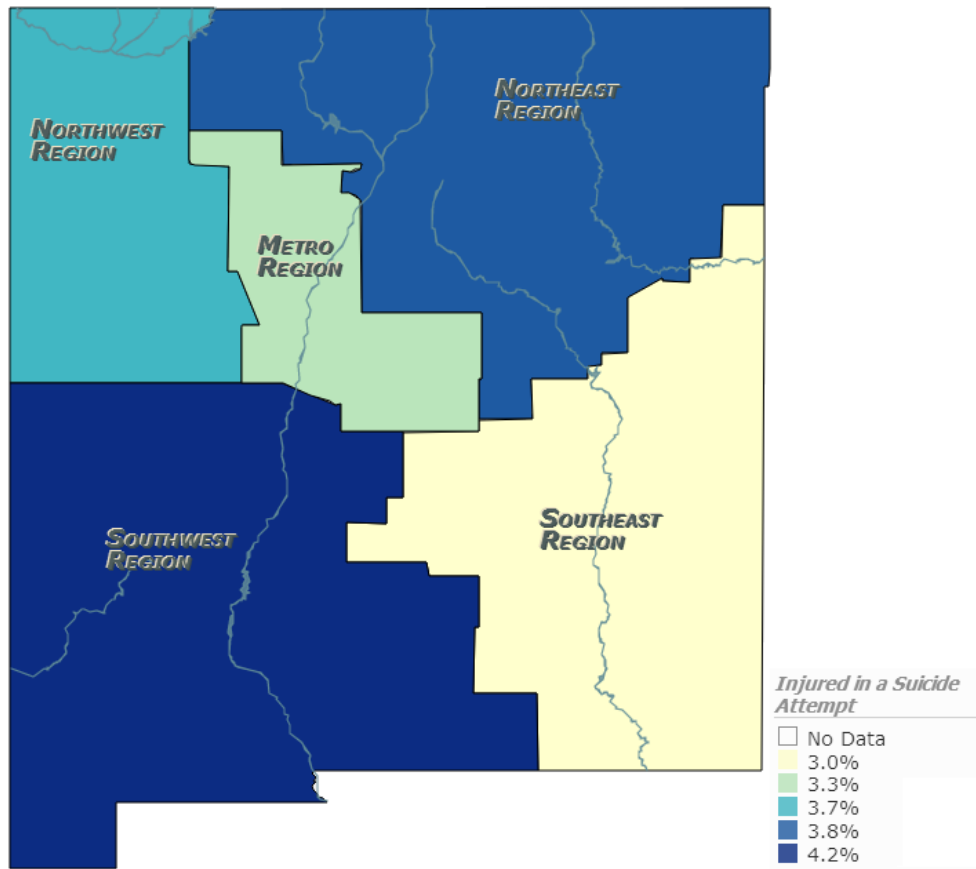
\*\* The values in these cells have been suppressed because there were fewer than 50 survey responses.

#### 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 17<sup>th</sup> of 34 states that asked this question in 2013.

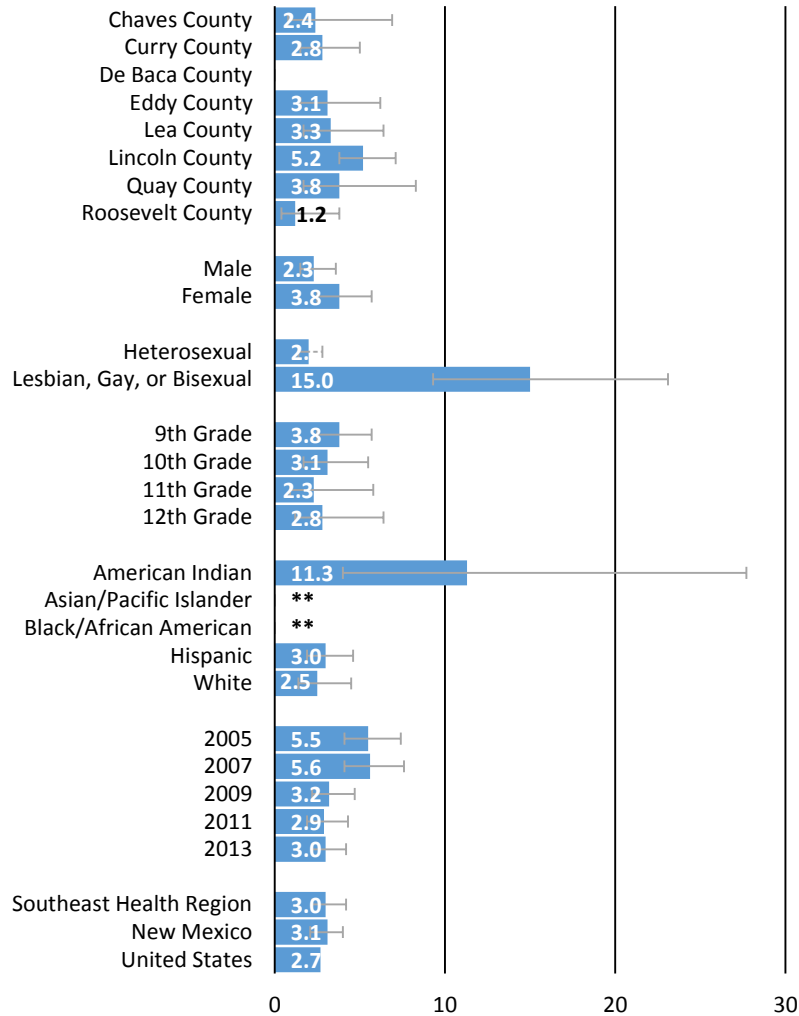
Students who were injured in a suicide attempt were identified by answering “Yes” to the question “If you attempted suicide during the past 12 months, did any attempt result in an injury, poisoning, or overdose that had to be treated by a doctor or nurse?”

**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

Southeast 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.

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

	Count	Sample Size	Percentage	LCL	UCL	Statistical Stability
Chaves County	4	192	2.4	0.8	6.9	Very Unstable
Curry County	8	275	2.8	1.5	5.0	Unstable
De Baca County	0	64	0.0	-	-	No Variance
Eddy County	13	518	3.1	1.5	6.2	Very Unstable
Lea County	20	410	3.3	1.7	6.4	Unstable
Lincoln County	19	389	5.2	3.8	7.1	-
Quay County	6	186	3.8	1.7	8.3	Very Unstable
Roosevelt County	2	174	1.2	0.4	3.8	Very Unstable
Male	33	1,101	2.3	1.5	3.6	-
Female	39	1,106	3.8	2.5	5.7	-
Heterosexual	39	1943	2.0	1.4	2.8	-
Lesbian, Gay, or Bisexual	28	167	15.0	9.3	23.1	-
9th Grade	27	719	3.8	2.5	5.7	-
10th Grade	20	642	3.1	1.7	5.5	Unstable
11th Grade	16	428	2.3	0.9	5.8	Very Unstable
12th Grade	8	407	2.8	1.2	6.4	Very Unstable
American Indian	7	71	11.3	4.0	27.7	Very Unstable
Asian/Pacific Islander	**	**	**	**	**	n/a
Black/African American	**	**	**	**	**	n/a
Hispanic	37	1,275	3.0	1.9	4.6	-
White	19	768	2.5	1.4	4.5	Unstable
2005	99	1,756	5.5	4.1	7.4	-
2007	89	1,933	5.6	4.1	7.6	-
2009	75	2,506	3.2	2.2	4.7	-
2011	51	2,256	2.9	1.9	4.3	-
2013	72	2,208	3.0	2.2	4.2	-
Southeast Health Region	72	2,208	3.0	2.2	4.2	-
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.

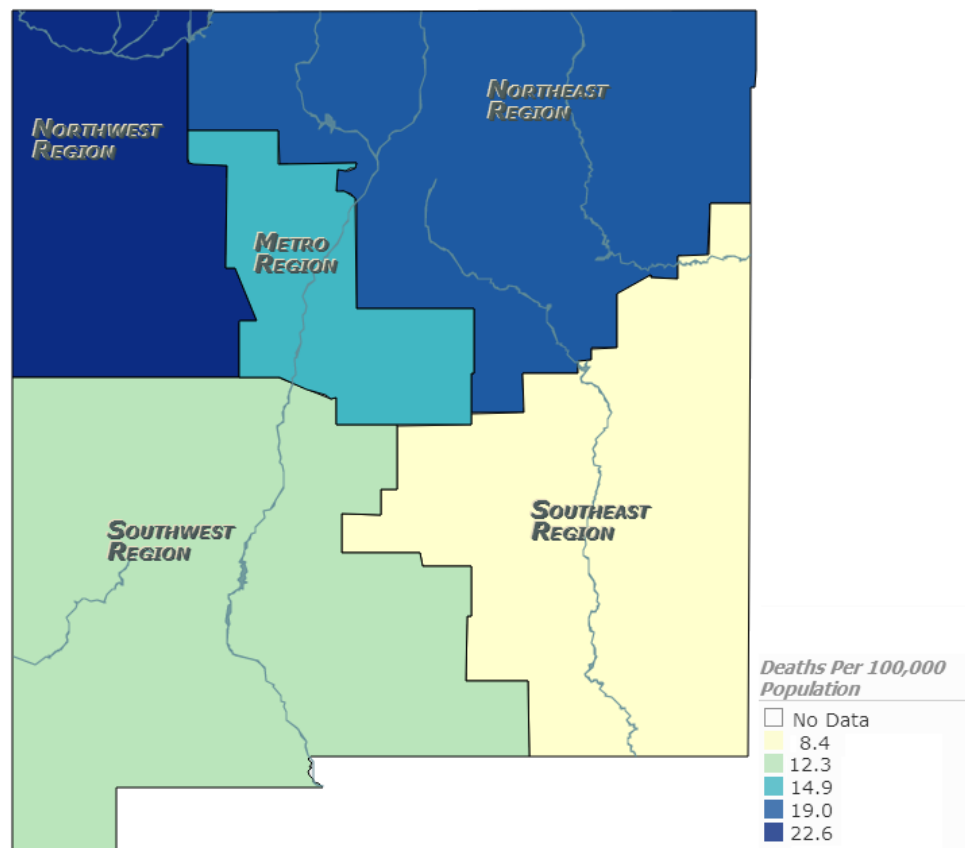
\*\* The values in these cells have been suppressed because there were fewer than 50 survey responses.

## 4.5 YOUTH SUICIDE

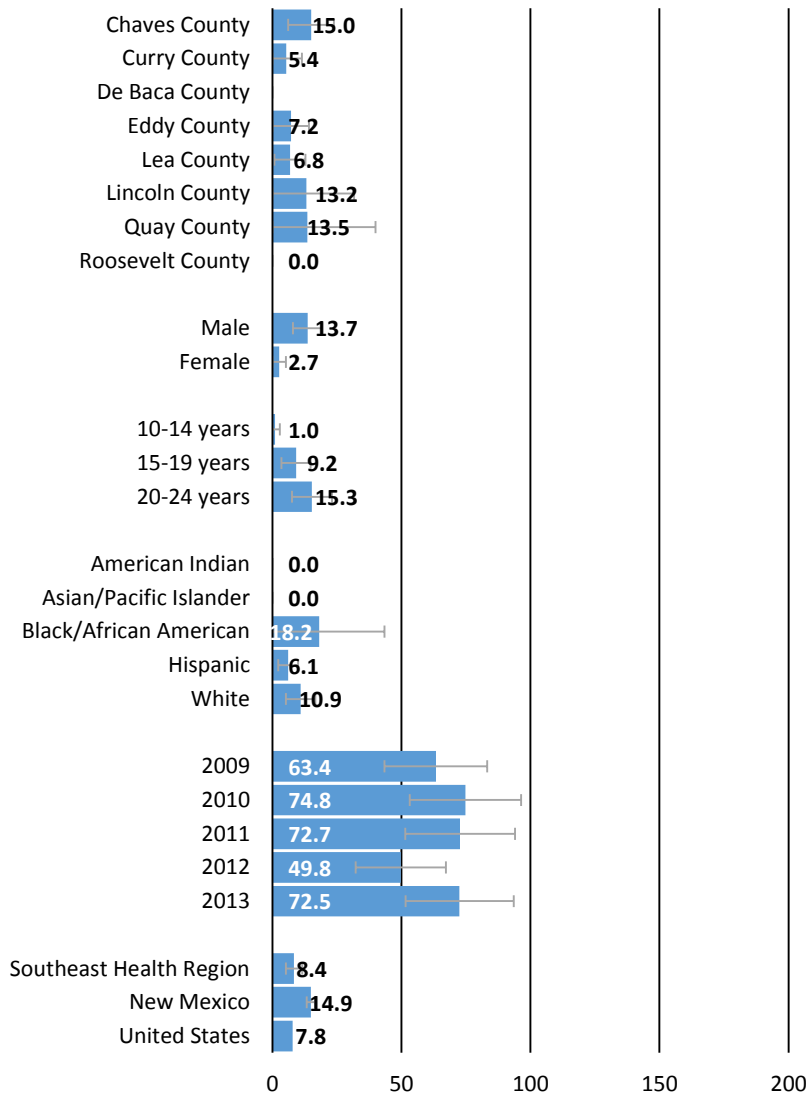
Adolescent suicide is a public health problem of considerable magnitude in New Mexico. Suicide was the second leading cause of death in NM youth 10-24 years of age in 2013, with 62 deaths reported that year (NCHS). Mental disorders increase the risk for both attempted and completed suicide. American 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](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  
Southeast Health Region  
2009-2013



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

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**Southeast 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
Chaves County	11	73,478	15.0	6.1	23.8	Unstable
Curry County	3	55,885	5.4	0.0	11.4	Very Unstable
De Baca County	0	1,486	0.0	-	-	No Variance
Eddy County	4	55,867	7.2	0.1	14.2	Unstable
Lea County	5	73,199	6.8	0.8	12.8	Unstable
Lincoln County	2	15,112	13.2	0.0	31.6	Very Unstable
Quay County	1	7,398	13.5	0.0	40.0	Very Unstable
Roosevelt County	0	28,118	0.0	-	-	No Variance
Male	22	160,669	13.7	8.0	19.4	-
Female	4	149,874	2.7	0.0	5.3	Unstable
10-14 years	1	103,343	1.0	0.0	2.9	Very Unstable
15-19 years	10	109,222	9.2	3.5	14.8	Unstable
20-24 years	15	97,978	15.3	7.6	23.1	-
American Indian	0	3,912	0.0	-	-	No Variance
Asian/Pacific Islander	0	2,999	0.0	-	-	No Variance
Black/African American	2	11,003	18.2	0.0	43.4	Very Unstable
Hispanic	10	164,025	6.1	2.3	9.9	Unstable
White	14	128,604	10.9	5.2	16.6	-
2009	39	61,494	63.4	43.5	83.3	-
2010	46	61,488	74.8	53.2	96.4	-
2011	45	61,885	72.7	51.5	94.0	-
2012	31	62,241	49.8	32.3	67.3	-
2013	46	63,435	72.5	51.6	93.5	-
Southeast Health Region	26	310,543	8.4	5.2	11.6	-
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.

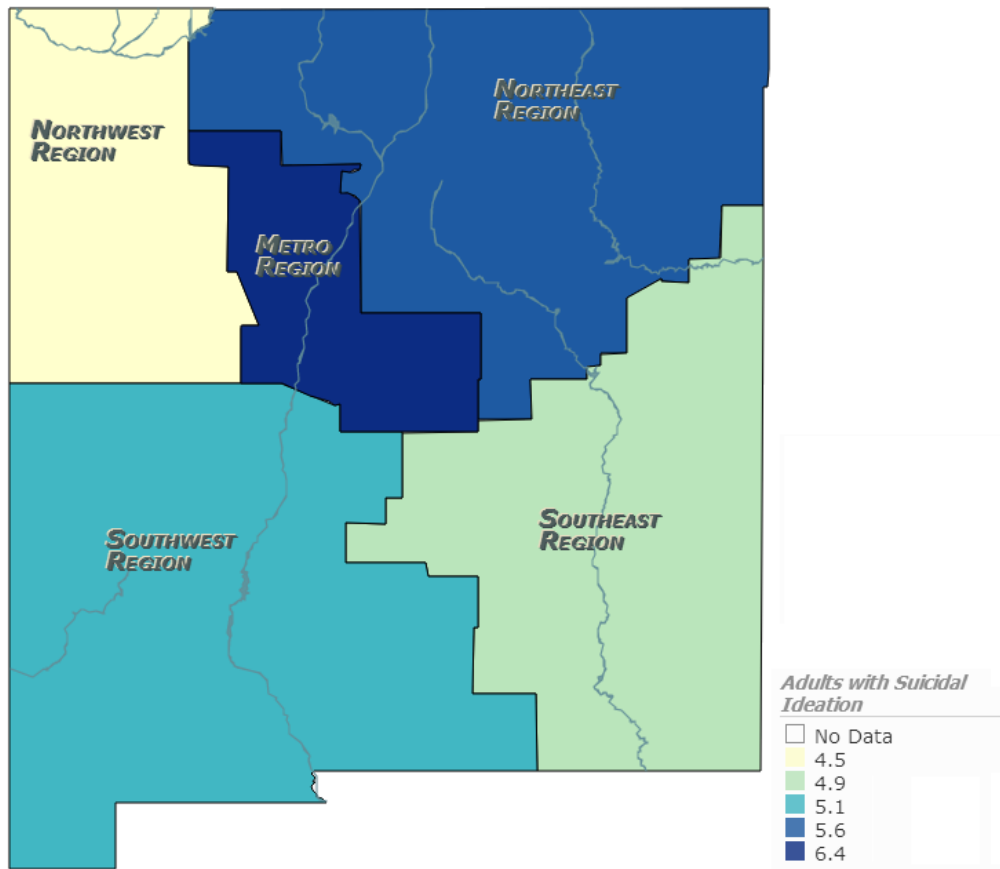
## 5 SUICIDAL BEHAVIOR

### 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.

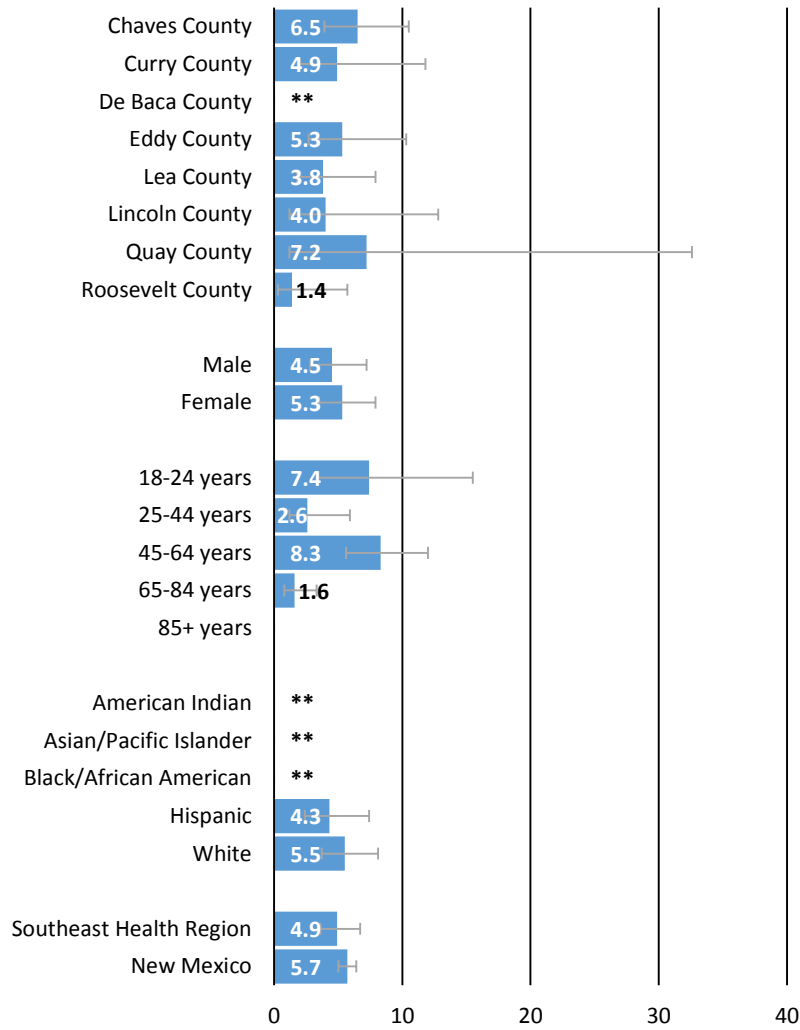
The suicidal behavior module was added to the 2011 BRFSS. Adults with suicidal ideation were identified by answering “Yes” to the question “In the past year, have you felt so low at times that you thought about committing suicide?” US data are not available because this BRFSS module was optional. For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

Southeast Health Region  
2011



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

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

	Number of Deaths	Sample Size	Crude Rate	LCL	UCL	Statistical Stability
Chaves County	23	355	6.5	3.9	10.5	Unstable
Curry County	7	206	4.9	2.0	11.8	Very Unstable
De Baca County	**	**	**	**	**	n/a
Eddy County	12	298	5.3	2.7	10.3	Unstable
Lea County	9	292	3.8	1.8	7.9	Very Unstable
Lincoln County	4	108	4.0	1.2	12.8	Very Unstable
Quay County	2	57	7.2	1.2	32.6	Very Unstable
Roosevelt County	2	91	1.4	0.3	5.7	Very Unstable
Male	25	553	4.5	2.8	7.2	Unstable
Female	35	875	5.3	3.5	7.9	-
18-24 years	7	69	7.4	3.4	15.5	Very Unstable
25-44 years	7	288	2.6	1.2	5.9	Very Unstable
45-64 years	37	552	8.3	5.6	12.0	-
65-84 years	9	449	1.6	0.8	3.3	Very Unstable
85+ years	0	62	0.0	-	-	No Variance
American Indian	**	**	**	**	**	n/a
Asian/Pacific Islander	**	**	**	**	**	n/a
Black/African American	**	**	**	**	**	n/a
Hispanic	17	451	4.3	2.4	7.4	Unstable
White	39	899	5.5	3.7	8.1	-
Southeast Health Region	60	1,428	4.9	3.6	6.7	-
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?

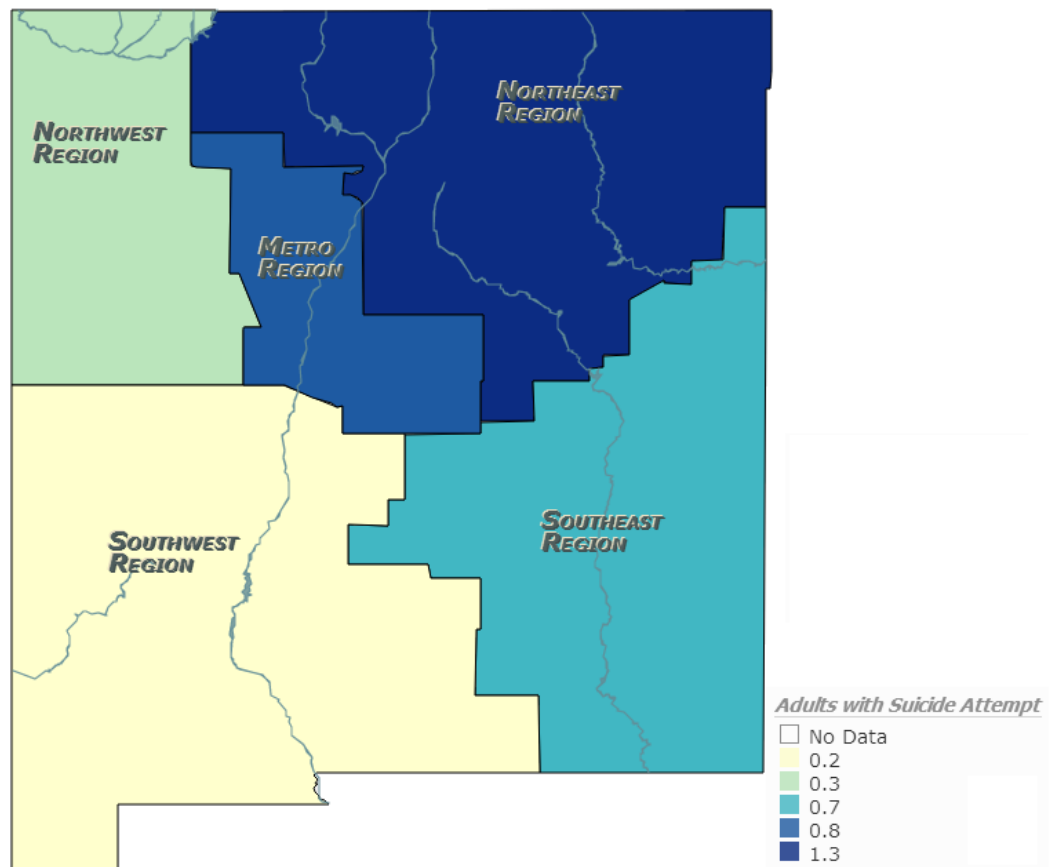
\*\* The values in these cells have been suppressed because there were fewer than 50 survey responses.

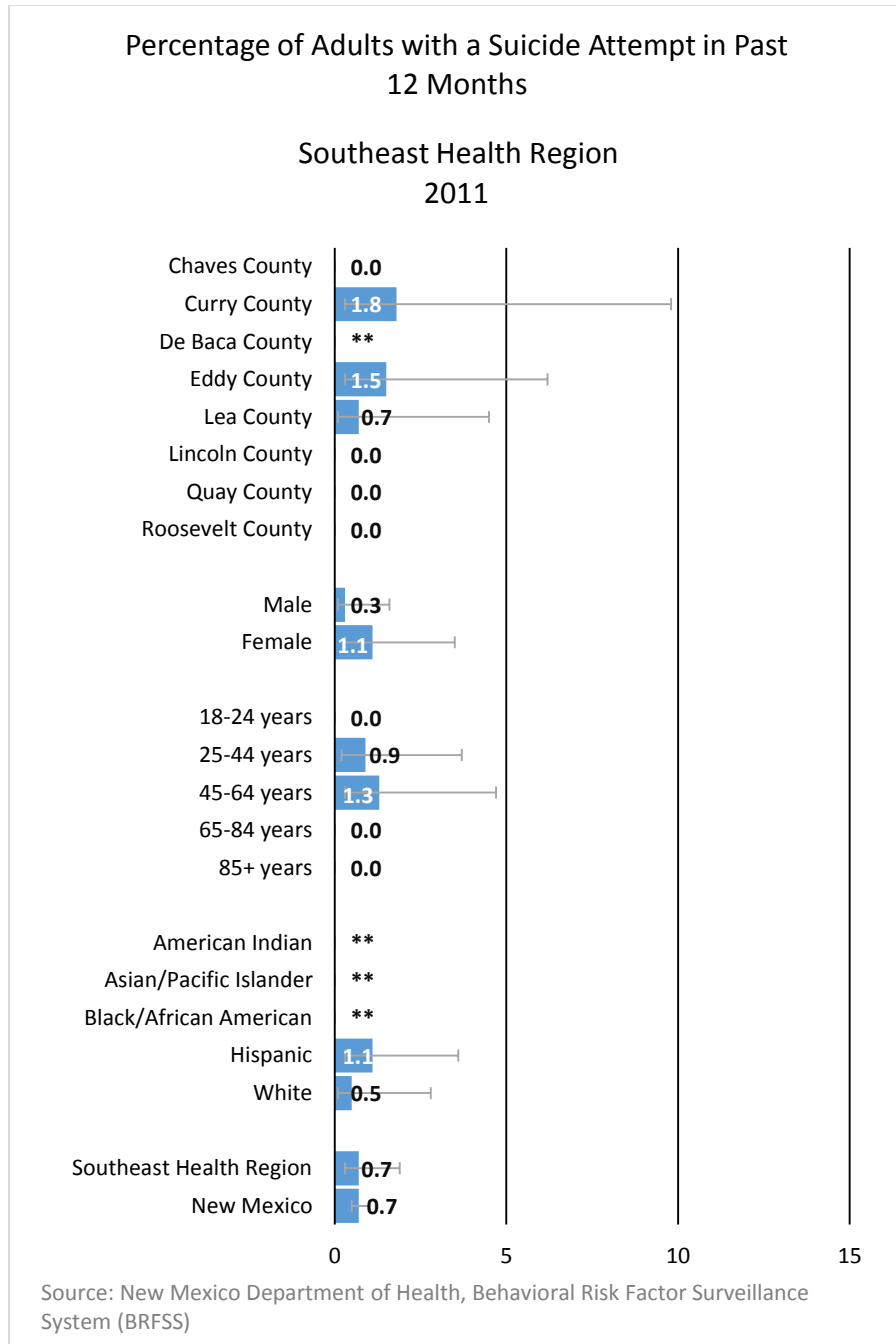
## 5.2 ADULT SUICIDE ATTEMPTS

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**





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

	Count	Sample Size	Percentage	LCL	UCL	Statistical Stability
Chaves County	0	356	0.0	-	-	No Variance
Curry County	2	206	1.8	0.3	9.8	Very Unstable
De Baca County	**	**	**	**	**	n/a
Eddy County	2	297	1.5	0.3	6.2	Very Unstable
Lea County	1	291	0.7	0.1	4.5	Very Unstable
Lincoln County	0	108	0.0	-	-	No Variance
Quay County	0	57	0.0	-	-	No Variance
Roosevelt County	0	91	0.0	-	-	No Variance
Male	2	553	0.3	0.1	1.6	Very Unstable
Female	3	874	1.1	0.3	3.5	Very Unstable
18-24 years	0	69	0.0	-	-	No Variance
25-44 years	2	288	0.9	0.2	3.7	Very Unstable
45-64 years	3	551	1.3	0.3	4.7	Very Unstable
65-84 years	0	449	0.0	-	-	No Variance
85+ years	0	62	0.0	-	-	No Variance
American Indian	**	**	**	**	**	n/a
Asian/Pacific Islander	**	**	**	**	**	n/a
Black/African American	**	**	**	**	**	n/a
Hispanic	3	450	1.1	0.3	3.6	Very Unstable
White	2	900	0.5	0.1	2.8	Very Unstable
Southeast Health Region	5	1,427	0.7	0.3	1.9	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?

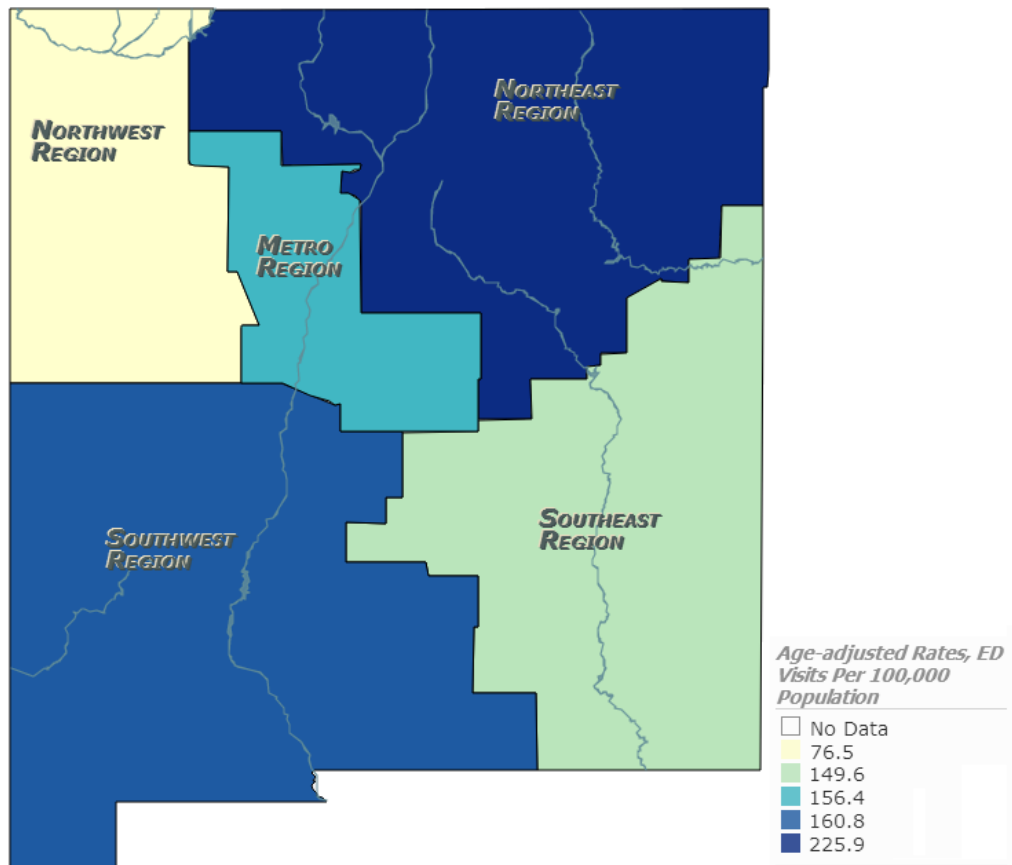
\*\* The values in these cells have been suppressed because there were fewer than 50 survey responses.

### 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.

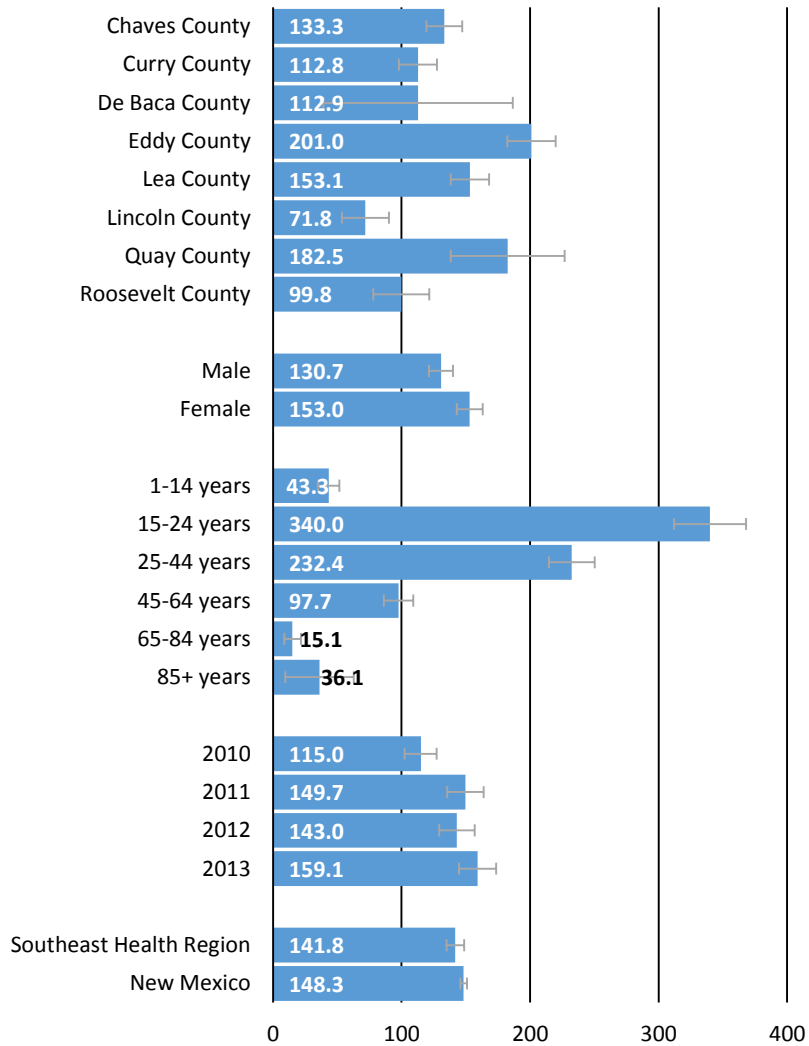
**Emergency Department Encounters for Intentional Self Harm per 100,000 Population by Health Region, New Mexico, 2010-2013**





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

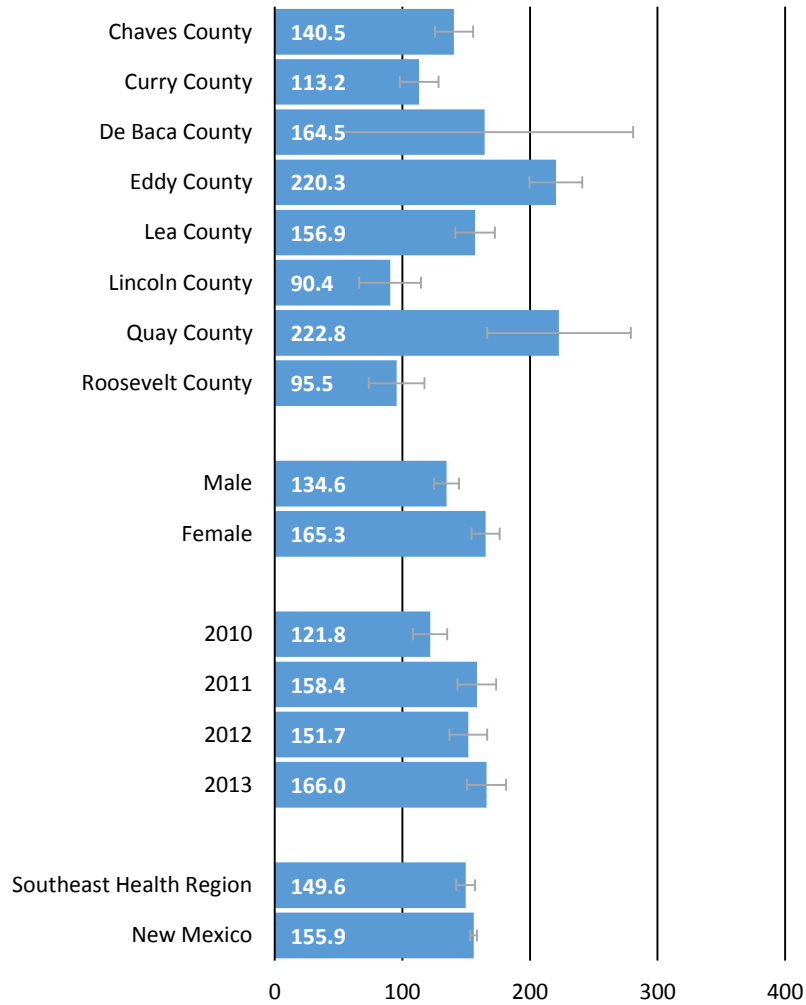
Southeast Health Region  
2010-2013



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

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

Southeast 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.

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**Southeast 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
Chaves County	352	264,063	133.3	119.4	147.2	-	140.5	125.6	155.5	-
Curry County	223	197,715	112.8	98.0	127.6	-	113.2	98.1	128.3	-
De Baca County	9	7,974	112.9	39.2	186.6	Unstable	164.5	48.1	280.8	Unstable
Eddy County	440	218,863	201.0	182.3	219.8	-	220.3	199.5	241.1	-
Lea County	406	265,147	153.1	138.2	168.0	-	156.9	141.5	172.4	-
Lincoln County	59	82,171	71.8	53.5	90.1	-	90.4	66.1	114.7	-
Quay County	65	35,609	182.5	138.2	226.9	-	222.8	166.6	279.0	-
Roosevelt County	81	81,133	99.8	78.1	121.6	-	95.5	73.8	117.3	-
Male	755	577,697	130.7	121.4	140.0	-	134.6	124.9	144.4	-
Female	880	574,978	153.0	142.9	163.2	-	165.3	154.2	176.4	-
1-14 years	105	242,287	43.3	35.0	51.6	-				
15-24 years	565	166,169	340.0	312.0	368.0	-				
25-44 years	656	282,234	232.4	214.7	250.2	-				
45-64 years	279	285,523	97.7	86.2	109.2	-				
65-84 years	21	138,824	15.1	8.7	21.6	-				
85+ years	7	19,385	36.1	9.4	62.9	Unstable				
2010	327	284,393	115.0	102.5	127.4	-	121.8	108.4	135.2	-
2011	430	287,204	149.7	135.6	163.9	-	158.4	143.2	173.6	-
2012	413	288,851	143.0	129.2	156.8	-	151.7	136.9	166.6	-
2013	465	292,227	159.1	144.7	173.6	-	166.0	150.7	181.2	-
Southeast Health Region	1,635	1,152,675	141.8	135.0	148.7	-	149.6	142.3	157.0	-
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.

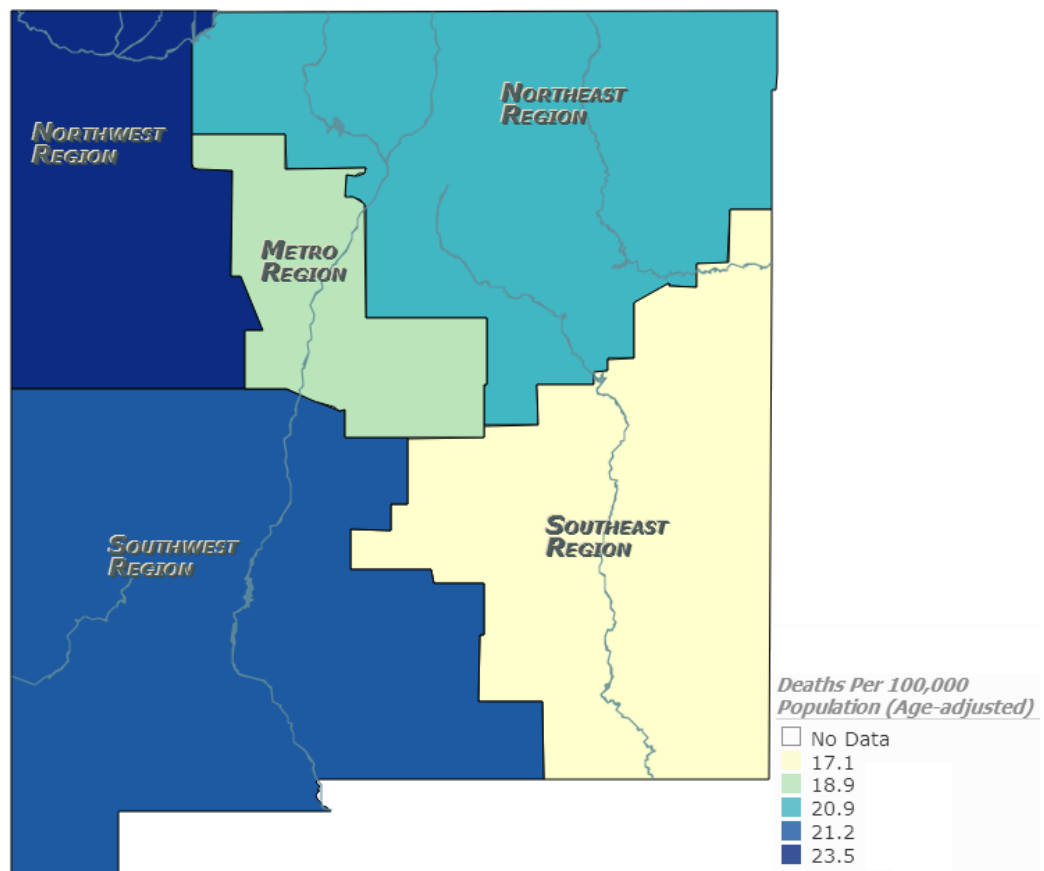
### 5.4 SUICIDE

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.

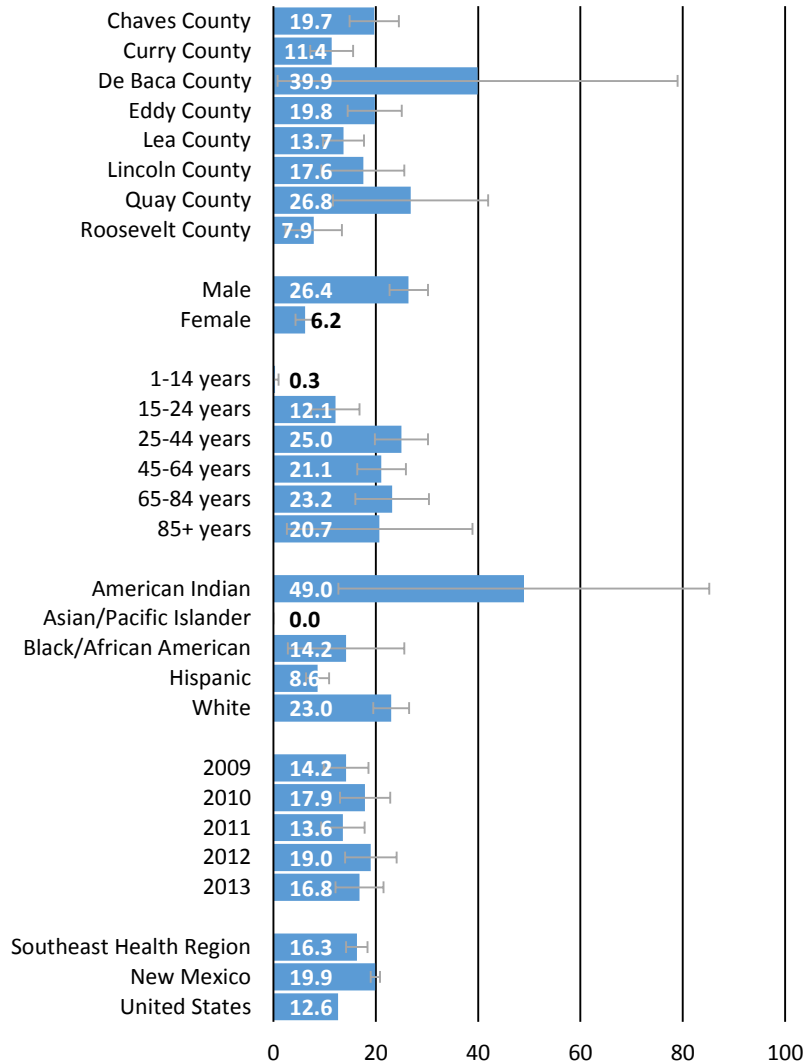
Suicides are recorded in the BVRHS dataset with the International Classification of Diseases, version 10 (ICD-10) codes X60-X84, Y87.0, and \*U03. Sexual orientation data are not reported on death certificates. More information:

[https://ibis.health.state.nm.us/indicator/view/SuicDeath.Year.NM\\_US.html](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**

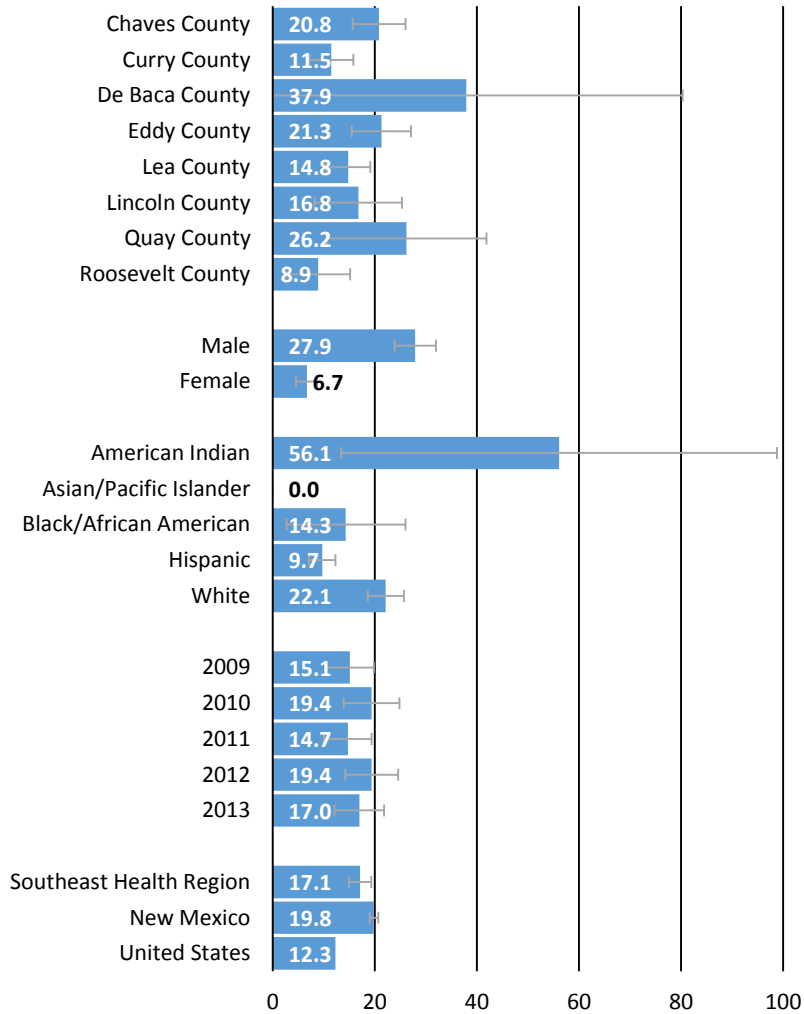


### Suicides per 100,000 Population Southeast Health Region 2009-2013



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

### Suicides per 100,000 Population Southeast 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.

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

	Number of Deaths	Person-Years	Crude Rate	LCL	UCL	Statistical Stability	AA Rate*	LCL	UCL	Statistical Stability
Chaves County	65	329,349	19.7	14.9	24.5	-	20.8	15.7	26.0	-
Curry County	28	245,775	11.4	7.2	15.6	-	11.5	7.2	15.8	-
De Baca County	4	10,019	39.9	0.8	79.0	Unstable	37.9	0.0	80.3	Very Unstable
Eddy County	54	272,516	19.8	14.5	25.1	-	21.3	15.5	27.1	-
Lea County	45	329,023	13.7	9.7	17.7	-	14.8	10.4	19.1	-
Lincoln County	18	102,575	17.6	9.4	25.6	-	16.8	8.2	25.3	-
Quay County	12	44,766	26.8	11.6	42.0	-	26.2	10.6	41.9	Unstable
Roosevelt County	8	100,818	7.9	2.4	13.4	Unstable	8.9	2.6	15.2	Unstable
Male	190	718,853	26.4	22.7	30.2	-	27.9	23.9	32.0	-
Female	44	715,987	6.2	4.3	8.0	-	6.7	4.6	8.7	-
1-14 years	1	301,781	0.3	0.0	1.0	Very Unstable				
15-24 years	25	207,200	12.1	7.3	16.8	-				
25-44 years	88	351,639	25.0	19.8	30.2	-				
45-64 years	75	354,970	21.1	16.4	25.9	-				
65-84 years	40	172,440	23.2	16.0	30.4	-				
85+ years	5	24,122	20.7	2.6	38.9	Unstable				
American Indian	7	14,298	49.0	12.7	85.2	Unstable	56.1	13.4	98.8	Unstable
Asian/Pacific Islander	0	11,446	0.0	-	-	No Variance	0.0	-	-	No Variance
Black/African American	6	42,133	14.2	2.8	25.6	Unstable	14.3	2.7	26.0	Unstable
Hispanic	56	650,437	8.6	6.4	10.9	-	9.7	7.1	12.3	-
White	165	716,526	23.0	19.5	26.5	-	22.1	18.6	25.7	-
2009	40	282,165	14.2	9.8	18.6	-	15.1	10.3	19.8	-
2010	51	284,393	17.9	13.0	22.8	-	19.4	13.9	24.8	-
2011	39	287,204	13.6	9.3	17.8	-	14.7	10.0	19.4	-
2012	55	288,851	19.0	14.0	24.1	-	19.4	14.2	24.6	-
2013	49	292,227	16.8	12.1	21.5	-	17.0	12.1	21.8	-
Southeast Health Region	234	1,434,840	16.3	14.2	18.4	-	17.1	14.9	19.3	-
New Mexico	2,063	10,371,635	19.9	19.0	20.8	-	19.8	19.0	20.7	-
United States	196,540	1,557,151,863	12.6	12.6	12.7	-	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

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### **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/>



## 7 ACKNOWLEDGEMENTS

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