1	SENATE MEMORIAL 64
2	54TH LEGISLATURE - STATE OF NEW MEXICO - SECOND SESSION, 2020
3	INTRODUCED BY
4	Shannon D. Pinto
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10	A MEMORIAL
11	REQUESTING THAT THE UNITED STATES, THE STATE OF NEW MEXICO AND
12	THE NAVAJO NATION COLLABORATIVELY TAKE PROACTIVE STEPS TO
13	PROVIDE HEALTH CARE INFRASTRUCTURE AND FACILITIES SPECIFICALLY
14	FOR WOMEN AND CHILDREN AS PART OF THE PROPOSED GALLUP INDIAN
15	MEDICAL CENTER.
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17	WHEREAS, American Indians and Alaska Natives are at
18	greater mortality risk from many health issues and injuries
19	than the rest of the United States population and have
20	mortality rates that are five hundred forty-eight percent
21	greater for alcoholism, two hundred percent greater for death
22	by a motor vehicle, one hundred eighty-two percent greater for
23	diabetes mellitus, one hundred thirty-eight percent greater for
24	unintentional injuries, seventy-five percent greater for
25	poisoning, seventy-five percent greater for homicide, seventy-
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<u>underscored material = new</u> [<del>bracketed material</del>] = delete five percent greater for suicide, thirty-seven percent greater for pneumonia and influenza and twenty-seven percent greater for firearm injury; and

WHEREAS, among American Indians and Alaska Natives, deaths from accidents, diabetes, suicide and chronic liver disease and cirrhosis are two to three times higher than among non-Natives; and

WHEREAS, compared to other American Indians and Alaska Natives, Navajos have lower percentages of high school and college graduates, lower household incomes and a lower percentage of women receiving prenatal care; and

WHEREAS, compared to other American Indians and Alaska Natives, Navajos have higher rates of unemployment, poverty, homicide and suicide, unintentional injury-related deaths and mothers with diabetes; and

WHEREAS, the majority of American Indians and Alaska Natives living in New Mexico reside in McKinley, San Juan and Bernalillo counties; and

WHEREAS, the percentage of births to single women in 2017 was highest for American Indians and Alaska Natives at seventyseven and one-half percent, and single-parent births have increased among American Indians and Alaska Natives by twentyfour and two-tenths percent since 1990; and

WHEREAS, the percentage of preterm deliveries for American Indian and Alaska Native women in New Mexico increased from

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eight and three-tenths percent to ten and one-half percent from
 2013 to 2017; and

WHEREAS, the birth rate is highest at one hundred twentysix and seven-tenths per one thousand women for American Indian and Alaska Native women aged twenty to twenty-four in New Mexico; and

WHEREAS, the death rate is highest for New Mexican American Indians and Alaska Natives at nine hundred sixty-seven and four-tenths per one hundred thousand; and

WHEREAS, the average adverse childhood experiences score is estimated at four among American Indians and Alaska Natives; and

WHEREAS, adverse childhood experiences have been shown to have long-lasting effects on many aspects of a person's life as indicated by health outcomes; and

WHEREAS, six hundred sixty-six cases were referred to child protective services in Shiprock from 2014 to 2017; and

WHEREAS, American Indians and Alaska Natives died younger than other racial and ethnic groups in 2017, and nearly onehalf of those who died were between the ages of fifteen and sixty-four; and

WHEREAS, American Indian and Alaska Native death rates increased from 2014 to 2016; and

WHEREAS, from 2007 to 2017, there were two hundred sixtyfour suicides and one hundred ninety-one homicides among

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American Indians and Alaska Natives in McKinley and San Juan
 counties; and

WHEREAS, American Indians and Alaska Natives had the highest death rates due to accidents and neonatal infant mortality; and

WHEREAS, American Indians and Alaska Natives in New Mexico had the highest death rate for ages one through four and fifteen through sixty-four; and

9 WHEREAS, infant mortality rates were highest for American
10 Indian and Alaska Native mothers aged fifteen to nineteen; and

WHEREAS, the costs of death and illness are felt by families and entire communities; and

WHEREAS, families and communities are impacted by the loss of potential years of productivity and contributions to the economy; and

WHEREAS, the increased risk of poor health outcomes and early death for American Indians and Alaska Natives can lead to survivor poverty, hardship, chronic illness and early death; and

WHEREAS, there are few dedicated resources for women and children, and those resources are often located at great distances from those who need them; and

WHEREAS, the lack of available resources creates ongoing trauma for women and children, who often live in very rural and remote communities; and

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WHEREAS, despite outreach by some organizations and professionals, many women and children still do not have access to resources due to lack of funding or transportation; and

WHEREAS, violence against women and children is related to incidence of family violence, control and restrictions, which often go unreported or are reported years after the crime occurred; and

8 WHEREAS, even when health care is sought, women and 9 children may not be able to attend follow-up appointments that 10 are necessary for healthy delivery of babies and chronic 11 disease management; and

WHEREAS, facilities and funding for victims of sexual violence are not available to sustain needed services, including comprehensive care and mobile facilities with twentyfour-hour dedicated staff, examiners, advocates and nurses in addition to Indian health service hospitals and emergency rooms; and

WHEREAS, many health problems and injuries are symptoms of adverse childhood experiences and resulting trauma that have been unattended by health, public safety, judicial and other public service systems;

NOW, THEREFORE, BE IT RESOLVED BY THE SENATE OF THE STATE OF NEW MEXICO that the United States, the state of New Mexico and the Navajo Nation be requested to collaboratively take proactive steps to provide health care infrastructure and

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facilities specifically for women and children as part of the proposed Gallup Indian medical center and satellite clinics, including health centers, health stations and school clinics in remote locations for access to mental and physical comprehensive care; and

BE IT FURTHER RESOLVED that victims of sexual violence be provided comprehensive care facilities and mobile units with sustained funding for twenty-four-hour dedicated staff, examiners, advocates, counselors and nurses with private interview environments in addition to Indian health service hospital inpatient, outpatient and emergency room staff; and

BE IT FURTHER RESOLVED that copies of this memorial be transmitted to the New Mexico congressional delegation, the governor and New Mexico's twenty-three Indian nations, tribes and pueblos.

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