



Santa Fe Recovery Center
Certified Community Behavioral Health Clinics
Community Needs Assessment
Project Period: 09/30/23 – 09/29/27
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Introduction

The Santa Fe Recovery Center (SFRC) was awarded the Certified Community Behavioral Health Clinics (CCBHC) grant by the SAMHSA in 2023 to provide comprehensive, coordinated behavioral health care in McKinley County. This requires a culturally competent provider enhancing its targeted outreach and person-centered integrated services using a care coordination model to bridge the gaps in service and address the disparities. CCBHCs serve all individuals across the lifespan in need of behavioral health services in the geographic catchment area served by the CCBHC.

Populations of Focus – McKinley County, NM has a population of 69,830. The populations of focus are the individuals of all ages living in and around McKinley County with:

- serious mental illness (SMI)
- substance use disorder (SUD) including opioid use disorder (OUD)
- children with serious emotional disturbance (SED)
- individuals with co-occurring mental and substance use disorders (COD)
- individuals experiencing a mental health (MH) or substance use-related crisis



Availability and Accessibility of Services

Available Local Service Agencies:

McKinley County offers many services for its residents. Here is a [Service Map](#) that shows various resources available in McKinley County as a method of assessing what currently exists in our community. The linked map demonstrates that our service area has the following number of resources:

- 43 Social Service Agencies
- 26 Mental Health Agencies
- 47 Safety Service Agencies
- 29 Medical Service Agencies
- 20 Food Resource Locations
- 49 Schools
- 69 Religious Organizations
- 10 Fitness Organizations
- 9 Media Organizations

Link to Service Map: https://www.google.com/maps/d/viewer?mid=114k_ScIxOfAvc5pyWV-ZKgwzGdHWXBE&ll=35.37954952395764%2C-107.84049762815147&z=9

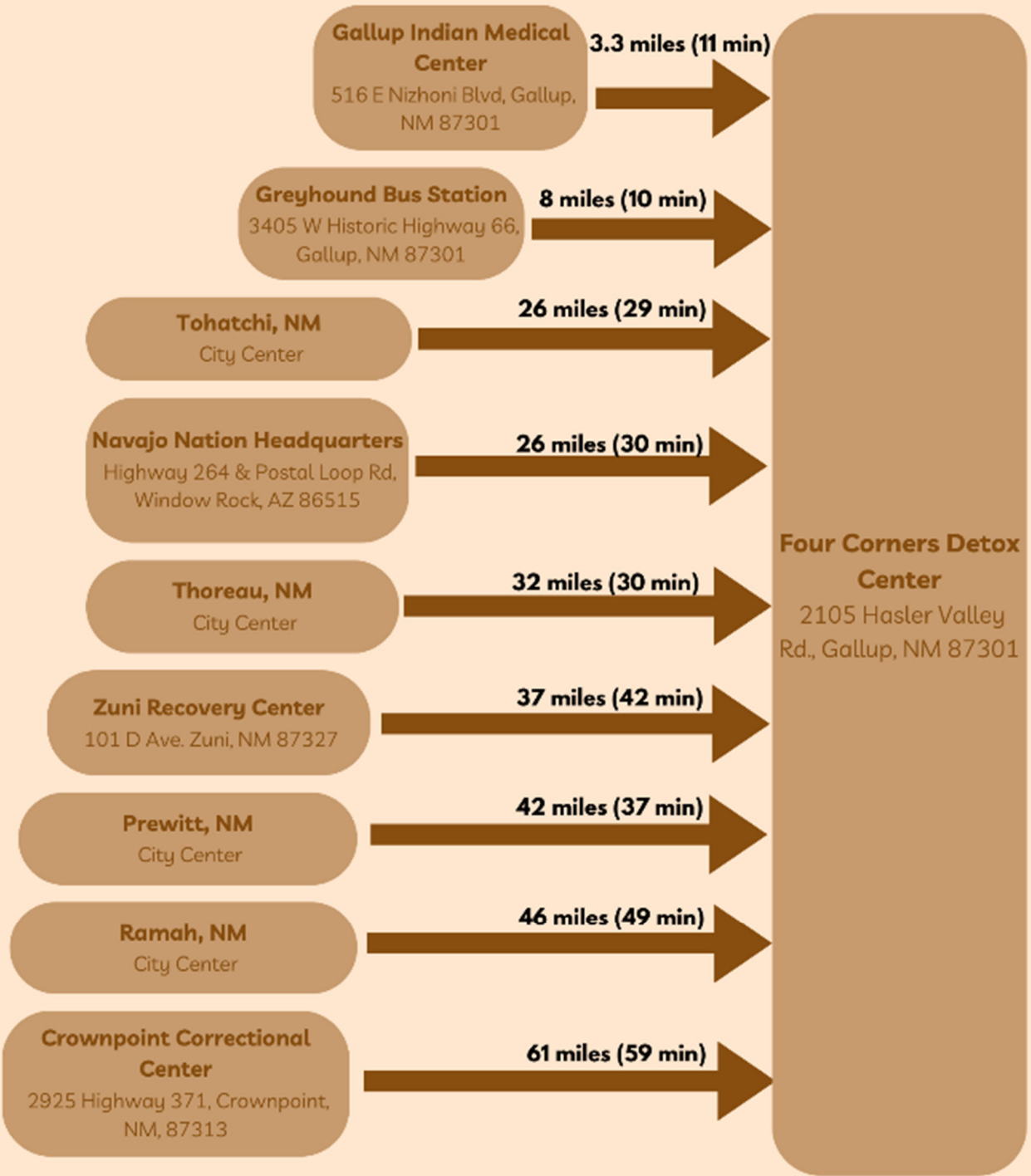
Geographic Accessibility to Four Corners Detox Recovery Center (FCDRC):

Gallup, New Mexico is a hub for community members living in McKinley County and rural areas beyond the county. In Gallup, community members access care as well as purchase necessities, and visit banks, laundry, and showering facilities. Gallup is also often the closest location where surrounding communities, including the Navajo Nation, can access detox and other SUD services. As in many rural areas across the country, it is sometimes difficult to access services because of the time it takes to travel to these services. One way we have assessed the accessibility of our services is by showing the length of time it might take for community members to access us from common starting points in our surrounding service area. Based on this, travel times for locals may be as little as 11 minutes, but clients traveling from the Navajo Nation may drive up to an hour to receive services at Four Corners Detox Center. The chart below estimates these travel times. An important factor when interpreting these distances is that travel times are especially difficult for those without a personal vehicle. Starting point locations that reside on or bordering the Navajo Nation include: Tohatchi, NM; Thoreau, NM; Prewitt, NM; and Ramah, NM.

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On average, **Four Corners Detox Center** is **31 miles (33 minutes)** from the various starting points.





Availability of 9 Core CCBCH Services:

The Four Corners Detox Center provides seven of the nine core CCBHC services on-site or in collaboration with local service providers. This year we will expand our service locations to the following additional site: 2020 East Aztec Suites 2022 & 2028, Gallup, NM 87301.

Four Corners Detox Center's CCBHC Services				
Services	Site	Address	Days and Times	Designated Collaborating Organization (Yes/No)
Screening, assessment, and diagnosis including risk assessment	Four Corners Detox Recovery Center	2105 Hasler Valley Rd., Gallup, NM 87301	M-F, 8a-5p (Admission) (24/7 as residential treatment and detox facility)	No
	Desert View Family Counseling	607 W Aztec Ave, Gallup, 87301	M-Th, 8a-5p F, 8a-11:45p	Yes
Patient-Centered Treatment Planning including Risk Assessment and Crisis Planning	Four Corners Detox Recovery Center	2105 Hasler Valley Rd., Gallup, NM 87301	M-F, 8a-5p (Admission) (24/7 as residential treatment and detox facility)	No
Outpatient mental health and substance use services	Four Corners Detox Recovery Center	Location TBD	M-F, 8a-5p	No
Outpatient clinic primary care screening and monitoring of key health indicators and health risk	Four Corners Detox Recovery Center	Location TBD	M-F, 8a-5p	No
	Gallup Indian Medical Center	516 E Nizhoni Blvd, Gallup, NM 87301	M-Sun 7 am - 5:30 pm Emergency Room 24/7	Yes
Peer Support	Hozho Center for Personal Advancement	506 W. Highway 66 Ste. 4 Gallup, NM 87301	By appointment	Yes
Primary care screening and monitoring	Gallup Community Health	2111 College Dr. Gallup, NM	M-Th, 8a-8p F-Sat, 8a-8p	Yes
Targeted Case Management	Four Corners Detox Recovery Center	2105 Hasler Valley Rd., Gallup, NM 87301	M-F, 8a-5p (Admission) (24/7 as residential treatment)	No

Four Corners Detox Center's CCBHC Services				
Services	Site	Address	Days and Times	Designated Collaborating Organization (Yes/No)
			and detox facility)	
Primary care screening and monitoring	Gallup Community Health	2111 College Dr. Gallup, NM	M, 9a-5p T, 10a-3:30p W, 9:30a-6p Th, Closed F, 9:30a-5p Sat, 9a-4p Sun, Closed	Yes
Psychiatric Services	Four Corners Detox Recovery Center	2105 Hasler Valley Rd., Gallup, NM 87301	M-F, 8a-5p (Admission) (24/7 as residential treatment and detox facility)	No
	Genoa Telepsychiatry	1115 Broadway, New York, NY 10010	M-F, 8a-5p	Yes
Peer support, counselor services, and family supports	Four Corners Detox Recovery Center	2105 Hasler Valley Rd., Gallup, NM 87301	M-F, 8a-5p	No
	Desert View Family Counseling	607 W Aztec Ave, Gallup, 87301	M-Th, 8a-5p F, 8a-11:45p	Yes

Input from people with lived experience about Availability and Accessibility of Services

Input from SFRC Clients about service accessibility:

Throughout 2023, SFRC clients were asked questions during their intake process. This feedback does not represent all of McKinley County's views of accessibility, only that of our clients who completed the survey, but through this project we will continue to fill in the data gaps related to the public's view of accessibility. One critical point to note is that all respondents of this survey indicated that it was easy for them to access treatment. However, other surveys indicate this may not be a consistent viewpoint among special populations (See quote in 'Input from Gallup, NM Area About Service Accessibility' below.).

The data was collected using a Client Feedback Survey at various SFRC locations. Clients would receive one or more services from SFRC: Detox, Four Corners Detox (FC Detox), Men's Residential Treatment (M RTC), Women's and Children's Program (W Combined), Four Corners Detox Recovery Center (FCDRC) Residential Treatment Center (RTC), Women's Extended Residential Program (W Ext).

Client Experience Questions – All questions were asked at intake:

- 98.5% of clients felt they were treated respectfully by admission/intake staff. (2,415 clients responded to this question.)
- 93.8% of clients said it was easy for them to access our treatment services. (2,418 clients responded to this question.)

Input from Gallup, NM Area About Service Accessibility

Through a broader community survey conducted by Rehoboth McKinley Christian Health Care Services in Gallup, NM, “more than two-thirds of respondents indicated "Very Inadequate or Inadequate" services are available for persons experiencing homelessness, persons with substance abuse, the working poor, persons who are uninsured/underinsured, persons with no social or emotional support, persons with mental illness, persons with no source of transportation, persons with chronic diseases, and low-income groups. One respondent stated: “We do not have free, accessible healthcare and mental healthcare for low-income people aside from IHS. We do not have any mental health crisis facilities, we do not have adequate shelter and affordable housing for homeless and working poor, single parents, and disabled. We do not have any long-term substance abuse recovery facilities. We do not have LGBTQ and immigrant friendly services.”¹ Respondents were local service provider agencies and members of the Gallup, NM community.

In the same survey for Rehoboth McKinley Christian Health Care Services, Respondents to a needs assessment survey conducted by Rehoboth McKinley Christian Health Care Services in Gallup ranked barriers related to access to primary/preventative care for low-income residents in the community which include² (in rank order):

1. Lack of capacity (e.g., insufficient providers/extended wait times)
2. Lack of providers accepting Medicaid/Medicare
3. Lack of childcare
4. Lack of coverage/financial hardship
5. Lack of transportation resource
- 6. Language barriers**

¹ Rehoboth McKinley Christian Health Care Services, & Community Hospital Consulting. (2022, October). *Community Health Needs Assessment and Implementation Plan. Community Needs Assessment.* https://www.rmch.org/docs/2022_Community_Health_Needs_Assessment_and_Implementation_Plan.pdf

² Rehoboth McKinley Christian Health Care Services, 2022 Community Health Needs Assessment conducted by CHC Consulting February 2, 2022-March 14, 2022.

7. Difficulty navigating system/lack of awareness of available resources
8. Eligibility screening process for benefits/covered services
9. Delays or complications in referrals to services
10. Delays in authorization/referral approval
11. Lack of access due to provider distance
12. Scheduling (system inefficiency/non-standardized process)

Input from Chief of Police Erin Toadlena-Pablo of Gallup Police Department

In an in-person meeting on 3/11/24 with Chief of Police Erin Toadlena-Pablo of Gallup Police Department, it was highlighted that a significant service gap within our community is the absence of dedicated crisis services. Currently, individuals experiencing crises often resort to emergency room visits or involuntary detoxification at Na'Nizhoozhi Center, Inc. (NCI).

During discussions, Chief Pablo served as a key informant for our needs assessment and emphasized that the implementation of crisis stabilization services, with direct referrals from the state crisis hotline and local law enforcement, would be highly beneficial. While Gallup Police Department's branch of Public Service Officers (PSA's) currently relies solely on involuntary detoxification services at NCI and emergency services, local police officers could potentially refer individuals directly to crisis stabilization services. This could result in at least 10 referrals per month directly from Gallup officers.

In addition to the data gathered from the state's 988 crisis hotline, this feedback underscores the urgent need for enhanced crisis intervention resources and suggests a clear path forward in addressing this critical gap in our community's behavioral health services.

Cultural and Linguistic Needs

Race and Ethnicity Demographics

The population found in McKinley County is more diverse than most places in the United States. McKinley County boasts a high percentage of American Indians/Alaskan Natives as well as Hispanic population which exceed state and/or national rates of these populations. While American Indians/Alaskan Natives may represent the numerical majority, their culture and language differences pose barriers to accessing services.

Demographics and Special Populations, US Census Bureau, 2017-2022 ³			
	McKinley County	New Mexico	United States
White	10.5%	46.4%	60.9%
Black or African American	0.8%	2.1%	12.2%
American Indian and Alaska Native	77.7%	9.2%	1.0%
Asian	1.5%	1.8%	5.9%
Native Hawaiian and Other Pacific Islander	0.0%	0.1%	0.2%
Some other race	6.3%	15.1%	7.3%
Two or More Races	3.3%	25.3%	12.5%
Hispanic/Latino	14.6%	50.2%	19.1%
Veterans	5.0%	8.4%	6.6%
Have Disability	15.1%	16.3%	12.9%
Have Health Insurance	80.1%	90.5%	91.3%

Language Demographics

Between 2006 and 2010, the most common languages spoken at home in McKinley County were English (43%) and Navajo (36%), a notable difference from the state of New Mexico’s language

³ US Census Bureau (2022). DP05 Demographic and Housing Estimates, American Community Survey 5-Year Estimates. Retrieved March 18, 2024 from: https://data.census.gov/table?q=DP05&g=010XX00US_040XX00US35_050XX00US.35031

US Census Bureau (2022). Selected Characteristics in the United States, American Community Survey 5-Year Estimates. Retrieved March 18, 2024 from: https://data.census.gov/table/ACSDP5Y2022.DP02?q=DP02%20DP03%20DP04%20DP05&g=010XX00US_040XX00US35_050XX00US.35031

distribution. In New Mexico, only 4% spoke Navajo at home, while 29% spoke Spanish and 64% spoke English.

Languages Spoken at Home, MLA Language Map Data Center, 2006-2010 ⁴		
	McKinley County	New Mexico
English	43.19%	63.96%
Navajo	36.12%	3.5%
Other North American Indian Language	14.19%	1.63%
Spanish	5.53%	28.45%
Other	0.97%	2.46%

Input from people with lived experience about Cultural and Linguistic Needs

Culture and Stigma Related Needs

According to Gallup Community Health, “The Latino and Native American communities historically do not seek behavioral health services due to social and cultural stigmas against mental illness and treatment. Religion can also be a factor preventing both Native Americans and Latinos from seeking behavioral health services contributing to the stigma against mental illness and treatment by attributing poor mental health to demons, lack of faith, or sinful behavior. Latinos and Native Americans, especially older generations, perceive discussing problems with mental health are embarrassing and shameful to the family which results in fewer people seeking treatment.”⁵

Gallup Community Health also says, “Lack of English proficiency (reading and writing skills) is often associated with reduced health care utilization and indicates a population who is less likely to self-identify a need for primary health services, which subsequently predicts lifetime primary health care use and results in longer duration of untreated disorders.”⁶

⁴ MLA Language Map Data Center. (2015m, October 12). *Language by State and County*. Language Map Data Center. https://apps.mla.org/map_data

⁵ Gallup Community Health. (October 2023). *Community Health Needs Assessment*. Gallup, New Mexico.

⁶ Gallup Community Health. (October 2023). *Community Health Needs Assessment*. Gallup, New Mexico.

Treatment Needs

Unmet Treatment Needs

The estimated substance use disorder treatment gap in McKinley County was 3,506 people or 60% of persons with substance use disorder who are not receiving treatment. The unmet treatment gap was below the treatment gap statewide (66%), but still concerningly high. Harding County (93%) and Rio Arriba (21%) Counties had the most and least treatment need gap in the state.

Estimate of the SUD Treatment Gap, New Mexico Public Health Department, 2018 ⁷				
	People Living with SUD	People Who Received Treatment	People Needing treatment	% of Persons with SUD Needing Treatment, but are not receiving Treatment
McKinley County	5,883	2,377	3,506	60%
Rio Arriba	4,145	3,282	863	21%
Harding County	73	5	68	93%
New Mexico	204,681	70,303	134,378	66%

In 2021, among individuals with any mental illness who sought mental health services, females had a slight majority, making up 52% of those seeking assistance. Conversely, during this period, males (35%) were more likely than females (33%) to report a perceived unmet need for mental health services.

Received Mental Health Services and Perceived Unmet Need for Mental Health Services Among Young Adults 18-25 Years with Any Mental Illness in the United States, NSDUH Data Brief, 2021 ⁸		
	Female	Male
Received Mental Health Services	51.6%	49.4%
Perceived Unmet Need for Mental Health Services	32.9%	34.8%

⁷ New Mexico Department of Health. (2020, January). New Mexico Substance Use Disorder Treatment Gap Analysis. Documents. <https://www.nmhealth.org/publication/view/marketing/5596/>

⁸ Substance Abuse and Mental Health Services Administration. (2024, January). *Gender Differences in Past Year Mental Health among Young Adults Aged 18 to 25*. NSDUH Data Brief. <https://www.samhsa.gov/data/sites/default/files/reports/rpt44475/2021-nsduh-data-brief-1.pdf>

Level of Behavioral Health Issues Experienced by Populations of Focus

The following describes the rates at which our community is experiencing various behavioral health issues as an indicator of the level of need in our community for treatment and other interventions.

- serious mental illness (SMI)

The prevalence of adults with serious mental illness (SMI) in New Mexico was consistent with the prevalence reported in the United States in 2022 at 54.0 per 1,000 residents. There are approximately 88,591 persons living with serious mental illness in New Mexico.

Adults with Serious Mental Illness (SMI) Prevalence, Substance Abuse and Mental Health Services Administration, 2022 ⁹		
	Population 18+ Years with SMI	Rate per 1,000 Residents
New Mexico	88,591	54.0
United States	14,172,550	54.0

- substance use disorder (SUD) including opioid use disorder (OUD)

According to estimates by the New Mexico Public Health Department, in a county with a population of only 69,830, there are 5,883 people living with a substance use disorder (SUD) in McKinley County. se

Estimate of Number of Persons with A Substance Use Disorder, New Mexico Public Health Department, 2018 ¹⁰			
	People Living with SUD	Population	Rate per 1,000
McKinley County	5,883	69,830	84.25
New Mexico	20,4681	2,113,344	96.85

Note: Population from US Census Bureau, 2017-2022

In 2023, alcohol and opioids were the primary substances contributing to substance use disorders in New Mexico, affecting 101,012 and 38,989 individuals, respectively. Other substance use disorders came from substances such as stimulants, benzodiazepines, and cannabis.

⁹ Substance Abuse and Mental Health Services Administration. (2023, November 21). *Adults with SMI and Children with SED prevalence in 2022. State-By-State Estimates Of Adults With Serious Mental Illness (SMI) And Children With Serious Emotional Disturbance (SED), 2022.* <https://www.samhsa.gov/data/sites/default/files/reports/rpt42790/adults-with-smi-and-children-with-sed-prevalence-estimates-in-2022.pdf>

¹⁰ New Mexico Department of Health. (2020, January). *New Mexico Substance Use Disorder Treatment Gap Analysis. Documents.* <https://www.nmhealth.org/publication/view/marketing/5596/>

New Mexicans Living with Substance Use Disorders, New Mexico Legislative Finance Committee, 2023 ¹¹				
Alcohol	Opioids	Stimulants	Benzodiazepines	Cannabis
101,012	38,989	21,694	15,987	17,776

Between 2016 and 2020, New Mexico saw its greatest number of single drug overdose deaths from methamphetamine at 390. Of all drug involved deaths during this period, methamphetamine and heroin were the primary contributors. When second substances were involved, the combination of methamphetamine and heroin was the most common.

Number of Substance Involved Deaths in New Mexico, New Mexico Substance Use Epidemiology Profile, 2016-2020 ¹²					
	Methamphetamine	Fentanyl	Heroin	Prescription Opioids	Benzodiazepines
All Drug Involved Deaths	926	562	691	467	430
Singe Drug Overdose Deaths	390	139	155	122	24
Second Substance Involved					
Methamphetamine	*	52	180	11	4
Fentanyl	52	*	36	34	31
Heroin	180	36	*	9	44
Cocaine	16	51	30	8	2
Prescription Opioids	11	34	9	*	74
Benzodiazepines	4	31	44	74	*
Another Drug	48	7	16	12	37
Three or more substance involved death	225	212	221	164	214
Alcohol-Involved	98	136	166	93	110

In 2020, Bernalillo County accounted for 39% of opiate overdose reversals using Naloxone in New Mexico. McKinley County reported 4 total opiate overdose reversals using Naloxone in 2020.

¹¹ New Mexico Legislative Finance Committee. (2023, August 24). *Addressing Substance Use Disorders*. Documents. https://www.nmlegis.gov/Entity/LFC/Documents/Program_Evaluation_Reports/Progress%20Report%20Addressing%20Substance%20Use%20isorders.%20August%202023.pdf

¹² New Mexico Department of Health. *New Mexico Substance Use Epidemiology Profile, 2022*



Bernalillo County and Union County had the most and least number of reversals in the state for this period.

With such a small number of reversals in McKinley County, there may be a need to make Naloxone available or track Naloxone reversals that are happening.

Opiate Overdose Reversals Using Naloxone, New Mexico Human Services Department, 2020 ¹³	
	Number of Reversals
McKinley County	4
Bernalillo County	1,163
Union County*	0
New Mexico	2,979

*Sierra, Otero, Hidalgo, Harding, Guadalupe, Cibola, and Catron also had 0

- individuals with co-occurring mental and substance use disorders (COD)

In 2021 and 2022, the prevalence of individuals diagnosed with co-occurring mental and substance use disorders in treatment facilities was higher in New Mexico compared to the United States. In 2022, individuals receiving care in mental health treatment facilities in New Mexico were more often diagnosed with co-occurring disorders compared to the national average.

Individuals with Co-occurring Mental and Substance Use Disorders (COD), SAMHSA Treatment Episode Data Set, 2021-2022 ¹⁴		
	2021	2022
New Mexico	41.9%	59.7%
United States	27.5%	27.3%

- children with serious emotional disturbance (SED)

In 2022, New Mexico reported 249,583 children aged 9-17 years that had serious emotional distress (SED). Regarding the level of functioning, the upper limit had the slight edge at 32,446, compared to the lower limit at 27,454.

¹³ New Mexico Human Services Department. (2022, May). *U.S. and NM Health and Wellness. 2022 Data Book*. <https://www.hsd.state.nm.us/wp-content/uploads/HW.pdf>

¹⁴ Substance Abuse and Mental Health Services Administration. (2023a). *Individuals with Co-occurring Mental and Substance Use Disorders*. Quick Statistics National Substance Use and Mental Health Services Survey. https://www.samhsa.gov/data/quick-statistics-results?qs_type=nsumhss&state=United+States&year=2021

Children (Ages 9 to 17 years) with Serious Emotional Disturbances (SED) Prevalence, Substance Abuse and Mental Health Services Administration, 2022 ¹⁵			
	Population 9-17 Years with SED	Level of Functioning = 60 (Lower Limit)	Level of Functioning = 60 (Upper Limit)
New Mexico	249,583	27,454	32,446
United States	37,919,276	3,872,115	4,630,500

- individuals experiencing a mental health (MH) or substance use-related crisis

In 2019, depressive disorder diagnoses were the leading cause of mental health hospitalizations among both male and female youth aged 5-17 years in New Mexico, although there was a higher prevalence among females compared to males which was more than double, with rates of 97.0 to 47.0 per 100,000 residents, respectively. Compared to males, females also showed a greater prevalence in hospitalizations with a diagnosis of trauma and stressor-related disorder and anxiety disorders. Males were more commonly hospitalized with a diagnosis of disruptive behavior/impulsive disorders and attention deficit/hyperactivity disorder than females.

New Mexico Youth Aged 5-17 Years with Mental Health Hospitalizations by Diagnosis Per 100,000 Residents, New Mexico Human Services Department, 2019 ¹⁶		
	Female	Male
Disruptive Behavior and Impulsive Disorders	12.0	18.8
Attention Deficit/Hyperactivity Disorder	23.5	39.7
Trauma and Stressor-related Disorders	49.5	28.5
Depressive Disorders	97.0	47.0
Anxiety Disorders	53.2	29.2

In 2019, White females exhibited the highest prevalence of adult hospitalizations per 100,000 for depression in New Mexico, with a rate of 174.4. Among all race/ethnicities, females exhibited a higher prevalence than men for adult hospitalization for depression.

New Mexico Adult Hospitalizations per 100,000 Resident for Depression, New Mexico Human Services Department, 2019 ¹⁷		
	Female	Male
American Indian/Alaskan Native	104.6	96.4

¹⁵ Substance Abuse and Mental Health Services Administration. (2023, November 21). *Adults with SMI and Children with SED prevalence in 2022. State-By-State Estimates Of Adults With Serious Mental Illness (SMI) And Children With Serious Emotional Disturbance (SED), 2022.* <https://www.samhsa.gov/data/sites/default/files/reports/rpt42790/adults-with-smi-and-children-with-sed-prevalence-estimates-in-2022.pdf>

¹⁶ New Mexico Human Services Department. (2022, May). *U.S. and NM Health and Wellness. 2022 Data Book.* <https://www.hsd.state.nm.us/wp-content/uploads/HW.pdf>

¹⁷ New Mexico Human Services Department. (2022, May). *U.S. and NM Health and Wellness. 2022 Data Book.* <https://www.hsd.state.nm.us/wp-content/uploads/HW.pdf>

Asian or Pacific Islander	46.4	33.8
Black or African American	152.1	106.6
Hispanic	121.5	85.1
White	174.4	114.3

In 2019, White females exhibited the highest prevalence of adult hospitalizations per 100,000 for anxiety in New Mexico, with a rate of 150.2. Among all race/ethnicities, females exhibited a higher prevalence than men for adult hospitalization for anxiety.

New Mexico Adult Hospitalizations per 100,000 Resident for Anxiety, New Mexico Human Services Department, 2019 ¹⁸		
	Female	Male
American Indian/Alaskan Native	63.9	59.9
Asian or Pacific Islander	41.7	30.1
Black or African American	134.6	76.3
Hispanic	108.1	74.7
White	150.2	92.3

In 2023, there 63,172 calls to the 988 or National Suicide Hotline which were directed to the New Mexico Crisis and Access Line. Among 688 calls from McKinley County, the rate emergent calls (11%) which require immediate 911 intervention was double the rate in the state. Additionally, urgent calls in McKinley County (36%) which require a ER stabilization recommendation were also elevated when compared to the state rate (29%).

988 Calls, New Mexico Crisis Line, 2023 ¹⁹					
	Total Calls*	Level of Care			
		Routine	Urgent	Emergent	Unknown
		N	%	%	%
McKinley County	688	31%	36%	11%	22%
County Unknown/Declined	10,375	19%	8%	0%	72%
New Mexico	63,172	30%	29%	5%	36%

* Hang up calls were dropped from totals, calls from National Suicide Line without location were also dropped

¹⁸ New Mexico Human Services Department. (2022, May). *U.S. and NM Health and Wellness. 2022 Data Book.*
<https://www.hsd.state.nm.us/wp-content/uploads/HW.pdf>

¹⁹ ProtoCall Services, Inc. New Mexico 988. (2024, March 7). 988 Calls to the New Mexico Crisis and Access Line. New Mexico; Santa Fe.

Input from people with lived experience about Treatment Needs

SFRC Client Treatment Needs

Throughout 2023, SFRC clients were asked questions during their discharge process. The data was collected using a Client Feedback Survey at various SFRC locations. Clients received one or more services from SFRC: Detox, Four Corners Detox (FC Detox), Men's Residential Treatment (M RTC), Women's and Children's Program (W Combined), Four Corners Detox Recovery Center (FCDRC) Residential Treatment Center (RTC), Women's Extended Residential Program (W Ext). Client Experience Questions – All questions were asked at discharge:

- 95.7% of clients said they would recommend SFRC treatment? (559 clients responded to this question.)
- When asked “How do you evaluate the services provided by the Counseling staff?”, here is how participants responded (612 clients responded to this question.):
 - Excellent – 67.9%
 - Good – 17.8%
 - Satisfactory – 6.6%
 - Fair – 6.7%
 - Poor – 0.8%
- When asked “Did you receive adequate counseling, education on your addictions, and therapeutic programs?”, here is how participants responded (843 clients responded to this question.):
 - Excellent – 65.8%
 - Good – 20.4%
 - Satisfactory – 4.3%
 - Fair – 8.8%
 - Poor – 0.7%

Program Effectiveness Questions – All questions were asked at discharge:

- When asked “Did you get what you needed from treatment to maintain your recovery?”, 93.6% of clients said yes. (564 clients responded to this question.):
- When asked to respond to the statement “I am making good progress on my recovery journey.”, 68.1% strongly agreed. (Recovery Capital Questionnaire) (1,239 clients responded to this question.)