

THE UNIVERSITY OF NEW MEXICO

# FEDERAL PRIORITIES FISCAL YEAR 2018

*Prepared for the New Mexico Congressional Delegation*



UNM

# The University of New Mexico FY 2018 Appropriations

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## Indian Health Professionals

### INDIAN HEALTH PROFESSIONALS

Agency: The Indian Health Service, Department of Health and Human Services

Appropriation Bill: Interior

Current Funding Level: \$ 48,342,000

FY 2017 President's Request \$49,345,000

Senate FY 2017 Interior Appropriation: \$ 49,345,000

House FY 2017 Interior Appropriation: \$49,345,000

FY 2018 President's Request: TBD

**FY 2018 UNM request: \$49,345,000**

## Strategic Effort for Indians Into Nursing

### STRATEGIC EFFORT FOR INDIANS INTO NURSING

Agency: The Indian Health Service, HHS

Current Funding Level: \$1.67 million

FY 2017 President's Budget Request: \$1,669,697 Quentin N. Burdick American Indians into Nursing Program, level funding

House FY 2017 Appropriation:

Senate FY 2017 Appropriation:

FY 2018 President's Budget Request: TBD

**FY 2018 UNM Request: \$1,669,697 and continued support for five centers**

#### Project Description:

The purpose of this IHS cooperative agreement is to augment the number of registered nurses, certified nurse midwives, nurse practitioners and certified nurse anesthetists who deliver health care services to AI/AN communities.

The primary objectives of this grant award:

- 1) To recruit and train AI/AN individuals to be nurses (graduate and undergraduate)
- 2) To provide scholarships to AI/AN individuals enrolled in schools of nursing
- 3) To provide a program that encourages AI/AN nurses (graduate and undergraduate) to provide or continue to provide health care services in AI/AN health care programs
- 4) To provide a program that increases the skills of and provides continuing education to AI/AN nurses.

**The American Indians Into Nursing program:**

This program is authorized under Section 112 of the Indian Health Care Improvement Act. The purpose of the Nursing Grant Program is to increase the number of nurses, nurse midwives, nurse anesthetists, and nurse practitioners who deliver health care services to American Indian and Alaska Native (AI/AN) communities. UNM is pleased to report that it successfully competed for a center in 2016, allowing the university to attract and recruit for the baccalaureate, masters, and doctoral nursing programs, increase mechanisms and resources to increase nursing student enrollment and retention, increase activities that boost the skills of nurses who deliver health services to the AI/AN population, and increase career counseling, academic advice and other activities to assist student retention.

# Strategic Effort for Indians Into Medicine

## STRATEGIC EFFORT FOR INDIANS INTO MEDICINE

Agency: The Indian Health Service, HHS

Current Funding Level: \$1.09 million

FY 2017 President's Budget Request: \$1,097,364 IHS INMED program

House FY 2017 Appropriation:

Senate FY 2017 Appropriation:

FY 2018 President's Budget Request: TBD

**FY 2018 UNM Request:** Increase of \$195,000 in FY18 for an additional center for a total request of \$1.29 million and the following report language: "The Committee is encouraged by the success of this program at attracting Native Americans into the medical profession and believes that far too many Native Americans remain underserved by this program. As a result, the Committee includes funding to support an additional center in the southwest region to serve a growing population of Native Americans."

### **Project Description:**

New Mexico has 219, 512 Native American (NA) citizens and is home to 23 federally recognized tribes and one large urban NA population (NM Indian Affairs Department). Native Americans in NM are a low wealth, high health disparities population predominately located in rural and frontier counties. NM's three significant NA populated counties (more than 40% NA population) all meet criteria as Persistent Poverty Counties, Medically Underserved Areas, and Health Professional Shortage Areas for primary medical, dental, and mental health care providers (Rural Policy Research Institute, Demographic and Economic Profile NM, 2006). Health disparities follow the developmental stages of life among the NM NA population and include the state's highest rates of malnutrition/childhood obesity, youth suicide that is twice as high as for the US general population of youth, and alcohol-related and diabetes-related mortality rates, which are the highest in the country as are mortality and morbidity rates for injury and violence (NM DOH, American Indian Health Equity, 2013).

The educational persistence and success of NAs is a foundational pathway to achieving health equity by and for NAs in NM. Culturally-informed health care as well as continuity of care can best be delivered to the reservations in rural and frontier counties by NAs themselves. However, entrenched and palpable educational disparities are evident in NM academic institutions. School systems and NA educational opportunities are truncated at multiple levels of schooling. At the *junior high-school* level, educational attainment for NAs in NM is challenged by at least two extenuating circumstances that are greater than for NAs in any other state: 28% are English Language Learners (ELL), a term used to describe students who are in the process of acquiring English language skills and knowledge; and 88% meet federal eligibility requirements for free or reduced-price lunch (National Assessment of Educational Progress,

2011). New Mexico's *high school* graduation rate is 54.1%, one of the lowest in the nation. The high school graduation rate for NAs in NM is 45.3% (National Clearinghouse for English Language Acquisition, Report # 0094-2011-2). When NA students make it to their first year of *college* in NM, they are often first generation college students and 65% are required to complete some form of remediation education, the highest rate for any ethnic group in the state (NM Higher Education Report, 2013).

Our request is for a *sustained*, not a "one-shot", funding stream to better promote exposure and interest in STEMH (science, technology, engineering, mathematics, and healthcare) programs and health professions' pathways that can be made available to NA students in a way that dismantles the barriers produced across centuries of NA educational inequities. The present request for program funding such as that offered by the USPHS/Indian Health Service's American Indians Into Medicine Program (INMED) is urgent. The University of New Mexico Health Sciences Center's Center for Native American Health (CNAH), a previous INMED grant recipient, offers a NA team of health and educational experts who are culturally and academically prepared to implement and leverage INMED programming to elevate Native American health and educational equity in NM.

**Challenge:**

- ◆ Only two competitive IHS INMED grants are awarded nationally every five years.
- ◆ A third, non-competitive, INMED grant was written into law in 1973 for the University of North Dakota School of Medicine.

**Description:**

The USPHS/IHS American Indians into Medicine (INMED) program is authorized under the authority of 25 U.S.C. 1616g, Indian Health Care Improvement Act, Public Law 94-437, as amended (IHCA). The purpose of INMED is to augment the number of AI health professionals serving Indians by encouraging AI to enter the health professions and removing the multiple barriers to their entrance into practice. The INMED program is administered by the USPHS/Indian Health Service (IHS), Division of Health Professions Support. Two nationally competitive awards are available every 5 years.

**Request:**

We request an expansion of the IHS INMED program for a fourth competitively-awarded INMED grant dedicated to the southwest region.

**What we're seeking and why:**

We are seeking funding for an additional INMED grant for the southwest region. The amount needed to cover the grant is **\$195,000 in FY 2018**. The amount of the request is within the current scope of the INMED program as specified in the Federal Register, Volume 79, Number 82, Pages 23983-23989.

The discontinuation of INMED funding to UNM HSC CNAH severely constrains progress in the beginning stages of addressing decades of attrition in secondary and post-secondary education by NAs in NM, a modifiable barrier that stands in the way of graduating sufficient numbers of NA health professionals. The initial 4-year funding cycle of the INMED program awarded to CNAH from 2010-2014 provided a team of NA health professionals with the resources to address cultural and academic barriers faced by NA students at UNM and NA high school students who hope for a college education. In the historical context previously described, our achievements in 4 years were phenomenal and measurable. Prior to implementing the CNAH-INMED, the UNM School of Medicine (SOM) matriculated 1 to 2 NA students

per year. Since the implementation of the INMED grant, UNM SOM now has a total of 25 NA medical students. Since 2010, UNM SOM has matriculated an average of 6 NA students per year. On the national scale, UNM SOM admitted 13% of all NA medical applicants in 2012 (Association of American Medical Colleges, 2012) and has an 80.5% enrollment rate (Smith-Barrow, 2014). From 2010-2014 we have not experienced attrition by even one medical student. In addition, the UNM HSC has approximately 100 NA health professions students who find tremendous support and benefit from the previous INMED grant as it relates to standardized exam preparation, tribal community specific health initiatives, peer mentoring, cultural programming, academic supports and advocacy, and connectedness to tribal workforce opportunities. The requested INMED funding will enable us to continue to build on the Native American health professions educational pipeline of secondary and post-secondary undergraduate and graduate students. The UNM CNAH INMED program operated in a low-budget no-cost extension status that terminated on August 31, 2015.

**Impact it will have on the state:**

Over the coming decade, with INMED funding, the impact at the tribal, county, and state levels in NM can be profound. Health and education statistics provided in the Background section will have sufficient time to demonstrate positive change as NA health professions students graduate from their various programs at UNM HSC and return to their tribal homes. Their visibility will be in leading primary care efforts, providing pharmacy services, promoting their own local public health initiatives, and attending to the significant mental and behavioral health needs that have been neglected for so long. The impact upon youth who see health professionals who look like them and understand their struggles, who can role model, mentor, coach, and be peer counselors for health occupations development and who include their own traditional healing knowledge and practices into an integrated system of care will have inspirational impact that can lift the health status of a whole community. Furthermore, successful INMED models of health professions development can serve as relatively low-cost approaches to addressing the significant pockets of health inequities that exist in the nation's rural and urban landscapes.

# Strategic Effort for Birth Cohort Study

## STRATEGIC EFFORT FOR BIRTH COHORT STUDY

Agency: Agency for Toxic Substances and Disease Registry (ATSDR), HHS  
Appropriations Bill: Interior

Current Funding Level: \$74,691,000

FY 2017 President's Budget Request: ATSDR's FY 2017 request of \$74,691,000 is level with the FY 2016 enacted level.

NOTE: Current Funding Level of the Birth Cohort Study: \$1 million

House FY 2017 Appropriation: \$74,691,000

Senate FY 2017 Appropriation: \$74,691,000

FY 2018 President's Budget Request: TBD

- **FY 2018 UNM request: \$74,691,000, plus language supporting the Navajo Birth Cohort Study: "The Committee supports the ongoing Birth Cohort Study at the Navajo Nation and provides \$3 million for the project"**

### Project Description:

UNM, in conjunction with the Navajo Area Indian Health Service and the Navajo Nation, is leading a study through ATSDR that is the first prospective epidemiologic study of pregnancy and neonatal outcomes in a uranium-exposed population. Known as "The Navajo Birth Cohort Study" (NBCS), the goal of the study is to better understand the relationship between uranium exposures and birth outcomes and early developmental delays on the Navajo Nation. Continued funding for the ATSDR program at the CDC is critical to this important work.



# Strategic Effort for Project ECHO

## STRATEGIC EFFORTS FOR PROJECT EXPANDING CAPACITY FOR HEALTH OUTCOMES (ECHO)

### I. Technical Training Center through IHS for Project ECHO training

Agency: The Indian Health Service, HHS (Hospitals and Health Clinics Account)

Appropriation Bill: Interior

Current Funding Level: The Indian Health Service: \$3,566,387,000, Hospitals and Health Clinics: \$1,857,225,000

FY 2017 President's Budget Request: IHS: \$3,815,109,000

House FY 2017 Appropriation: IHS: \$3,720,690,000, Hospitals and Health Clinics: \$1,928,879,000

Senate FY 2017 Appropriation: IHS: \$3,650,171,000, Hospitals and Health Clinics: Not specified

NOTE: Project authorized in 2016 (P.L. 114-270)

FY 2018 President's Budget Request: TBD

**FY 2018 UNM request—Report Language:** “The Committee continues to be concerned about the urgent need for skilled health providers in AI/AN communities and is encouraged by Project ECHO’s success in delivering timely care to underserved communities. The Director of the Indian Health Service shall consider how Project ECHO could support existing Indian Health Service providers through the establishment of a technical training center to aid in the recruitment and retention of providers to IHS sites, thereby expanding the provider network.”

### Project Description:

The shortage of health care providers in AI/AN communities is well documented. A recent IHS Nurse Position Report noted a vacancy rate of 18 percent for registered nurses. There is an urgent need for skilled providers in these communities.

The ECHO model has been shown to increase provider job satisfaction, reduce their sense of isolation, and improve their overall “joy of work.” Project ECHO would work with the Indian Health Service to establish a system-wide implementation of the ECHO model that would support existing IHS providers to encourage retention and assist with the recruitment of providers to IHS sites that have high vacancy rates.

## II. Technical Training Center through the Office of Rural Health Policy

Agency: HRSA, HHS (Office of Rural Health Policy)

Appropriation Bill: Labor/HHS

Current Funding Level: \$149,571,000 (Rural Health Programs within HRSA)

FY 2017 President's Budget Request: \$144,162,000

House FY 2017 Appropriation: \$169,571,000

Senate FY 2017 Appropriation: \$152,571,000

NOTE: ECHO Project authorized in 2016 (P.L. 114-270)

FY 2018 President's Budget Request: TBD

FY 2018 UNM request—Report Language: “The Committee notes the passage of P.L. 114-270 supporting Project ECHO and the efforts to deliver high-quality, professional care to rural and underserved communities. The Committee understands that there is increasing demand for technical training on Project ECHO and encourages the Secretary of Health and Human Services to set aside \$1 million to fund a national resource center focused on Project ECHO technical training.”

### Project Description:

Project ECHO began out of a need to serve Hepatitis-C patients in the rural areas of New Mexico so that they could receive best practice care where they lived, when they needed it. Since then, its applications have expanded to cover more than 55 complex conditions and more than 65 Academic Medical Centers have replicated the model to support their rural and underserved patients. Demand has been increasing at an exponential rate with more than 200 other programs already in the pipeline and regularly oversubscribed monthly training opportunities. The need is even greater.

Project ECHO would expand its outreach and training capacity. This expansion would include a direct expansion of capacity that supports the development and implementation of new technology-accelerated models of training. These new models would significantly increase efficiency and reach while maintaining the essential chemistry of community, collaboration, and service that the current model of training imbues.

# Strategic Effort for SBIR/STTR Regional Innovation Incubators in IDeA States

## STRATEGIC EFFORT FOR SBIR/STTR REGIONAL INNOVATION INCUBATORS IN IDEa STATES

Agency: National Institutes of Health, HHS

Appropriation Bill: Labor/HHS

Current Funding Level: N/A

FY 2017 President's Budget Request: N/A

House FY 2017 Appropriation: No specific language

Senate FY 2017 Appropriation: Includes language supporting innovation incubators in four IDeA regions.

FY 2018 President's Budget Request: TBD

FY 2018 UNM Request-- Report Language: "The Committee supports the initiative in the President's budget request for FY 2016 calling for directed small business research funding to IDeA states in order to foster the development of products to advance public health. The Committee directs that \$4 million be allocated to fund one shared innovation incubator in each of the four IDeA regions that would be competitively bid among IDeA states and would serve IDeA states. NIH shall not use funding from its IDeA allocation for these grants."

### Project Description:

The SBIR program encourages public-private partnerships by funding start-up companies in early-stage technology. Often, technology is developed in academic labs, and then licensed to the private sector. The SBIR/STTR program helps foster regional economic and workforce development by spurring high-tech small business growth and "lab to table" development.

The Institutional Development Award Program (IDeA) at NIH helps broaden the geographical distribution of biomedical research funding and often serves rural and medically underserved populations. IDeA states (23 states, of which New Mexico is one) have historically had a proportionately low level of SBIR awards. In the 2012 Defense Authorization Act (P.L. 112-81), Congress recognized this state disparity and called on NIH to better support IDeA states through the SBIR/STTR program (Sec. 5168). This request is in keeping with that authorization and consistent with the President's budget request for FY 2016.

## UNM Strategic Effort for High Energy Density Laboratory Plasmas

### UNM STRATEGIC EFFORT FOR HIGH ENERGY DENSITY LABORATORY PLASMAS

Agency: National Nuclear Security Administration (NNSA) and Office of Science (OS), Department of Energy

Appropriation Bill: Energy and Water

NOTE: UNM draws funding from both the NNSA and the OS programs in High Energy Density Laboratory Plasmas (HEDLP):

#### **NNSA Program:**

Program: High Energy Density Laboratory Plasmas is part of the Inertial Confinement Fusion Ignition program (ICF) at NNSA.

Current Funding Level: \$8.9 million (HEDLP)

FY 2017 President's Budget Request: \$9,492,000

Senate FY 2017 Appropriation: \$9,492,000

House FY 2017 Appropriation: \$18,000,000 for the high-energy density laboratory plasma program.

**FY 2018 UNM Request for NNSA HEDLP: \$9,492,000 and the following language: "The Committee supports continued research at NNSA into High Energy Density Plasmas and recognizes the partnerships between the labs and research universities to address the critical need for skilled graduates to replace an aging workforce at our NNSA laboratories."**

#### **OS Program:**

Program: HEDLP is part of the Fusion Energy Science account in the Office of Science

Current Funding Level: \$20,250,000

FY 2017 President's Budget Request: \$7,000,000

Senate FY 2017 Appropriation: \$18,000,000

House FY 2017 Appropriation: Not Specified

FY 2018 President's Budget Request: TBD

**FY 2018 UNM Request for OS HEDLP: \$20,250,000**

### Project Description:

New Mexico has very active HEDP programs in Sandia National Laboratories and Los Alamos National Laboratory. The University of New Mexico is emerging as a critical partner in supporting the large research activities at both DOE/NNSA Labs through the laboratories of Professors Schamiloglu, Gilmore, and Lehr in ECE.

Sandia National Laboratories is the nation's premier science and engineering lab for national security and technology innovation. Research in HEDP spans a broad range of topics with a common theme of gaining an improved understanding of physical processes at normal as well as extreme conditions of high densities and/or temperatures, pressures, magnetic fields, and rapidly changing states. The research has both applied and fundamental dimensions, such as in the areas of electronic structure, shock physics, material science, planetary science and astrophysics. High energy density plasma physics is a core capability at Los Alamos National Laboratory (LANL) and is important to supporting mission-relevant research in energy security, national security, and threat detection.

The workforce at our NNSA labs is aging, and skilled scientists are needed to continue the critical work at these facilities that is vital to our national security. The High Energy Density Laboratory Plasmas program provides a link between the NNSA labs and research universities and helps foster workforce development.

# Nuclear Energy University Program (NEUP)

## NUCLEAR ENERGY UNIVERSITY PROGRAM (NEUP)

Agency: Office of Nuclear Energy, Department of Energy  
Appropriation Bill: Energy and Water

Current Funding Level: \$5,000,000  
President's FY17 Budget Request: \$0  
Senate FY 2017 Appropriation: Not less than \$5,000,000.  
House FY 2017 Appropriation: \$5,000,000  
President's FY 2018 Budget Request: TBD

**FY 2018 UNM request: \$5,000,000**

### Project Description:

The DOE Nuclear Energy University Program (NEUP) funds nuclear energy research and equipment upgrades at U.S. colleges and universities, and it provides student educational support. Since 2009, NEUP has awarded approximately \$290 million in research and infrastructure funding. The goals of the program are to: integrate R&D at universities, national labs and industry; revitalize nuclear engineering education to meet anticipated manpower needs of the nuclear power industry; improve university infrastructure to facilitate delivery of quality education and conduct state-of-the-art research; and facilitate training of future educators and industry leaders by transferring knowledge from the existing aging workforce to the next generation of workers.

As NEUP is the only Department of Energy program that provides R&D support to universities, their nuclear engineering departments and programs are heavily reliant on one federal agency and program to sustain innovative research and train graduate students. Smaller programs, such as the one at UNM, find themselves at a disadvantage compared to the larger programs. This is in spite of our internationally renowned faculty who routinely submit multiple proposals under this program, and the success of our students post-graduation.

The faculty in the Department of Nuclear Engineering at UNM conduct cutting-edge research on: design and safety of advanced nuclear reactors, including space reactors; radiation detector development and measurements for nuclear nonproliferation and safeguards applications; and radiation interactions in matter with application to space radiation and medical physics.

One of our junior faculty has built a state-of-the-art research laboratory in thermal-hydraulics to conduct fundamental research on advanced reactor safety technologies and to address specific concerns of the nuclear industry relating to loss of coolant accidents. Another young faculty has built a radiation detection laboratory for developing advanced instrumentation for fission fragment measurements that can be used in the detection of clandestine special nuclear material. Other faculty develop computational methods and algorithms for simulating interaction of high energy radiation with matter with application to active interrogation of shielded sources of nuclear material as well as to space radiation interactions with satellite instrumentation.

This work is important to the Sandia National Laboratories, Los Alamos National Laboratory, Air Force Research Laboratory and UNM's nuclear engineering department, which is the only such department in the State of New Mexico. UNM is also the only MSI/HSI institution that has the Carnegie category Very High Research Activity with a nuclear engineering program, and it serves to provide a manpower pipeline for these national laboratories.

Continued support of research in areas of nuclear reactor design and safety, and nuclear nonproliferation and safeguards, as well as nuclear materials for our faculty, especially our junior faculty, are essential for the nuclear engineering program at UNM to hire and retain excellent faculty, deliver quality undergraduate and graduate education, and help meet the manpower needs of the nuclear energy and security complex to replace an aging nuclear workforce.

# DOE Regional Energy Innovation Centers

## DOE REGIONAL ENERGY INNOVATION CENTERS

Agency: Department of Energy

Appropriation Bill: Energy and Water

Authorization: None

Current Funding Level: \$0. DOE has just put out an RFP for a study on regional energy innovation centers.

FY 2017 President's Budget Request:

House FY 2017 Appropriation: No specific language.

Senate FY 2017 Appropriation: Senate included language in the committee report supporting the goals of transformational energy research and development through partnerships between universities, labs and industry, broadly dubbed "Mission Innovation".

President's FY 2018 Budget Request: TBD

**FY 2018 UNM language request: "The Committee supports the continuation of efforts at the Department of Energy to advance energy innovation through regional partnerships between universities, national labs and industry and instructs the Secretary to provide a report to the committee within 90 days of enactment detailing how the department will move forward on the creation of regional energy innovation centers."**

### Background:

The University of New Mexico (UNM) took the lead in responding to an initiative from the Department of Energy last year to host a workshop on regional energy innovation. Out of that workshop emerged the formation of a partnership of National Laboratories (Sandia NL, Los Alamos NL, Idaho NL, National Renewable Energy Lab), industries, and universities in New Mexico, Arizona, Colorado, Utah and Idaho that will develop disruptive energy technologies based on materials research as well as agile pathways to commercialize and implement these technologies. The resulting **Mountain West Energy Innovation Center** (MWEIC) seeks to maximize the substantial capabilities in materials innovation of the region by extending and enhancing longstanding collaborations between universities and DOE laboratories.

The MWEIC will shepherd promising new energy materials for the diverse energy sectors (*e.g.*, fossil fuels, nuclear, wind and solar) within the region from initial research and development, through proof of concept testing and integration into pilot projects, and finally, commercialization and deployment. At each stage, promising projects will be evaluated by regional energy stakeholders, including private investors, as well as representatives from utilities and corporations. Through this process, the MWEIC



will develop and implement a system of sustainable, reliable and affordable clean energy production that will generate significant economic benefits to the region by reducing energy costs in both urban and rural areas, including tribal lands, while creating high paying jobs in STEM-related areas.

In preparation for developing a regional energy innovation center, UNM is submitting a proposal to DOE in response to DOE-FOA-0001643: *Assessing the Opportunities and Economic Impact of a Regional Advanced Materials Innovation Energy Ecosystem Center*. In addition to the national laboratories listed above, the following organizations have agreed to partner with UNM on an economic analysis of the potential impacts of a regional energy innovation center.

Utah State University

University of Utah

Utah Science Technology and Research (USTAR)

Arizona State University

Arizona Technology Enterprises (AzTE)

Colorado School of Mines

Colorado State University

Microgrids Systems Lab

NM Economic Development Department

Public Service Company of NM (PNM)

# Prescription Opioid Abuse Study

## PRESCRIPTION OPIOID ABUSE STUDY

Agency: Agency for Healthcare Research and Quality (AHRQ), Department of Health and Human Services  
Appropriation Bill: Labor/HHS

Current Funding Level: \$334,000,000 for AHRQ  
President's FY 2017 Budget Request: \$363,000,000  
Senate FY 2017 Appropriation: \$324,000,000  
House FY 2017 Appropriation: \$280,240,000  
President's FY 2018 Budget Request: TBD

**FY 2018 UNM LANGUAGE REQUEST: "The Committee directs AHRQ to fund research on the implementation of the CDC guidelines on opioid prescriptions."**

### **New Mexico Background:**

With more than 24 age-adjusted overdoses per 100,000 people, New Mexico has long had one of the highest drug overdose death rates in the United States. This rate has increased almost 300% since 1990. Most of the increase in overdose deaths can be attributed to deaths from prescription overdoses, which outnumber deaths from heroin overdose by 60%. In 2013, about 85,000 opioid prescriptions were filled per 100,000 persons in the state. New Mexico has been responsive to this serious increase in prescription drug overdoses and has implemented a number of policies and prevention efforts in the state (e.g., establishing a Prescription Drug Monitoring program, expanding naloxone prescriptive authority).

### **UNM Background:**

The Center on Alcoholism, Substance Abuse, and Addictions (CASAA), founded in 1980, is a research-intensive center at the University of New Mexico devoted to research and training to reduce suffering caused by substance use and other addictive behaviors. CASAA supports about 80 faculty, full-time and part-time staff, post-doctoral fellows, and graduate students through grants and contracts from Federal, State, and local government as well as private foundations. CASAA researchers have been at the forefront of developing and researching evidence-based approaches to addictions treatment, and also have researched effective methods to reduce harm from risky drinking in college students, drivers, and pregnant women. Research at CASAA has contributed to a better understanding of issues and effective prevention and treatment approaches for specific populations, including women, criminal justice populations, adolescents, Hispanics, and American Indians.

**Why AHRQ studies needed:**

The mission of the Agency for Healthcare Research and Quality's (AHRQ) is “to produce evidence to make health care safer, higher quality, more accessible, equitable, and affordable” (<http://www.ahrq.gov/cpi/about/index.html>). The AHRQ recently has initiated funding to reduce the abuse of opioid drugs and prevent deaths from opioid overdoses by testing methods to increase the use of medication-assisted treatment for opioid dependence in rural populations. This is an important initiative, but the prevention of opioid abuse and overdose deaths is necessarily a multi-pronged approach that includes, for example, the development and implementation of policies such as co-prescribing of naloxone with opiate medication, the use of prescription drug monitoring systems, and the integration of prevention efforts into primary care settings. Specific research devoted to studying prevention efforts at the policy level would fit well with the commitment of the AHRQ to prevent disease and maximize patient health.

# Support of National Endowment for the Humanities/National Endowment for the Arts

## [Support of National Endowment for the Humanities/National Endowment for the Arts](#)

Agency: NEH/NEA

Appropriations Bill: Interior

Current Funding Level: NEH \$147,942,000

NEA \$147,949,000

FY 2017 President's Budget Request: NEA \$149,849,000

FY 2017 House Appropriation: NEA \$149,849,000 which is \$1,900,000 above the fiscal year 2016 enacted level and equal to the budget request; NEH \$149,848,000

FY 2017 Senate Appropriation: NEH \$146,021,000; NEA \$146,021,000

FY 2018 President's Budget Request: TBD

**FY 2018 UNM Request: NEA: \$149,849,000; NEH: \$149,848,000**

### Description:

Over the past five years, the College of Fine Arts (CFA) and the College of Arts and Sciences (CAS) have worked in several capacities with the National Endowment for the Arts and the National Endowment for the Humanities. In 2016 alone, a number of faculty have been awarded grants from NEH and NEA providing over \$224,000 of federal funding. CFA faculty have been NEA award recipients across a range of disciplines from community based projects to research into music education and the developing brain. Current projects include continued studies regarding music training and brain development, as well as a major project to begin data collection to reveal the efficacy of arts interventions in medical treatment and palliative care. Proposals have been submitted for the UNM Music Prep School with continued classes for a range of school aged children and the further development of our Flamenco program that was identified as a program that exemplifies the highest level of excellence in its rigor, quality of cultural preservation, and accessibility to a broad community.

The College of Arts and Sciences has also been active with the NEH. One faculty member in History has been awarded a prestigious grant aimed at transforming the training and education of humanities Ph.D.s, and another is working on a project related to Latin American migration to urban centers. It is also important to note that many of our programs benefit from the New Mexico Arts and New Mexico Humanities Councils, both of which are funded through the NEA. Presently, the NM Humanities Council has awarded a grant to support the upcoming CFA/Land Arts conference *Decolonizing Nature: Resistance, Resilience, Revitalization*. This conference is international in scope and has drawn broad support. Without the NEA and NEH, these important local councils would not exist.