

The 100% Community Survey Report

Doña Ana County
2020

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Prepared for the Resilience Leaders of Southern New Mexico
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Introduction



What is the 100% Community Survey?

The following report presents the results of the 100% Community Survey for Doña Ana County, New Mexico. This county-wide assessment was initiated by the Resilience Leaders of Southern New Mexico and follows the 100% Community initiative framework provided by the Anna, Age Eight Institute, whose mission is to "ensure that children, students, and families are safe and thriving." The purpose of the survey was to identify the level of need and access to 10 basic "surviving" and "thriving" family services, as well as perceptions of quality.

Summary of Findings

Surviving Services

- 68% of respondents who reported needing affordable housing services had difficulty accessing them. Long waitlists and not qualifying for services were the top 2 barriers.
- 76% of single-parent households and 64% of respondents speaking a language other than English in the home reported needing food assistance services. Not qualifying for services was the top barrier to access.
- 48% of respondents who reported needing public transportation had difficulty accessing it. In Chaparral, 83% of respondents had difficulty.
- The perceived need for all health-related services was notably less for Hispanics or Latinos, and those whose primary language was not English. Common barriers among all respondents were a lack of providers and the high cost of care.
- 49% of respondents who needed mental or behavioral health support had difficulty accessing it. Lack of quality providers, long waitlists, and cost were the top 3 barriers to access.

Thriving Services

- Results highlighted the essential role child care plays in parents accessing other services. Nearly 1 out of every 4 parents (24%) who had difficulty accessing job training services reported, "I don't have anyone to watch my child during training." The high cost of child care was a common barrier. 76% of those facing difficulty reported, "it costs too much." Child care subsidies are crucial to access, especially for single parents. 44% of single-parent households reported receiving a subsidy compared to 27% of two-parent households.
- The need for home visiting services was highest among respondents who speak a language other than English in the home. Although only 14% of respondents reported difficulty accessing home visiting services, among those who did, 38% said they didn't qualify.
- 21% of respondents with children reported needing parenting classes. Of those who had difficulty obtaining them, 63% reported not knowing where to get them.
- Among the 20% of respondents who reported difficulty obtaining preschool services, the top barriers included long waitlists, high costs, and the inability to find a quality provider. Comments pointed to issues obtaining services for children with special needs and not qualifying for free programs.
- Only 6% of respondents with children reported needing youth mentor services, but 62% of those who did need services reported difficulty accessing them.
- Among respondents reporting difficulty obtaining school-based health services for their child, 36% reported their child's school did not offer the service.
- 67% of respondents who needed school-based mental health services for their child said there weren't enough mental health care professionals at their child's school, and nearly half (48%) said the school did not offer the types of services their child needed.

Feelings of Support

- 59% of respondents reported they "agreed" to "strongly agreed" with the statement, "I have extended family support living near me that I can depend on." 28% disagreed with the statement, and 13% were neutral.
- Slightly less than half (49%) of respondents not caring for children felt they had outside support, highlighting the need for more community outreach and support.

Survey Methodology

The Resilience Leaders partnered with the Center for Community Analysis (CCA) at New Mexico State University to adapt the Anna, Age Eight Institute's 100% Community Survey particular to Doña Ana County. The survey was widely distributed in the late summer and fall of 2019, online through email, websites, and social media outlets. To encourage participation from families living in rural areas and those lacking internet and technology, paper surveys and tablets with the survey preloaded were distributed at health, human, and social service offices, child care centers, and at community events held throughout the county. Surveys were available in both English and Spanish.

A statistically appropriate sample according to geography was determined by the CCA to ensure proper representation. A total of 1,226 surveys were collected and 67% of respondents reported caring for at least one child. Chi-square tests (or Fisher's exact tests) to determine statistically significant differences were examined and are included in this report when relevant.

1,226

total survey responses

67%

of respondents were a parent, guardian, or primary caregiver for a child



Sample Representativeness

The survey sample is generally reflective of the population in Doña Ana County, with a few exceptions.

Most of the socioeconomic factors measured are more or less true to the population, including area of residence, ethnicity, education level, and income level of survey respondents. There were two notable exceptions. Males were noticeably underrepresented in this sample. Also, proxy variables suggest Spanish speakers were underrepresented.

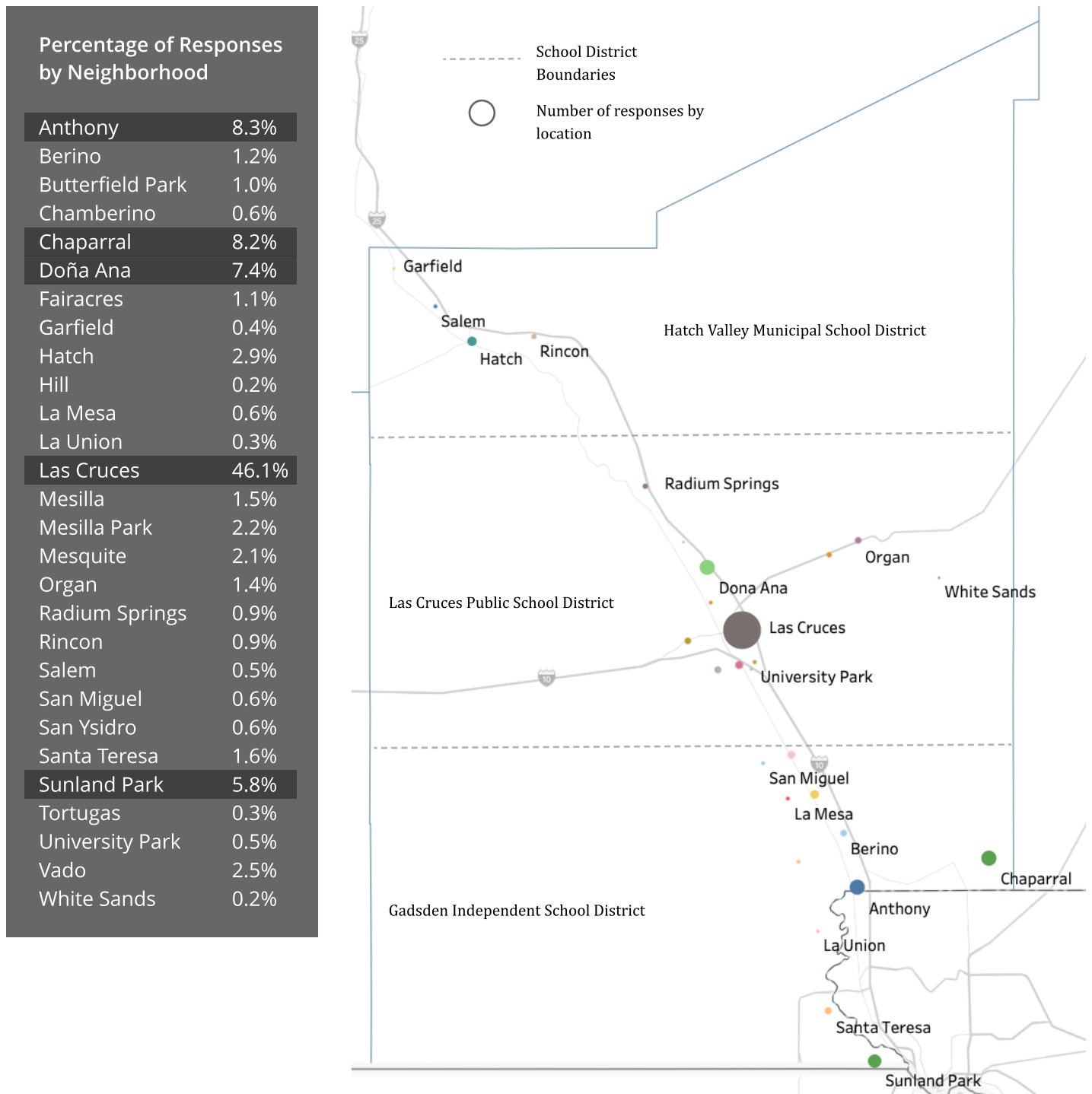
DEMOGRAPHICS: DOÑA ANA COUNTY AND SURVEY SAMPLE

	Doña Ana County ¹	Survey Sample	(Difference)
Area of Residence			
Lives in Las Cruces	52%	46%	(-6%)
Lives outside Las Cruces	49%	54%	(6%)
Gender			
Male	49%	18%	(-31%)
Female	51%	81%	(30%)
Race/Ethnicity			
Hispanic	68%	73%	(5%)
Non-Hispanic	32%	27%	(-5%)
Language Spoken at Home²			
English	48%	68%	(20%)
Spanish, other language/bilingual	52%	28%	(-24%)
Highest Education Attained			
High School Degree or Less	43%	37%	(-6%)
Some College/2-Year Degree	29%	27%	(-2%)
Bachelor's	17%	19%	(3%)
Graduate Degree	11%	17%	(6%)
Household Income			
Less than \$10,000	11%	17%	(6%)
\$10,000 to \$24,999	23%	26%	(3%)
More than \$24,999	66%	57%	(-9%)

¹Doña Ana County's demographic estimates are taken from the U.S. Census Bureau 2018 American Community Survey 5-Year Estimates ²Census data measures people who speak a language other than English in the home (with no distinction on primary language) whereas the survey asked respondents to identify the primary language spoken in their home.

Response Locations

Forty-six percent of responses came from the City of Las Cruces, where approximately half the actual county population resides. During survey analysis, geographies were typically grouped by school district boundaries and by Colonia status to mask potentially identifiable populations in neighborhoods with small populations and consequently, fewer survey respondents.



Surviving Services

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Affordable Housing Services

Access to affordable housing services, such as those provided by the Mesilla Valley Public Housing Authority (MVPHA) and Mesilla Valley Community of Hope, is crucial to families living in poverty and the homeless. The Mesilla Valley Community of Hope estimates that every night 200-300 people in the county experience "literal" homelessness (sleeping in shelters or the streets).¹ In addition, US Census Bureau data reports that 58% of renters in Doña Ana County have a high housing burden and 27% have a severe housing burden.² Furthermore, since 2015 the county has experienced an 18% increase in high housing burden, highlighting the urgency of addressing affordable housing in the county.

Need for Affordable Housing Services in Doña Ana County

Just over 1 in 7 (16%) county residents reported needing affordable housing services (Figure 1.1). Statistical analysis found significant differences in need for affordable housing based on household type, household income, and education level (Figure 1.2).

Single parents reported greater need for housing services (33%) compared to two-parent households (12%) and those without children (12%). Unsurprisingly, households with lower annual incomes also reported greater need. Lastly, respondents with a 2-year degree or less were twice as likely as those with a bachelor's degree or higher to report needing services.

Figure 1.1

Have you ever needed affordable housing services? (e.g., Section 8, Mesilla Valley Community of Hope, Mesilla Valley Public Housing Authority, etc.)

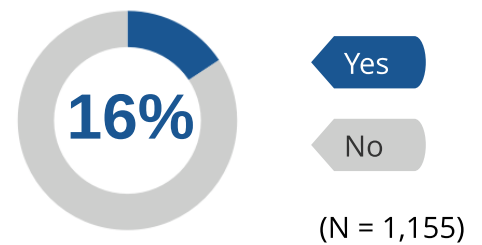
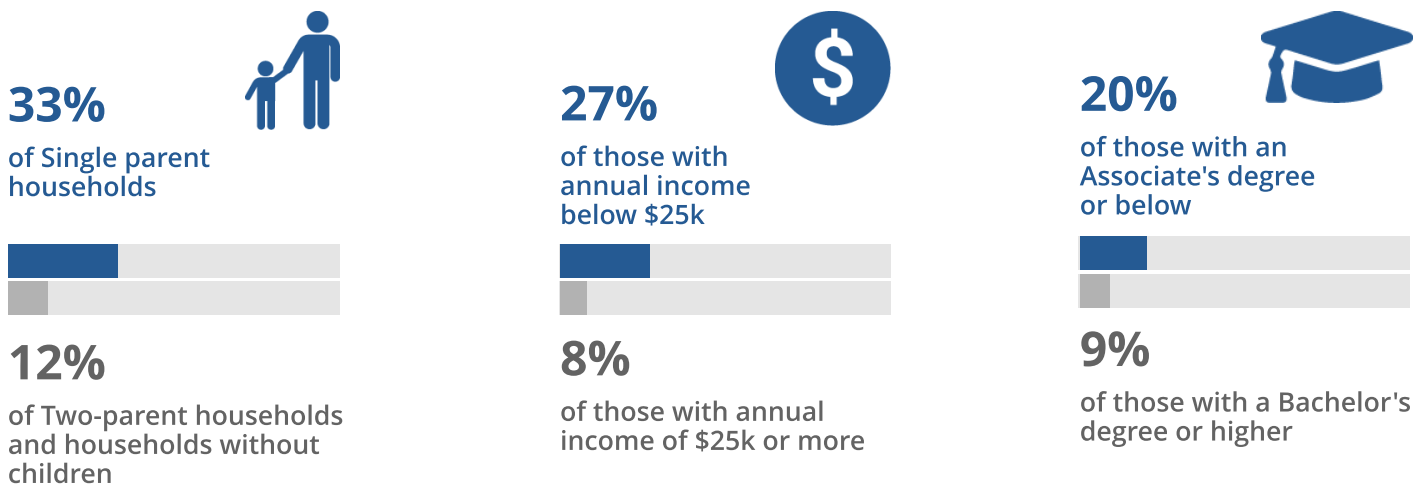


Figure 1.2

Who reported need for affordable housing services?

All group differences are statistically significant at $\alpha=0.05$



1. <http://www.mvcommunityofhope.org/> 2. Harvard Joint Center for Housing Studies. HUD defines cost-burdened families as those who pay more than 30% of their income for housing and may have difficulty affording necessities such as food, clothing, transportation, and medical care. Severe rent burden is defined as paying more than 50% of one's income on rent.

Accessibility and Quality of Affordable Housing Services in Doña Ana County

Two-thirds (68%) of those who needed services, reported difficulty getting them (Figure 1.3). Long waitlists and not qualifying for services were the greatest barriers to access (Figure 1.4). This aligns with information from MVPHA, which states that the demand for services in Doña Ana County is high and the waitlist for housing services is typically 2-6 years.³ When asked about difficulty accessing services, one respondent reiterated this by commenting, "[The] waitlist is 2-3 years long."

In addition, respondents cited a lack of awareness of where to get services (18%), feeling bad or worried about accessing services (11%), and transportation challenges (10%).

Comparisons revealed significant differences regarding access to services based on annual household income. Approximately half (52%) of the households earning under \$10,000 a year experienced difficulty compared to 78% of those earning between \$10,000-\$24,999, 88% of those earning between \$25,000-\$39,999 a year, and 57% of those earning \$40,000 or more (Figure 1.5).

Eligibility for housing assistance programs like those run by the Department of Housing and Urban Development (HUD) are tied to local median income and Fair Market Estimates.⁴ While considering family size, HUD requires local agencies to prioritize families deemed "extremely low-income" and "very low-income." This is defined as families earning 30% and 50%, respectively, of the area's median income which in Doña Ana County is \$39,164.⁵

Figure 1.3

Have you ever had difficulties getting affordable housing services?

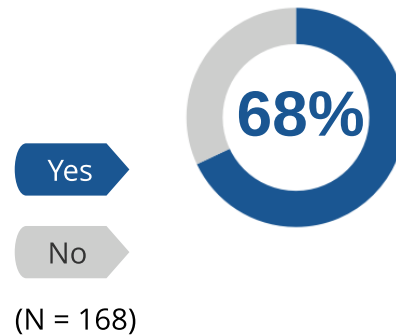
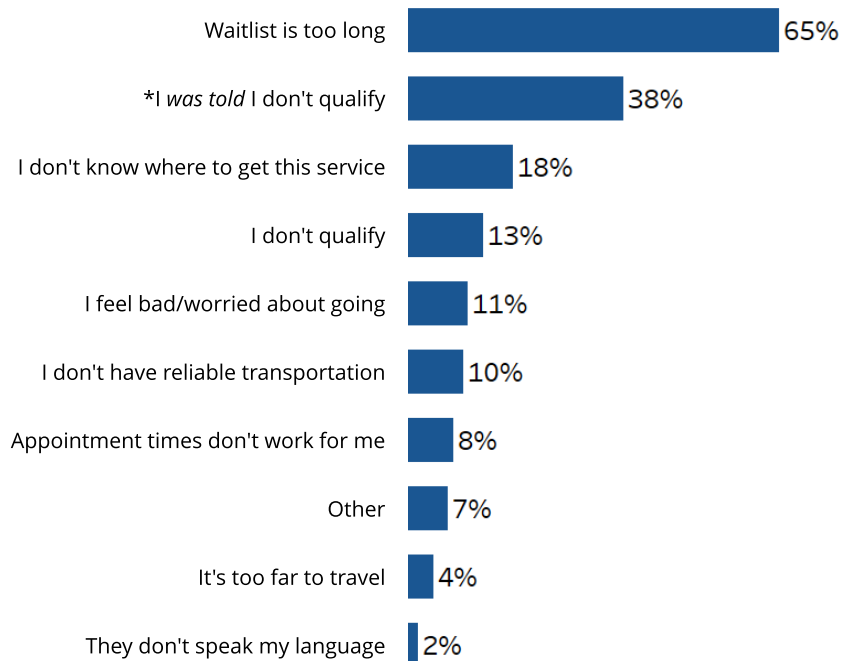


Figure 1.4

Difficulties accessing affordable housing services:



* Note: Respondents who selected both, "I was told I don't qualify" and, "I don't qualify" were recategorized solely as, "I was told I don't qualify".

3. https://www.mvpha.org/housing_programs/ 4. <https://www.huduser.gov/> 5. US Census Bureau American Community Survey 5-year estimate, 2018.

In this context, it is not unusual to see rates of difficulty rising in tandem with income levels. Although local advocates have little power to change federal income limits, they could advocate locally for more affordable housing options, equitable zoning laws, mixed income housing, and strong renter protections.

For those in need of services, perceptions of quality were mixed. Thirty-one percent rated the quality of services as "very bad" or "bad," while 29% rated quality as "good" to "very good," and 16% didn't know because they couldn't get services (Figure 1.6).

Respondents provided comments reiterating their frustration with waitlists and the general lack of affordable housing options.

Comments

"There isn't enough affordable housing."

"The ones available are in very poor condition."

"Waitlist is 2-3 years long."

"We don't qualify for Section 8, but we can't come up with a deposit and first month's rent."

"Need more affordable housing for one-bedroom apartments."

"Housing assistance for homeless individuals in Doña Ana County is basically nonexistent."

Figure 1.5

Percent who experienced difficulty with affordable housing services - by annual household income

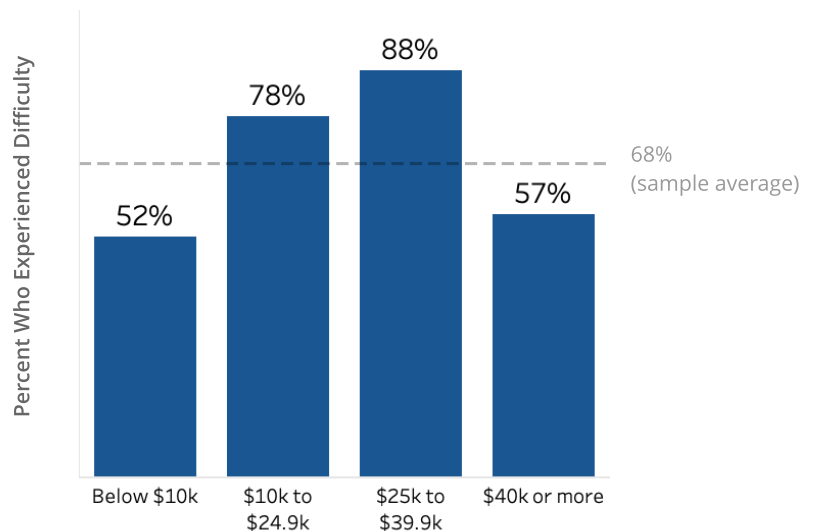
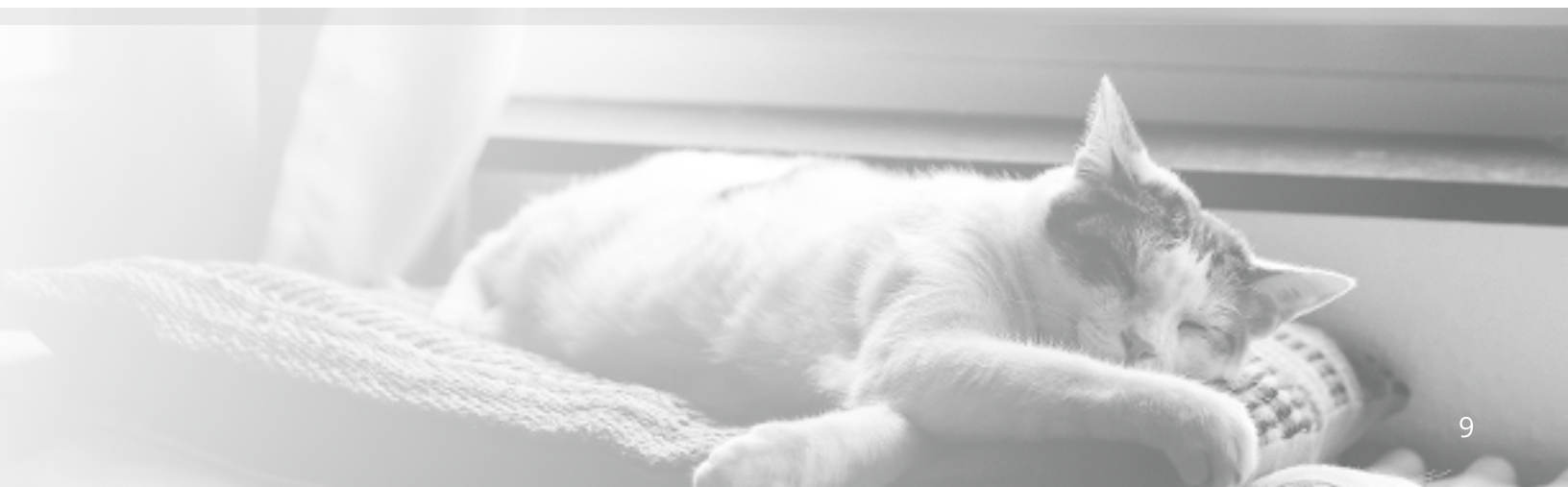
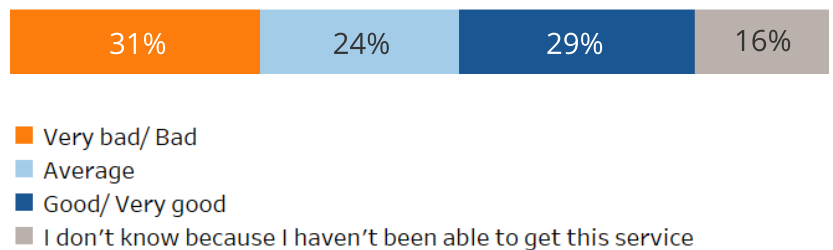


Figure 1.6

In general, how would you rate the quality of affordable housing services you have received?



Food Assistance Services

In Doña Ana County, 16% of individuals (33,579) and 27% of children aged 17 and under are living in food insecure households.⁶ In addition, nearly half (49%) of children under 18 in the county are living in a household with Supplemental Security Income (SSI), cash public assistance income, or Food Stamps/SNAP.⁷ Food assistance programs such as WIC, food stamps, food banks/pantries, and more play a key role in ensuring that Doña Ana County is properly fed.

Need for Food Assistance Services in Doña Ana County

Just over half (53%) of survey respondents reported needing food assistance services (Figure 2.1). As this survey was conducted prior to the COVID-19 pandemic, current need for food assistance services is likely even higher.

Demographic tests found significant differences in need for food assistance services based on socioeconomic factors including: family composition, education, language spoken, geography, and ethnicity. Results indicated a much higher need among single parents, Hispanic/Latino populations, and residents of Colonias, among other factors (Figure 2.2).

Figure 2.1

Have you ever needed food assistance services? (e.g., WIC, food stamps, Roadrunner Food Bank, etc.)

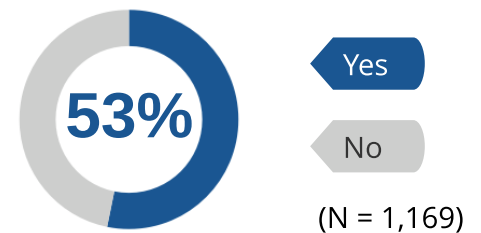
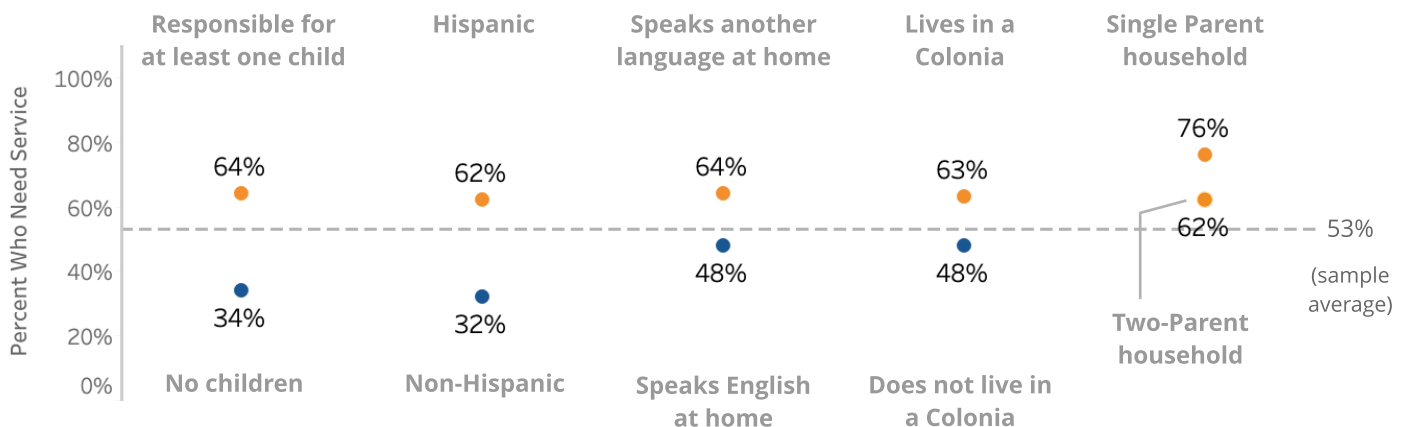


Figure 2.2

Who reported need for food assistance?

All group differences are statistically significant at $\alpha=0.05$



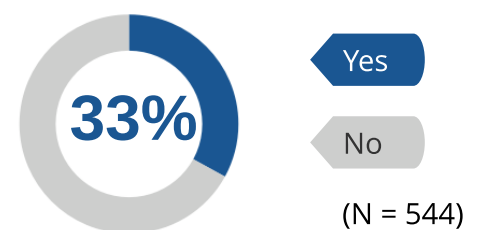
Accessibility and Quality of Food Assistance Services in Doña Ana County

Of those who needed food assistance services, one-third (33%) reported difficulty getting them (Figure 2.3).

Respondents most frequently cited ineligibility as a barrier to food assistance

Figure 2.3

Have you ever had difficulties getting food assistance services?



6. New Mexico Indicator Based Information System (2017) <https://ibis.health.state.nm.us> 7. US Census Bureau American Community Survey 5-year estimate, 2018.

services (Figure 2.4). Fifteen percent of respondents reported "feeling bad or worried about getting services," a phenomenon highlighted by one respondent's comment that food assistance center workers are "incompetent and insensitive."

Demographic comparisons revealed that non-traditional families (such as grandparent guardians or foster parents) may face more difficulties getting food assistance services compared to more traditional single or two-parent families (Figure 2.5).

The survey also shows that mid-income families face a disadvantage when it comes to food assistance services. Households with annual income between \$25,000 and \$54,999 were the most likely to report difficulties accessing services (38%), compared to those with a higher or lower income (Figure 2.5). This is most likely attributed to eligibility barriers, which prevent struggling families lying just above the income threshold from receiving services.

For those who needed services, most (59%) rated quality as "good" to "very good," and only 10% rated quality as "bad" to "very bad" (Figure 2.6).

Several respondents provided comments illustrating the impact of the "cliff-effect," when slight changes in income push families off subsidized support programs such as food assistance or subsidized child care.

Comments

"I was told multiple times that I don't qualify, even though I actually do qualify."

"I make \$10 too much."

"When I was a student I did not qualify for services because I did not work enough hours."

"[I'm a] single parent and make \$5 over 'poverty level' and don't qualify."

"Eligibility process is very stringent and those administering the intake process make one feel less worthy and are insensitive to the client situation."

"Judgmental workers."

"Their staff was rude."

Figure 2.4

Difficulties accessing food assistance services:

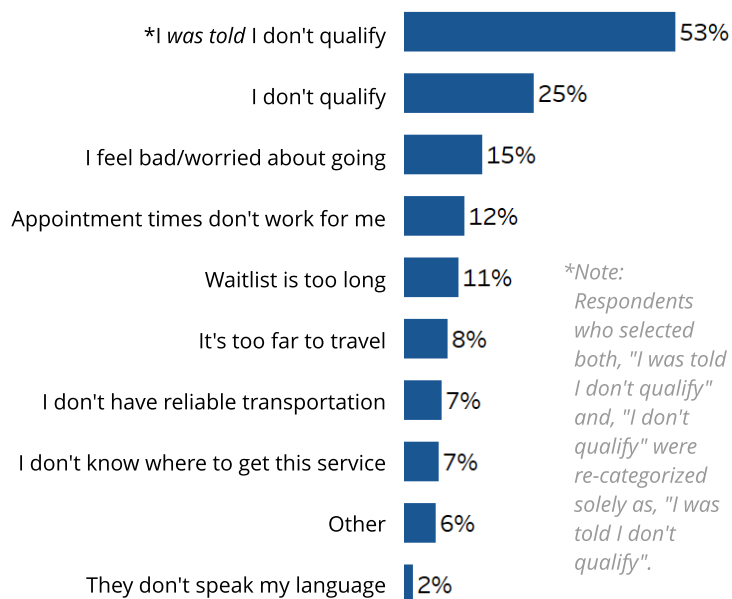


Figure 2.5

Who reported difficulty getting food assistance?

All group differences are statistically significant at $\alpha=0.05$

46%

of households with non-traditional child guardians (grandparents, foster parents, etc.)



28%

of Single Parent and Two Parent households

38%

of households with annual income between \$25k and \$54.9k



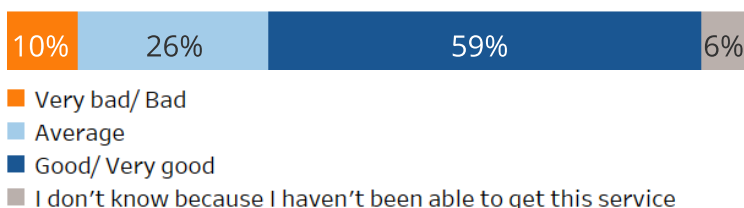
30%

of households with annual income below \$25k

And 20% of households with annual income of \$55k or more

Figure 2.6

In general, how would you rate the quality of food assistance you have received?



Public Transportation

Access to reliable transportation is essential to families, not only for commuting to work and school, but also for getting to hospitals, clinics, and other important destinations. Doña Ana County extends from Garfield in the north to Sunland Park in the south, covering a distance of 90 miles with a large portion of services centered in the City of Las Cruces. In addition, estimates reveal that nearly 5,000 households have no access to a vehicle, and many more share a single vehicle with multiple family members.⁸ Without reliable transportation, families risk serious health, social, and economic consequences. Fortunately, in late 2019, bus routes were established connecting Garfield and the surrounding communities with Las Cruces. Regardless, survey respondents reported challenges in finding access to timely and reliable transportation.

Need for Public Transportation in Doña Ana County

About 1 in 5 (21%) survey respondents reported needing public transportation services (Figure 3.1).

Statistical tests revealed no credible differences in need for public transportation between demographic groups, except for individuals caring for children compared to those not caring for children (Figure 3.2).

Higher need for public transportation was reported by those not caring for children, possibly explained by the impracticality of families using public transportation particularly for families with multiple children and diverse schedules. This idea is reiterated when analyzing accessibility.

Figure 3.1

Have you ever needed public transportation services?

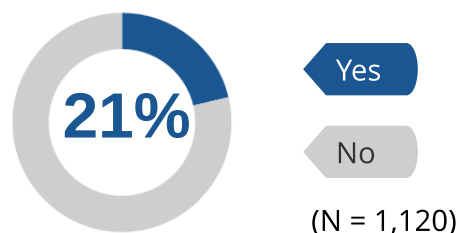
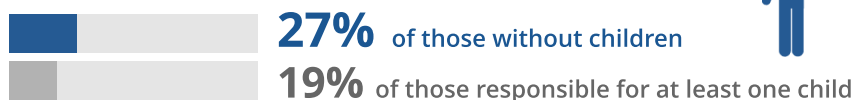


Figure 3.2

Who reported need for public transportation?
All group differences are statistically significant at $\alpha=0.05$

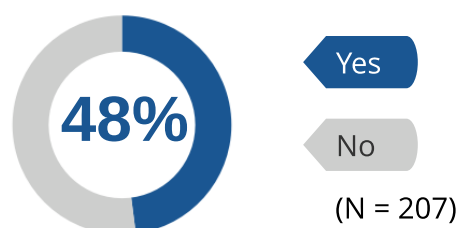


Accessibility and Quality of Public Transportation in Doña Ana County

Of those who needed services, nearly half (48%) reported difficulty getting them (Figure 3.3). Specific complaints about public transportation in Doña Ana County suggest that residents perceive this service as inconvenient or even bothersome. Sixty-three percent of respondents who had difficulty reported that public transportation does not go where needed, 61% mentioned it didn't run during the times they needed it. Other

Figure 3.3

Have you ever had difficulties using public transportation services?



8. US Census Bureau American Community Survey 5-year estimate, 2018.

obstacles included that it takes too long to use, and is not available within walking distance or near survey respondents' homes (Figure 3.4).

Demographic comparisons demonstrated that public transportation poses the greatest difficulty for those with children, and most strikingly for residents of Chaparral (Figure 3.5).

For those who needed services, perceptions of quality were split. About one-third (35%) rated quality as "good" to "very good," and another third (32%) rated quality as "average." About one-quarter (23%) rated quality as "bad" to "very bad." About one-quarter (23%) rated quality as "bad" to "very bad" (Figure 3.6).

Respondents provided comments highlighting specific hurdles faced in tracking transportation routes and accessing bus stops.

Figure 3.4

Difficulties accessing public transportation:

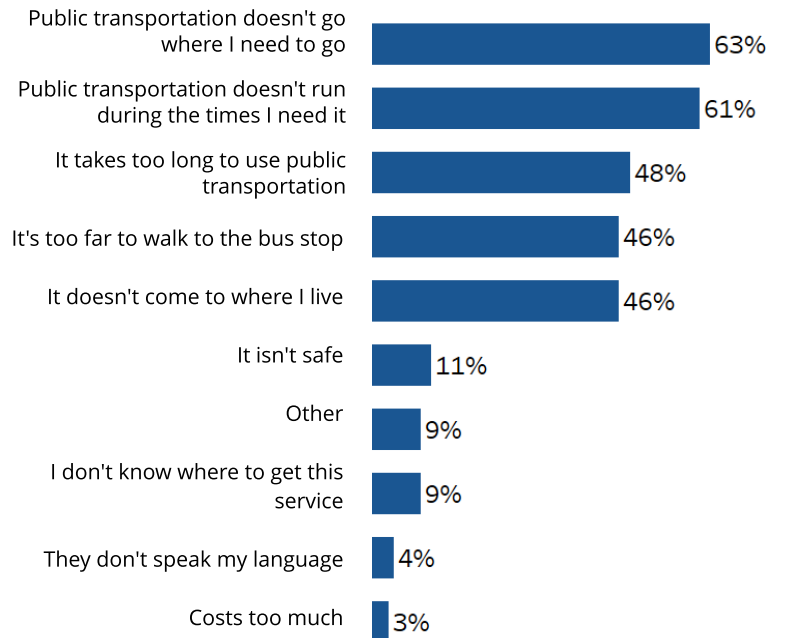


Figure 3.5

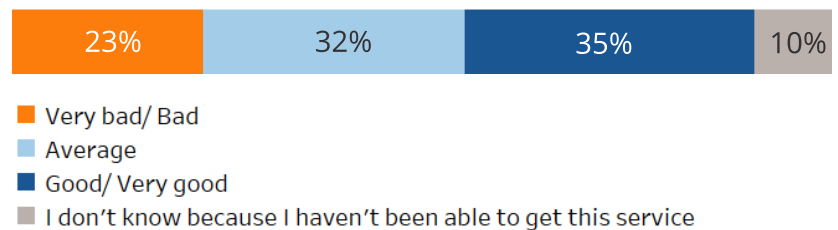
Who reported difficulty using public transportation?

All group differences are statistically significant at $\alpha=0.05$



Figure 3.6

In general, how would you rate the quality of public transportation you have received?



Comments

"I had to walk more than a mile to the bus route that would drop me closest to work."

"Keep changing routes or closing stops due to construction."

"Las Cruces bus routes are time consuming and impractical/indirect routes."

"Sidewalks were not available - not safe to walk in the busy streets to get to the bus stop. Very little if any shade especially in over 100 degrees weather. Sitting area is not disability friendly."



Medical Care

Almost everybody will require medical care at some point in their life. Unfortunately, those in need of care may be unable to obtain it due to a number of barriers. In particular, the cost of health care can be crippling to the many families within this county who are experiencing poverty. According to the New Mexico Department of Health, 18% of adults in Doña Ana County are unable to receive medical care because of cost.⁹ Those who are unable to get help must live with potentially debilitating or even fatal consequences of untreated health conditions.

Need for Medical Care in Doña Ana County

The majority of survey participants (89%) reported needing medical care services (Figure 4.1).

Significant differences in need for medical services were found among socioeconomic factors including language spoken, ethnicity, income, and education (Figure 4.2).

Need was significantly higher among English-speaking populations, non-Hispanics, and participants with higher incomes and education. These differences may reflect variations in health literacy or the level of access respondents have to health care. Lack of insurance, or limited financial circumstances may force some families to prioritize other basic needs over medical care.

Figure 4.1

Have you ever needed medical care services? (e.g., primary care doctors, general health checkups, etc.)

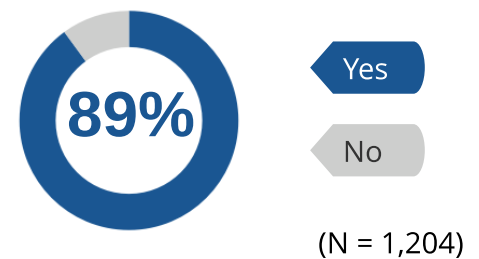
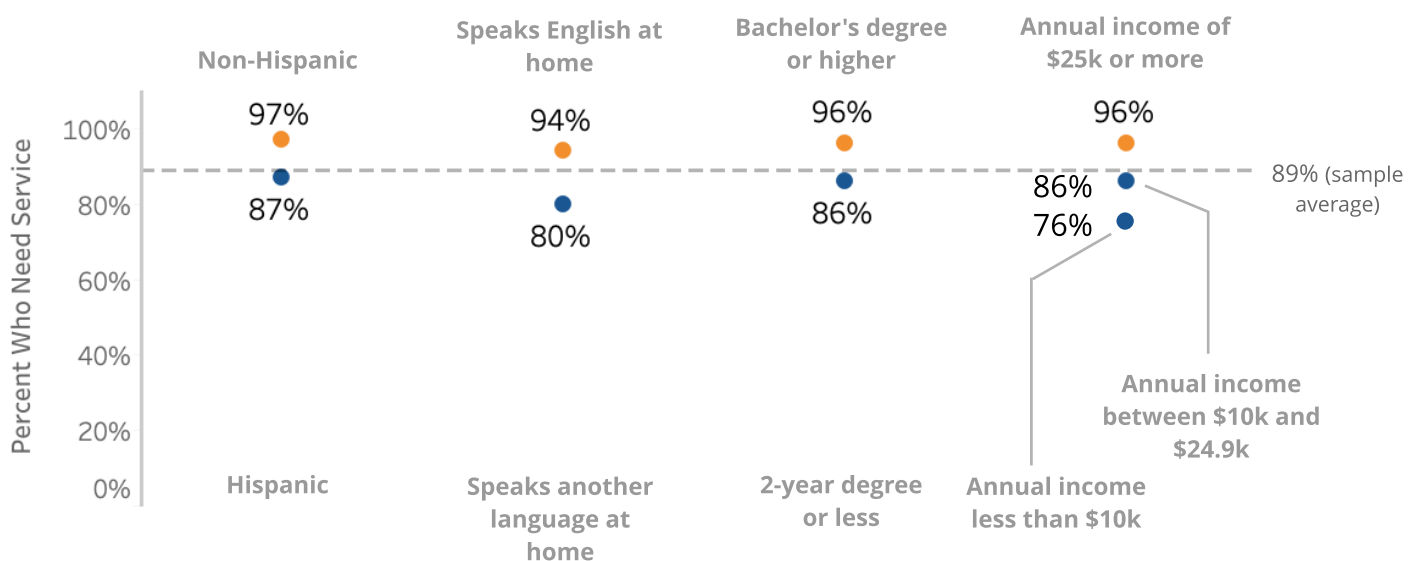


Figure 4.2

Who reported need for medical care?

All group differences are statistically significant at $\alpha=0.05$



9. New Mexico Indicator Based Information System (2017) <https://ibis.health.state.nm.us>

Accessibility and Quality of Medical Care in Doña Ana County

Of those who needed services, nearly 2 in 5 (38%) reported difficulty getting them (Figure 4.3).

Respondents cited many difficulties accessing medical care. The most frequently mentioned difficulties were long waitlists (45%), high costs (39%), inability to find a quality provider (36%), and lack of insurance coverage (31%) (Figure 4.4).

According to the U.S. Health Resources and Services Administration, nearly every county in New Mexico, including Doña Ana County has been designated a Health Professional Shortage Area (HPSA), meaning that there is a shortage of primary care providers throughout the state.¹⁰ Aside from primary care, multiple respondents reported their inability to book appointments with specialists or even to find specialists within the county.

Barriers to access were most prevalent for those who identify as non-Hispanic or non-Latino, those whose primary language is English, and those with an education above a high school degree (Figure 4.5).

Although this runs contrary to the commonly held notion that patients of traditionally disadvantaged backgrounds tend to have more

Figure 4.3

Have you ever had difficulties getting medical care services?

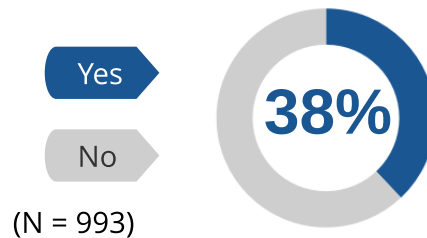


Figure 4.4

Difficulties accessing medical care:

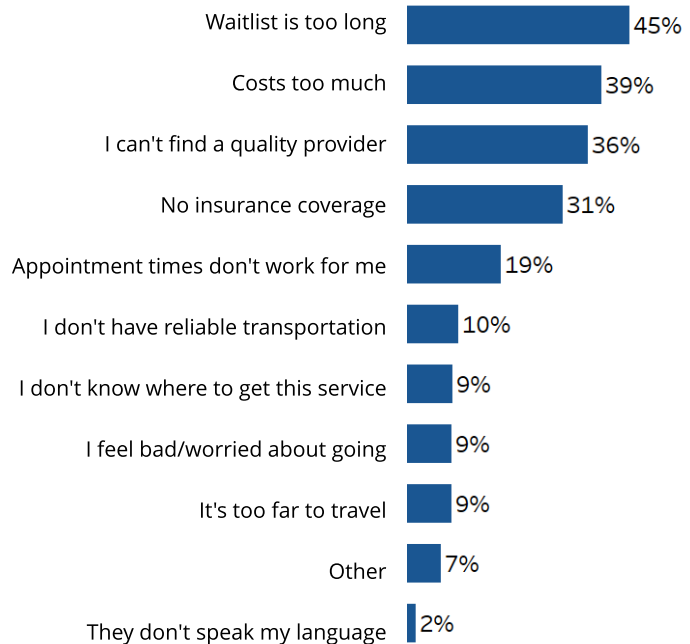
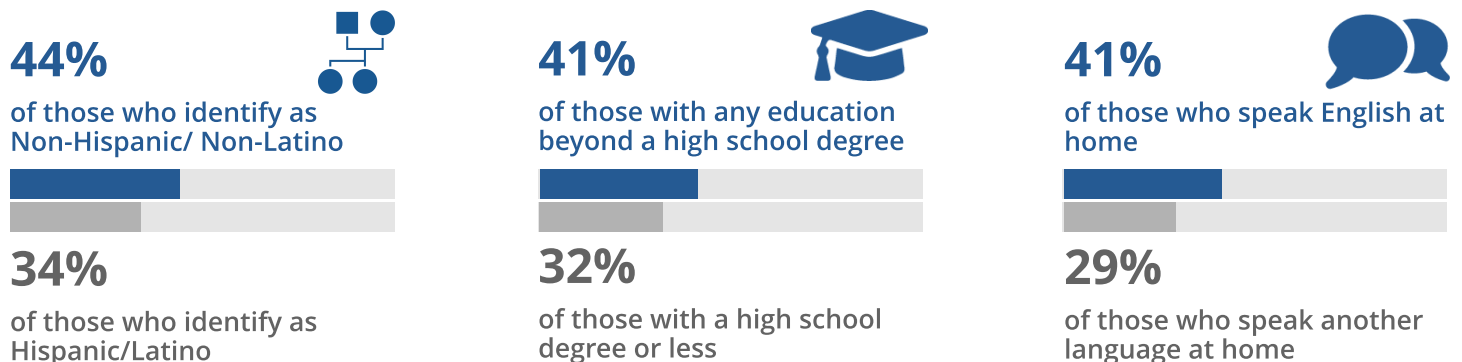


Figure 4.5

Who reported difficulty getting medical care?

All group differences are statistically significant at $\alpha=0.05$



10. HPSA Find tool, <https://data.hrsa.gov/tools/shortage-area/hpsa-find>

difficulty getting medical care, this discrepancy may be traced back to a difference in the type of care sought. Respondents who are non-Hispanic, who speak English at home, or who have any education above a high school degree were far more likely than their counterparts to select "I can't find a quality provider" as a source of difficulty with accessing medical care (Figure 4.6). It may be that members of these groups are more likely to seek care from specialists, which are lacking in Doña Ana County, and thus are more likely to experience difficulty getting care. Another plausible explanation is that these survey respondents may simply have higher expectations for the quality of medical care, especially if they have had more exposure to a variety of health care options and therefore have a baseline for comparison.

For those who had received services, or at least tried, about 3 in 5 (61%) rated quality as "good" to "very good," while only 6% rated quality as "bad" to "very bad" (Figure 4.7).

Respondents provided comments reflecting a shortage of providers, including both primary care and specialists and problems with insurance.

Comments

"The specialty provider doesn't exist in the area."

"Quality of specialty services is a major concern. I had a broken arm, was misdiagnosed and needed care in El Paso."

"It's difficult to find a good primary care physician in [Las Cruces] who is accepting patients."

"Hard to find providers that accept Medicaid."

"Doctors don't stay around. I've been forced to have 4 different primary care doctors in just the last 5 years or so."

"The problem usually is with specialists, for whom I must make an appointment weeks or even months in advance."

"Won't accept my insurance."

Figure 4.6

Respondents who cited "I can't find a quality provider" as a difficulty

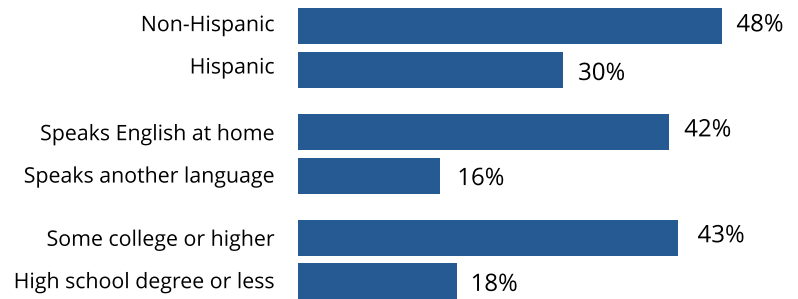
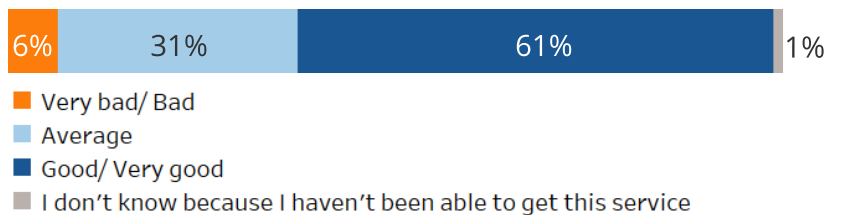


Figure 4.7

In general, how would you rate the quality of medical care you have received?



Dental Care

Dental care may often be perceived as a largely cosmetic service, when in fact oral health is crucial in disease prevention and just as important as regular medical care. According to the New Mexico Department of Health, 62% of adults in Doña Ana County have had a dental visit in the past 12 months.¹¹ However, this does not mean that dental care is easily accessible. There are still residents that have difficulties obtaining dental services.

Need for Dental Care in Doña Ana County

Nearly 9 in 10 (87%) of county residents reported needing dental care services (Figure 5.1). Demographic tests found significant differences in need for dental services based on household income, language spoken at home, and education level (Figure 5.2).

These differences may reflect financial barriers that prevent lower income families and families without insurance coverage from prioritizing regular dental care. They may also reflect a discrepancy in health literacy.

Figure 5.1

Have you ever needed dental care services?

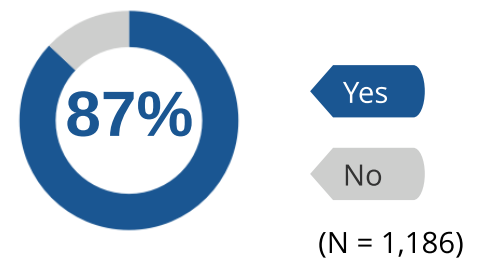
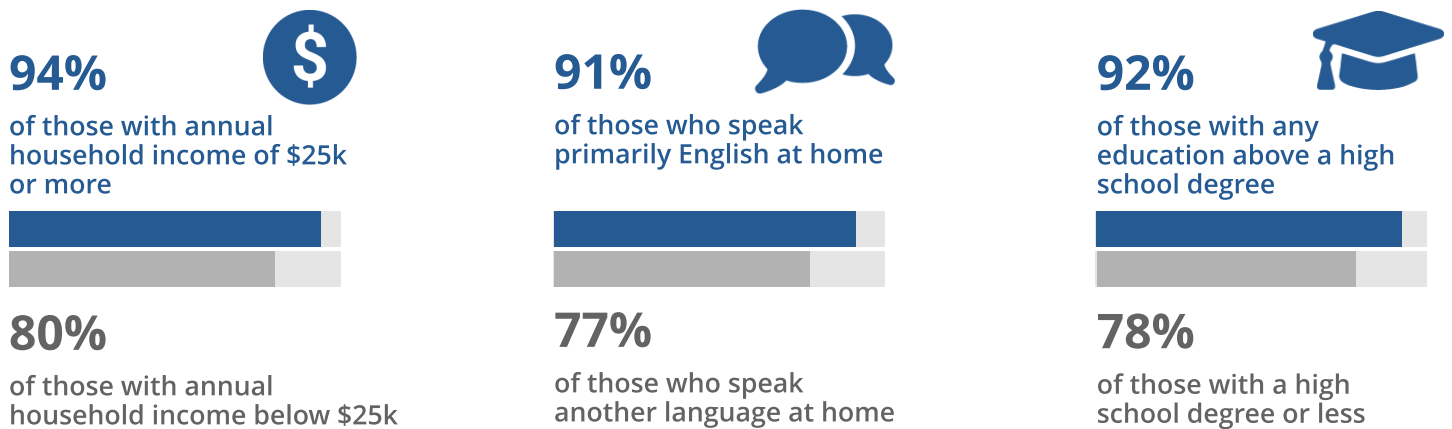


Figure 5.2

Who reported need for dental care?

All group differences are statistically significant at $\alpha=0.05$



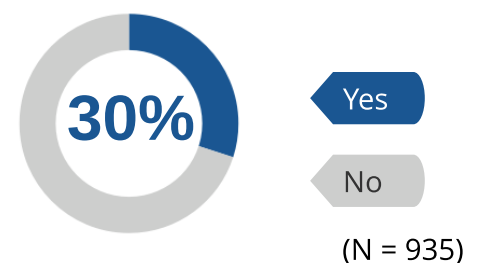
Accessibility and Quality of Dental Care in Doña Ana County

Of those who needed services, just under one-third (30%) reported difficulty getting them (Figure 5.3).

Common difficulties with obtaining dental care were the cost, barriers with insurance,

Figure 5.3

Have you ever had difficulties getting dental care services?



11. New Mexico Indicator Based Information System (2014+2016) <https://ibis.health.state.nm.us>

long waitlists, and the need for quality providers (Figure 5.4).

Insurance coverage was the second strongest indicator if an individual experienced difficulties. Of those who experienced difficulty accessing dental care, 49% attributed at least part of their struggle to having no insurance coverage (Figure 5.4). Of those respondents who did have dental insurance coverage, some commented that their coverage was still not enough so that even with dental insurance they could not afford services.

Geographic comparisons show that a large portion of those that had difficulties obtaining dental care live in Chaparral, New Mexico. Living in more rural areas can cause difficulties in access and transportation. Individuals may have to arrange time off and find a way to get to larger cities where they can get services (Figure 5.5).

For those who had received services, or at least tried, about 2 in 3 (66%) rated quality as "good" to "very good," while only 6% rated quality as "bad" to "very bad" (Figure 5.6).

Comments from respondents reveal that high costs, overcrowded clinics, and inadequate insurance coverage often force patients to seek dental care in Mexico.

Comments

"More than two months to get a crown."

"Medicaid options for dental [are] extremely limited."

"Having both private dental insurance and Medicaid, the cost was still too much."

"My dental insurance doesn't cover enough."

"I go to Juarez."

"I go to a dentist in El Paso. I can't find a good dentist in Las Cruces, the only ones who get recommended aren't accepting new patients."

"I travel to Mexico to get dental care."

"I get all dental done across the border."

Figure 5.4

Difficulties accessing dental care:

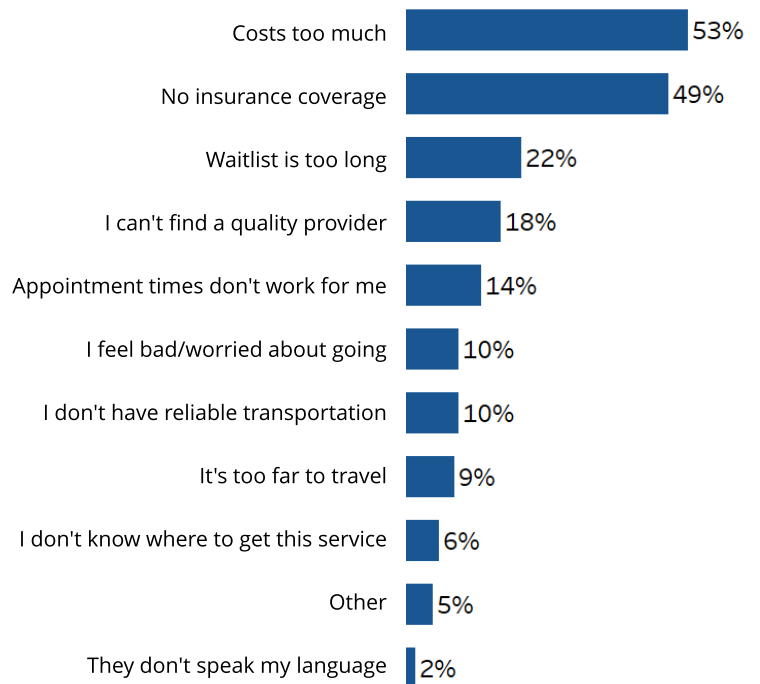


Figure 5.5

Who reported difficulty getting dental care?

All group differences are statistically significant at $\alpha=0.05$

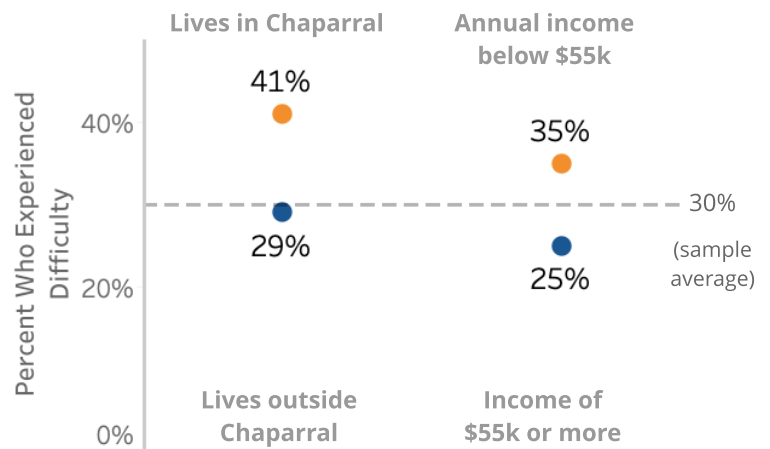
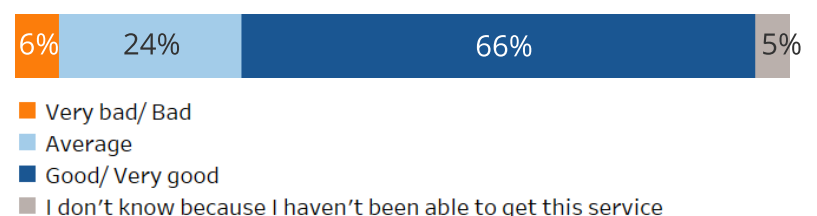


Figure 5.6

In general, how would you rate the quality of dental care you have received?



Mental and Behavioral Health Services

According to the NM Department of Health, since 1995 suicide rates in New Mexico have been consistently 1.5 times higher than national rates. Access to mental health care is especially important for New Mexicans, and benefits extend beyond the individual. Mental health concerns are sometimes correlated with substance abuse, child abuse and neglect, and domestic violence. Per 1,000 children, approximately 22 are victims of child abuse in this county.¹² Mental health care for adults can help prevent cycles of abuse.

Need for Mental and Behavioral Health Services in Doña Ana County

Just over one-third (35%) of county residents reported needing mental health services (Figure 6.1).

Demographic comparisons found significant differences in need for mental health services based on area of residence, income, ethnicity, language spoken at home, and education level (Figure 6.2).

In general, those from traditionally disadvantaged socioeconomic groups were the least likely to report needing care. Research points to the stigma associated with mental health issues that prevent those in need from seeking services.^{13,14}

As with other types of medical care, this may also be the result of financial circumstances that cause potential patients to prioritize other needs over mental health care. The stigma associated with seeking care may also play a role in perceived need. Perceived need was also less common among Hispanic respondents compared to those who identify as Non-Hispanic.

Figure 6.1

Have you ever needed mental health services? (e.g., psychiatrists, psychologists, therapists, counselors, substance abuse programs, etc.)

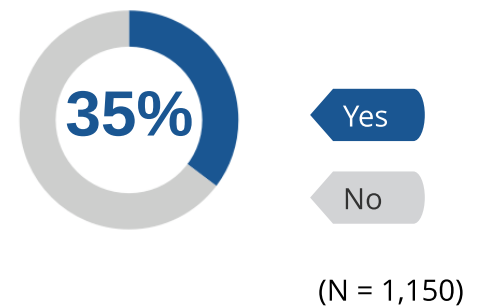
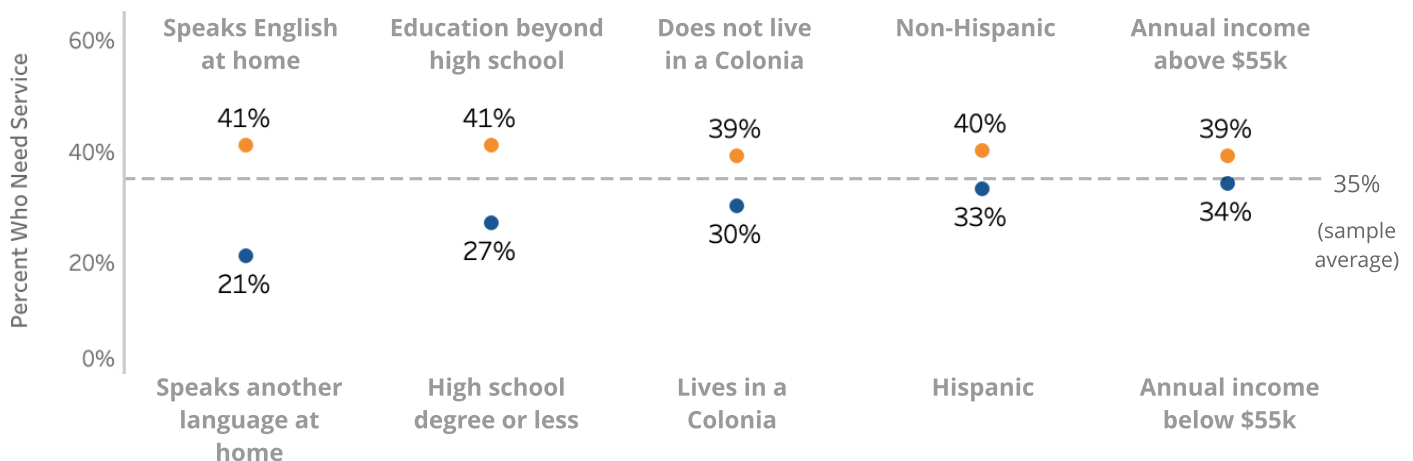


Figure 6.2

Who reported need for mental health services?
All group differences are statistically significant at $\alpha=0.05$



12. New Mexico Indicator Based Information System (2017) <https://ibis.health.state.nm.us> 13. Thoits P. A. (2005). Differential labeling of mental illness by social status: a new look at an old problem. *Journal of health and social behavior*, 46(1), 102-119. 14. Villatoro, A. P., Mays, V. M., Ponce, N. A., & Aneshensel, C. S. (2018). Perceived Need for Mental Health Care: The Intersection of Race, Ethnicity, Gender, and Socioeconomic Status. *Society and Mental Health*, 8(1), 1-24.

Accessibility and Quality of Mental Health Services in Doña Ana County

Of those who needed services, about half (49%) reported difficulty getting them (Figure 6.3).

Half (50%) of those who reported difficulties cited their inability to find a quality provider. Other common troubles included long waitlists, high costs, and no insurance coverage (Figure 6.4).

Non-Hispanic respondents were more likely to report difficulty than those who identified as Hispanic, 59% compared to 46% respectively. Level of education and language also played a role in difficulty obtaining care (Figure 6.5.a).

Consistent with previous research, people with higher levels of education and those not in poverty seek mental health services at higher rates. This could be explained by persons with a higher socioeconomic status (SES) having wider access to information regarding mental health, and the resources to access it.

Regarding insurance coverage for mental health care, mid-income families may face an even greater disadvantage than low-income families. Half (51%) of mid-income families who experienced difficulty cited no insurance coverage as a source of difficulty, compared to 40% of low-income families (Figure 6.5.b).

Figure 6.3

Have you ever had difficulties getting mental health services?

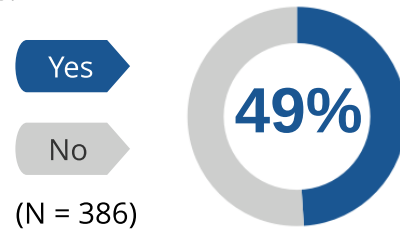


Figure 6.4

Difficulties accessing mental health services:

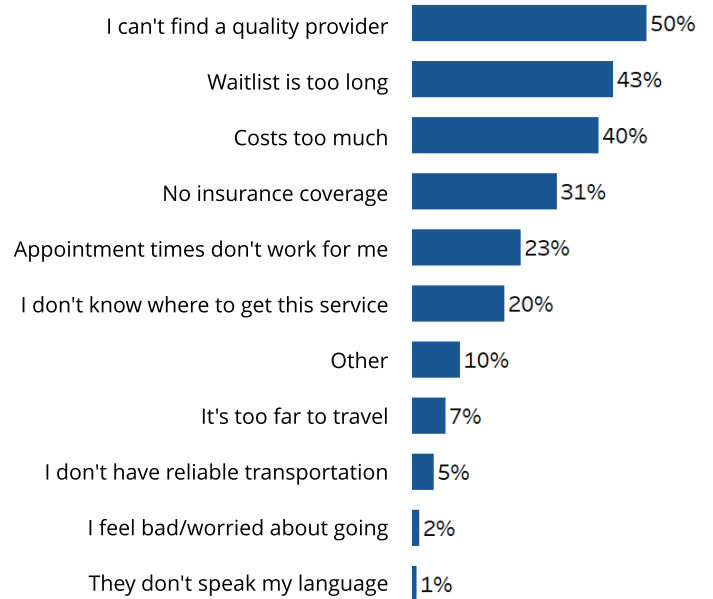


Figure 6.5.a

Who reported difficulty getting mental health services?

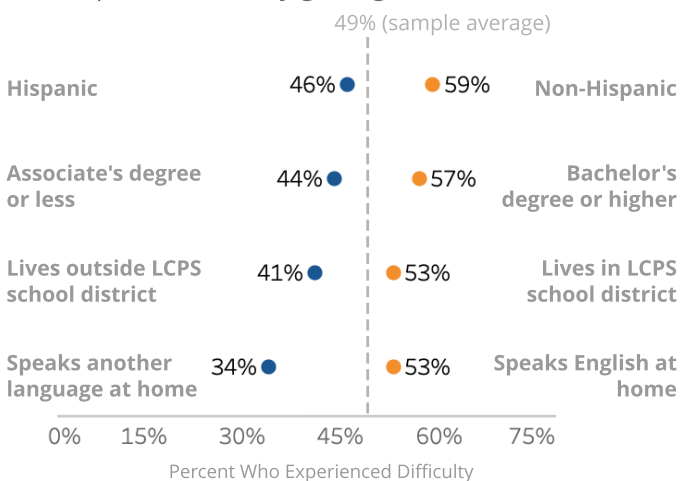


Figure 6.5.b

Insurance coverage among those who reported difficulty:

"No insurance coverage" was specified as a difficulty by...

40%
of those with household income below \$25k

51%
of those with household income between \$25k and \$54.9k

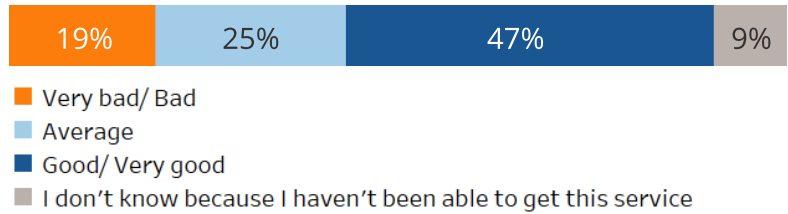
20%
of those with household income of \$55k or more

For those who had received mental health services, or at least tried, 47% rated quality as "good" to "very good," while 19% rated quality as "bad" to "very bad." Almost 1 in 10 (9%) reported inability to get any services (Figure 6.6).

Respondents' comments elaborate on the many barriers to mental health care in Doña Ana.

Figure 6.6

In general, how would you rate the quality of mental health services you have received?



Comments

"It's very difficult to find qualified mental health providers for children."

"I tried a couple mental health providers...I found a therapist who is great! Now that my insurance changed I can not afford to see him."

"Providers not culturally competent."

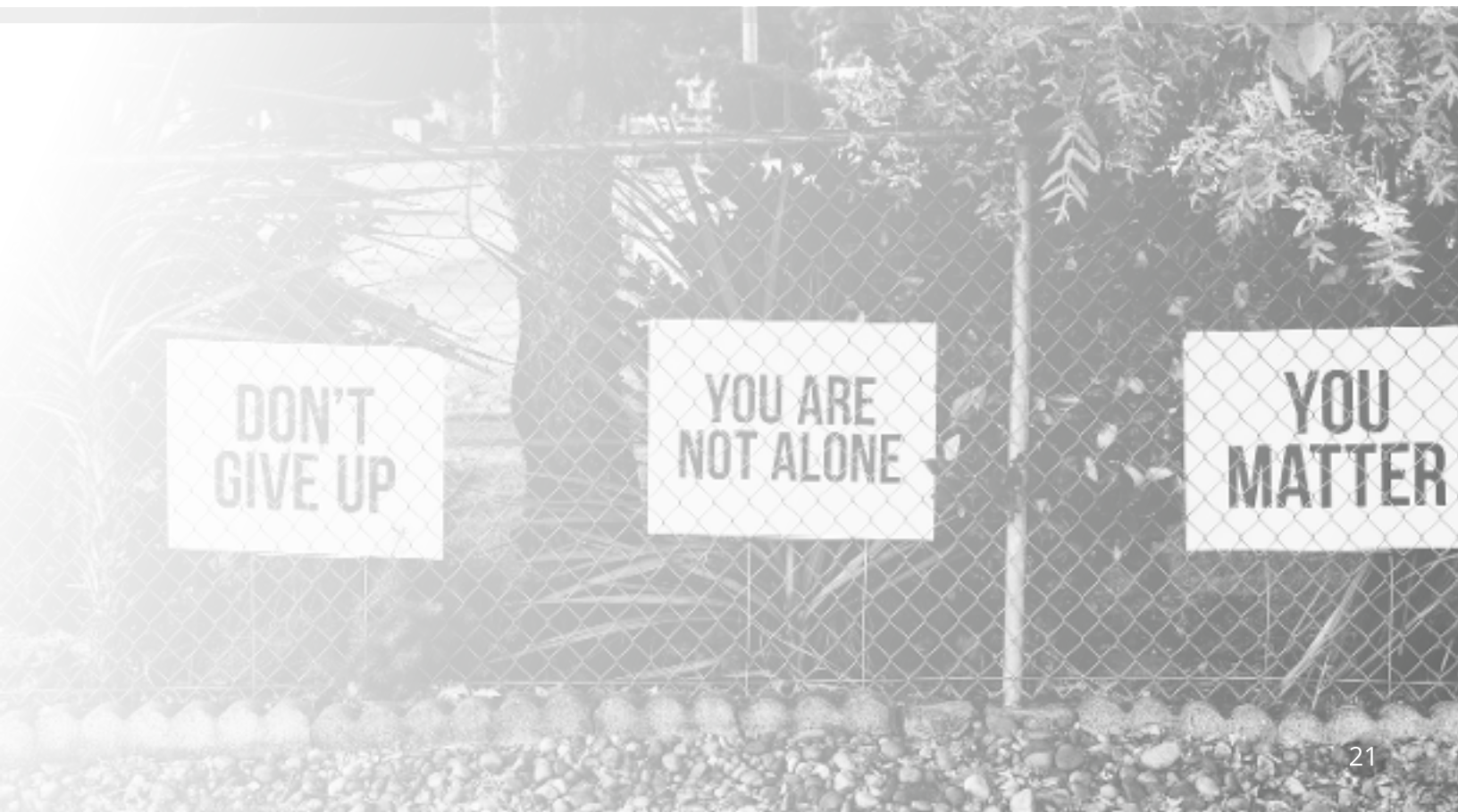
"I was not satisfied with the approach taken for mental health services for my son. Therapy was short then discharged. Another provider wanted to give my son medication before completing an evaluation or diagnose him."

"I have to go to El Paso to find a mental health care provider. There aren't enough providers in Las Cruces and the wait to see them is too long."

"Many therapists, especially LPCCs cannot accept Medicare"

"The therapists are only wanting you to get drugs instead of trying to help you through the problem mentally first. Too much of a reliance on drugs as a fix all when it should be a crutch."

"I can't afford the copay."



Thriving Services

Parent Supports.....pg 23

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Home Visiting Services

A child's first few years are critical to their development and can set a precedent for the rest of their life. Home visiting services work to assist new and existing parents through their journey of raising a child. These services are beneficial not only to the child but also to parents that need a little extra help or support. Home visiting has many benefits, such as reduced child abuse and neglect, improved birth outcomes (decreases in pre-term births and low birth weight), improved school readiness for children, and increased high school graduation rates for mothers in the program.¹

Need for Home Visiting Services in Doña Ana County

Just over one-third (35%) of residents responsible for any children reported needing home visiting services (Figure 7.1).

Demographic tests found significant differences in need for home visiting services based on ethnicity, primary language spoken at home, and residency within a school district. Respondents who most frequently reported needing services included those who identify as Hispanic or Latino, those who speak another language at home, and those who live within the Gadsden Independent School District zone (Figure 7.2).

Figure 7.1

Have you ever needed home visiting services? (By providers such as Aprendamos, MECA, CHI St. Joseph's, Early Head Start, etc.)

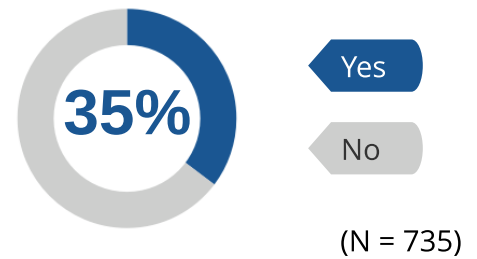
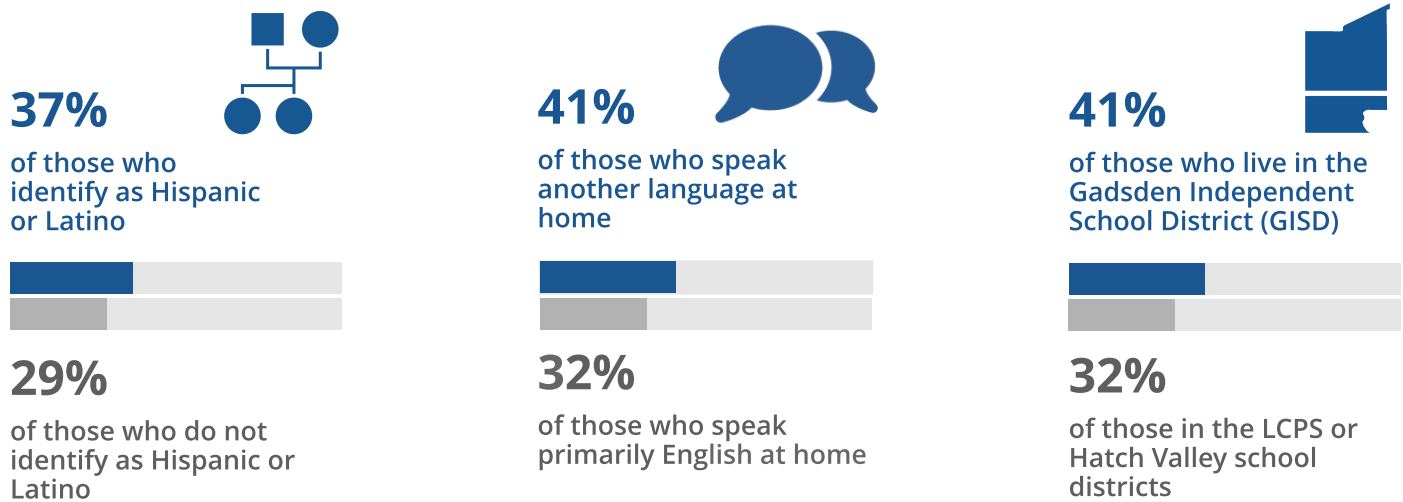


Figure 7.2

Who reported need for home visiting services?
All group differences are statistically significant at $\alpha=0.05$



1. National Conference of State Legislatures: <https://www.ncsl.org/research/human-services/home-visiting-improving-outcomes-for-children635399078.aspx>

Accessibility and Quality of Home Visiting Services in Doña Ana County

Of those who needed services, about 1 in 7 (14%) reported difficulty getting them (Figure 7.3).

Thirty-eight percent of respondents facing difficulty mentioned that they do not qualify for services (Figure 7.4). This may be attributed to restrictions imposed by certain programs, such as being a first-time parent. In addition, respondents reported dealing with long waitlists, not knowing much about this service or where to get it, not having time or ability to get off work, and high costs.

For those who had received services, or at least tried, the vast majority (79%) rated quality as "good" to "very good," while only 3% rated quality as "bad" to "very bad" (Figure 7.5).

Respondents provided comments detailing a variety of issues, many concentrating on a need for specialized services for children with disabilities..

Comments

"When I requested services through the webpage I had no response."

"Their schedule is as difficult as mine and if I have to reschedule due to child illness, we lose a whole month rescheduling".

"Home visitors [are] judgmental, not qualified, and intrusive."

"Due to Medicaid I haven't been able to get a referral for [FIT home visiting services] for my autistic child."

"We wished we had this services for our child with disabilities to help improve his quality of life."

"They won't come to Hatch for ABA."

Figure 7.3

Have you ever had difficulties getting home visiting services?

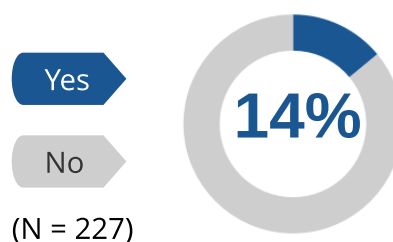


Figure 7.4

Difficulties accessing home visiting services:

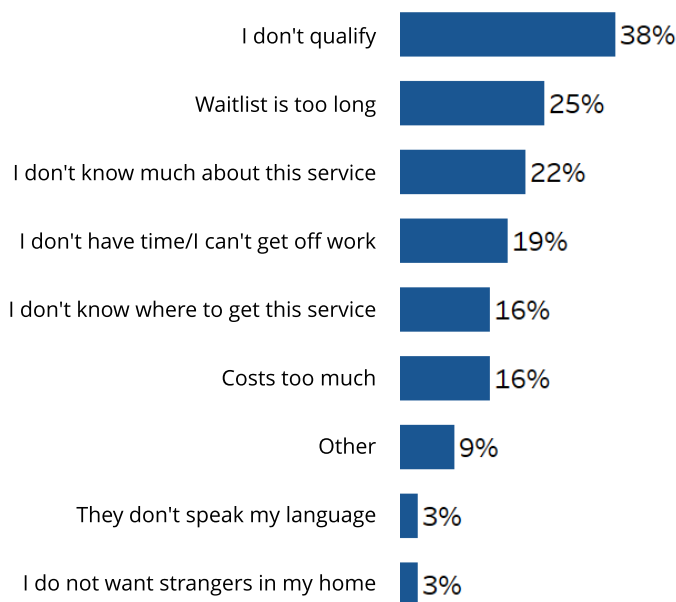
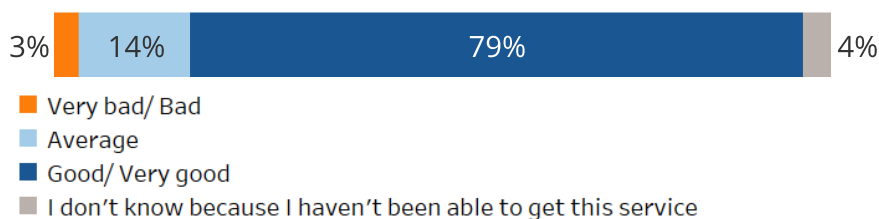


Figure 7.5

In general, how would you rate the quality of home visiting services you have received?





Child Care Services

Child care services can be a leg up for parents and children alike. These services allow parents to continue working or further their education, and simultaneously assist children in developing social, cognitive, language, and motor skills. However, child care services are costly and the supply of high-quality child care options is low, particularly for children under 2 years old. Full-time child care for a child under 2 years old costs approximately \$900 per month in Doña Ana County.² In addition, if every child in Doña Ana County under 2 needed care in a licensed center, there would be space for approximately 18% of children.³ This issue is also exacerbated by the COVID-19 pandemic that has resulted in the closure of nearly 40% of child care centers.

Need for Child Care Services in Doña Ana County

Almost half (47%) of residents responsible for children reported needing child care services (Figure 8.1).

Demographic tests found significant differences in need for child care services based on six factors. Populations who most frequently reported needing child care services included: those with an annual income of \$55,000 or more; those with any education above a high school degree; those from single parent households; those who speak primarily English at home; those living in the Las Cruces Public Schools (LCPS) school district; and those not living in a Colonia (Figure 8.2).

Figure 8.1

Have you ever needed child care services? (Daycare centers or home-based childcare, babysitters, etc.)

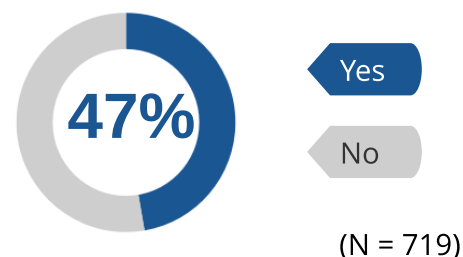
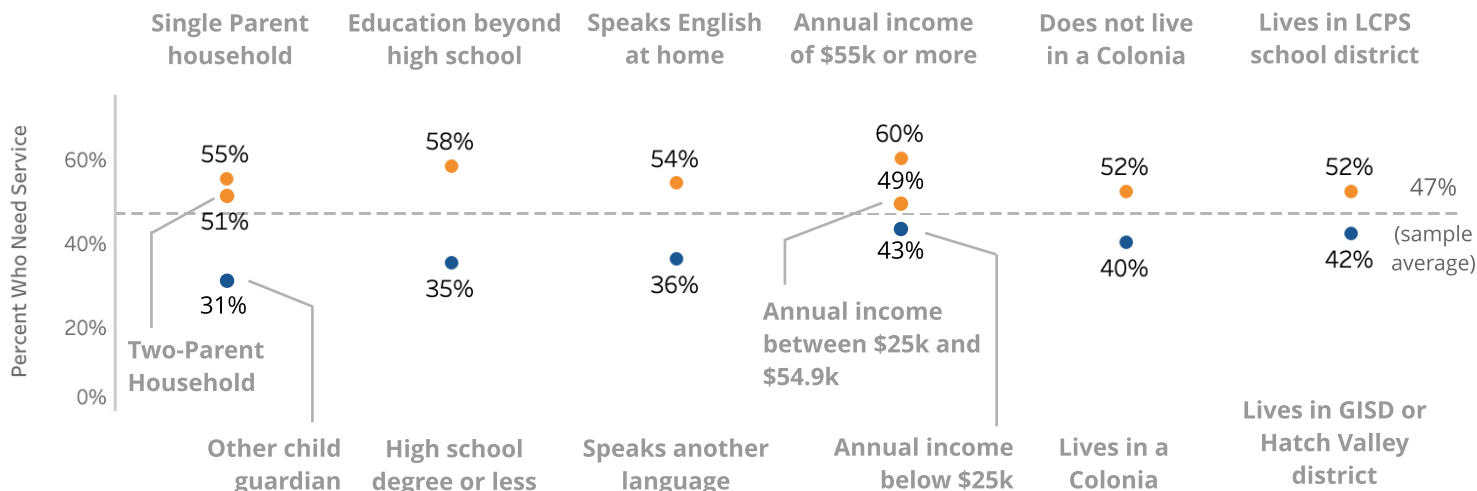


Figure 8.2

Who reported need for child care services?

All group differences are statistically significant at $\alpha=0.05$



2. CYFD 2018 Child Care Market Rate Survey (refers to cost for a child under 2 in a licensed, 5 star center.) 3. Center for Community Analysis NMSU Access to ECE Dashboard: <https://cca.nmsu.edu/interactive-data-dashboards/access-to-ece-in-dac/>

Accessibility and Quality of Child Care Services in Doña Ana County

Of those who needed services, approximately 3 in 10 (31%) reported difficulty getting them (Figure 8.3).

By far the greatest barrier to child care appears to be cost. Of those who reported difficulty with getting services, about 3 in 4 (76%) cited high costs as a barrier. Other commonly mentioned difficulties were inability to find a quality provider; long waitlists, and scheduling conflicts (Figure 8.4.a). It should be noted that 20% of families experiencing difficulty selected "the times do not fit my schedule" and at least one respondent commented that finding child care outside of the 9-5 schedule was difficult. This is potentially a very serious issue for single, low-income parents who work non-traditional hours, and it may prove a barrier to their employment.

Demographic comparisons found no evidence of a difference in the proportion of respondents who reported any difficulty with child care. However, some groups were likelier than others to report that child care "costs too much." Populations who were most likely to select "costs too much" as a difficulty with child care included those with any education above a high school degree, and those living within the district of Las Cruces Public Schools (LCPS) (Figure 8.4.b).

Those with a mid-level annual household income (between \$25,000 and \$54,999) also struggled with child care costs, likely because they may not qualify for a subsidy, but do not earn enough to pay for the high cost of care (Figure 8.4.b).

Figure 8.3

Have you ever had difficulties getting child care services?

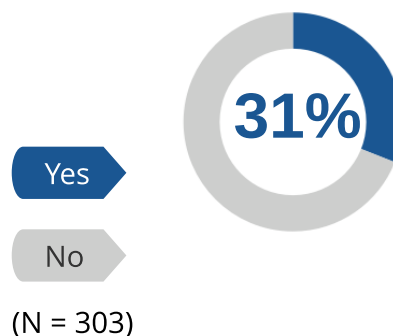


Figure 8.4.a

Difficulties accessing child care services:

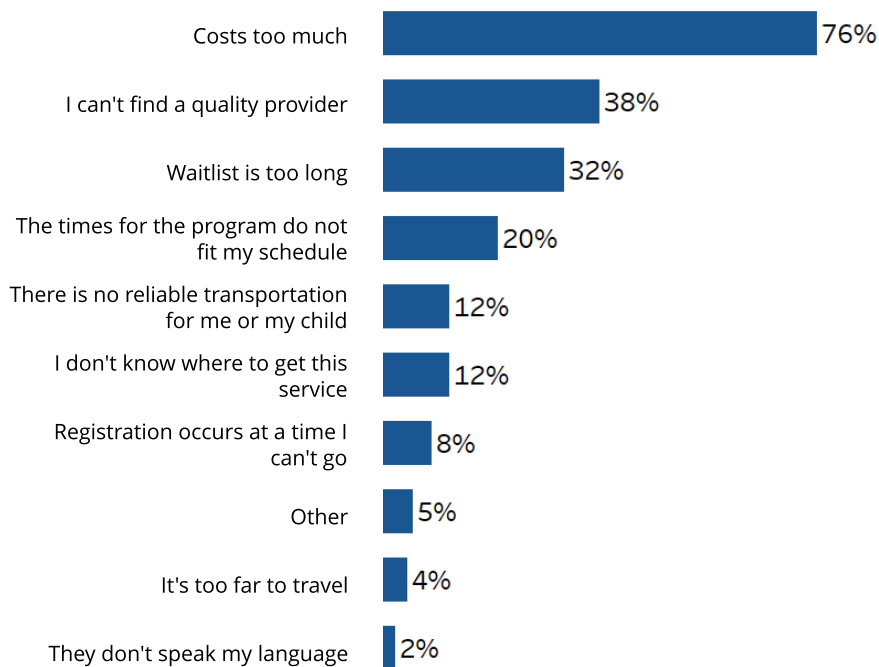
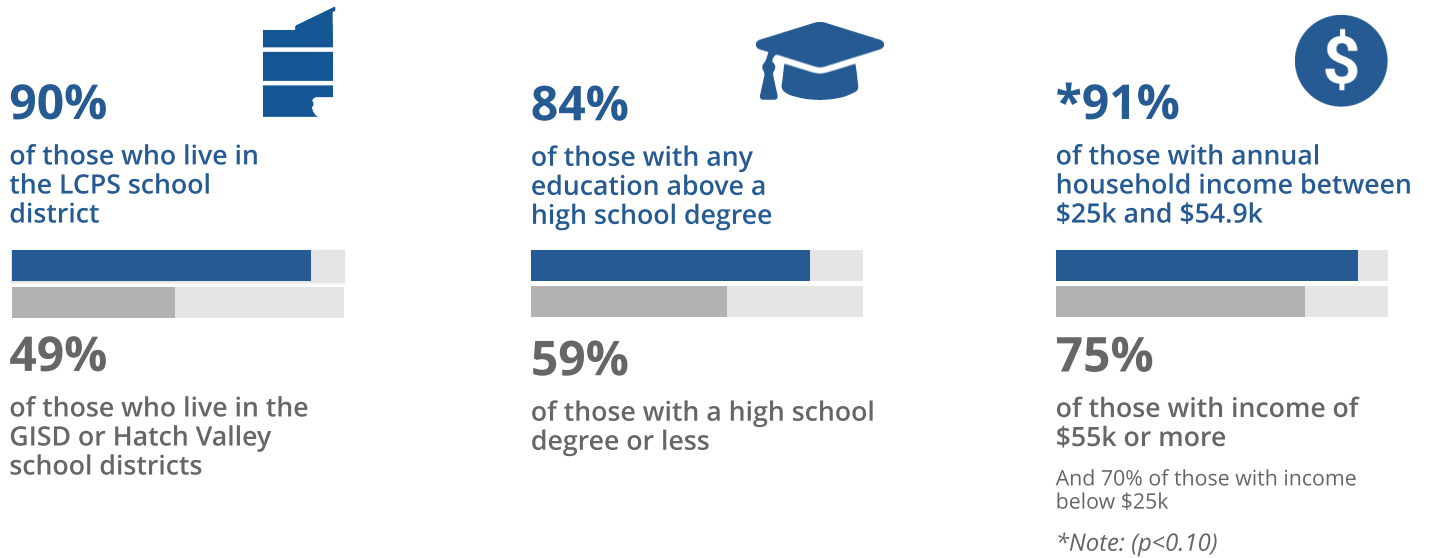


Figure 8.4.b

Who believes that child care **COSTS TOO MUCH** ?

All group differences are statistically significant at $\alpha=0.05$, except where noted.

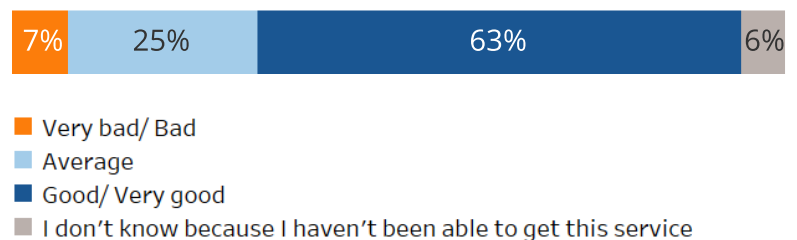


For those who had received services, or at least tried, the majority (63%) rated quality as "good" to "very good," while only 7% rated quality as "bad" to "very bad" (Figure 10.5).

Comments from respondents revealed difficulties with daycare quality, child care for children with special needs, and other logistics.

Figure 8.5

In general, how would you rate the quality of child care services you have received?



Comments

"No special needs child care."

"It is very hard to get child care beyond the 9-5 schedule."

"Few quality daycares."

"Most will not come to my house. I must take the children to them which incurs more cost to the already over priced service."

"Many providers are not equipped to work with children with disabilities."

"Daycares refuse to enroll my daughter because of her type one diabetes."

"Seems most service providers aren't trained to handle children with issues and disabilities and they essentially push you out of programs."

"Cannot find a program that specializes in working with children with Mental Illness/Emotional Disturbances."



Child Care Assistance Subsidies

As we have seen, the most significant barrier to accessing child care services is cost. In response, the New Mexico Children, Youth & Families Department (CYFD) offers a Child Care Assistance Program which subsidizes child care costs for low-income families that are working or in school.⁴

Nearly one-third (32%) of respondents who care for children reported receiving a subsidy from CYFD (Figure 9.1). Of those who have not received a subsidy, half explain that they do not need one (Figure 9.2). Other common reasons for not receiving a subsidy include not knowing about the program (16%), believing or being told that they do not qualify, or being unemployed.

The populations most likely to have received a child care assistance subsidy include single parents; those with some college or a 2-year degree; those with annual household income below \$25,000, and those who identify as Hispanic or Latino (Figure 9.3).

Figure 9.1

Have you ever received a child care assistance subsidy from CYFD?

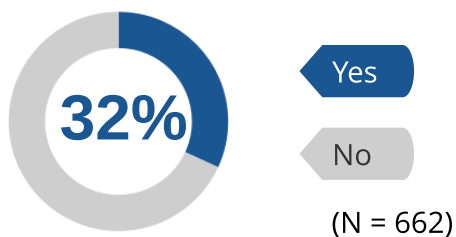


Figure 9.2

Why haven't you received a child care assistance subsidy from CYFD?

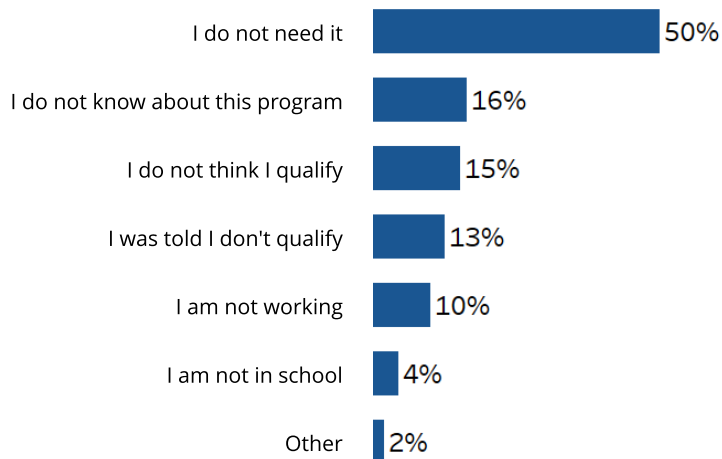
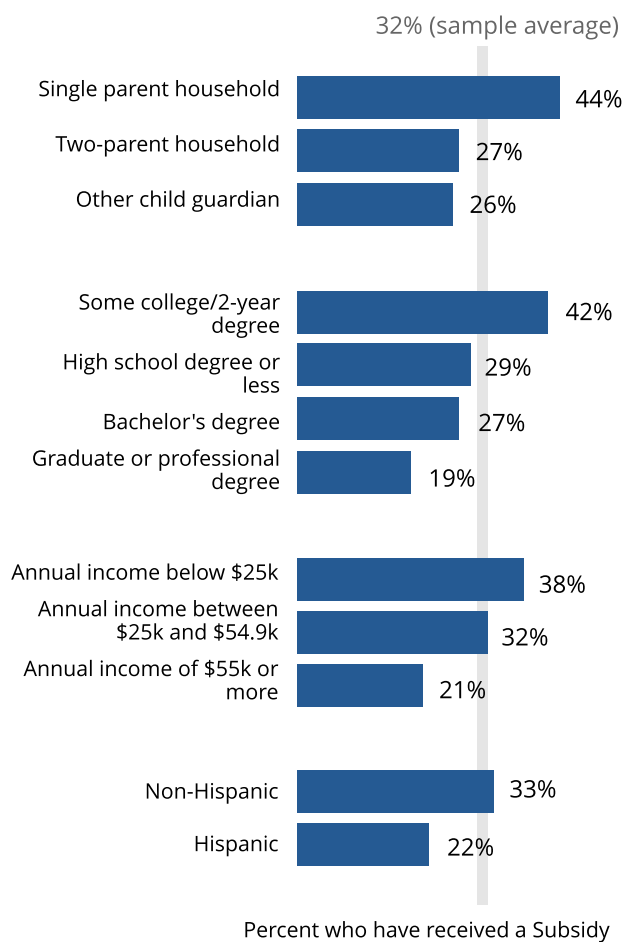


Figure 9.3

Who has received a child care assistance subsidy from CYFD?



4. New Mexico Children, Youth, and Families Department <https://cyfd.org/child-care-services/child-care-assistance>



Parenting Classes

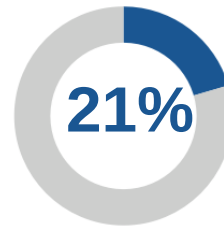
Much like home visiting services, parenting classes assist first-time and existing parents with guidance and extra support. When parents are informed and develop useful skills, their children reap the benefits. It also allows for a happy and healthy family unit. However, not all parents are aware that parenting classes exist, or are unable to find the time in their busy schedules to attend them.

Need for Parenting Classes in Doña Ana County

About 1 in 5 (21%) residents who were responsible for any children reported needing parenting classes (Figure 10.1).

Figure 10.1

Have you ever needed parenting classes? (e.g., Circle of Security, Conscious Fathering, etc.)



Yes

No

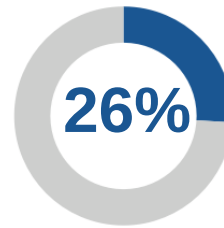
(N = 706)

Accessibility and Quality of Parenting Classes in Doña Ana County

Of those who needed services, approximately 1 in 4 (26%) reported difficulty getting them (Figure 10.2).

Figure 10.2

Have you ever had difficulties getting parenting classes?



Yes

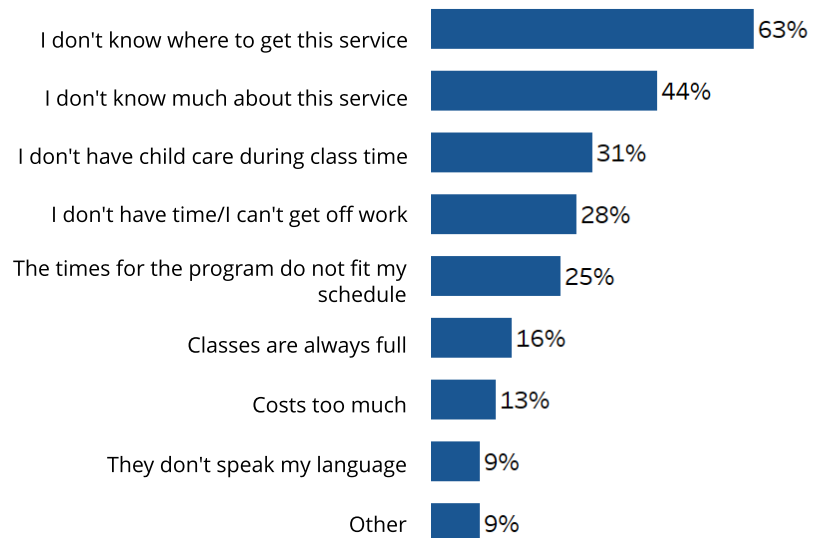
No

(N = 124)

Limited information about parenting classes seems to be a major culprit behind inaccessibility. Of those who reported difficulties with parenting classes, a majority (63%) did not know where to get services while just under half (44%) said they did know not much about this service (Figure 10.3).

Figure 10.3

Difficulties accessing parenting classes:



Another major barrier to parenting classes seems to be scheduling conflicts, with numerous parents reporting not having child care during class times, not being able to get off work, and class times clashing with their own schedules (Figure 10.3).

For those who had received services, or at least tried, the majority (72%) rated quality as "good" to "very good," while

only 3% rated quality as "bad" to "very bad." Nearly 1 in 10 (9%) reported inability to get any services (Figure 10.4).

Respondents provided comments further explaining their troubles.

Comments

"This service is not provided in Rincon. Our community center sits there unused."

"Finding a provider or class is difficult. Many of the providers do not seem to have a great grasp of actual parenting in a complex blended family."

"Did not know [parenting classes are] offered."

Figure 10.4

In general, how would you rate the quality of parenting classes you have received?



- Very bad/ Bad
- Average
- Good/ Very good
- I don't know because I haven't been able to get this service



Preschool Services

According to the Harvard Graduate School of Education, children that attend Early Childhood Education (ECE) programs are less likely to be placed in special education, less likely to be retained in a grade, and more likely to graduate from high school.⁵ This step can be fundamental in the outcome and success of the child. Unfortunately, not all parents are aware of or able to access preschool services. While there has been an increase in children participating in New Mexico PreK in Doña Ana County, there are still many children that are missing out.

Need for Preschool Services in Doña Ana County

Half (50%) of residents responsible for children reported needing preschool services (Figure 11.1).

Significant differences in the need for preschool services were seen by household type, education level, and school district. Traditional single- and two-parent households were the most likely to need services compared to non-traditional child guardians such as grandparents. Respondents with any higher education experience were more likely than those with a high school degree or less to report needing services. Residents of the Gadsden Independent School District were most likely to need services, compared to residents of the LCPS or Hatch Valley school districts (Figure 11.2).

Figure 11.1

Have you ever needed preschool services? (e.g., NM Pre-K, Head Start, public school preschool, etc.)

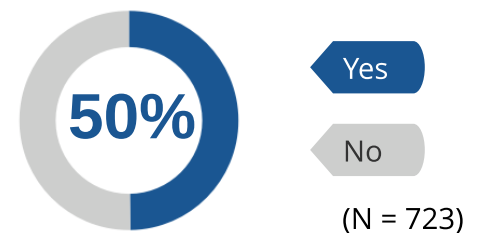
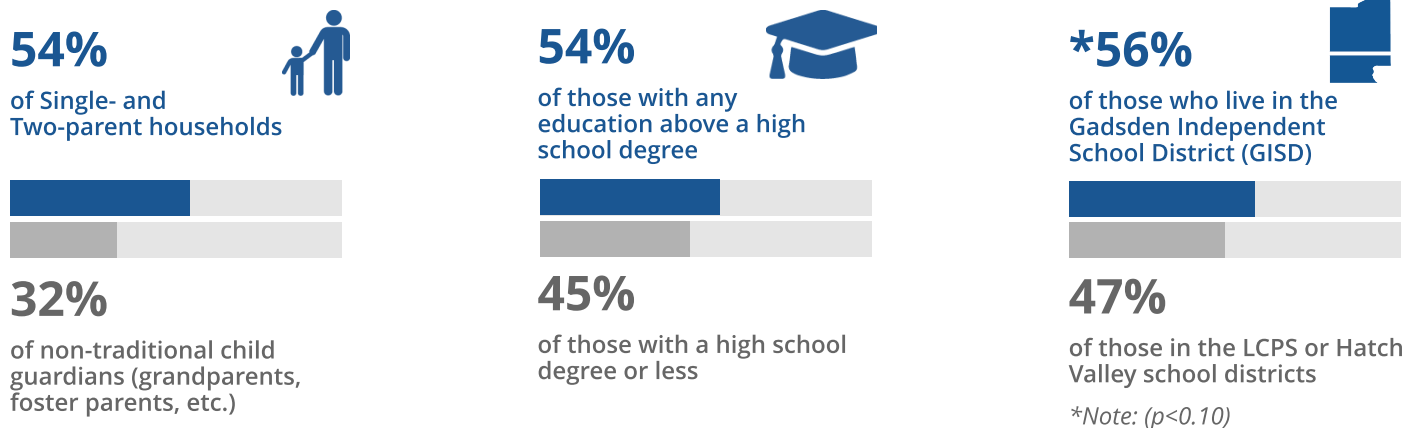


Figure 11.2

Who reported need for preschool services?

All group differences are statistically significant at $\alpha=0.05$, except where noted.



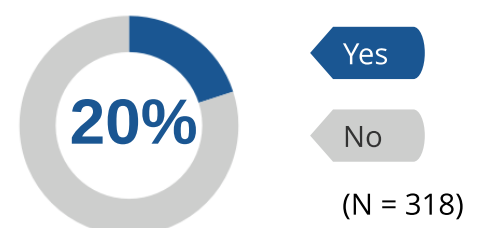
Accessibility and Quality of Preschool Services in Doña Ana County

Of those who needed services, about 1 in 5 (20%) reported difficulty getting them (Figure 11.3).

Top difficulties included long waitlists, inability to find a quality provider, and

Figure 11.3

Have you ever had difficulties getting preschool services?



5. Harvard Graduate School of Education <https://www.gse.harvard.edu>

high costs (Figure 11.4). This aligns with previous analyses that have pointed to long waitlists in centers that are deemed high quality and free, such as Head Start programs and New Mexico PreK.⁶

Difficulty accessing preschool services varied by education level and income. Respondents with a graduate or professional degree were twice as likely as those with a bachelor's degree or less to report difficulty getting preschool services (Figure 11.5).

Likewise, significant differences in accessibility were also found between income groups. Those with mid-level income (between \$25,000 and \$54,999) were the most likely to report difficulties getting services, whereas those with very low income (below \$25,000) were the least likely to report difficulty. This is possibly due to a wider range of free or subsidized preschool options for low-income parents (Figure 11.5).

For those who had received services, or at least tried, the majority (73%) rated quality as "good" to "very good," while only 4% rated quality as "bad" to "very bad" (Figure 11.6).

Respondents commented on scheduling conflicts, stringent income requirements, as well as a shortage of programs designed for special needs.

Comments

"I tried 3 and found that the teachers do not have training for differently-abled children."

"Program hours [conflict with] working family schedules."

"Communication from school districts is very minimal."

"[Speech therapy services] are not available in this area."

"Providers never got back to me about my application for Early Pre-K."

"Didn't qualify based on income."

"Needed a preschool with special training in Autism Spectrum Disorder."

Figure 11.4

Difficulties accessing preschool services:

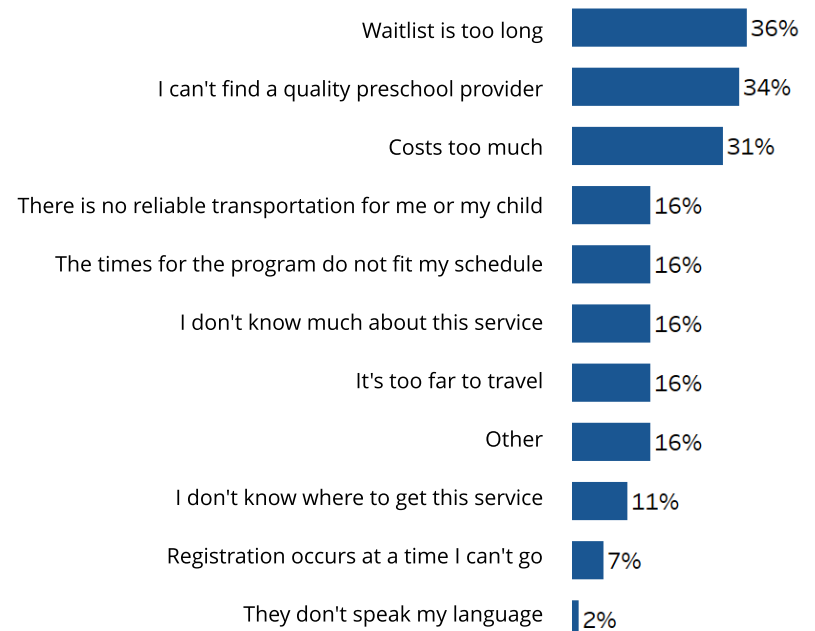


Figure 11.5

Who reported difficulty getting preschool services?

All group differences are statistically significant at $\alpha=0.05$

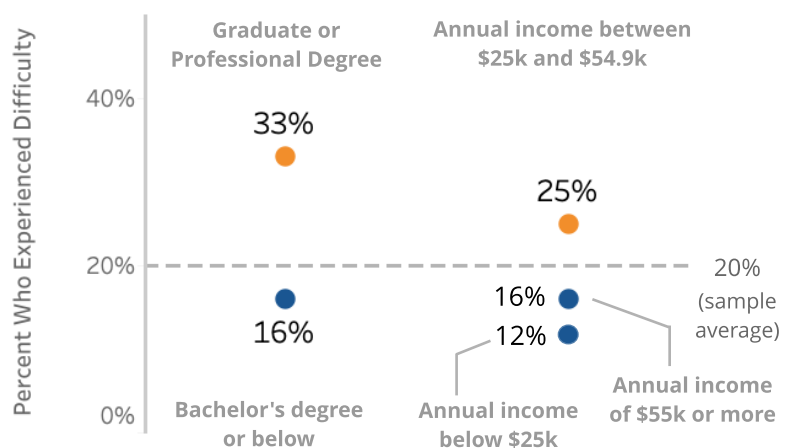
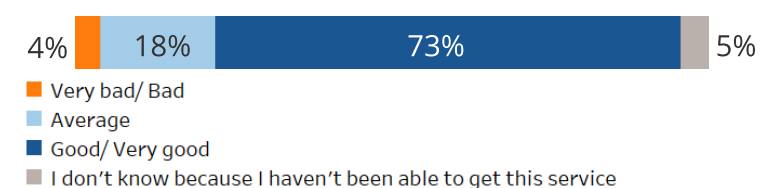
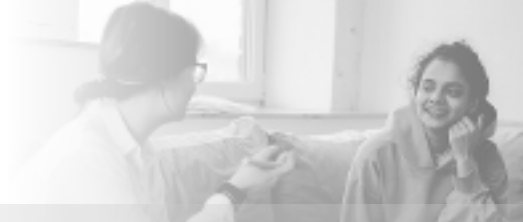


Figure 11.6

In general, how would you rate the quality of preschool services you have received?



6. Access to Quality Early Childhood Care and Education In Doña Ana County, 2018, Center for Community Analysis NMSU and the SUCCESS Partnership



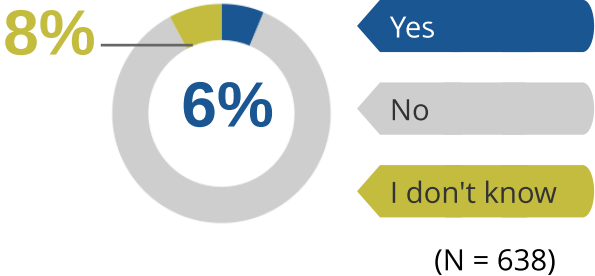
Youth Mentor Services

This survey suggests that parents may not think their children are in need of a youth mentor, but data shows some alarming struggles that middle school and high school students face. The Youth Risk and Resiliency Survey reports that 36% of Doña Ana County high school students have felt sadness or hopelessness, defined as being, “so sad or hopeless almost every day for two weeks or more in a row that you stopped doing some usual activities.”⁷ Coupled with other problems, such as bullying online or at school, it becomes clear how beneficial youth mentors can be to children.

Need for Youth Mentor Services in Doña Ana County

Only 6% of residents responsible for any children reported needing youth mentor services for their child, and (8%) did not know whether their child needed services (Figure 12.1).

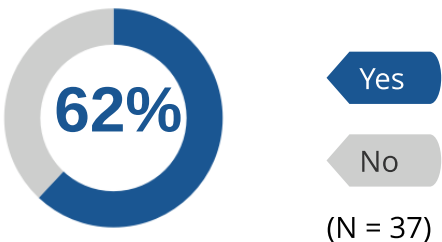
Figure 12.1
Has your child ever needed youth mentor services? (e.g., Big Brothers/Big Sisters)



Accessibility and Quality of Youth Mentor Services in Doña Ana County

Although a very small percentage of respondents indicated a need for youth mentor services, those who did need services faced great obstacles obtaining them. Approximately 3 in 5 (62%) reported difficulty (Figure 12.2).

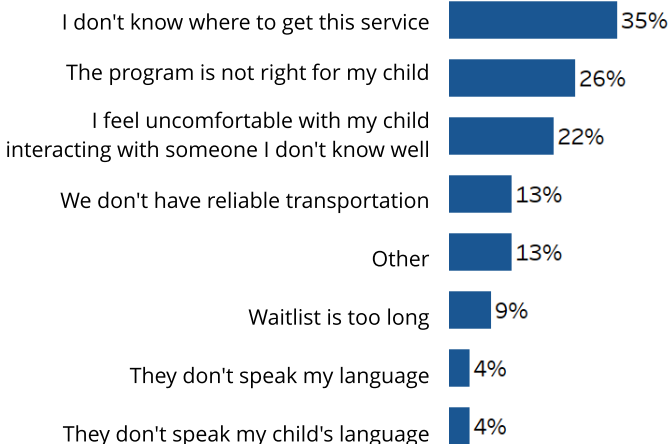
Figure 12.2
Have you ever had difficulties getting youth mentor services for your child?



Due to the small number of respondents who reported difficulties, demographic tests lacked power to detect any possible differences in accessibility.

Commonly cited difficulties included not knowing where to get services, believing the program is not right for their child, and feeling uncomfortable with their child interacting with someone whom the parent does not know well (Figure 12.3).

Figure 12.3
Difficulties accessing youth mentor services



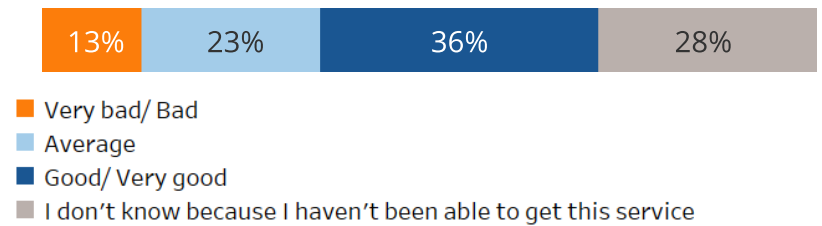
7. Youth Risk and Resiliency Survey for Doña Ana County (2017)

For those who had received services, or at least tried, 36% rated quality as "good" to "very good," and 13% rated quality as "bad" to "very bad." Over 1 in 4 (28%) reported inability to get any services (Figure 12.4).

Comments from respondents suggest personal conflict and poor communication may be barriers to accessing youth mentor services.

Figure 12.4

In general, how would you rate the quality of youth mentor services your child has received?



Comments

"My child had a big sister that part was okay, but the services my daughter needed at school were less than acceptable...They act like they care and are concerned about my child but did little to nothing to help her."

"They never call back."

"I was told my child was not a match for their mentors."





School-Based Health Services

School-based health centers provide services to children such as vision, hearing, immunization screening, behavioral services, and more. By offering these services on site, schools can help to reduce medical-related student absences. School-based health centers can also relieve parents from having to leave work to care for a sick child or to transport their child to doctor appointments.⁸ Access to health care services can be challenging for many families in Doña Ana County and providing health care in schools may alleviate some of the disparities we see concerning access.

Need for School-Based Health Services in Doña Ana County

About 3 in 10 (31%) residents responsible for any children reported needing school-based health services for their child (Figure 13.1).

Demographic tests found significant differences in need for school-based health services based on school district, Colonia residency, and language spoken at home. Respondents who were the least likely to report needing services for their child were those from the Gadsden Independent School District (GISD), those who live in a Colonia, and those who speak a non-English language at home (Figure 13.2).

Figure 13.1

Has your child ever needed health services at school? (e.g., vision, hearing, and immunization screening, and similar services)

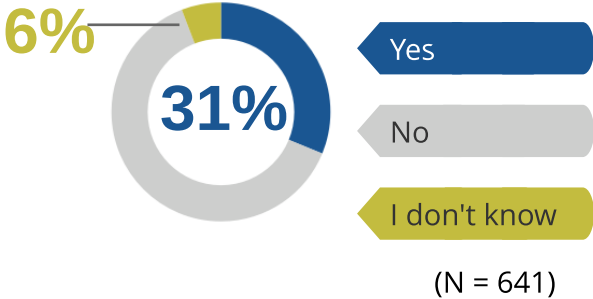
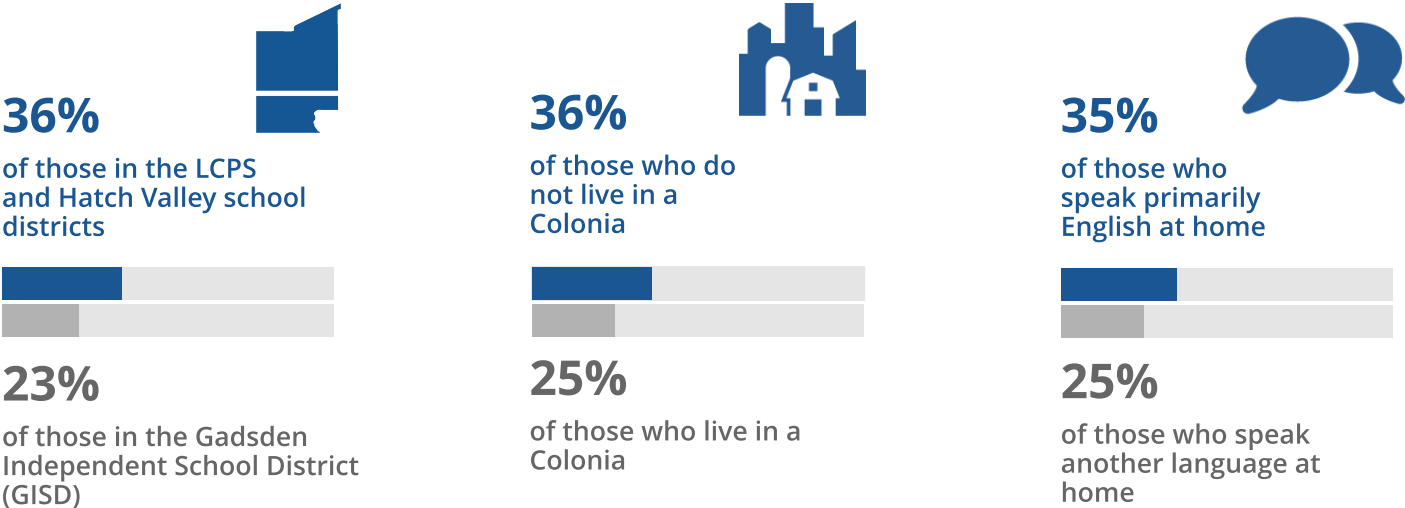


Figure 13.2

Who reported need for school-based health services for their child?

All group differences are statistically significant at $\alpha=0.05$



8. New Mexico Alliance for School Based Health Care (2020) <https://www.nmasbhc.org/about/impact/>

Accessibility and Quality of School-Based Health Services in Doña Ana County

Of those who needed services for their child, about 1 in 4 (27%) reported difficulty getting them (Figure 13.3).

Those who have experienced difficulties getting school-based health services for their child, point primarily to a shortage of services at the schools, stating that schools either do not offer the right types of services needed by their child or do not offer any health services at all (Figure 13.4).

For those who had received services, or at least tried, about half (52%) rated quality as "good" to "very good," while 1 in 10 (10%) rated quality as "bad" to "very bad" (Figure 13.5).

Respondents provided additional comments indicative of an allegedly flawed school healthcare system.

Comments

"The nurse doesn't listen to what I have to say and goes completely off of doctor's orders, which hinders my child's health at school."

"Process is too long and hard to get through paperwork."

"[Translated] Not enough counselors or mental health professionals at school."

"They just don't seem to want to help."

Figure 13.3

Have you ever had difficulties getting school-based health services for your child?

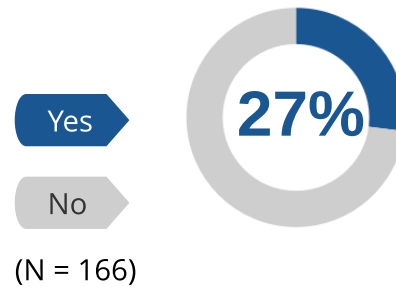


Figure 13.4

Difficulties accessing school-based health services:

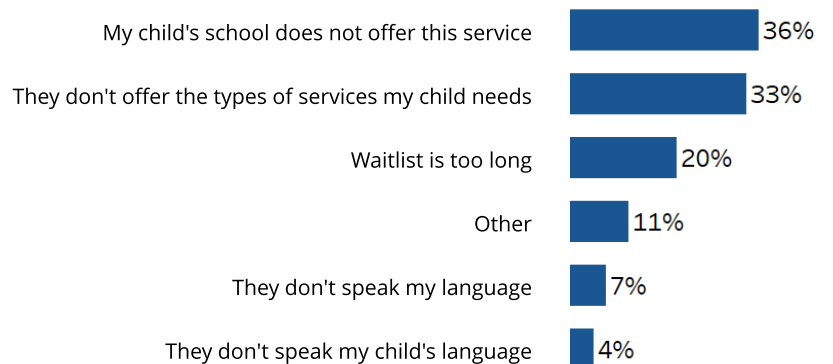
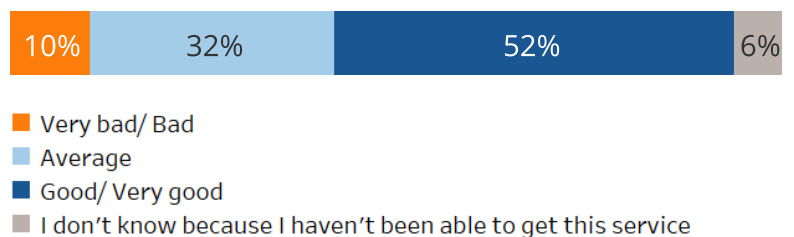


Figure 13.5

In general, how would you rate the quality of school-based health services your child has received?



School-Based Mental Health Services

Children face an array of problems both inside and outside of their homes. In Doña Ana County, 17% of high school girls have been sexually assaulted, 14% of all high school students have seriously considered suicide, and 14% have been bullied on school property in the past 12 months.⁹ Yet many parents may be unaware that these things may be happening or that their child needs any help at all. For a child who feels as if they have no one to talk to at home, or who are unable to access a counselor, school-based mental health and behavioral services can be indispensable.

Need for School-Based Mental Health Services in Doña Ana County

Just under 1 in 4 (23%) residents responsible for any children reported needing school-based mental health services for their child (Figure 14.1).

Demographic tests found significant differences in need for school-based mental health services based on ethnicity, language spoken at home, education, school district, and Colonia residency. Perhaps most notably, respondents with a graduate or professional degree were almost twice as likely as the general population to say that their child needed services (Figure 14.2).

Figure 14.1

Has your child ever needed mental health services at school? (e.g., counseling, psychology services)

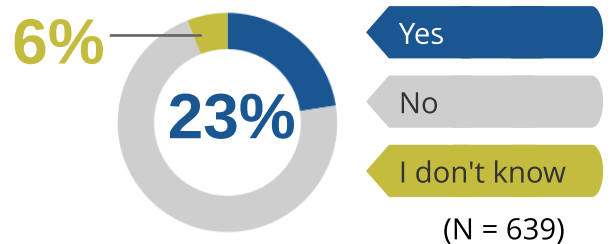
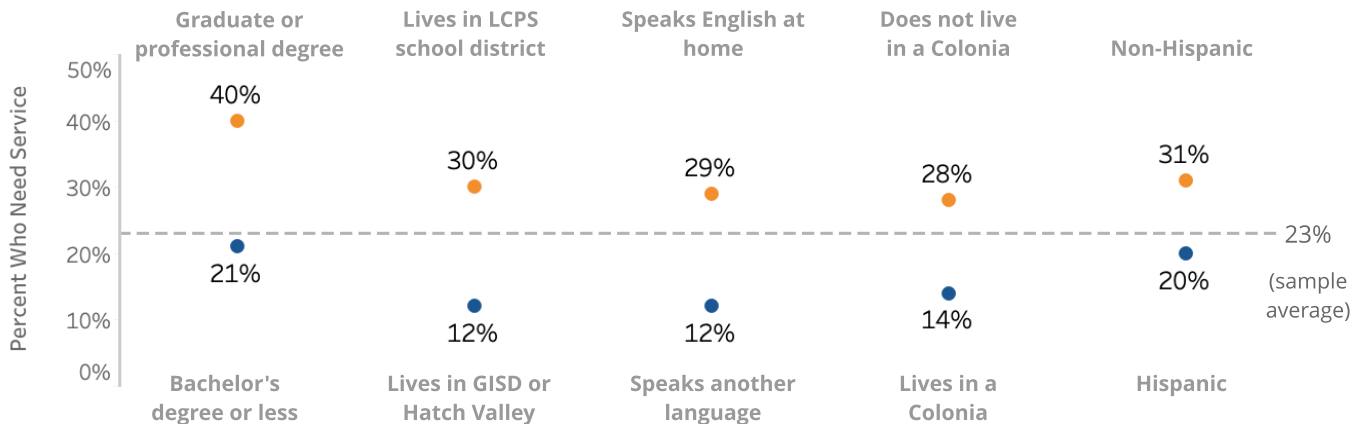


Figure 14.2

Who reported need for school-based mental health services for their child?

All group differences are statistically significant at $\alpha=0.10$

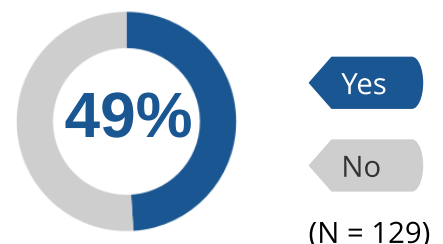


Accessibility and Quality of School-Based Mental Health Services in Doña Ana County

Of the nearly one in four respondents who said their child needed services at school, almost half (49%) reported difficulty getting the services (Figure 14.3).

Figure 14.3

Have you ever had difficulties getting school-based mental health services for your child?



9. Youth Risk and Resiliency Survey for Doña Ana County (2017)

Further analysis reveals a probable need for more mental health service providers in Doña Ana County schools. Of those who reported difficulty getting services, two-thirds (67%) cited a shortage of counselors or mental health professionals at their child's school. Nearly half (48%) reported that the school does not offer the right type of services, while almost one-third (30%) reported that their child's school does not offer any services (Figure 14.4).

Demographic comparisons suggest a possible discrepancy in accessibility based on Colonia residence. Colonia residents were less likely to report difficulty with accessing school-based mental health services, compared to those who do not live in a Colonia (Figure 14.5).

For those who had received services, or at least tried, one-third (33%) rated quality as "good" to "very good," and one-third (33%) rated quality as "bad" to "very bad." About 1 in 10 (11%) reported an inability to get any services (Figure 14.6).

Comments from respondents reiterate parents' inability to receive services, whether due to a shortage of professionals, barriers to qualification, or lack of information.

Comments

"The specialized providers for the behavioral program are wonderful, but often are temps or interns so there has been some inconsistency in service."

"If there isn't an IEP [the student doesn't] qualify for counseling. They don't have someone who prescribes medication."

"We need more mental health support in the schools by qualified professionals not guidance counselors."

"I did not know that this existed."

Figure 14.4

Difficulties accessing school-based mental health services:

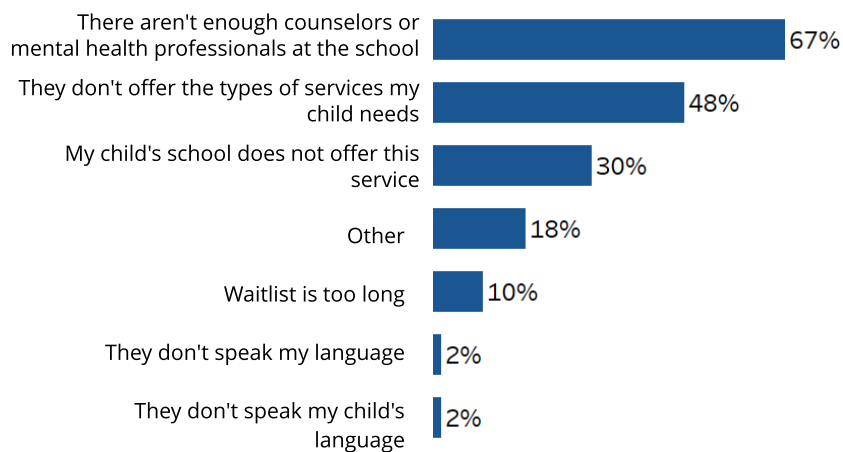


Figure 14.5

Who reported difficulty getting school-based mental health services for their child?

All group differences are statistically significant at $\alpha=0.05$

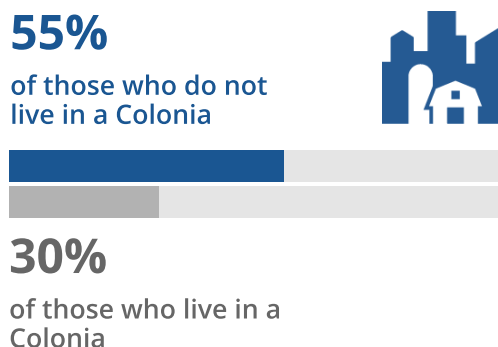
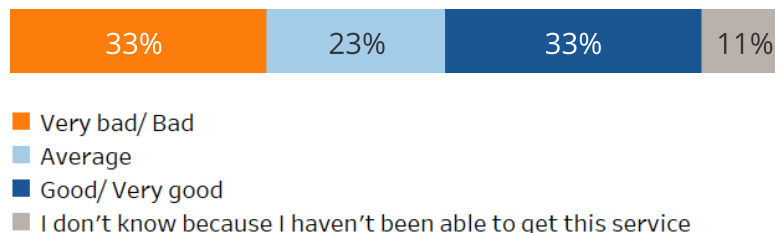


Figure 14.6

In general, how would you rate the quality of school-based mental health services your child has received?





Job Training Services

Job training services are crucial in providing young adults and adults with the tools and education they need to progress in their career choice. Lack of education and job training that leads to secure employment is a source of inequity in the county, profoundly affecting underrepresented populations. According to the US Census Bureau, the median income in the county for Hispanic or Latinos is \$32,767 per year compared to \$56,019 for white non-Hispanics.¹⁰ As we have seen, secure employment and income play a large role in access to other important services, including basic health care.

Need for Job Training Services in Doña Ana County

Just under one-quarter (23%) of county residents reported needing job training services (Figure 15.1).

Demographic tests found significant differences in need for job training services based on Colonia residence, child guardian status, income, and school district. Need for job training was most frequently reported by those who do not live in a Colonia, single parents, those with annual household income below \$25,000, and those who live within the LCPS school district (Figure 15.2).

Figure 15.1

Have you ever needed job training services? (e.g., apprenticeships, vocational training, job training programs at community colleges, colleges or universities, etc.)

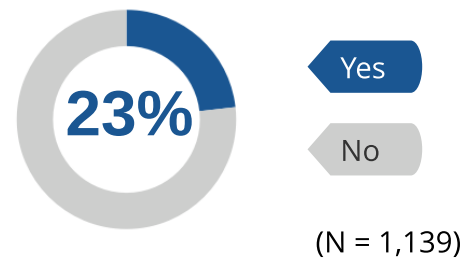
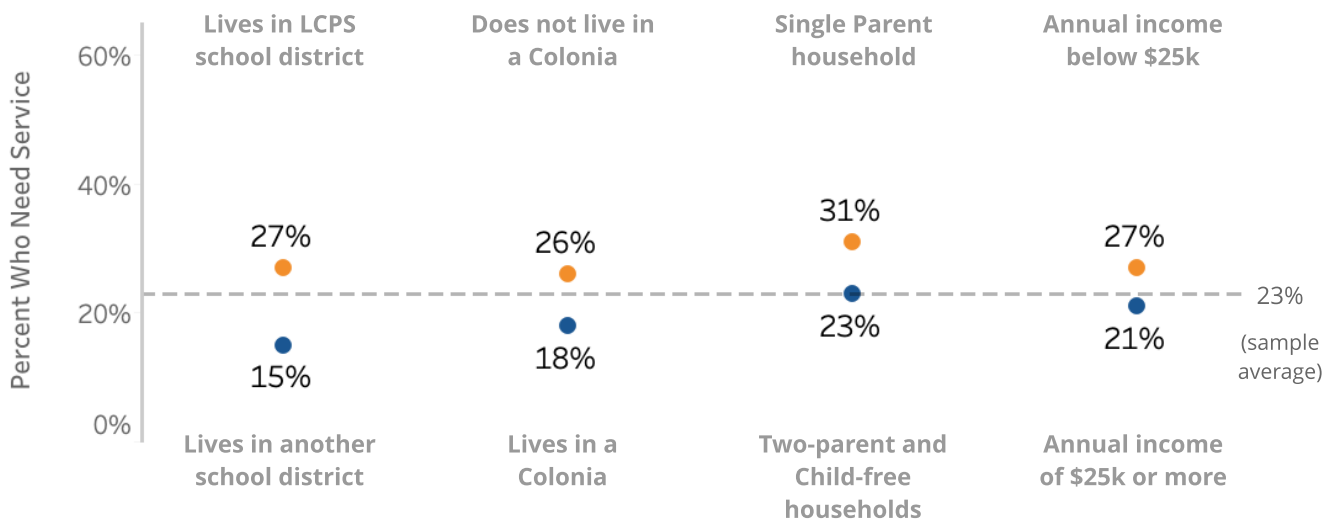


Figure 15.2

Who reported need for job training services?
All group differences are statistically significant at $\alpha=0.10$



10. US Census Bureau 2018 ACS 5-year estimates

Accessibility and Quality of Job Training Services in Doña Ana County

Of those who needed services, about 2 in 5 (42%) reported difficulty getting them (Figure 15.3).

When pressed for more details about difficulties with accessing job training services, respondents most frequently reported that current job training services do not offer the type of training desired (Figure 15.4). Other common difficulties were not knowing where to get services, not having child care during training times, schedule conflicts, and high costs.

For those who had received services, or at least tried, 42% rated quality as "good" to "very good," while 18% rated quality as "bad" to "very bad." Nearly 1 in 7 (14%) reported an inability to get any services (Figure 15.5).

Respondents provided comments expressing frustration with the qualification process and cost of job training, as well as dissatisfaction with services from the Department of Vocational Rehabilitation (DVR).

Comments

"When you have felonies people are unwilling to work with you even if you have not reoffended in 10+ years"

"DVR has a waiting list that averages 1 to 3 years before we can get services."

"The only way to afford training is to get into debt."

"The process for qualifying is long and drawn out."

"My son has autism...They were completely out of touch such as suggesting phone soliciting for a functional non-verbal person."

"Staff are extremely rude at DVR."

Figure 15.3

Have you ever had difficulties getting job training services?

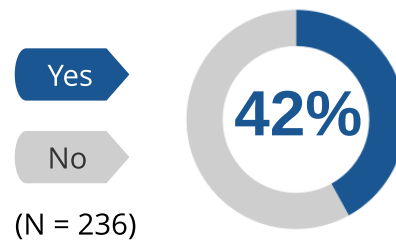


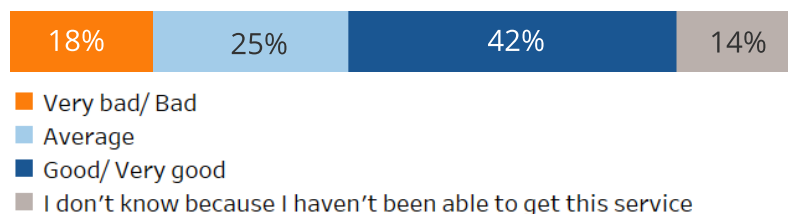
Figure 15.4

Difficulties accessing job training services:



Figure 15.5

In general, how would you rate the quality of job training services you have received?



Other Findings

Family Support.....pg 42

Additional Comments.....pg 43



Feelings About Family Support

Historically, New Mexico has ranked low when looking at indicators of child and family well being.¹ Numerous factors can influence how a family unit functions and the capacity to which they can provide for their household, emotionally and economically. Many look to extended family members to help where they can. This can include emotional support, helping with child care, providing transportation, etc. Parents can find ease in knowing that they have family members and friends to assist them and their children when needed. However, not all families have this outside support.

Approximately 3 in 5 respondents (59%) reported feeling that they have extended family support (Figure 16.1).

Demographic tests revealed significant differences in perceptions of family support based on multiple social and geographic factors. Groups that were the most likely to feel supported included those who live outside of the LCPS school district, those with children, those who speak a non-English language at home, Colonia residents, and those who identify as Hispanic or Latino (Figure 16.2).

Figure 16.1

Please tell us how much you agree with following statement:

"I have extended family support living near me that I can depend on (other family members and/or friends who help me and my family with things like emotional support, child care, etc.)"

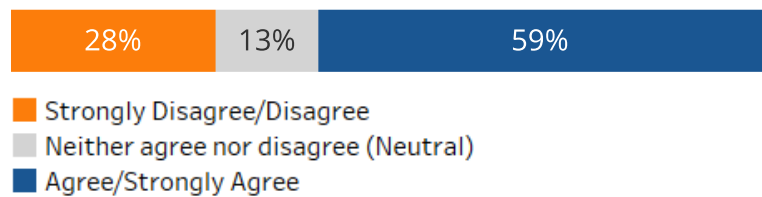
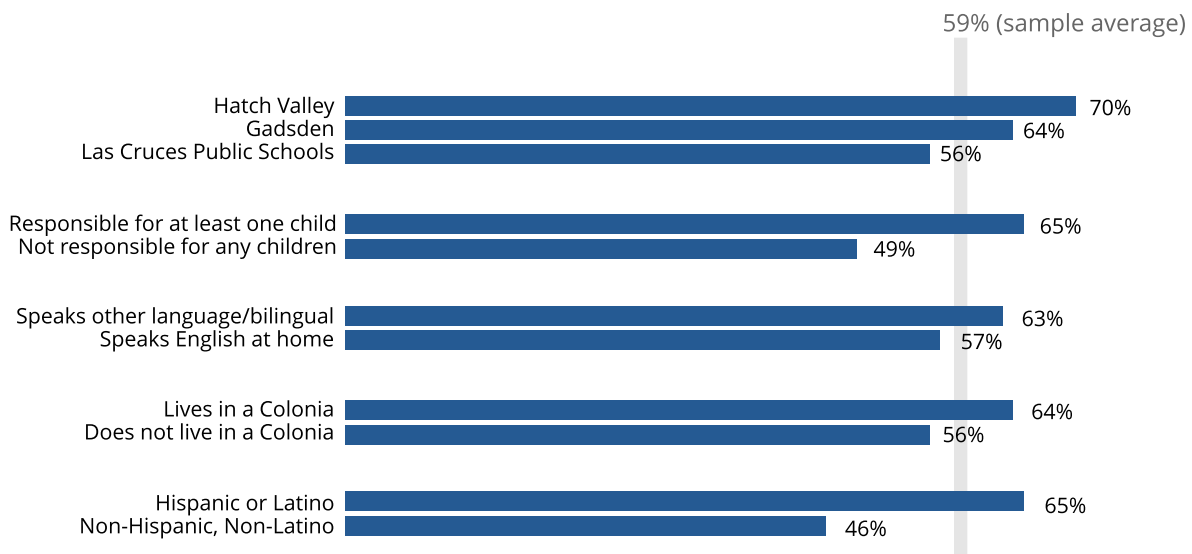


Figure 16.2

Percentage who **agree or strongly agree** with the statement:

"I have extended family support living near me that I can depend on (other family members and/or friends who help me and my family with things like emotional support, child care, etc.)"



1. Analyzing State Differences in Child Well-Being
<https://www.fcd-us.org/assets/2016/04/Analyzing-State-Differences-in-Child-Well-Being.pdf>

Additional Comments by Respondents

Is there anything else you would like to share about access to basic family services in Doña Ana County?

Survey participants left over 200 responses. The top three themes were a lack of services (or inaccessible services), the high cost of services, and the need for more mental and behavioral health services.

"We need more providers of all types. We don't have enough for the area or amount of people we have here."

"We need more employees at all the different facilities because the lines are so bad."

"This county needs more services for people who have disabilities - including sidewalks that are not being used as parking lots."

"There is no para-transit in Doña Ana County. Doesn't matter if there is access to services if you have no way to get there."

"Registration and appointment times need to be extended into the afternoon. Also more advertising such as Facebook events or community radio commercials would help more people know about the help they could receive."

"I feel like I work twice as hard but sometimes it feels like I should leave my job just to have access to better health care since I make too much [to qualify for services]. That doesn't make sense."

"Rural areas that don't have community centers run by the county are usually left out of services and information."

"Please do something about the lack of availability of testing young children through adulthood for learning disabilities. I could not receive help for myself or my child."

"All services and businesses in Las Cruces cater to the extremely wealthy, or the extremely poor, and there seems to be no middle income."

"If you have private insurance you are [#@%*] providers want Medicaid for mental health services under age 18. We had to put our life savings plus get loans to send our child away and save his life."

"Not enough services for seniors, especially in the medical and transportation fields. Home health is not affordable and assisted living is not affordable."

"I work full time, provide for my family and children, we are a one-income family and not being able to qualify for Food Assistance because I make too much is beyond me...I am left with nearly nothing after paying daycare, rent, bills, etc, and to have nothing (and help) for food is stressful. I will apply every year, and every year get denied. At one point, I was given \$7.14, [what am I] supposed to feed my kids with that!"

"I think that the system kicks people off of services far too quickly and promotes a culture of not wanting to better yourself employment wise in order to keep needed services such as SNAP benefits and Medicaid. A lot of times a small raise won't even make up for the lost assistance and it pushes you two steps backwards."

"As a new expecting parent, I have no clue of where to even begin to look for information or what type of information I should be requesting or researching."

"Early intervention services and behavioral health services are needed in rural areas."

"We have health insurance, but our copays are crazy expensive. It stops us from going to the doctor or taking our kids to the emergency room."

Conclusion

The purpose of this survey was to assess the level of access individuals and families had to 10 basic surviving and thriving services in Doña Ana County. The survey aimed to uncover the level of need for families, perceptions of quality, as well as the level of difficulty accessing these services.

Among the 10 services, many respondents experienced similar difficulties in obtaining services. Cost, quality, lack of insurance, long waitlists, and logistical issues obtaining services were among the top barriers to access. Here we provide some data highlights categorized according to surviving services, thriving services, and family support.

Surviving Services

Results found that 16% of respondents reported needing affordable housing and that difficulty accessing those services was particularly challenging for single parents (33%).

Approximately 1 out of every 5 respondents reported needing access to public transportation. Difficulty accessing it was especially challenging for residents of Chaparral (83%).

A shortage of providers, cost, lack of insurance coverage, and scheduling conflicts were common obstacles to accessing health-related services.

The perceived need for all health-related services was notably less for Hispanics or Latinos, and respondents whose primary language was not English. This points to a possible need for more health literacy and identifying underlying barriers to access.

Nearly half (49%) of respondents seeking mental or behavioral health services had difficulty obtaining them. Lack of quality providers, long waitlists, cost, insurance issues, and inconvenient appointment times were common barriers.

Regarding quality, survey respondents ranked mental and behavioral health

services the lowest compared to dental and medical services. Less than half (47%) ranked services as "good" to "very good." Participants mentioned a general lack of qualified providers in the area.

Thriving Services

Half of the respondents responsible for children reported needing preschool services. Of those, 20% reported barriers to access. Respondents cited a lack of providers offering services for children with disabilities and parents' inability to qualify for free or subsidized programs.

Themes were similar for child care. Among the 47% of families needing services, 76% reported that it "costs too much." Moreover, comments from respondents pointed to the impact of the "cliff-effect," when slight changes in income push families off subsidized support programs such as food assistance or subsidized child care. Single-parent households reported the greatest need for subsidies (44%).

Among the 23% of respondents who needed job training services, nearly one in four (24%) had no one to watch their children during training times. Also, 41% said the types of training they wanted weren't offered, and 29%

didn't know where to find services.

Access to school-based health services was challenging for many respondents, especially for services related to mental health. Of those who reported that their child needed services, 49% reported difficulties accessing them. The lack of providers was a problem; 67% reported that there weren't enough counselors or mental health professionals in the schools, and nearly half (48%) said the schools didn't offer the types of services their child needed.

Family Support

When asked about feelings of family support, 59% reported "agreeing" to "strongly agreeing" with the statement, "I have extended family support living near me that I can depend on."

Respondents reporting the highest level of family support were those living in Hatch Valley School District, while those feeling the lowest level of support were non-Hispanics.

Although the level of need and barriers to access for surviving and thriving services in Doña Ana County may have changed in response to the COVID-19 pandemic, these results serve as a useful guide and jumping-off point for further exploration.

To join the Resilience Leaders of Southern NM, contact Kasandra Gandara: kgandara@las-cruces.org

For questions about the survey results, contact Erica Surova: surova@nmsu.edu

To learn more about the 100% Community initiative, please visit: <https://www.annaageeight.org/>