Families' Access to Vital Services

RIO ARRIBA COUNTY, NEW MEXICO 2020

Challenges accessing health care and other vital services for surviving and thriving in a pandemic and economic disruption

A REPORT BY THE ANNA, AGE EIGHT INSTITUTE JUNE 1, 2020



The Anna, Age Eight Institute has identified 10 services that form the foundation for thriving, resilient communities.

Information from surveys about Rio Arriba county residents' access to those 10 critical services is presented in this report.

The surveys, conducted before the COVID-19 pandemic was identified in New Mexico, show a county already facing challenges delivering health care and other services.

As communities across New Mexico work to recover and emerge stronger, this report can serve as a starting point to identify and address access issues in a timely manner.

Contents

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Our Mission · 5
Survey Method · 7
10 Sectors: Strengths, Challenges, and Opportunities in Rio Arriba County · 9
  SERVICES FOR SURVIVING
  Challenges to accessing Medical Care · 10
  Challenges to accessing Behavioral Health Care · 12
  Challenges to accessing Food Security Programs · 13
  Challenges to accessing Housing Security Programs · 14
  Challenges to accessing Transportation to Vital Services · 15
  SERVICES FOR THRIVING
  Challenges to accessing Parent Supports · 16
  Challenges to accessing Early Childhood Learning Programs · 17
  Challenges to accessing Fully-Resourced Community Schools with Health Care · 18
  Challenges to accessing Youth Mentors · 19
  Challenges to accessing Job Training · 20
Recommended Next Steps · 21
Appendices · 25
 Appendix A: The 100% Community Survey · 26
 Appendix B: Neighborhood of Residence · 29
 Appendix C: Survey Results · 30
 Appendix D: Executive Overview: Ten Sectors At-a-glance, Rio Arriba County, New Mexico 2020 · 31
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"Look at the world around you. It may seem like an immovable, implacable place. It is not. With the slightest push in just the right place it can be tipped."

Malcolm Gladwell, author, The Tipping Point

Our Mission

We empower the community leaders who strengthen the vital services to ensure family and community health, safety, education, job readiness, and economic stability.

The Anna, Age Eight Institute was funded by the New Mexico state legislature in 2019. Our institute's far-reaching goal is ensuring that our children, students and families are safe and thriving. To achieve this we're using a data-driven process focused on building the capacity of local government, non-governmental agencies and the business sector to provide the surviving and thriving services that community members need to strengthen health, safety and resilience.

OUR 100% COMMUNITY INITIATIVE: EMPOWERING COMMUNITIES

We bring to each county's leaders and stakeholders a process of brainstorming, learning, mobilizing and innovating, all with the support of state-of-the-art technology. Locally, the Institute's 100% Community initiative helps guide collaborative efforts using the critical steps of assessing, planning, action and evaluation to ensure accessibility to the ten services shown to empower all families. These services include medical care, mental health care, food security programs, housing security programs, transportation, parent supports, early childhood learning programs, community schools, youth mentors, and job training.

VITAL AND TIMELY SERVICES: WHO HAS ACCESS?

In this report on Rio Arriba County, the Anna, Age Eight Institute shares the results of a recent survey focused on access to medical care and nine other services that promote health, safety and education. While the results, collected right before COVID-19 hit, may be worrying, today's situation in the middle of both COVID-19 and economic disruption, may become more challenging in terms of access families have to vital services.

This report provides data on parents' access to services and reasons why access may be challenging. We also provide recommendations for increasing the capacity of each county to ensure that all residents have access to the ten vital services for surviving and thriving.

This survey was done as part of the 100% Community initiative designed to identify and address gaps in vital family services. This county-wide assessment was done in collaboration with NMSU Center for Community Analysis and is part of the assessment process conducted in the pilot counties engaged with our initiative in New Mexico which includes: Rio Arriba, Doña Ana, Socorro, Taos Pueblo, and San Miguel. For more information about the 100% Community and the Anna, Age Eight Institute please see: Recommended Next Steps.

"The family, community, or society that understands and values its children thrives; the society that does not is destined to fail."

Bruce Perry, M.D., Ph.D.

Survey Method

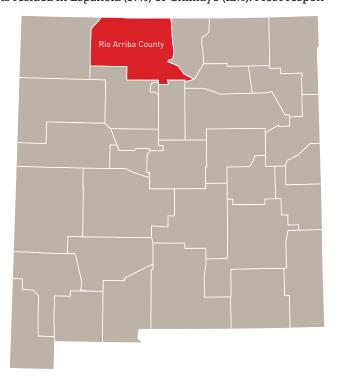
OUR COUNTYWIDE APPROACH

There were 425 surveys collected in Rio Arriba County. The Anna Age Eight Institute partnered with United Way of Northern New Mexico, The New Mexico Department of Health, NM Probation and Parole, NM State Police, Espanola City Police Department, NM Treatment Services, Moving Arts Espanola, and various community partners who actively participated in the monthly Anna Age Eight meetings. We had teams of a minimum of 2 youth at various locations throughout the survey time period including McCurdy Mission Fall Fiesta*Espanola School District Parent Teacher Conferences, Moving Arts Espanola, New Mexico Treatment Services, Presbyterian Hospital, and many other locations. Surveys were available in both English and Spanish, see Appendix A: 100% Community Survey.

The survey was conducted between the months of October 2019 and February 2020. 425 surveys were collected using both electronic and paper versions of the survey. A statistically appropriate target sample was determined by NMSU's Center for Community Analysis, in order to ensure proper representation from the communities throughout Rio Arriba county. The largest portions of respondents resided in Espanola (37%) or Chimayo (12%). Most respon-

dents were Hispanic/Latino (80%), with 11% identifying as white, and 7% identifying as Native American. While some of the responses to this survey may have been from the Pueblos in Rio Arriba county, each pueblo would need a survey specific to their residents in order to determine access to services for the pueblos.

Most respondents were between the ages of 25-44 (49%) and 77% of respondents cared for at least one child under 18 years old. Of those with children in the home, 37% reported single parent households, 46% two parent households, and 18% were grandparent/relative/foster parent raising the child. Over two thirds of respondents (69%) were female. Over half of respondents reported annual household income of \$39,999 or less (54%). Survey respondents came from the following communities: Abiquiú, Alcalde, Canjilon, Cañones, Canova Chamita, Chili, Chama, Chimayó, Cordova, Dixon, Dulce, El Duende, El Rito, Ensenada, Hernandez, Española, La Madera, La Mesilla, La Villita, Los Luceros, Los Ojos, Lyden, Ohkay Owingeh, Pueblito, Santa Clara Pueblo, Tierra Amarilla, Truchas, and Velarde. See Appendix B: Neighborhood of Residence.



"Our definition of recovery from crises and economic disruptions is: ensuring that all residents have access to the ten services for surviving and thriving."

Katherine Ortega Courtney, PhD and Dominic Cappello Co-Directors, Anna, Age Eight Institute

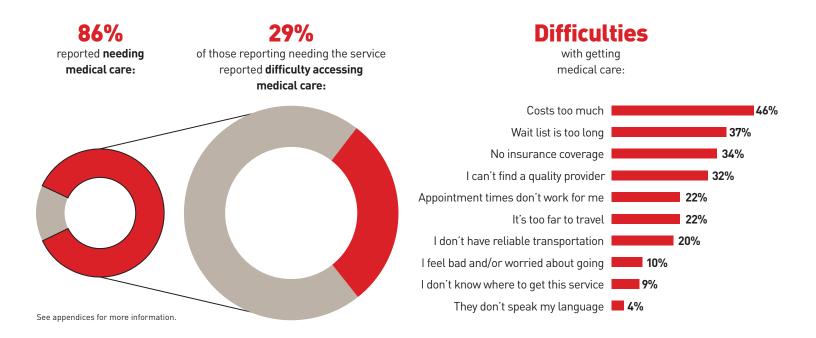
10 Sectors: Strengths, Challenges and Opportunities in Rio Arriba County

Challenges to accessing **Medical Care**

Almost a third of county residents who need it have difficulty accessing medical care.

Medical care is a service that can literally mean the difference between quality of life or illness in "normal times." Access can be a matter of life, recovery, death and viral spread in a pandemic.

In both city and town centers and rural areas, access to affordable, timely medical care has been problematic for decades. As the data below indicate, a sizable proportion of the county's residents may struggle to access services. The reasons why are varied.



ISSUES FOR CONSIDERATION

Results indicate that those who are caring for children are significantly (via chi square) more likely to have trouble accessing medical care. 31% of those caring for children had difficulty accessing medical care compared to 20% of those not caring for children (p<.05).

SUGGESTIONS FOR NEXT STEPS

Create a county action team on medical care, guided by data, to:

- Assess current services and barriers; analyze capacity to address gaps in services
- Plan projects to reduce gaps and improve services; identify desired outcomes
- Act in partnership with stakeholders; implement projects from planning phase
- Evaluate progress made toward measurable outcomes; share results with community

"We can embrace a collaborative and data-driven strategy to design the new systems of care and safety we urgently need."

Matt Probst, Medical Director, PA-C, El Centro Family Health

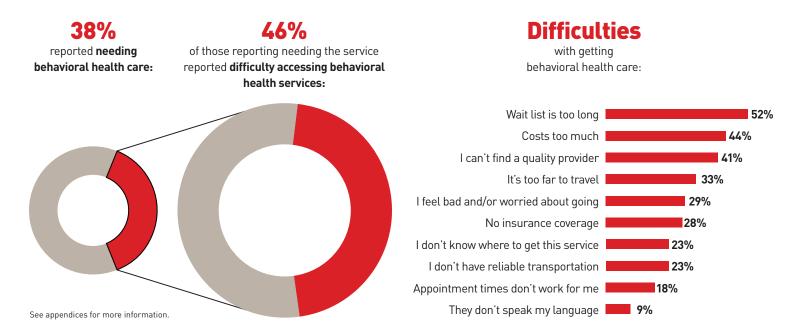
Challenges to accessing Behavioral Health Care

Nearly half of Rio Arribans needing behavioral health services experience difficulties with access.

New Mexicans, like the entire nation, have never experienced such rapid change, moving from self-isolation to a slow reentry into a new economy with changing job markets.

All the old challenges, like substance misuse and adverse childhood experiences, have been exacerbated leading to a greater need for behavioral health care. In both urban and rural areas, access to timely and culturally appropriate behavioral care, as well as comfort with its use, has been a challenge for decades.

As the data below indicate, a sizable proportion of the county's residents may struggle to access services. The reasons why are varied and complex, requiring concentrated local focus on not only creating access but acceptance of mental health care as a viable tool for healing.



ISSUES FOR CONSIDERATION

Qualitative data reveal a host of challenges including high turnover rates for counselors, a need for more substance misuse programs and a need for more services in general—both different forms of behavioral health care and the basic services of survival (stable housing supports, food security programs and transportation). 43% of those caring for children reported needing behavioral health care compared to 24% of those not caring for children (p<.01).

SUGGESTIONS FOR NEXT STEPS

Create a county action team on behavioral health care, guided by data, to:

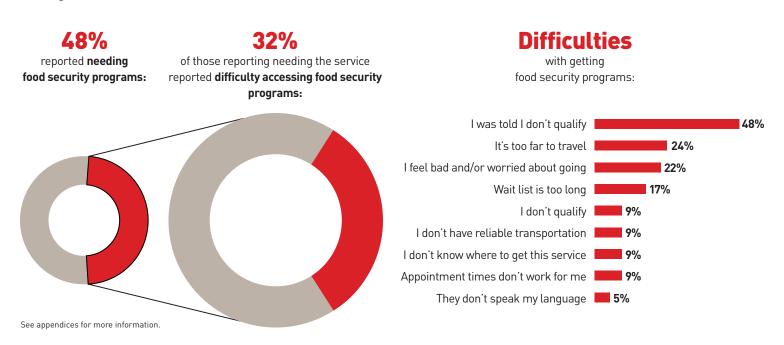
- Assess current services and barriers; analyze capacity to address gaps in services
- Plan projects to reduce gaps and improve services; identify desired outcomes
- Act in partnership with stakeholders; implement projects from planning phase
- Evaluate progress made toward measurable outcomes; share results with community

Challenges to accessing Food Security Programs

Nearly one half of respondents reported having needed food assistance services.

Food insecurity is not a new challenge for New Mexico. What may be new is the magnitude of food insecurity and hunger, with some families struggling with food bills as the workforces shift and finding a job in the new economy becomes problematic.

Until we can get economic engines working in each county, communities will need to ensure food support is viable or hunger will impact family functioning and student achievement. In both urban and rural areas, access to daily food security programs can reduce the burden of hunger for families. The reasons families struggle to access food security are varied.



ISSUES FOR CONSIDERATION

Results indicate that those who are caring for children are significantly (via chi square) more likely to have needed food assistance. 56% of those caring for children had needed support with food compared to 33% of those not caring for children (p<.01).

SUGGESTIONS FOR NEXT STEPS

Create a county action team on food security, guided by data, to:

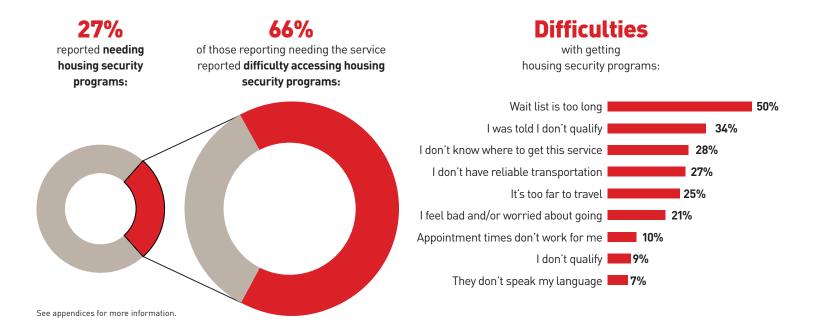
- Assess current services and barriers; analyze capacity to address gaps in services
- Plan projects to reduce gaps and improve services; identify desired outcomes
- Act in partnership with stakeholders; implement projects from planning phase
- Evaluate progress made toward measurable outcomes; share results with community

Challenges to accessing **Housing Security Programs**

Two thirds of respondents who reported needing housing supports also reported having difficulties getting services.

Housing insecurity can impact New Mexicans in both urban and rural areas. With the changing job market and local economies in a state of flux, we can expect housing insecurity to stay with us in a variety of forms.

Not unlike food insecurity, housing insecurity impacts family functioning and student achievement. To avoid having each district setting up a "homeless student department" we propose that we act swiftly to address housing insecurity. The reasons families struggle to access stable affordable and safe housing situations is complex and varied.



ISSUES FOR CONSIDERATION

Results indicate that those who are caring for children are significantly (via chi square) more likely to have needed housing assistance. 31.4% of those caring for children had needed support with housing compared to 14.5% of those not caring for children (p<.01).

SUGGESTIONS FOR NEXT STEPS

Create a county action team on housing security, guided by data, to:

- Assess current services and barriers; analyze capacity to address gaps in services
- Plan projects to reduce gaps and improve services; identify desired outcomes
- Act in partnership with stakeholders; implement projects from planning phase
- Evaluate progress made toward measurable outcomes; share results with community

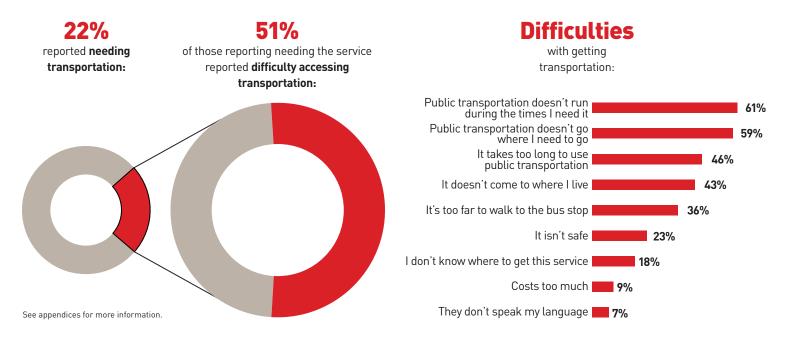
Challenges to accessing Transportation to Vital Services

Transportation is a reason people cannot access vital services.

New Mexicans, up until now, have been very car-centric. With incomes, workforces and local economies in flux, people may find themselves without personal transport and be dependent on forms of public help. The reasons families and all community members may struggle to access affordable, timely, and safe transportation is complex and varied, but a variety of transport options exist for localities to explore in both urban and rural areas.

KEY FINDINGS

According to our survey, lack of transportation is an issue when seeking to access medical care, behavioral health care, food security programs, housing security programs, getting to transport hubs, child care, pre-school, parent classes, mentorship programs and job training.



ISSUES FOR CONSIDERATION

Results indicate that those who are caring for children are significantly (via chi square) more likely to have needed transportation. 25% of those caring for children had needed support with transportation compared to 15% of those not caring for children (p<.05).

SUGGESTIONS FOR NEXT STEPS

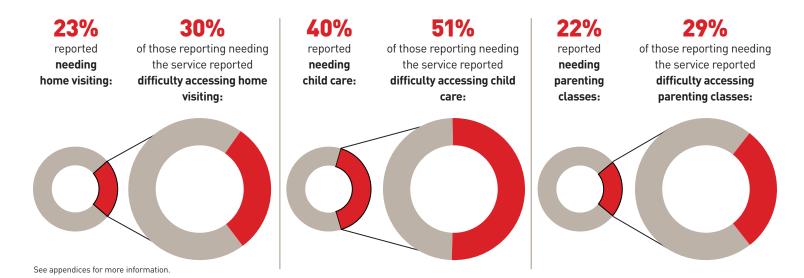
Create a county action team on housing security, guided by data, to:

- Assess current services and barriers; analyze capacity to address gaps in services
- Plan projects to reduce gaps and improve services; identify desired outcomes
- Act in partnership with stakeholders; implement projects from planning phase
- Evaluate progress made toward measurable outcomes; share results with community

Challenges to accessing **Parent Supports**

51% of parents who reported needing child care reported difficulty accessing it.

Parent supports come in many forms, including home visitation, child care and parent education. Each of these services are part of a puzzle that makes parenting successful. As you can see from the data below, the reasons families struggle to access parent supports are complex and varied.



ISSUES FOR CONSIDERATION

Qualitative data reveal a host of challenges.

For home visiting, challenges to access include:

- Don't have time (because the schedule doesn't allow for me to access program)
- Don't know where to get the service
- · Don't qualify
- · Wait list is too long
- Don't want strangers in my home.

For child care, challenges to access include:

- Cost
- · Wait list is too long
- · Can't find quality provider
- Times for program do not fit my schedule
- Don't know where to get the service
- No reliable transportation to service

For parenting classes, challenges to access include:

- Don't know where to get the service
- Don't have childcare during class time
- Don't have time/can't get off work

SUGGESTIONS FOR NEXT STEPS

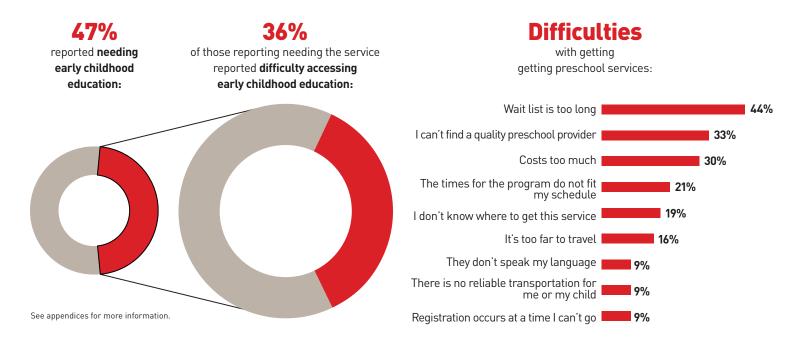
Create a county action team on parent supports, guided by data, to:

- Assess current services and barriers; analyze capacity to address gaps in services
- Plan projects to reduce gaps and improve services; identify desired outcomes
- Act in partnership with stakeholders; implement projects from planning phase
- Evaluate progress made toward measurable outcomes; share results with community

Challenges to accessing Early Childhood Learning Programs

36% reported difficulty accessing early childhood education.

The benefits of early childhood learning programs are well documented, and such programs are seen as part of a seamless system of development and learning that starts in the first years of life, leading through childhood, teens and into job readiness programs. As you can see below, the reasons families struggle to access early childhood learning programs are complex and varied.



ISSUES FOR CONSIDERATION

Data reveal that more highly educated parents/caregivers are more likely to report needing preschool services. Those with bachelor's degrees were significantly more likely (via chi square) to report needing preschool services (72%) than those with high school degree or no degree (33%), p<.01. This may speak to a need to promote the importance of early childhood education to all parents/caregivers.

SUGGESTIONS FOR NEXT STEPS

Create a county action team on early childhood education, guided by data, to:

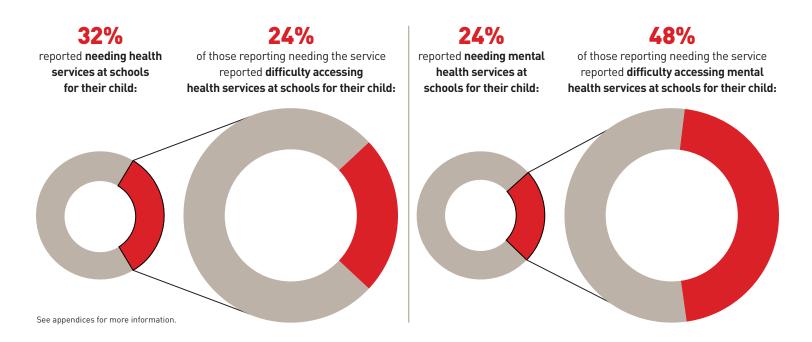
- Assess current services and barriers; analyze capacity to address gaps in services
- Plan projects to reduce gaps and improve services; identify desired outcomes
- Act in partnership with stakeholders; implement projects from planning phase
- Evaluate progress made toward measurable outcomes; share results with community

Challenges to accessing Fully-Resourced Community Schools with Health Care

48% reported difficulty accessing mental health services at schools for their child.

Community schools are those that have school-based health centers with medical care, dental care and behavioral health care. They also have extra staff to address education disparities and can keep students with health challenges or adverse childhood experiences (ACEs) from becoming marginalized.

Especially in an era when a public health crisis can appear quite suddenly, the benefits of having school-based medical care becomes apparent. As you can see from the data below, the reasons families struggle to access fully resourced community schools with health care serving students and family members are complex and varied.



ISSUES FOR CONSIDERATION

We suggest that community leaders do further research to identify how aware parents and caregivers of all education levels are aware of the services and benefits of schools with health care and the community schools model.

SUGGESTIONS FOR NEXT STEPS

Create a county action team on schools with health care, mental health care and student supports, guided by data, to:

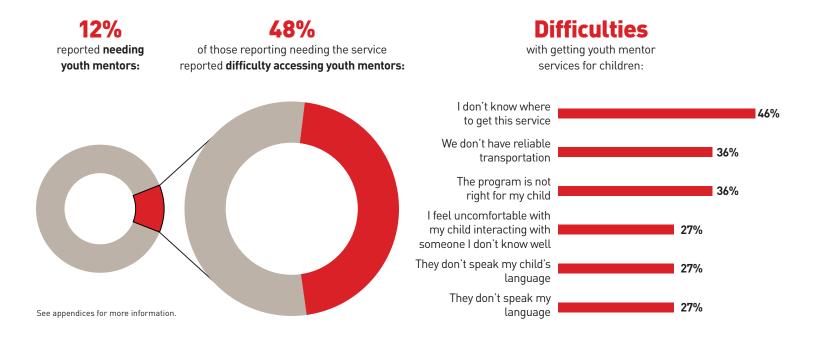
- Assess current services and barriers; analyze capacity to address gaps in services
- Plan projects to reduce gaps and improve services; identify desired outcomes
- Act in partnership with stakeholders; implement projects from planning phase
- Evaluate progress made toward measurable outcomes; share results with community

Challenges to accessing **Youth Mentors**

48% of parents reported difficulty accessing youth mentors for their children.

Youth mentorship comes in many forms, including one on one mentoring, coaching sporting activities, leading study groups in faith-based and community-based centers, and a variety of after school and out of school experiences. These programs put an extra set of eyes on every child, providing a way for adults to look after the most vulnerable of our children and teens.

Mentorship, especially Big Brothers/Big Sisters, has substantial research to show the benefits of a child or youth having a caring mentor. Mentorship has been shown to delay a wide variety of problems including substance misuse. As you can see from the data below, the reasons families struggle to access mentoring programs are complex and varied.



ISSUES FOR CONSIDERATION

While a small percentage of parents/caregivers reported needing youth mentors, this should not be interpreted as children and teens not benefiting from mentorship. It might be that communities would benefit greatly from promoting the benefits of mentorship to parents.

SUGGESTIONS FOR NEXT STEPS

Create a county action team on youth mentorship, guided by data, to:

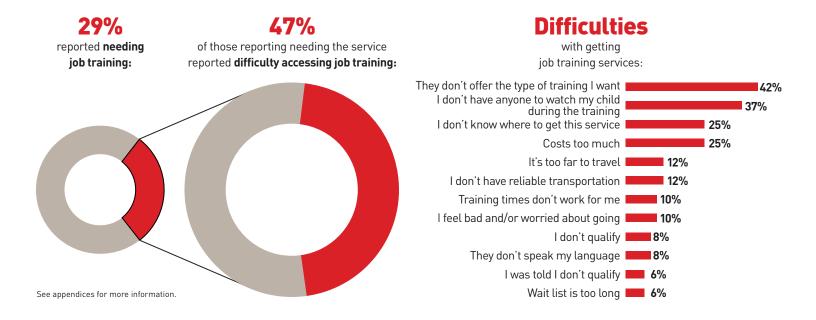
- Assess current services and barriers; analyze capacity to address gaps in services
- Plan projects to reduce gaps and improve services; identify desired outcomes
- Act in partnership with stakeholders; implement projects from planning phase
- Evaluate progress made toward measurable outcomes; share results with community

Challenges to accessing **Job Training**

47% of those who reported needing job training, reported difficulty accessing it.

With COVID-19, economic disruption and a very fast immersion into web-based work, we will be seeing shifts in the workforce requiring new skills. Job training, in many forms, including vocational ed and higher ed, is a vital step toward job readiness and placement.

As you can see from the data below, the reasons families and individuals struggle to access job training are complex and varied.



ISSUES FOR CONSIDERATION

We strongly recommend that all community leaders analyze the reasons why residents face challenges when accessing job training programs. Challenges that must be addressed include offering the types of programs that residents seek as well as aligning training programs to the present and future job markets.

SUGGESTIONS FOR NEXT STEPS

Create a county action team on job training, guided by data, to:

- Assess current services and barriers; analyze capacity to address gaps in services
- Plan projects to reduce gaps and improve services; identify desired outcomes
- Act in partnership with stakeholders; implement projects from planning phase
- Evaluate progress made toward measurable outcomes; share results with community

Recommended Next Steps

Recommendations for Increasing County Capacity to Serve Families

Data from surveys in our pilot counties indicate gaps in services and families unable to access timely vital support. Our 100% Community initiative is designed to address these gaps.

Institute's Hypothesis guiding the 100% Community initiative in New Mexico's counties: If we ensure that all our families and community residents have access to the five surviving services and the five thriving services, we will increase self-sufficient family households, higher educational achievement, job readiness, employment and healthy residents of all ages.

ACCESS IN A TIME OF CRISES

Implications for service access during COVID-19 and economic disruption in New Mexico

The data in this report is timely. If almost a third of a county's population can't access timely medical care, this has implications for Rio Arriba County's capacity to know infection rates and testing rates. It also highlights the challenges if COVID-19 infections require medical care and the capacity of the county's systems of care to respond. In addition to medical care, access to other services such as food support, housing security and behavioral health care can have a profound impact on families and all community members including our students in school and higher education and vulnerable elder populations.

We believe this report is a starting point, the beginning of more targeted assessment of access issues with different populations, as well as informational interviews with medical providers and all those seeking to support the health, safety and economic stability of all New Mexicans.

Our 100% Community initiative is demonstrating how to use data to identify access issues and address them in a timely manner through a process of continuous quality improvement—assessing, planning, acting and evaluating.

Recommendations

We recommend that all counties be resourced to engage in a process of continuous quality improvement to identify and address gaps in ten vital services. The Institute can also be resourced to support in each county the development of a mobilizing structure and ten action teams to ensure that all ten surviving and thriving services are accessible to 100% of residents.

As stated on each of our sector pages, the four-step continuous quality improvement process noted below can be supported to achieve positive outcomes.

- 1. Assess current services and barriers; analyze capacity to address gaps in services
- 2. Plan projects to reduce gaps and improve services; identify desired outcomes
- 3. Act in partnership with stakeholders; implement projects from planning phase
- 4. Evaluate progress made toward measurable outcomes; share results with community

THE COST-EFFECTIVE BENEFITS OF ENSURING 10 VITAL SERVICES

By working on a county scale, with buy-in from local elected leadership and stakeholders, a locality can build the capacity to ensure access to ten vital services. This can achieve groundbreaking results that include: increasing physical health, household stability and self-sufficiency, school achievement, and job readiness.

With a system of care, counties can also reduce costly problems that include: adverse childhood experiences (ACEs), maltreatment, trauma, substance misuse and violence. This Report is designed to be shared widely with county and state leadership in an effort to address both long-standing and emerging challenges.

FROM TROUBLED STATUS QUO TO SAFETY AND SUCCESS

A question often asked of us as we work with stakeholders across the state sounds a lot like this, "Is there a framework for addressing the challenges data identify year after year and decade after decade?" Said another way, "How do we change?"

Leaders know their residents face challenges. The data detailed in this report is one more confirmation, this time directly from parents, that the resources and supports to give individuals and families the stepping stones to self-sufficiency don't exist for many.

We are gratified to learn that in our counties where initiatives are mobilizing, we have the opportunity to do ground-breaking work. The comment we always look forward to from a local stakeholder is, "Finally, there's a framework for addressing hardships. A model that's doable. And sustainable."

To address both the desire for change in order to meet the needs of county residents and reluctance to change, our county trainings are not only providing expertise in Continuous Quality Improvement (CQI), but in a process called adaptive leadership to address and facilitate the challenges associated with change.

Communities can, with a commitment to a tested data-driven and collaborative process, ensure 100% of New Mexicans can access the ten vital local services for surviving and thriving.

For more information about the work of the Anna, Age Eight Institute in New Mexico please contact us at info@annaageeight.org.

Katherine Ortega Courtney, PhD Dominic Cappello Anna, Age Eight Institute Co-Directors:



info@AnnaAgeEight.org www.AnnaAgeEight.org "For all of us who believe that we can make everyone's health, safety, resilience, and readiness for crisis a priority, 100% Community shows the way."

Dr. Bill Soules, New Mexico State Senator

Appendices

100% Community Survey

ANNA, AGE EIGHT ENSURING TRAUMA-FREE AND THRIVING CHILDHOODS
Welcome! We invite you to participate in the
Access to Basic Services Survey for Rio Arriba County.
We would like to understand if families are able to get quality, basic family services (like education, health care, childcare, affordable housing, and job assistance) in Rio Arriba County. The information you share will be used to make recommendations to city and county officials, and nonprofit groups who work to help families. Your survey responses could lead to changes that make family services more available.
This survey is completely anonymous, and all responses will be grouped together so that no one can be identified. Participation in this survey is completely voluntary, you do not have to participate, and you may stop the survey at any time. The survey will take 10 minutes or less.
Please complete only one survey per household.
Thanks in advance for your participation!
1

0	Abiquiú	0	Dulce	0	Lyden
0	Alcalde	0	El Duende	0	Ohkay Owingeh
0	Brazos	0	El Rito	0	Pueblito
	Canjilon		Ensenada		San Jose
	Cañones		Española		Santa Clara Pueblo
	Canova		Gallina		Tierra Amarilla (county sea
	Chama Chamita		Hernandez La Madera		Truchas Velarde
	Chili		La Mesilla		Youngsville
	Chimayó		La Villita		Other:
	Cordova		Los Luceros	_	
0	Coyote	0	Los Ojos		
0	Dixon	0	Lumberton		
	•				
	Single-parent household Two-parent household				
	Grandparent guardian				
	Foster guardian				
	Grandparent, aunt, uncle, relative ntal care, etc.	or frien	d/mentor responsible for he	elping a child ge	et services like health care,
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		uardian	or caregiver for a child		
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THE FOLLOWING C	UESTIONS	ASK A	BOUT HEAL	LTH-RELA	ATED SER	VICES IN RIO ARRIB	A COUNTY. IF YOU CARE	- 11			N	∕ledical	Dental	Mental		
				IONS BA	SED ON G		OR YOU AND FOR THE	- 11				care	care	health ca	re	
				CHILDE	REN.				Costs too much							
									I feel bad and/or worried a	bout goi	ng					
5. Have you ever need	led any of th	ne follo	wing service	es?					They don't speak my langu	age						
		1	/es	No				- 11	I can't find a quality provid	er						
Medical ca	ire								Other:							
(e.g., primary care general health chec			0	0				- 11								
Dental car	re		0	0				- 11								SUCH AS ASSISTANCE
Mental health (e.g., psychiatrists, po therapists, cour	sychologists	,	0	0					Have you ever needed an					IC I KANS	PORTATION, AND) JOB TRAINING SERVICES.
substance abuse pro								- 11			Yes		No			
								- 11	Affordable housing serv	ices						
6. In general, how wo	uld you rate	the qu	ality of heal	th service	s you have	received?	I don't know because I	- 11	(e.g., Section 8, Housi Assistance Programs, e	ng	0		0			
	Very bad	Bad	Average	Good	Very good	I haven't needed this service	haven't been able to get this service		Food assistance service		_					
Medical care	O	O	Average	0	O	O C	O		(e.g., WIC, food stamps,	etc.)	0		0			
Dental care	0	0	0	0	0	0	0		Public transportation	,	0		0			
Mental health care	0	0	0	0	0	0	0		Job training program		0		0			
7. Have you ever had on the first state of the firs		s	No	ollowing s	ervices? (F	or example, transpoi	tation problems, no	Ш	(e.g., apprenticeships, voci training, job training progr community colleges, colle universities, etc.)	ational ams at	0		0			
Dental care	0		0					- 11	10. In general, how would y	ou rate t	he qualit	y of serv	ices you	have receiv	ved?	
Mental health care If "no," please skip to	0		0					- 11	,				,			I don't know because I
ii no, piease skip to	question 9.							- 11		Very				Very	I haven't needed	haven't been able to get
3. From the list below	, please cho	ose any	difficulties	you have	had gettin	g the following servi	ces:	- 11	Affordable housing	bad		Average			this service	this service
			Medical	Dental	Manta	ı.		- 11	services	0	0	0	0	0	0	0
			care	care	Menta health c			- 11	Food assistance services	0	0	0	0	0	0	0
I don't know where t	o get this se	rvice							Public transportation Job training programs	0	0	0	0	0	0	0
It's too far to travel								- 11	sob training programs	_	_	_	_			Ŭ.
I don't have reliable	transportati	on														
Appointment times of	lon't work fo	or me		П	П											
Wait list is too long																
No insurance coverage	7e			П												
THO INSUITANCE COVERU	5-		-					- 11								
							3									•
11. Have you ever had	difficulties	getting	any of the f	following	services?			Ш							ED SERVICES SUC	H AS, HOME VISITING
Affordable housing s			Yes O	No O					13. Have you ever needed a					,		
rood assistance serv	ices		0	0						, 2. 110	,	5				

	Yes	No				
Affordable housing services	0	0				
Food assistance services	0	0				
Public transportation	0	0				
Job training programs f "no," please skip to question 13.	_	U				
2. From the list below, please choo						
		Help with	Food assistance	Public transportation	Job	
It's too far to travel/walk to the bu	is ston	housing	assistance	transportation	training	
They don't speak my language	top		П	П		
I don't know where to get this ser	vice .					
I don't have reliable transportation			П	Ä		
Costs too much			_		П	
I feel bad/worried about going		П	П	_		
I was told I don't qualify			П		П	
Appointment/training times don't	work for me					
I don't qualify			П		П	
Wait list is too long						
Public transp	ortation onl	.1				
It doesn't run during the times I ne						
It isn't safe						
It doesn't go where I need to go						
It takes too long to use						
It doesn't come to where I live						
1-1-	taninina e - t	.1				
They don't offer the type of training	training onl y					
I don't have anyone to watch my o						
the training						

13. Have you ever needed	any of the	e followin	ng servic	es?			
		Yes	1	No			
Home visiting servi (By providers such as Es Presbyterian Hospita Cumbres, Youth Develo Inc., etc.)	pañola I, Las	0	(0			
Childcare services (Daycare centers or home-based childcare, babysitters, etc.) Preschool programs (e.g., NM Pre-K, Head Start, public school preschool, etc.)		0	(0			
		0	(0			
Parenting classes	•	0	(0			
14. In general, how would	you rate	he qualit	ty of serv	ices you h	nave recei	ved?	
	Very bad	Bad	Average	Good	Very	I haven't needed this service	I don't know because I haven't been able to get this service
Home visiting services	0	0	0	0	0	0	0
Childcare services	0	0	0	0	0	0	0
Preschool programs	0	0	0	0	0	0	0
Parenting classes	0	0	0	0	0	0	0
Parenting classes							
	iculties ge	tting any	of the f	ollowing s	ervices fo	r your child?	
	iculties ge	tting any	of the f	ollowing s	ervices fo	r your child?	
	iculties ge		of the f	_	ervices fo	r your child?	
15. Have you ever had diff	iculties ge	Yes	of the f	No	ervices fo	r your child?	
15. Have you ever had diff	iculties ge	Yes	of the fo	No O	ervices fo	r your child?	
15. Have you ever had diff Home visiting services Childcare services Preschool programs Parenting classes		Yes O	of the f	No O	ervices fo	r your child?	
15. Have you ever had diff Home visiting services Childcare services Preschool programs		Yes O O	r of the f	No	ervices fo	r your child?	
15. Have you ever had diff Home visiting services Childcare services Preschool programs Parenting classes		Yes O O	r of the f	No	ervices fo	r your child?	

	Home visiting Childcare Pres				19. Has your child ever n	eeueu any t	or the fol	llowing s	ervices?			
don't know where to get this service							Yes	No	o Id	lon't know		
osts too much					Youth mentor serv		_	_	`	_		
hey don't speak my language					(e.g., Big Brothers/Big		0	С	,	0		
Vait list is too long					Mental health services		_	_		0		
don't know much about this service					(e.g., counseling, psyc services)	iiuiugy	0	С)	0		
ne times for the program do not fit my schedule					Health services at s	chool						
can't find a quality provider nere is no reliable transportation for me or my child					(e.g., vision, hearing	, and	_	С)	\circ		
's too far to travel					immunization screeni similar services	ng, and	0	C	,	0		
egistration occurs at a time I cannot go					Sillillal Services	,						
					20. In general, how woul	d you rate t	he qualit	ty of serv	vices you	ı have rece	eived?	
Home visiting only												I don't know because I
do not qualify						Very				Very		haven't been able to ge
do not want strangers in my home					Youth mentor services	bad	Bad A	Average	Good	good	this service	this service
don't have time/I can't get off work					Mental health services	0	0	0	0	0	0	0
Parenting classes only					at school	0	0	O	0	0	0	0
asses are always full					Health services at school	0	0	0	0	0	0	0
don't have childcare during class time												
don't have time/I can't get off work					21. Have you ever had di	ficulties ge	tting any	of the f	ollowing	services f	or your child?	
								,		,	,	
her:					Variab manatar consissa			Yes		No		
					Youth mentor services Mental health services	it school		0		0		
Have you ever received a childcare assistance subsid		your child to rece	eive free or	r	Health services at school			0		0		
duced-price childcare) from Children, Youth and Famil	ies Department (CYFD)?				If "no," please skip to qu	estion 23.						
Yes No	Prefer not to answer				22 From the list below a	losco choo	co any di	ifficultion	r vou ha	uo had got	ting the following s	anvisor for your child:
0 0	0				22. From the list below, p	псазе СПОО	se any di	meuities	you nav	ve nau geti	ang are ronowing s	ervices for your child:
Why haven't you received a childcare assistance sub	sidy (help paying for childcar	e)? (Select all tha	at apply)								Health services	
] I do not need it	et think I qualify									rvices	at school	
I do not know about this program I am n					Wait list is too long	11	1.47					
] I was told I do not qualify					They don't speak my an			guage				
					My child's school doesn							
ther:				-	They don't offer the typ There aren't enough co							
					professionals at the sch		mentarr	ileaitii				
				7								
				7								
				7								
				7	28. What is the highest d							
Youth mentor services only				7	O Less than high so	hool	0 1	Bachelor	's Degre			
				7	Less than high soHigh school grad	hool	0 1	Bachelor Master's	's Degree degree	e		
don't know where to get this service				7	O Less than high so	hool	0 1	Bachelor Master's	's Degree degree		D egree	
Youth mentor services only don't know where to get this service They don't speak my and/or my child's language We don't have reliable transportation				7	Less than high soHigh school grad	hool	10	Bachelor Master's	's Degree degree e or Prof	e fessional D	Degree	
don't know where to get this service hey don't speak my and/or my child's language Ve don't have reliable transportation				7	Less than high stHigh school gradSome college2-year degree	hool uate	1010	Bachelor' Master's Doctorati Prefer no	's Degree degree e or Prof	e fessional D	Degree	
don't know where to get this service 'hey don't speak my and/or my child's language 'We don't have reliable transportation 'he program is not right for my child feel uncomfortable with my child interacting with				7	Less than high sc High school grad Some college 2-year degree 29. What language do yo	hool uate	1010	Bachelor' Master's Doctorati Prefer no	's Degree degree e or Prof	e fessional D	Degree	
don't know where to get this service hey don't speak my and/or my child's language Ve don't have reliable transportation he program is not right for my child feel uncomfortable with my child interacting with				7	Less than high sc High school grad Some college 2-year degree 29. What language do yo English Spanish	hool uate u primarily	1010	Bachelor' Master's Doctorati Prefer no	's Degree degree e or Prof	e fessional D	Degree	
don't know where to get this service hey don't speak my and/or my child's language Ve don't have reliable transportation he program is not right for my child				7	Less than high sc High school grad Some college 2-year degree 29. What language do yo English Spanish Native American	hool uate u primarily	1010	Bachelor' Master's Doctorati Prefer no	's Degree degree e or Prof	e fessional D	Degree	
don't know where to get this service hey don't speak my and/or my child's language Ve don't have reliable transportation he program is not right for my child feel uncomfortable with my child interacting with omeone I don't know well				7	Less than high sc High school grad Some college 2-year degree 29. What language do yo English Spanish Native American Bilingual Bilingual	hool uate u primarily	1010	Bachelor' Master's Doctorati Prefer no	's Degree degree e or Prof	e fessional D	Degree	
don't know where to get this service hey don't speak my and/or my child's language /e don't have reliable transportation he program is not right for my child feel uncomfortable with my child interacting with meone I don't know well her:		ACCESS TO BASI	C SERVICE:		Less than high sc High school grad Some college 2-year degree 29. What language do yo English Spanish Native American Bilingual Other:	hool uate u primarily language	O E O E Speak at	Bachelor' Master's Doctorati Prefer no : home?	's Degree degree e or Prof of to ansi	e fessional D wer		
don't know where to get this service hey don't speak my and/or my child's language //e don't have reliable transportation he program is not right for my child feel uncomfortable with my child interacting with meone I don't know well her:			C SERVICES		Less than high sc High school grad Some college 2-year degree 29. What language do yo English Spanish Native American Bilingual Bilingual	hool uate u primarily language	O E O E Speak at	Bachelor' Master's Doctorati Prefer no : home?	's Degree degree e or Prof of to ansi	e fessional D wer		riba County?
don't know where to get this service hey don't speak my and/or my child's language //e don't have reliable transportation he program is not right for my child feel uncomfortable with my child interacting with smeone I don't know well her: PLEASE TELL US MORE ABOUT YOU. THIS WILL DIFFERENT FOR VA	HELP US UNDERSTAND IF A		C SERVICES		Less than high sc High school grad Some college 2-year degree 29. What language do yo English Spanish Native American Bilingual Other:	hool uate u primarily language	O E O E Speak at	Bachelor' Master's Doctorati Prefer no : home?	's Degree degree e or Prof of to ansi	e fessional D wer		riba County?
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don't know where to get this service ney don't speak my and/or my child's language fe don't have reliable transportation per program is not right for my child eel uncomfortable with my child interacting with menore I don't know well PLEASE TELL US MORE ABOUT YOU. THIS WILL DIFFERENT FOR VA Please tell us how much you agree/disagree with the have extended family support living near me that I can epend on (other family members and friends who hel e and my family with child care, emotional support, 6 What is your household income per year? Less than \$10,000 Between \$10,000 and \$24,999 Between \$25,000 and \$29,999 Between \$25,000 and \$39,999	HELP US UNDERSTAND IF A	Neither agree nor disagree	Agree O	S IS Strongly Agree	Less than high sc High school grad Some college 2-year degree 29. What language do yo English Spanish Native American Bilingual Other:	hool uate u primarily language	O E O E Speak at	Bachelor' Master's Doctorati Prefer no : home?	's Degree degree e or Prof of to ansi	e fessional D wer		riba County?
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Neighborhood of Residence

Neighborhood	N	Percent
Abiquiú	19	4.5%
Alcalde	28	6.6%
Canjilon	4	0.9%
Cañones	1	0.2%
Canova	2	0.5%
Chama	2	0.5%
Chamita	2	0.5%
Chili	2	0.5%
Chimayó	49	11.5%
Cordova	9	2.1%
Dixon	4	0.9%
Dulce	6	1.4%
El Duende	5	1.2%
El Rito	3	0.7%
Ensenada	2	0.5%
Española	156	36.7%
Hernandez	27	6.4%
La Madera	1	0.2%
La Mesilla	16	3.8%
La Villita	1	0.2%
Los Luceros	2	0.5%
Los Ojos	2	0.5%
Lyden	3	0.7%
Ohkay Owingeh	13	3.1%
Other	35	8.2%
Pueblito	1	0.2%
Santa Clara Pueblo	13	3.1%
Tierra Amarilla (county seat)	2	0.5%
Truchas	5	1.2%
Velarde	10	2.4%
Total	425	

APPENDIX C

Survey Results

Service	Number Reporting need	Reported needed %	Number reporting difficulty accessing	Difficulty accessing %
Medical Care	363	86.2	101	28.9
Behavioral Health Care	151	37.7	69	45.7
Affordable Housing Services	108	26.5	68	66.0
Food Assistance Services	196	48	58	31.7
Public Transportation Services	90	22.4	44	51.2
Home Visiting Services	63	23.1	18	29.5
Child Care Services	111	40.4	54	50.9
Preschool Services	128	47.1	43	35.8
Parenting Classes	60	22.2	16	28.6
Youth Mentor Services	24	12.2	11	47.8
School based mental health services	48	24.2	22	47.8
School based health services	64	32.3	14	24.1
Job training programs	117	29.1	52	47.3

Executive Overview: Ten Sectors At-a-glance, Rio Arriba County, New Mexico 2020



29%
of those reporting needing
the service reported
difficulty accessing
medical care.



of those reporting needing the service reported difficulty accessing behavioral health services.



32%
of those reporting needing
the service reported
difficulty accessing food
security programs.



66%
of those reporting needing
the service reported
difficulty accessing
housing security
programs.



51%
of those reporting needing
the service reported
difficulty accessing
transportation.



30%
of those reporting needing
the service reported
difficulty accessing home
visiting.



36%
of those reporting needing
the service reported
difficulty accessing early
childhood education.



24%
of those reporting needing
the service reported
difficulty accessing health
services at schools for
their child.



of those reporting needing the service reported difficulty accessing youth mentors.



of those reporting needing the service reported **difficulty accessing job training.**

