

Shiprock

Aztec

Bloomfield

Farmington

2008

San Juan County Needs Assessment

data collection

societal problems

household concerns

sources of help

health service issues

families

alcohol

substance abuse

medical care

dental care

family violence

gang activity

affordable housing

family support

mental health

societal needs

prevention

sources of help

health service issues

families



PRESENTED BY SAN JUAN COUNTY PARTNERSHIP

COMMUNITY NEEDS ASSESSMENT OF SAN JUAN COUNTY

Completed March, 2008

Compiled and Written by
Natalie F. Salvatore, Ph.D. and Shannon R. Dee
for
San Juan County Partnership, Inc.

Commissioned by:
San Juan United Way
San Juan Regional Medical Center
San Juan County Indigent Fund
City of Farmington, CDBG Funds

San Juan County Partnership
3535 E. 30th Street, Ste. 239
Farmington, NM 87402
505-566-5867
Email sjcp@sjcpartnership.org
www.sjcpartnership.org

Cover design by Charlene Anderson, Creative Geckos

ACKNOWLEDGEMENTS

We would like to thank everyone who participated in making this project possible, including survey respondents, interviewers/callers, sponsors, San Juan County Partnership staff, and the local business, libraries, and chapter houses that facilitated survey administration. In addition, we wish to express appreciation to the organizations that make county-level social indicator data accessible, and to those organizations that took extra time upon request to provide unpublished, recent county-level data: Juvenile Justice Services and Protective Services of New Mexico Child, Youth and Family Department; New Mexico Office of the Medical Investigator; New Mexico Department of Education; Northern Navajo Medical Center; the Aztec Magistrate Court; the San Juan County Sheriff's Office; and the local area Senior Centers.



San Juan County Partnership

Working together with people of all ages
and cultures to develop community
wellness and prevention awareness.

CONTENTS

- I. Executive Summary 1**
- II. Methodology 3**
- III. Demographics 7**
- IV. Topic Sections 9**
 - 1. DWI, Alcohol & Other Substance Abuse 11
 - 2. Health & Wellness 23
 - 3. Economics & Housing 35
 - 4. Crime & Safety 49
 - 5. Transportation, Access to Services & Recreation 57
 - 6. Education 65
 - 7. Environment 71
- V. Summary, Conclusions & Recommendations 75**
- Appendix A: Data Sources & References 81*
- Appendix B: Community Concerns 89*
- Appendix C: Household Concerns 90*
- Appendix D: Key Informant Survey Results 91*
- Appendix E: Respondent Survey Instrument 97*
- Appendix F: Key Informant Survey Instrument 107*
- Appendix G: Phone Protocol 113*
- Appendix H: Postcard 115*

I. EXECUTIVE SUMMARY

Purpose

The purpose of this county-wide community needs assessment is to help identify and prioritize areas of greatest need in San Juan County. It is a partial replication of past assessments conducted every four years since 1996 for San Juan County Partnership.^{1, 2, 3} This report summarizes and integrates findings from two surveys, along with relevant social indicator data collected by state, local and national agencies and organizations, to paint a comprehensive picture of the priorities in our community. The goal is that this document will be useful to a variety of service agencies, government entities, schools, businesses, and organizations throughout the county for purposes of planning, fundraising, and channeling resources where they are needed most.

How Data Were Obtained & Key Findings

This community needs assessment utilized two surveys. A Respondent Survey was completed by a random, representative sample of 402 residents throughout San Juan County. A Key Informant Survey was completed by 30 members of the community who are knowledgeable about the needs of San Juan County residents, and who represent a variety of sectors, including health and human services, government, or business aspects. Survey results that contributed to how issues were prioritized are as follows:

- **Community Concerns – Respondent Survey.** In order to identify top county problems and priorities, as perceived by residents, the first section of the resident survey asked residents to rate a list of community concerns. The highest-rated priority community concerns were drunk driving, alcoholism and drug abuse. The next highest priority concerns were crime and violence.
- **Personal Household Concerns – Respondent Survey.** The respondent survey next asked residents to rank personal household concerns, according to whether it was experienced as a problem for them or for someone in the household. The highest priority personal household concerns were problems related to health, including anxiety or stress, medical insurance and having money to pay for medical care. The next highest priority problems were related to having enough money to buy basic essentials.
- **Community Service Needs – Key Informant Survey.** According to key informants, the highest rated community service needs in San Juan County are affordable housing, particularly availability of affordable rental housing, as well as housing assistance, both short- and long-term. Transportation was a high-rated concern, especially for elderly and disabled persons, and was also rated as a major barrier to accessing services.

Top Five Priorities

- 1.** DWI, alcohol and substance abuse problems are the highest priority community concerns. These issues are discussed in *Section 1: DWI, Alcohol & Other Substance Abuse*.
- 2.** Mental health issues of anxiety and stress, health care services, and financial strain, are the most pressing personal household problems. These are covered in *Section 2: Health & Wellness*.
- 3.** Affordable housing is an increasing need, and is the highest rated community service need in San Juan County, according to key informants. Energy efficiency is the highest housing upgrade need identified by residents. See *Section 3: Economics & Housing*.
- 4.** Crime, safety, and family violence are prominent concerns among San Juan County residents. See *Section 4: Crime & Safety*.
- 5.** Better access to and awareness of existing services for everyone and particularly for high-need or less-mobile populations are consistently identified needs. These are delineated in *Section 5: Transportation, Access to Services & Recreation*.

How this Report is Organized

This report is designed to serve as a resource that is accessible, with numbered sections organized conceptually, based on the priority needs identified by county residents and key informants.

Each section begins with a brief summary, followed by three content areas: (1) relevant social indicator data, (2) a summary of the items from the Respondent Survey that are related to the topic or priority, and (3) related community service needs from the Key Informant Surveys, as they are ranked within related topic categories.

The information presented in each section is intended to give special focus to a particular topic area, with the understanding that many of the subjects discussed impact each other. Cross referencing is encouraged. Comparisons are facilitated by the consistent section-based structure, with data sources and complete data from surveys in the appendices.

II. METHODOLOGY

This Needs Assessment is a partial replication of previous county-wide community needs assessments conducted for San Juan County Partnership (1996, 2000, and 2004). In order to optimize the ability to make year-to-year comparisons, the general approaches for collecting data have been held generally consistent, with a few exceptions as noted below. As such, this report integrates findings from three distinct data sources to paint a comprehensive picture of the needs in San Juan County:

1. *Social Indicator Data* from national, state, and local agencies and organizations;
2. *Respondent Survey* completed by a randomly chosen sample of 402 San Juan County residents who are generally representative of the county demographics;
3. *Key Informant Survey* completed by 30 members of the community who are knowledgeable about certain aspects of the county, and who represent different domains, including health and human services, government, and business agencies.

These approaches for determining the needs of a community possess a high degree of validity, and used together they lend corroborating support to the process of identifying and prioritizing needs. In other words, where there is considerable overlap between priorities identified by various sources, one can more confidently draw conclusions.

Social Indicator Data

Social indicators presented in this report were selected on the basis of four criteria. First, every effort was made to obtain as recent data as possible, but it must be recognized that there is a time lag in the collecting and publicizing of social indicator data. For instance, public health data from two or three years prior is considered *current*. There are exceptions, and more recent data are reported where available. Second, extensive effort was made to obtain archival data, from five- to ten-year periods, in order to depict any trends in the data. To this end, priority was given to data measures collected from the *same agency over time*, to increase the likelihood of uniformity and consistency of the data, and therefore, of the veracity of apparent trends. Third, whenever possible, *numbers* were calculated into *rates*. As you will see, the population of San Juan County has grown considerably over the last 10 to 12 years. Moreover, it is optimal when data can be compared to other communities, and to state and national rates. Meaningful comparisons over time and between communities of different sizes can only be made by comparing rates, not numbers. A rate is calculated as the number of occurrences divided by the total population size, then multiplied by the population standard (e.g., 100,000). The value is then expressed as a “rate per 100,000 population.” In this way, population has been “ruled out” or accounted for when looking at changes over time. Fourth, social indicators were chosen *selectively*. Emphasis was given to indicators that best represent the phenomena of interest. Invaluable guidance for the selection of indicators was obtained from publications by the National Association of Planning Councils,⁴ the United Way “State of Caring Index,”⁵ and the Child Trends DataBank.⁶

Respondent Survey

As noted, for the most part, the survey methodology used in San Juan County Partnership’s previous Needs Assessments was generally replicated in the current assessment, allowing for straightforward year-to-year comparisons. A random sample of San Juan County residents were telephoned, inviting them to participate in a face-to-face survey interview. An initial contact list was purchased from a national database managed by “W3

Data/White Pages,” the database used for directory assistance. This allowed for the largest, most up-to-date list of telephone contacts from which random lists were drawn in such a way as to proportionally represent areas of the county. (See *Demographics* for a description of characteristics of the survey sample.)

Calling/Interviewing Protocol

A dedicated team of 12 interviewers made calls and conducted 30-minute interviews with residents throughout San Juan County over the course of 2½ months, from early October to mid-December 2007. Interviews were set up at locations acceptable to both interviewer and respondent. Unlike past assessments, the interviewers were also the callers. (The 2004 Needs Assessment hired separate individuals to call and to conduct interviews.) Each interviewer was given a telephone contact list from which to call and to schedule their own interviews. If they were unable to schedule an interview because of timing, they tentatively scheduled the interview for a different interviewer. (See *Appendix G* for complete interview and calling protocol guidelines.)

Two main challenges were inherent in this process, which are typical to this particular kind of survey methodology. First, making cold-calls to residents was exceedingly difficult to sustain; and second, the advent of “no-shows” was quite frustrating. Overall, the success rate of calls was relatively high: one hour of calling resulted in an average of one scheduled interview. However, some caller/interviewers were more successful at eliciting scheduled interviews, and all interviewers experienced the discouragement in making calls over stretches of several hours with limited success. Suffice it to say that the combined challenges of making calls and no-shows proved frustrating.

Three of the 12 interviewers were Navajo speakers who were able to work with Chapter House Coordinators and other representatives of the Navajo Nation to ensure a representative sample of respondents from Navajo communities. A total of 402 county residents were surveyed, and every respondent was offered a \$15 gift card for completing the survey.

Postcard Protocol

In addition to the difficulties of the telephone method, as described above, there is an inherent limitation in the approach of contacting people by telephone. Specifically, it is now estimated that 20% of San Juan County residents do not have land-line telephone service (U.S. Census Bureau, 2006 American Community Survey). To compensate for the difficulties and limitations, a unique method was employed as a supplement to the standard methodology, thus testing out an additional strategy for reaching potential respondents. A postcard was sent to 4,000 San Juan County households, inviting recipients to complete a 30-minute survey. The postcard provided six dates and locations where the Needs Assessment staff would be available to conduct surveys. If none of the times was convenient, the postcard included contact information to call for an appointment. (See *Appendix H*.)

The postcard recipients were randomly chosen as follows. In order to specifically target residents who do not have land-based telephone service, an additional contact list was obtained for 1,000 resident households, randomly drawn from a list of 7,648 households *with* address information, but for whom phone numbers were not available. This ensured that the method was reaching at least some residents who did not have land-line phone service. In addition, 3,000 addresses were randomly generated from the W3/White Pages database of contacts, explained above, which included address as well as telephone information. This method allowed for reaching out to a greater diversity of residents who would otherwise not have been reached by the land-based telephone method alone.

Upon arriving with their postcard invitation at the designated location, respondents were asked if they would like to have an interviewer administer the survey and read it to them, or if they would prefer to fill out the survey themselves. With a few exceptions, most respondents preferred to fill out the survey themselves. A total

of 100 surveys were collected using the postcard method. The respondent samples for the two survey protocols were similar in terms of demographics, income and ethnicity, and the two methods did not elicit different results overall which could be attributable to the survey method, with the exception noted below regarding some of the “sensitive questions” (*Section E*).

Revisions to the Survey Instrument

The survey instruments from previous Needs Assessments, and from the current study, contained two core sections (*Sections A & B*) that were unchanged, with one minor exception. An item (“Available housing”) was added to the Community Concerns section (*Section A*), replacing an item deemed less useful (“Tension between the haves and have-nots”). The current survey includes an expanded Health Section (*Section C*), two completely new sections devoted to personal housing and financial concerns (*Sections F & G*), and a unique section (*Section D*) dedicated to perceptions of high-school aged youth. The “Sensitive Questions” (*Section E*) (described below) and “Demographics” have remained essentially the same throughout assessment years allowing for comparisons over time. The only change made to “Demographics” was that respondents were asked to indicate their “Highest grade or year of school completed.” (See *Appendix E* for the entire Respondent Survey instrument.)

A caveat about year-to-year comparisons of the respondent survey is important. In particular, the method employed in the year 2000 Needs Assessment, a “follow-up” study, was different in that it included a smaller number of residents (n=156) selected via a convenience sample. The precision of measurement was not as accurate, therefore, and more caution should be taken when making comparisons with the 2000 results. Because the methodology used in 1996, 2004, and the current study were more similar, with larger numbers (n>350) of randomly selected respondents, one can more confidently generalize from the sample of respondents to San Juan County residents, and year-to-year comparisons of the ranking of items in 1996 and 2004 surveys can be made with greater confidence.

Sensitive Questions

For the general interview protocol, the “Sensitive Questions” section (*Section E*) of the Respondent Survey was replicated from the 2004 survey, in both content and method of delivery. This section consisted of a series of eight “sensitive questions” considered either more personal or perceived as socially unacceptable. Four questions pertained to domestic violence and abuse, and four pertained to heavy alcohol use, other substance abuse, and drinking and driving. The manner of asking the questions allowed for private reporting, without the interviewer having to ask and record answers directly. The respondent was handed a tape player and headset to listen to the pre-recorded questions, in their preferred language, and were given a sheet on which to mark their responses.

For the postcard protocol, a different method was developed, since survey locations were public settings, and it was anticipated that more respondents in this protocol would be filling out the survey themselves. In order to increase the feeling of confidentiality in a public setting, sensitive questions were provided on a folded sheet of paper placed inside the survey. Respondents were instructed to circle the letter (A, B or C) at the top of their blank answer sheet which corresponded to the letter on their folded sheet of questions, and to mark their responses with either a plus (+) to indicate “Yes” or a minus (-) to indicate “No.” Upon completing the survey, they placed the folded sheet of questions into a separate box, and put their completed survey into a blank envelope. This method gave respondents a higher degree of privacy, reducing the chance that someone nearby would be able to determine their answers. It proved to be a viable alternative method for presenting personal questions. Indeed, the percentage of “yes” responses to some of the sensitive questions was substantially higher than in the pre-recorded tape and headset method, as will be described in subsequent sections.

One additional change was made to the survey. In previous iterations, a separate section asked respondents to indicate who they would go to for help for problems listed in Personal Household Concerns (*Section B*). Previous surveys presented the entire list of personal household problems a second time, and asked residents where they would go for help, hypothetically speaking, whether or not they actually had the problem. In the current survey, residents were asked if and where they went for help only for those problems they rated as a “3” or, as a “Major problem” for them or someone in their household. This was done, in part to reduce the length of the survey and also to gather responses based on issues that respondents had actually experienced.

Results from the current survey showed a different pattern of help-seeking. On past surveys, “family and friends” were listed most often as sources of help. The current survey suggests that when people are seeking help for problems they actually have, they typically “go to the source.” For example, if they have problems with a child at school, they go to the school personnel. For problems considered more “personal” in nature, with a few exceptions described in subsequent sections of this report, respondents typically indicated that they didn’t seek help, but rather simply tried to work it out themselves or within their families.

Key Informant Survey

The key Informant survey collected information from representatives of the community deemed knowledgeable about the needs of residents in the county, and who work in different sectors, including healthcare, social service agencies, government offices, education, business, clergy and the military. Through their contact with residents of the county, key informants are in a position to formulate knowledge of services needed and services met. They were asked to rate 109 services that were organized into meaningful categories, according to the degree to which these services are High, Moderate, or Slight Need, Met Needs or Not Needed. They were also asked open-ended narrative questions to describe service areas or related issues in need of expansion or creation. A total of 72 key informant surveys were mailed out with a self-addressed, stamped envelope; 30 surveys were completed and returned. The survey instrument remained essentially unchanged from previous years. (See *Appendix F* to see the entire Key Informant Survey.)

Additional Data Sources

The above surveys were successful at gathering information from a representative sample of San Juan County residents and from community members who are knowledgeable about needs in the county. However, the methodology would not result in interviews with persons who are homeless, and it also tended to be more successful in eliciting participation from older residents. In order to round out the data collection, focus groups with two specific populations were conducted:

- 28 participants attending a local homelessness fair completed customized interview/surveys. For a complete description of the method and the results, see *Economics and Housing: Target-Population Survey*.
- 35 youth participated in two separate focus groups that utilized a unique group technique that allowed for both group and individual input about county problems and priorities. The 18-25 year old population represented an important target group because they tended to be under-represented in the sample that relied exclusively on the land-based telephone method, as older residents were generally more receptive to completing the survey. For a complete description and results, see *DWI, Alcohol & Other Substance Abuse: Youth Focus Group*.

In addition, an investigation of transportation and other services available for elderly and less mobile residents was conducted to gain a clear picture of services that are available. See *Transportation, Access to Services, and Recreation: Services Survey* for a complete description and results.

III. DEMOGRAPHICS

San Juan County has experienced steady population growth in recent years. It is the 4th most populous county and is one of the fastest growing areas in New Mexico. In 2006, San Juan County had an estimated population of 126,473 residents,⁷ which represents an 11.1% increase from April 1, 2000 to July 1, 2006, compared to an increase of 7.5% for New Mexico’s population. Continuing a steady, moderate growth rate, the projected county population for the year 2025 is 148,315.⁸

Of the population, 29% are under 18, and 9.8% are 65 years old and over. The population includes roughly equal proportions of females (50.3%) and males (49.7%). The median age in 2006 was 30.9. It is estimated that 18% of people were in poverty in 2006. The median age range of adults is 35-44 years.⁹

According to 2006 Census estimates, 58.5% of the population describe themselves as White, 38.2% describe themselves as Native American, and 17% indicate they are of Hispanic or Latino origin. An additional 1.8% report two or more races, and 1.0% describe themselves as Black, followed in percentages by Asian, 0.4%, Native Hawaiian or Other Pacific Islander, 0.1%. To be clear, note that percentages do not add up to 100%, as Hispanic origin can overlap with racial categories. In other words, people of Hispanic origin may be of any race. The percentage of the population that is “White, not Hispanic” is a minority, 43%.⁹

In 2006 there were approximately 38,500 households in San Juan County, with an average household size of 3.3 persons. Families comprised 75% of the households in San Juan County, including both married-couple families (53%) and other families (22%) with female- or male-headed households. Non-family households made up 25% of all households, most of which were people living alone, although some (2%) included people living in households in which no one was related to the householder.⁷

Characteristics of the Resident Survey Respondents

Of the 402 respondents in the resident survey sample, 50.6% described themselves as White, 31.6% as Native American, and 12.9% as Hispanic. An additional 4.9% selected “other” or chose more than one race/ethnicity. Of the respondents, 54.2% are female, 45.8% male. The median age range of the sample was 41-50 years. Effort was extended to obtain representation from rural areas of the county, and from areas on the Navajo Nation. Target numbers of surveys were based on census population estimates for zip codes, and a target goal of 400 resident surveys. (See Table III.1.) Given a demographic profile which resembles county demographics and population distribution, coupled with a random sampling technique, the sample is considered to be representative of San Juan County adult residents.

Table III.1. Zip Code of Residence (Only cities of 5 or more respondents are shown.)

City	Zip Code(s)	Target	Actual	% of Sample
Farmington	87401 & 87402	183	180	45.7%
Aztec	87410	58	53	14.6%
Bloomfield, Huerfano	87413	47	57	11.6%
Shiprock, Beclabito	87420	30	39	7.6%
Kirtland	87417	19	21	4.8%
Fruitland	87416	14	10	3.5%
Nageezi	87037	3	10	0.9%
Flora Vista	87415	7	9	1.6%
Waterflow	87421	5	5	1.2%

Characteristics of the Key Informant Survey Respondents

There were 30 respondents to the Key Informant Survey, including 13 women and 17 men. Their average age range was 41-50 years. They had resided in San Juan County an average 20 years. When asked to describe their service area, most respondents reported that they serve the entire county. They represented a variety of sectors of the community, as follows:

- Government agencies (3)
- Businesses (4)
- Education (4)
- Health care (5)
- Social Service (13)
- Military (1)

IV. TOPIC SECTIONS

Introduction

The following seven sections are organized conceptually to provide special focus to particular topic areas. Each section includes a brief summary of section highlights, followed by social indicator data, and summaries of related items from the Respondent Survey and the Key Informant Survey. The order of sections was determined by the ranking of priority needs, as outlined in the *Executive Summary* and in the *Conclusions*.

Sections are as follows:

1. *DWI, Alcohol & Other Substance Abuse*
2. *Health & Wellness*
3. *Economics & Housing*
4. *Crime & Safety*
5. *Transportation, Access to Services & Recreation*
6. *Education*
7. *Environment*

1. DWI, ALCOHOL & OTHER SUBSTANCE ABUSE

The issue of DWI, alcohol and other substance abuse remains the highest priority issue in San Juan County, as identified in this and all three prior county-wide community Needs Assessments conducted by San Juan County Partnership (1996, 2000 and 2004).^{1, 2, 3}

Why is it important? Alcohol-related deaths are devastating to a community and are only the tip of the iceberg of the wide-ranging and associated consequences. The New Mexico Statewide Epidemiological Profile summarized:

“The effects of alcohol abuse are not limited to death, but can also be linked to domestic violence, crime, poverty, and unemployment, as well as chronic liver disease, motor vehicle crash and assault injuries, mental illness, and a variety of other medical problems. For every alcohol-related death there are many persons (and their families) living impaired by serious morbidity and reduced quality of life due to chronic alcohol abuse”¹⁰ (p. 19).

While the social indicators in this section focus on injury and deaths directly related to alcohol or other substance abuse, keep in mind that these data are *indicators*, as noted above, of a variety of associated negative consequences.

Section Highlights

- Consistent with past county-wide Needs Assessments, issues of “Drunk driving,” “Alcoholism,” and “Drug abuse” were identified as highest-priority community concerns by an overwhelming majority of San Juan County residents.
- Key informants ranked prevention and treatment of “other drug use” as top-priority issues in this category. Compared to the 2004 Needs Assessment, they conveyed a perception that existing programs are beginning to meet some of the needs related to DWI and alcohol abuse.
- While acknowledging the severity of these concerns, there are a number of positive trends that are cause for optimism. Over the last 10 to 12 years, there has been a gradual decrease in the rate of alcohol-involved injury crashes and fatalities. This section also describes evidence of “active” DWI enforcement by San Juan County law enforcement.
- A unique section revealed substantial community misperceptions of youth risk behaviors, pointing to a potentially positive prevention focus through correcting these misperceptions.

SOCIAL INDICATORS**DWI, ALCOHOL & OTHER SUBSTANCE ABUSE**

San Juan County ranks among the highest counties in New Mexico for alcohol-related deaths, particularly alcohol-related motor vehicle fatalities and other injuries. And, New Mexico consistently ranks among the highest states for alcohol-related deaths.

For the years 1999-2003, New Mexico had the second highest death rate from alcohol-related causes with 56.7 alcohol-related deaths per 100,000. Over this period, San Juan County was ranked 10th among New Mexico's 33 counties, with an alcohol-related death rate of 61.5.¹⁰

Alcohol-Related Chronic Disease

One component of alcohol-related deaths is deaths due to chronic diseases (such as chronic liver disease), which are associated with *chronic* alcohol abuse. Averaged across the years 1999–2003, San Juan County ranked 9th among the state's 33 counties for deaths due to all types of alcohol-related chronic diseases, with a rate of 34.4 deaths per 100,000 – about 2 ½ times the national rate.¹⁰

Chronic Liver Disease (CLD) is a chronic disease for which excessive, chronic alcohol consumption is the leading cause. San Juan County's death rate due to CLD is 15.7 deaths per 100,000, compared to New Mexico's death rate of 14.2 deaths, and the national rate of 9.3.¹¹

Alcohol-Related Injury Deaths

Deaths due to alcohol-related injuries, a category that includes motor vehicle crash fatalities, are associated with *acute* alcohol abuse.

Table 1.1. Injury* Death Rates (Alcohol and Drug-Induced) by Sex for San Juan County and New Mexico, 2005; U.S., 2003

	Injury Death Rate			Rate of Alcohol-Induced Injury Deaths			Rate of Drug-Induced Injury Deaths		
	Both Sexes	Males	Females	Both Sexes	Males	Females	Both Sexes	Males	Females
San Juan	97.2	146.6	51.6	18.7	29.4	8.7	10.5	12.0	9.0
New Mexico	92.3	134.3	52.9	17.0	26.5	8.2	18.9	25.1	12.9
U.S.	56.0	n/a	n/a	7.0	11.0	3.3	9.9	12.8	7.0

SOURCE: New Mexico Department of Health

*Injury deaths include unintentional, accidental deaths (such as falls, drowning, and motor vehicle accidents) and intentional injury (suicide and homicide).

San Juan County has a high death rate due to injuries, somewhat higher than New Mexico's rates overall, and extremely higher than the United States. San Juan County also has higher rates of alcohol-induced injury deaths, about 2.5 times the national rate for both males and females.

To gain a more complete picture of the degree of alcohol-involvement in injury deaths in San Juan County, the table below summarizes findings by the New Mexico Office of the Medical Investigator in 2006.

Table 1.2: San Juan County Injury Death Cases* investigated by the Office of the Medical Investigator, 2006

Manner of Death	Cases Investigated	Presence of Alcohol			% Tested Positive (% is of those tested)
		Yes	No	Not Tested	
Accident	83	30	27	26	52.6%
---(Motor Vehicle)	(39)	(21)	(16)	(2)	(56.8%)
Homicide	14	6	5	3	54.5%
Suicide	25	10	13	2	43.5%
	122	46	45	31	50.5%

SOURCE: New Mexico Office of the Medical Investigator

* These numbers are for "County of Pronouncement," and do not represent all San Juan County injury deaths, since not all injury deaths on the Navajo Nation are investigated by New Mexico's OMI.

Of the 122 injury death cases examined by the OMI that were pronounced dead in San Juan County, 50.5% tested positive for the presence of alcohol. Of note is the number of alcohol-involved pedestrian deaths. Of nine pedestrian deaths investigated, 7 (77.8%) tested positive for alcohol.¹²

Alcohol-Involved Motor Vehicle Crashes

Fatalities

There are three interrelated components to consider when looking at alcohol-related crash fatalities: (1) the overall motor vehicle fatality rate; (2) the rate of alcohol-involved motor vehicle fatalities; and (3) the percent of alcohol involvement. Taken separately, San Juan County has high rates of all three.

1. **San Juan County has a high rate of motor vehicle fatalities, due to crashes of all types.** In 2007, there were 40 motor vehicle fatalities in San Juan County. Between the years of 1996 to 2007, the number of motor vehicle fatalities ranged from a high of 50 in 1996 to a low of 27 in 1999.¹³ Fatality rates due to crashes of all types are higher in San Juan County than both New Mexico overall and the United States. In 2006, San Juan County's death rate due to motor vehicle crashes was 35 deaths per 100,000, compared to New Mexico's rate of about 25 deaths per 100,000, and the U.S. rate of 14.¹⁴
2. **San Juan County has a high rate of alcohol-involved motor vehicle fatalities.** Of the 40 fatalities in San Juan County in 2007, 23 died in alcohol-involved crashes.¹³ The rate of alcohol-related fatalities in San Juan County is consistently higher than the rates in New Mexico and the U.S. In 2006, San Juan County's death rate due to alcohol-involved motor vehicle crashes was 18 deaths per 100,000, compare to New Mexico's rate of about 10 deaths per 100,000, and a national rate in 2004 of 5.76.¹⁵
3. **San Juan County has a high percent of alcohol-involvement in crash fatalities.** Over the last 10 years, the percent alcohol involvement in San Juan County motor vehicle fatalities has ranged from a high of 77% in 2001 to a low of 44% in 2005. For 2007 San Juan County's fatalities, the degree of alcohol involvement was 58%. In New Mexico, it was 41%. Nationally, it is estimated that alcohol was involved in 39% of fatal crashes.¹⁶

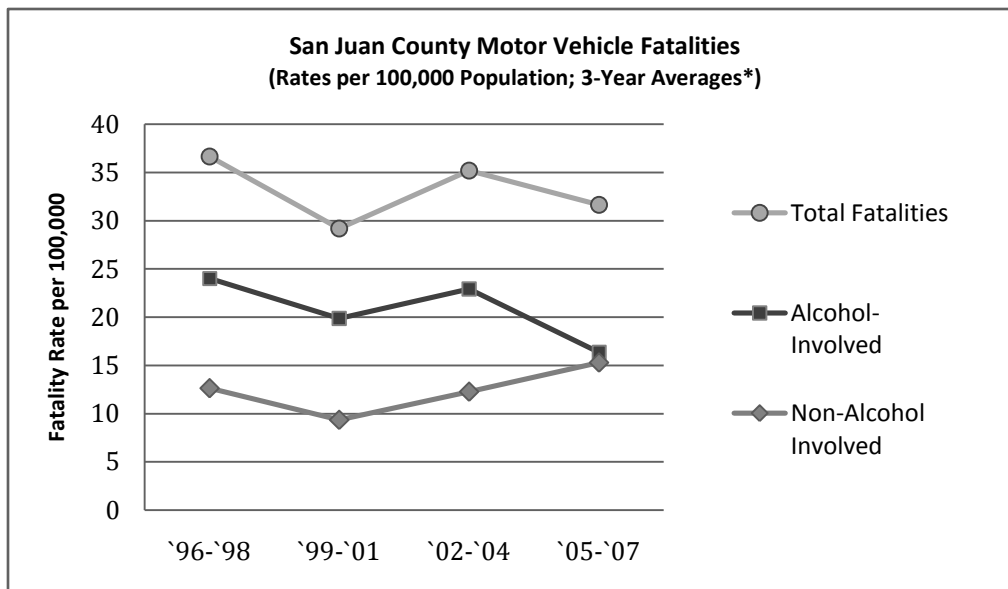


Figure 1.1.
San Juan County Motor Vehicle Fatality Rates per 100,000 Population, with Total Fatalities, Alcohol and Non-Alcohol Involved Fatalities

There has been a gradual decrease in the rate of alcohol-involved fatalities in recent years.

SOURCE: Traffic Safety Bureau, as processed by the Division of Government Research

**Rates for 3-year averages were calculated by adding values for years divided by population estimate for the middle year.¹⁷*

Alcohol-Involved Injury Crashes

San Juan County also has a high rate of alcohol-involved motor vehicle injury crashes. The rate of injury accidents in San Juan County in 2006 was 98 per 100,000 population, compared to a rate of 61 in New Mexico. However, over time, San Juan County's rate of alcohol-involved injury crashes has shown a marked decrease. In 1996, the rate was 180.¹⁸

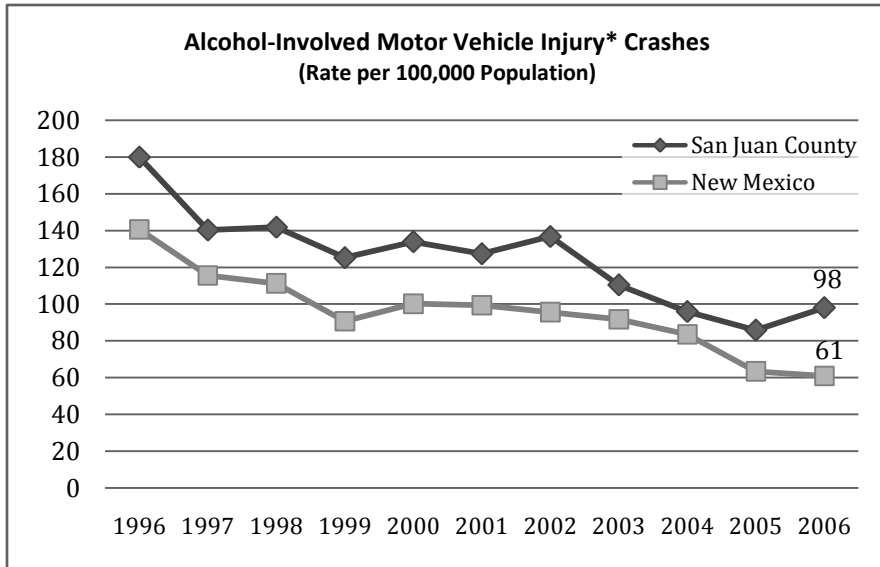


Figure 1.2.
Motor Vehicle Injury Crash Rates per 100,000 Population for San Juan County and New Mexico, for years 1996 – 2006

The graph illustrates a promising trend in San Juan County, and in New Mexico overall, of fewer alcohol-involved injury crashes.

SOURCE: DWI Resource Center

*Injury crashes are those involving non-fatal injury; property-damage only crashes are not included.

DWI Arrest Rates

According to data made available online by the DWI Resource Center, there were a total of 1,573 DWI arrests in San Juan County in 2006.¹⁹ Table 1.3 below shows the number of arrests, as well as the percentage of arrests made from alcohol-involved crashes, along with the percent of those arrests that resulted in convictions.

The DWI Resource Center defines “active” DWI enforcement as “arrests of impaired drivers for traffic violations.” *Passive* enforcement is defined as those “arrests resulting from crashes.”²⁰ As can be seen from the table, the level of active DWI enforcement in San Juan County in 2002 to 2006 has ranged from 89.7% in 2002 to 85.1% in 2006. Overall, this suggests a high level of active DWI enforcement by law enforcement in San Juan County.

Table 1.3. DWI Arrests and Convictions, San Juan County and New Mexico, 2002-2006

Year	DWI Arrests	% DWI Arrests from Crashes		% DWI Convictions	
	San Juan County	San Juan County	New Mexico	San Juan County	New Mexico
2002	2,127	10.3%	16.3%	84.0%	65.5%
2003	2,014	11.0	15.3	81.4	63.5
2004	1,769	11.0	14.8	82.1	65.0
2005	1,800	12.4	15.4	81.4	65.4
2006	1,573	14.9	14.2	64.9	47.8

SOURCE: DWI Resource Center

Youth Alcohol Use, Drinking & Driving, and Motor Vehicle Crashes

According to the New Mexico State Epidemiological Profile, motor vehicle-related injuries are the leading cause of death among 15 to 19 year olds.¹⁰ In 2006, San Juan County ranked 2nd among New Mexico 33 counties for the rate of alcohol-involved crashes with teen drivers (15 to 19 year olds). The same year, San Juan County also ranked 2nd in the state for the rate of alcohol-involved crashes with young adult drivers (20 to 24 year olds.). Approximately 12% of the DWI arrests in San Juan County are underage drinkers. In 2001-2003, 3% of the DWI arrests were juveniles (under 18 years); 9% were 18 to 20 years old.²⁰

In order to better understand alcohol-related behaviors among youth, the following indicators are taken from the results of San Juan County's 2005 New Mexico Youth Risk and Resiliency Survey (YRRS).²¹ The YRRS is a statewide survey of public school students, grades 9-12. Additional results of the YRRS are described later in this section, as they are compared to community perceptions of youth from the current Resident Survey.

Episodic Heavy Drinking

Episodic heavy drinking, or "binge drinking," by youth is associated with a range of negative outcomes, from poor academic performance to higher rates of injury and death. In 2005, 1 out of 4 San Juan County high school students (24.9%) reported binge drinking, defined as having 5 or more drinks of alcohol within a couple of hours. This is similar to the national percent of 25.5%. It can also be said that 3 out of 4 San Juan County youth do *not* engage in binge drinking.

Heavy drinking, as well as other high-risk behaviors such as drinking and driving, and riding with a drinking driver, are all significantly lower for those high school students who report having caring and supportive relationships with adults in their family, at school, or in their community. In other words, a positive relationship with an adult is a *protective* factor. Among San Juan County high-school students, 62% report having at least one caring, supportive relationship with an adult in their family; 70% report a positive relationship with an adult in their community.

Drinking & Driving

In 2005, 11.9% of San Juan County high school students reported driving after drinking during the 30 days prior to the survey. This means that seven out of eight students did not drive after drinking. This is a rate similar to New Mexico's rate of 12.0%. The national rate is 9.9%.²² Approximately 1 out of 4 high school students in San Juan County (26.3%) reported they rode with a drinking driver during the month prior to the survey.

First-Time Use

The age at which a young person first has an alcoholic drink is strongly associated with alcohol dependence or abuse later on. According to an October, 2004 National Survey on Drug Use and Health Report, "Persons reporting first use of alcohol before age 15 were more than 5 times more likely to report past-year alcohol dependence or abuse than persons who first used alcohol at age 21 or older."²³ Among San Juan County high school students, 32.8% reported having had a first drink before age 13, similar to the New Mexico rate overall of 30%, and somewhat higher than the national rate of 25.6%.²²

RESPONDENT SURVEY**DWI, ALCOHOL & OTHER SUBSTANCE ABUSE****Community Concerns**

The table below summarizes the percent of respondents who rated the issue as either a moderate or a major problem in San Juan County. These three issues are the top three ranked concerns overall; no other issue was rated by more than 90%. The numbers in parentheses indicates rank overall. See *Appendix B* for a complete list.

Table 1.4. Community Concerns Related to DWI, Alcohol, or Other Substance Abuse Issues, Rated as either a Moderate or Major Problem

ISSUE	2008	2004	2000	1996
Drunk Driving	95.3% (1)	94.5% (1)	94.3%	100%
Alcoholism	94.0% (2)	92.4% (2)	91.3%	93%
Drug Abuse	92.8% (3)	89.8% (3)	89.6%	94%

As can be seen from the table, issues of “Drunk driving,” “Alcoholism,” and “Drug abuse” have consistently been identified as either moderate or major community concerns by an overwhelming majority of San Juan County residents over the past 12 years.

Personal Household Concerns

Recall that the second section of the Respondent Survey asked respondents to indicate the degree to which they or someone in their household experienced various challenges or concerns. The one item directly related to DWI, Alcohol or Other Substance Abuse is shown below.

Table 1.5. Personal Concerns Related to DWI, Alcohol and Other Substance Abuse, Rated as Moderate or Major Problem

ISSUE	2008	2004	2000	1996
Alcohol and/or drug problem	19.7% (23)	15.7% (23)	51%	~33.3%

Approximately 1 out of 5 (19.7%) responded that “Alcohol and/or drug problem” was either a moderate or a major problem for them or someone in their household. An additional 8.3% indicated that it was a minor problem.

In addition, those residents who rated the problem as “Major” were asked if they sought help, and if so, from whom. Of the 46 respondents who indicated whether or not they sought help for the problem, 12 (26%) said they had. The most frequently mentioned places they sought help were treatment programs, AA, and the police.

Self-Reported Alcohol / Drug Use, Drinking & Driving

The Personal Health section of the respondent survey included questions about general alcohol and tobacco use. When asked about alcohol use, 27.9% of the respondents indicated that they drink alcohol. Of those who drink, the average number per week was 6.4 drinks. A somewhat smaller percentage, 23.4%, reported that they smoke cigarettes or use tobacco products. Of those who smoke, the average number of cigarettes per day is 12, or approximately half a pack. The most frequently reported amount was “1 pack.” On one additional relevant question in the health section, 1.5% of the respondents reported having a Chronic Liver Condition, a condition, as noted in the social indicator section earlier, that is strongly associated with chronic alcohol use.

Section E of the respondent survey consisted of a series of eight questions considered either more personal or perceived as socially unacceptable. A manner of asking the questions was developed to allow for private reporting, without the interviewer having to ask and record answers directly. (See *Methodology* for more information.) Out of the eight sensitive questions, four pertained directly to heavy alcohol use, other substance abuse, and drinking and driving. The instructions asked the respondent to report on what has happened to them and/or their family in the last 12 months.

- 19.6% of the respondents reported that “a family member had a drug or alcohol problem”
- 8.5% “drove a car or truck after having more than 3 or 4 drinks in a couple of hours”
- 10.8% indicated they had “used illegal drugs”
- 3.5% reported being addicted to prescription medications

These more “sensitive” questions were asked in a way to allow for private reporting, in part because to the extent that something is perceived to be unacceptable or is illegal, it is going to be underreported. An alternative method for asking the questions was developed for those who would be filling out the survey themselves in more public settings. (See *Methodology* for a complete description.) As it turned out, the method proved to be a viable alternative that unexpectedly resulted in higher reporting for some of the items. For example, when filling out the survey themselves, 16% of the respondents reported they had “used illegal drugs,” 33% reported that “a family member had a drug or alcohol problem” and 13% reported they had “drove a car or truck after having more than 3 or 4 drinks in a couple of hours.” The fourth item was similar across methods, with 4% reporting being addicted to prescription medications. Recall that the demographics of those filling out the survey did not differ with the demographic profile of those who were interviewed. Both samples were representative and random samples of San Juan County adult residents.

Community Perceptions of High-School Aged Young People

A unique section of the survey, Section D, asked respondents about their perceptions of high-school aged young people in San Juan County. Given that how a community sees its youth can influence how young people perceive themselves, and in turn, how they actually behave, this section represents an attempt to gain a better understanding of San Juan County residents' perceptions of young people. Survey questions were designed to correspond with questions asked on the YRRS (see *Social Indicators* above) and to elicit general perceptions. Residents rated how many high-school aged youth they thought engaged in risk behaviors, using a 1 to 5 scale, with 1 = Very Few and 5 = Almost All. They also had the option of choosing "Don't Know."

While this is not intended to be a precise measurement, a meaningful, conceptual comparison can be made to estimate the degree of accurate perception vs. misperception, as compared with youth self-reports. Two tables are presented below. The first summarizes the percent of youth who report behaviors related to alcohol/drug use and drinking and driving. The second table presents respondent's perceptions. The shaded areas of the second table highlight the percentages of respondents who generally perceived youth's behaviors accurately. The unshaded areas correspond to general *misperceptions*, either over or under-estimations.

As an example, notice that 11.9% of high-school students reported driving a car after drinking within the past 30 days. This corresponds conceptually to the response, "Very Few." Thus, when asked how many young people *they think* drove after drinking, most residents (about 70%) *misperceive* or *overestimate* how many youth do. (Note, 70% represents the sum of unshaded percentages, on table below, not including those who chose, "don't know.")

Table 1.6. High School Aged Youth in San Juan County, Self-Reported Alcohol-Drug Related Behaviors, YRRS, 2005

Behavior	YRRS Behavior - Defined	% Youth Who Report the Behavior
Current Drinker	Had at least one drink in past 30 days	37.7%
Drove after Drinking	Drove a car after drinking, in past 30 days	11.9%
Rode with Drinker	Rode with someone who had been drinking	26.3%
Meth Use	Used methamphetamines in past 30 days	5.0%
Current Smoker	Smoked cigarettes in past 30 days	31.6%

Table 1.7. Perceptions of Number of High-School Aged Youth Engaging in Alcohol-Drug Related Behaviors

How many youth do you think...?	Very Few=1 (~ <20%)	Some=2 (~ 20-40%)	About Half=3 (~ 40-60%)	Most=4 (~ 60-80%)	Almost All=5 (~ >80%)	Don't Know
Current Drinker	4.8%	18.3%	22.8%	24.6%	14.7%	14.7%
Drove after Drinking	8.1%	23.4%	20.8%	16.5%	9.6%	21.6%
Rode with Drinker	8.4%	19.3%	23.2%	19.5%	9.4%	20.3%
Meth Use	9.4%	26.8%	13.3%	12.0%	6.9%	31.6%
Current Smoker	6.2%	20.8%	23.4%	20.1%	15.0%	14.7%

Note: Shaded areas reflect the range of generally accurate perceptions, relative to self-reported behaviors on the YRRS.

Notice also the numbers of residents who selected "Don't Know," suggesting that they either have had little exposure to information or are simply reticent to guess about something they know little about. The question about past-month use of methamphetamines elicited the most number of "Don't Know" responses.

As community perceptions of youth change over time, these data can be used to track those changes and better understand how positive perceptions of youth might contribute to positive changes in risk behavior.

YOUTH FOCUS GROUP**DWI, ALCOHOL & OTHER SUBSTANCE ABUSE**

In order to garner the voice and input of young people in San Juan County, two focus groups were conducted with a total of 35 students, age 18-25, at San Juan College. The group technique used with the youth focus group allowed individual judgments to be pooled and prioritized effectively. Individuals first created their own list of county needs/problems. Their responses were tallied to form a list of everyone's ideas. In this case a total of 40 county issues were generated. The group next voted to distill the list into the "Top 10 Needs." Finally, each individual selected and ranked the *three* they felt are most important. The results of this last step are shown below as percentages of participants who ranked the issue in the top three.

As can be seen from the table below, the results are quite consistent with other survey results that found substance abuse issues are the highest priority and most prominent community concern in San Juan County.

Table 1.8. Focus Group Rankings from 40 Group-Generated County Problems

ISSUE	Ranked 1 st	2 nd	3 rd	Total	Percent*
DWI (1)	10	5	3	18	51%
Drug Abuse (2)	9	6	2	17	49%
Meth (3)	7	3	3	13	37%
Violence (4)	3	6	4	13	37%
Cost of Living (5)	2	3	4	9	26%
Pollution (6)	1	3	2	6	17%
Educational reform (7)	2	0	3	5	14%
Teen Pregnancy (8)	0	0	5	5	14%
Quality Health Care (9)	1	2	1	4	11%
Underage Drinking (10)	0	2	1	3	9%

*Percent reflects those who ranked the issue as 1st, 2nd or 3rd.

KEY INFORMANT SURVEY**DWI, ALCOHOL & OTHER SUBSTANCE ABUSE****Substance Abuse Services**

The table below summarizes the responses on the key informant survey in the area of DWI, Alcohol and Other Substance Abuse. Recall, on this survey, key informants were asked to rate a variety of service-related community needs according to whether the need was a “High Need,” a “Moderate Need,” a “Slight Need,” “None,” or the “Need was Met”. They also had the option of choosing “Don’t Know.”

Table 1.9. Community Needs Rated as Either Moderate or High Need by 50% or More of Key Informants

SERVICE NEED	%
Above 80%	
Treatment for other substances (marijuana, meth, etc.) (youth)	83.3%
Treatment for other substances (marijuana, meth, etc.) (adult)	83.3%
Prevention of other drug use (marijuana, meth, etc.) (youth)	83.3%
Prevention of other drug use (marijuana, meth, etc.) (adult)	80.0%
50-80%	
Alcoholism treatment (youth)	70.0%
Alcohol use prevention (adult)	70.0%
Alcoholism treatment (adult)	70.0%
DWI prevention (youth)	70.0%
Alcohol use prevention (youth)	66.7%
DWI prevention (adult)	66.7%
Residential substance abuse treatment programs (adult)	63.3%
Residential substance abuse treatment programs (youth)	60.0%
Cigarette smoking prevention (youth)	56.7%

Out of a list of 17 community needs in the category of Substance Abuse Services, the above 13 were rated as either “Moderate” or “High Need” by over 50% or more of the key informants. Compared to 2004, key informants ratings suggest a shift toward the perception that existing programs are meeting some of the needs related to DWI and alcohol abuse. A careful inspection of the pattern of their ratings indicated that the same low number of key informants indicated there was “no need,” but in the current survey, there were more “Need Met” responses, along with more “Don’t know” responses.

Specific Population Groups in Need of Services

Key informants were also asked to rate the degree to which specific populations are in need of service. Alcoholics/drug addicts were rated as the population group with the highest level of need for services in San Juan County. 80.6% of the key informants rated their need for services as either Very or Extremely Serious. The next highest population in need of services, according to key informants, is the poor, with a level of need rated as either “Very Serious” or “Extremely Serious” by 77.4%. (See *Appendix F* for complete survey results.)

Services in Greatest Need of Expansion

In open-ended question format, key informants were asked what services they believed were in greatest need of expansion. They were asked to list services MOST and SECOND MOST in need of expansion. Five of the key informants listed substance abuse-related services as most in need of expansion; 11 listed this service area as the second most in need of expansion. Services related to substance abuse treatment and prevention received far more responses overall than any other single category.

2. HEALTH & WELLNESS

The top three ranked *personal* household concerns for San Juan County residents are those related to health and wellness, with anxiety or stress experienced as the number one personal challenge.

Why is it important? When community members are healthy and resilient, they have higher levels of self-esteem, a sense of coherence (life experienced as meaningful and manageable) and self-efficacy. By extension, they are more able to contribute to building a stronger and more enjoyable community for themselves and future generations.

Section Highlights

- Medical care, teen pregnancy, and dental care remain as the top cluster of *community* health concerns. There is a consistent reporting of anxiety or stress among San Juan County residents. And there is a cluster of consistently highly ranked *personal* household concerns about medical insurance, and the ability to pay for medical and dental services.
- According to key informants, low-cost child care and infant health care have risen, compared to previous years' assessments, to become the highest ranked health-related community needs. Key informants also identified a core cluster of health-care service needs that includes dental care, nutrition counseling, and quality of the environment (a strong contributor to breathing problems and asthma).
- Social indicators in the area of Infant, Child and Maternal health, suggest major challenges, with high rates of poverty and other factors that are related to economic hardship, such as births to single mothers. There are also signs of strengths in early infant health and improvements, such as the steadily declining teen birth rate.
- In the area of Mortality, one of the most striking indicators is the number of deaths due to accidents of all types, including motor vehicle accidents and other unintentional injuries, which are extremely higher in San Juan County than in the nation.
- On the positive side, San Juan County residents are exercising more than was reported in 1996. And overall, they indicate they are in "good health," and give positive ratings of life satisfaction.

SOCIAL INDICATORS**HEALTH & WELLNESS****Infant, Child & Maternal Health**

*"The well-being of children is crucial to any society, both because children represent the future and because of the consensus that it is intrinsically important for children to be healthy and happy."*⁴ National Association of Planning Councils

Table 2.1 below highlights key social indicators in the area of infant, child and maternal health, with state and national comparisons.

Table 2.1. Key Natality Indicators, San Juan County and New Mexico, 2006; U.S., 2004, or Years as Noted

	San Juan County	New Mexico	U.S.
Percent Low Birth Weight Babies (<2500 grams)	7.1%	8.9%	8.1%
Infant Mortality (Infant deaths under 1 year of age, per 1,000 births)	6.1 (2001-2005 average)	6.1 (2001-2005 average)	6.8
First Trimester Prenatal Care	58.5% (2005)	67.1% (2005)	83.9 (2005)
Low or No Prenatal Care	17.7%	11.5%	3.5% (2005)
Teen Birth Rate (Births per 1,000 females, age 15-19)	61.5 (2005)	60.3 (2005)	41
Percent Births to Single Mothers	55.8%	51.2%	35.8%

SOURCES: New Mexico Department of Health; KIDS COUNT Data Books; U.S. Department of Health and Human Services

Low Birth Weight and Infant Mortality

Birth weight serves as a leading indicator of child health. As can be seen from the table above, babies get off to a good start in San Juan County, despite relative insufficiency of prenatal care. The percent of low birth weight babies in San Juan County is a relative strength, consistently below both state and national rates. According to the National Association of Planning Councils, "babies born with a healthy birth weight have lower rates of health and developmental problems."⁴ Similarly, infant mortality, another leading indicator, is generally equal to or below state and national rates.

Prenatal Care

San Juan County mothers and babies do not receive the same level of prenatal care when compared to the U.S. As can be seen in the Table 2.1 above, there are substantial deficits when compared to national indicators. In San Juan County, a much smaller number (58.5%) of mothers receive "first trimester care" (an indication of high-level care) than in the United States overall. Similarly, in San Juan County, 17.7% receive either low or no prenatal care during pregnancy, compared to 3.5% in the U.S.^{25, 26, 27}

Based on data collected during the years 1998-2003 as part of the New Mexico PRAMS (Pregnancy Risk Assessment), and using the Kotelchuck index, only 31.9% of women in San Juan County received "an adequate level of prenatal care."²⁸

Teen Pregnancy

The teen birth rate serves as a leading social indicator of maternal and child health, as well as economic need. Teen pregnancies often result in health problems for both mother and baby, and parenting challenges can create potentially serious social and economic hardship.⁴

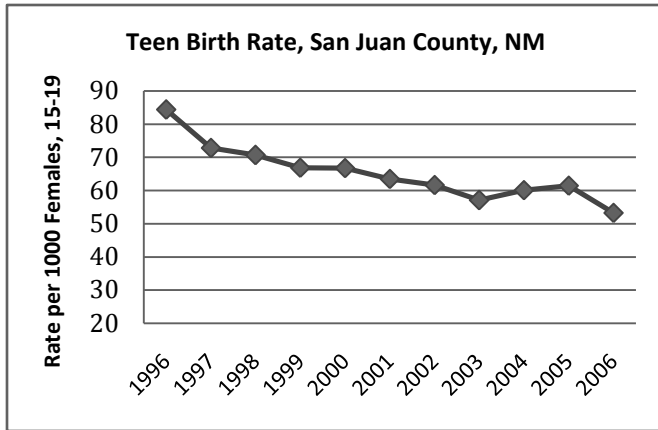


Figure 2.1. Teen Birth Rate per 1,000 Females, Age 15 – 19, in San Juan County, 1996 – 2006

There has been a steady decrease in the numbers of births to teen mothers, since 1996 when the rate was 84.4. During the same time, New Mexico’s rate dropped from a rate of 70.8 in 1996 to 60.3 in 2005.

SOURCE: New Mexico Department of Health

Approximately 15% of all children born in San Juan County are born to teen mothers. In 2005, the teen birth rate in San Juan County was 61.5 births per 1,000 females, age 15 – 19, similar to the teen birth rate for New Mexico of 60.3. While there have been substantial successes in reducing teen pregnancy in New Mexico and San Juan County, the rate is still notably higher than the national average. In 2004, New Mexico was ranked 48th in the nation for teen pregnancy. By contrast, the national teen birth rate in 2004 was 41.²⁹

Births to Single Mothers

The percent of births to single mothers is an indicator strongly associated nationally with economic hardship, and it has been steadily increasing in San Juan County, as well as the state and the nation.

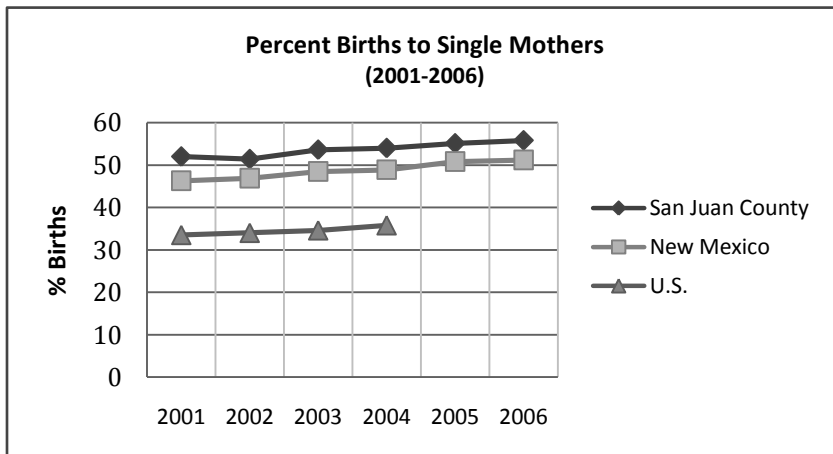


Figure 2.2. Percent of Births to Single Mothers, San Juan County, New Mexico and the United States

Over half of all children born in San Juan County are born to single mothers, compared to approximately one in three for the nation.

SOURCE: New Mexico Department of Health

As an example of economic hardship, in San Juan County in 2006, 12.8% of children under age 18 were living in households that were receiving Supplemental Security Income (SSI), cash public assistance income, or Food Stamps. Of those, 70.3% were in female-headed family households, with no husband present.³⁰

Child Poverty

According to the National Association of Planning Councils, “poverty is at the root of most health and human-service needs, so this measure serves as a leading indicator of need across the country.”⁴ About 1 out of 4 children in San Juan County is living below poverty.³¹ Student participation in free or reduced-price lunch programs is an additional indicator that serves as a proxy indicator for financial hardship. In San Juan County, 63.9% of students receive free or reduced lunches.³²

Table 2.2. Child Poverty, San Juan County and New Mexico, 2006; U.S., 2004, or Years as Noted

	San Juan County	New Mexico	U.S.
Children (<18 years) Living Below Poverty	23.8%	25.6%	19% (2005)
Free or Reduced Lunches	63.9% (05-06 School Year)	52.4% (05-06 School Year)	---

SOURCES: U.S. Census, 2006 American Community Survey; KIDS COUNT Data Books

Food Insecurity

Poverty typically accompanies some degree of food insecurity, or the experience that there is not enough food. When asked on the Pregnancy Risk Assessment survey (PRAMS) whether their family has enough food, 80% of women said they did, leaving 20% who are experiencing some degree of food insecurity.³³ Similarly, on the state-wide Youth, Risk and Resiliency Survey (YRRS), 13.1% of high school students in San Juan County report food insecurity, with 10.1% reporting there is *sometimes* not enough food to eat, and 3% indicating that there is *often* not enough food to eat for themselves and their family.³⁴

A study of the impact of hunger and food insecurity on children’s physical and mental health, Weinreb, et al, found that severe child hunger was found to be associated with both higher rates of chronic illness and psychiatric distress.³⁵

Child Abuse

As summarized by the National Association of Planning Councils, “Child abuse and neglect are community problems that cross socioeconomic boundaries and have profound effects on the safety and well-being of children. Without support and intervention, at-risk children can remain unsafe, which can result in tragic consequences.”⁴

In 2007, according to Child, Youth and Family Protective Services Division, there were 1,051 investigations of child abuse allegations in San Juan County. Of these, there were 234 substantiated cases, or cases in which it was determined by the social worker conducting the investigation that the allegation was true. The remaining 817 cases were unsubstantiated.³⁶

Mortality - Leading Causes of Death

Table 2.3 below lists the eight leading causes of death in San Juan County for 2005, the most recent year for which mortality data are available. Heart disease and cancer are the two leading causes of death in San Juan County, as well as New Mexico and the U.S. Compared to the nation, the overall death rates in San Juan County are lower for stroke, heart disease, and cancer, but generally higher for diabetes, cirrhosis & other chronic liver diseases, chronic respiratory diseases, and suicide. The rate of death due to accidents (unintentional injuries) is substantially higher, about 1.75 times the national rate.³⁷

Table 2.3. Leading Causes of Death in San Juan County, with New Mexico and U.S. Rates, 2005

	San Juan County	New Mexico	U.S.
Heart Disease	187.6	176.8	232.3
Malignant Neoplasms (Cancer)	150.8	159.2	190.1
Accidents (Unintentional Injuries)	64.9	61.3	37.3
---(Motor Vehicle Accidents)	(30.6)	n/a	n/a
Chronic Lower Respiratory Diseases	55.8	45.5	43.3
Diabetes	39.5	32.0	25.3
Cerebrovascular Diseases (Stroke)	31.2	33.1	53.3
Intentional Self-harm (Suicide)	14.8	17.3	10.8
Chronic Liver Disease & Cirrhosis	15.7	14.2	9.3

SOURCE: New Mexico Department of Health

Health Care Access & Availability

Health Care Professionals

In order to decide whether or not a geographic area or population group has an adequate supply of health professionals and resources, shortage designation criteria were developed by HRSA's Bureau of Health Professions. Using these criteria, 18 counties in New Mexico in 2007 received the designation of "MUA," or *medically underserved areas*, with *whole county* designation. San Juan County is one of these 18 counties.³⁸ Table 2.4 below highlights the availability of active care physicians in order to gauge the degree of growth and shortage. Notice the growth in the supply of active-care physician FTEs from 2001 to 2006, yet with a rate of 1.11 that still falls substantially below the national benchmark for "adequate supply" of 2.42.

Table 2.4. Active Patient Care FTEs (Full-time equivalents) and FTEs/1000 population 2006 vs. 2001

	2001		2006	
	Total Active Care FTE Physicians	Physician FTE per 1000 Population	Total Active Care FTE Physicians	Physician FTE per 1000 Population
San Juan County	56.5	0.6	141.4	1.11
New Mexico	2,533.50	1.39	3,100.30	1.54
U.S.				2.42 (National Benchmark)

SOURCE: New Mexico Health Policy Commission

The table below summarizes the numbers of dentists, registered nurses and pharmacists, along with rates for comparing to state and national measures. While a national rate for pharmacists was not available, it can be noted that New Mexico ranks among the 7 lowest states for number of licensed pharmacists.

Table 2.5. Number and Rates of Selected Health Care Professionals for San Juan County and New Mexico, 2006; U.S., 2004

	<i>Total Number of Active Care Dentists</i>	<i>Rate Active Care Dentists</i>	<i>Total Number Licensed Registered Nurses</i>	<i>Rate Licensed RNs</i>	<i>Total Number of Active Licensed Pharmacists</i>	<i>Rate Active Licensed Pharmacists</i>
San Juan County	54	.42	875	6.86	49	.38
New Mexico	882	.44	15,686	7.80	1,486	.74
U.S.		.60 (2004)		8.25* (2004)		

SOURCES: New Mexico Health Policy Commission; U.S. Department of Health and Human Services

Policy makers are particularly interested in the nursing shortage issue for various reasons, including growing evidence that demonstrates a link between nurse staffing levels and quality of care and health outcomes. The U.S. is in the midst of a nursing shortage, and the Health Resources and Services Administration anticipates that this shortage is estimated to worsen in the coming years.³⁹ As with shortages of other health professionals, rural areas are particularly prone to experiencing short supply. At the time of this writing, the current vacancy rate of nursing positions at Northern Navajo Medical Center in Shiprock was about 30%, with about 40 open nursing positions out of approximately 125 positions.⁴⁰

Medical Insurance

New Mexico currently has one of the highest rates of individuals without insurance in the nation, with 22.1% uninsured, compared to 15.6 percent nationwide. According to the "Insure New Mexico, 2005" report, uninsured rates are highest in Northwestern New Mexico and in Southern New Mexico.⁴¹

Medically indigent people in New Mexico have access to health care through a variety of financial resources at the county level. The most common source is through the County Indigent Fund. In 2007, San Juan County's indigent fund's expenditures were \$7,625,558 (9.2% of the state's total expenditures.) Approximately 2.25 million of the 7.6 million dollars went toward county supported Medicaid.⁴²

RESPONDENT SURVEY**HEALTH & WELLNESS****Community Concerns**

The table below summarizes the percent of respondents who rated each health-related issue as either a moderate or a major problem in San Juan County. The number in parentheses indicates rank overall.

Table 2.6. Health-Related Community Concerns, with Percent Respondents Rating Issue as Moderate or Major Problem

ISSUE	2008	2004	2000	1996
Top-Ranked Health-Related Issues				
Medical care	73.5% (9)	62.7% (11)	33%	72.4%
Teen pregnancy	72.9% (10)	67.9% (8)	50%	80.9%
Dental care	64.9% (15)	65.6% (10)	91%	no data
Additional Health-Related Issues				
Shortage of child day care	50.6% (24)	42.3% (23)	63%	no data
Mental illness	46.9% (27)	38.8% (26)	70%	52.7%
Teenage suicide	46.5% (28)	37.9% (27)	31%	46.6%
Health care during pregnancy	38.6% (30)	27.0% (30)	63%	43.5%

The cost and availability of medical care is a consistently high concern to San Juan County residents. Within the health care category, “Medical care” has risen to the top rank, as compared to 2004, when it ranked 3rd behind teen pregnancy and dental care. Teen pregnancy and dental care remain as top concerns to San Juan County residents. Together with the cost of medical care, these three issues have tended to form a cluster of top health care concerns for San Juan County residents over the last decade.

The lack of child daycare, teenage suicide and mental illness were identified as either a moderate or major concern by about half of the respondents. Written comments by interviewers highlighted that it was not just the cost or availability of child day care, but finding quality care that residents found difficult.

Personal Household Concerns

Recall that the second section of the Respondent Survey asked respondents to indicate the degree to which they or someone in their household experienced particular problems. Items related to Health & Wellness are summarized below, with previous year comparisons. Numbers in parentheses are ranks overall.

Table 2.7. Personal Health-Related Concerns, Rated as Moderate or Major Problem

ISSUE	2008	2004	2000	1996
Top-Ranked Health-Related Issues				
Anxiety or stress	44.4% (1)	39.8% (2)	54%	53%
Medical insurance	41.5% (2)	39.1% (3)	52%	45.5%
Money for doctor and prescriptions	39.2% (3)	38% (4)	52%	46.4%
Dental care	36.6% (5)	41.7% (1)	65%	no data
Depression	35.1% (8)	32.9% (6)	54%	35.9%
Money for food	33.4% (9)	22.8% (14)	43%	29.7%
Additional Health-Related Issues				
Home health care	22% (17)	26.8% (8)	26%	34.5%
Child daycare	20.5% (19)	18.2% (18)	51%	~25%
Child/Teen emotional or behavior problem	20.5% (20)	17.5% (21)	51%	~33%
Adult daycare	19.7% (24)	22.4% (16)	27%	~33%
After-school child care	17.7% (27)	18.4% (19)	22%	no data
Parenting training	15.7% (29)	11.4% (28)	1%	24.9
Pre-natal care	13.4% (30)	8.8% (30)	11%	17%

Anxiety or stress is the number one personal challenge experienced by San Juan County residents. When asked about personal problems and concerns, 44% of respondents identified anxiety or stress as being either a moderate or major problem. An additional 22% identified it as a minor problem. Thus, two out of three residents identified anxiety or stress as possessing some degree of personal challenge. Depression, while not rated quite as high as anxiety/stress, was identified by 1 out of 3 residents as a moderate or major concern. "Money for food," while not directly related to health care, per se, is nevertheless a key indicator of overall health and wellness for adults, as well as youth and children. Having enough "Money for food" is rated as a challenge for one out of three San Juan County households.

When asked whether they sought help for anxiety or depression, and if so, from whom, approximately 40% indicated they had sought help. Of those, approximately 50% went to medical doctors, 25% went to counselors, and 16% specified a local human service agency that offers both medical and mental health services. Within the area of health care, medical insurance, being able to pay for medical care and prescriptions, and affording dental care were also rated as substantial challenges for residents. Together with anxiety and stress, these four issues have tended to form a cluster of highly rated personal concerns for San Juan County residents over the past 12 years.

Health Section

The current respondent survey included a Health Section devoted to a variety of health-related topics; from personal health problems to self-rated overall health. (See *Section C* of the Respondent Survey, *Appendix E*.)

Physical Exercise and Self-Perceived Body Weight

In 1996, 60.4% residents reported that they engaged in some form of physical exercise at least 2-3 times per week. A comparable question on the present survey found that about 3 out of 4 (73.2%) of San Juan County residents exercise at least 30 minutes, 2-3 times a week or more. That represents a 12.8% increase from 1996. About half of those (55%) who do exercise do so 2-3 times per week. An additional 30% of those who exercise do so daily. It was noted from written comments that a large proportion of those who exercise daily do so via physical work on their jobs.

When asked whether residents believe they are underweight, overweight, or average weight for their height, 46% said they were overweight, 43% said they were average weight, and 9% said they were underweight.

Health Problems

The Health Section included a short list of health problems that loosely correspond to the leading causes of death in San Juan County (see *Mortality* in *Social Indicators* section above). For each, respondents were asked if they experienced the problem in the past year. The table below summarizes the results, with 2004 comparisons when available.

Table 2.8. Self-Reported Prevalence of Major Health Problems

	2008	2004
High Blood Pressure	26.7%	~20%
Asthma	18.1%	n/a
Diabetes	15.1%	13.6%
Cirrhosis	1.5%	n/a
Cancer	3.0%	n/a
Other	11.6%	

Of the 189 who responded to the question of whether they were receiving medical attention for their health problem, 138 (73%) reported that they were.

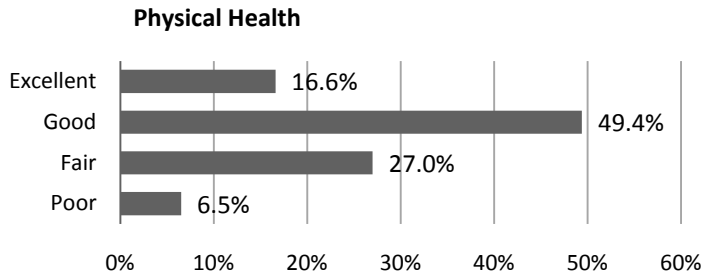
When asked whether any child in the household had experienced health problems in the past year, 10% said "Yes." Many of those who responded listed a variety of common childhood ailments, including colds, flu, ear and eye infections, and broken bones. Of the 21 more serious health concerns listed, asthma was by far the most commonly reported. This finding parallels other indicators of the prevalence of asthma among children and youth in San Juan County. On the 2005 YRRS, 19.9% of San Juan County high school students reported having been told by a doctor or nurse in the last 12 months that they have asthma.

Health Care Services

Respondents were asked whether they seek health care services outside San Juan County. Approximately 1 out of 5 residents (22%) said they did. Those who did sought the care of either a specialist or general family physician, with Cardiology being by far the most frequently mentioned by 16 respondents.

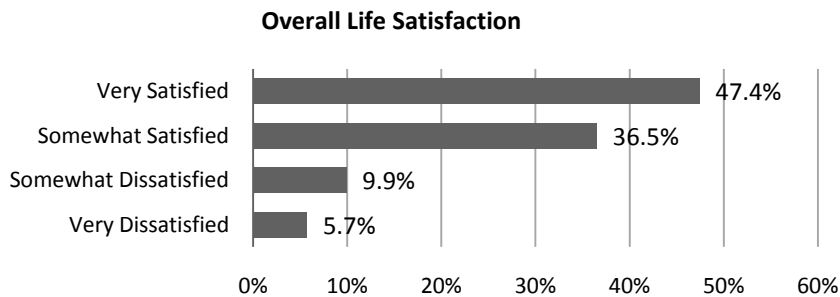
Self-Rated Physical Health

Two out of three San Juan County Residents self-report they are in Good or Excellent Health. Nearly half give themselves a rating of “Good Health” when asked to rate their overall physical health. An additional 16.6% report they are in “Excellent” health. (See chart below.)



Life Satisfaction

When asked to rate their overall life satisfaction, the overwhelming majority (83.9%) of San Juan County residents report they are either Somewhat or Very Satisfied with their lives. (See chart below.)



A recent Community Survey by the Services and Planning Community Survey, administered by San Juan County in 2007, similarly found high levels of general satisfaction among San Juan County residents. On a scale of 1 – 3, residents gave an average rating of 2.6 for the “overall quality of life in San Juan County.”⁴³

KEY INFORMANT SURVEY**HEALTH & WELLNESS****Physical Health**

The key informant survey included two sections of service needs directly tied to Health & Wellness. The tables below summarize their ratings. Percentages are key informants' combined ratings of High and Moderate Need. (See *Appendix D* for a complete ranked list.)

Table 2.9. Health-Related Community Needs Rated as either Moderate or High Need by 50% or More of Key Informants

SERVICE NEED	%
Infant health care	60.0%
Dental care	56.7%
Nutrition counseling	56.7%
Environmental quality (air, water, land)	56.7%
Outpatient medical care	53.3%
Caregiver relief (for companions of disabled or terminally ill)	53.3%
Pre-natal care	50.0%
Home health care (skilled)	50.0%

Out of a list of 16 physical health-related community needs in the category of “Physical Health,” key informants identified the above cluster of unmet needs in San Juan County, a cluster generally consistent with the 2004 survey. A noteworthy difference was that in 2004, key informants rated “Diabetes Prevention and/or Treatment Services” as the top unmet need in the category of Physical Health. The key informants in the current survey also rated “Home Health Care” higher than in previous years.

For services that received a ‘Don’t Know’ response, the highest percent was for “Services for Persons with AIDS.” This has been the case for all four Needs Assessments, and suggests a persistent lack of knowledge regarding HIV/AIDS services. To the extent that these services are available or exist, they may need greater publicity, education or attention.

Family Support and Mental Health

Out of 16 Community Needs listed in the category of Family Support and Mental Health, these eight were rated as either Moderate or High Needs by over 50% or more of the key informants. As compared to previous years, “Low-Cost Child Care” has risen to one of the highest ranked unmet community needs, and is seen as the highest priority within this category.

Table 2.10. Health-Related Community Needs Rated as either Moderate or High Need by 50% or More of Key Informants

SERVICE NEED	%
Low-cost child care	73.3%
Crisis intervention for mental illness	70.0%
Parenting skills training	63.3%
Low-cost counseling	60.0%
Family support and mental health	60.0%
Outpatient counseling	53.3%
Short-term treatment for mental illness	53.3%
Child mentoring supports	50.0%

Need for Services Among Specific Population Groups

Congruent with findings in social indicators and the respondent survey, key informants identified the following population groups as having either Very or Extremely Serious need for services in San Juan County:

- Poor (77.4%)
- Chronically mentally ill (71%)
- Children and youth (58.1%)
- Single-parent families (58.1%)

3. ECONOMICS & HOUSING

The results of the key informant survey suggests strongly that affordable housing is a top priority concern in San Juan County, particularly “availability of affordable rental housing,” which was ranked as the *number one need* out of 109 service needs.

Why is it important? Economic well-being, along with safe and satisfying housing, allows people to better enjoy the quality of life in their communities. Individuals and families need consistent employment to remain strong and self-sufficient. Factors that contribute to economic hardship and an inability to meet basic needs in turn result in family stress or crisis.

Section Highlights

- In the area of personal household concerns, one in three residents expressed concern about affording basic life necessities. Consistent with key informants and social indicators, affordable housing is a rising community concern, whereas unemployment is decreasing in severity.
- In addition to affordable rental housing, key informants identified housing assistance, both short- and long-term as high service needs.
- In San Juan County, the population is growing faster than the housing supply, and the median household income is not keeping pace with rising costs of housing. Renters are particularly cost-burdened.
- Energy efficiency was identified as the most pressing need for those homes that need to be remodeled or upgraded.
- Three out of four San Juan County residents express positive satisfaction with their current housing situation.

SOCIAL INDICATORS

ECONOMICS & HOUSING

San Juan County has experienced steady population growth, and it has been one of the fastest growing areas in the state in employment, with unemployment rates that are now below state and national rates. As reported in a monthly news release by the New Mexico Department of Workforce Solutions, "Over the last year, the Farmington area has added 1,900 jobs, growing 3.8 percent. This rate of job growth is far above the average for the state. The press release concluded that the "the outlook for job growth in the area remains favorable, and the Farmington MSA continues to have a strong job market."⁴⁴ (*The Farmington MSA is the "Metropolitan Statistical Area" inclusive of San Juan County.*)

Unemployment

In 1997, San Juan County's annual unemployment rate was 10.2%, well above New Mexico's rate of 6.6% and the national rate of 4.9%. In 2007, San Juan County's annual unemployment rate of 3.3% was slightly below the state's rate of 3.5% and below the U.S. rate of 4.6%.⁴⁵

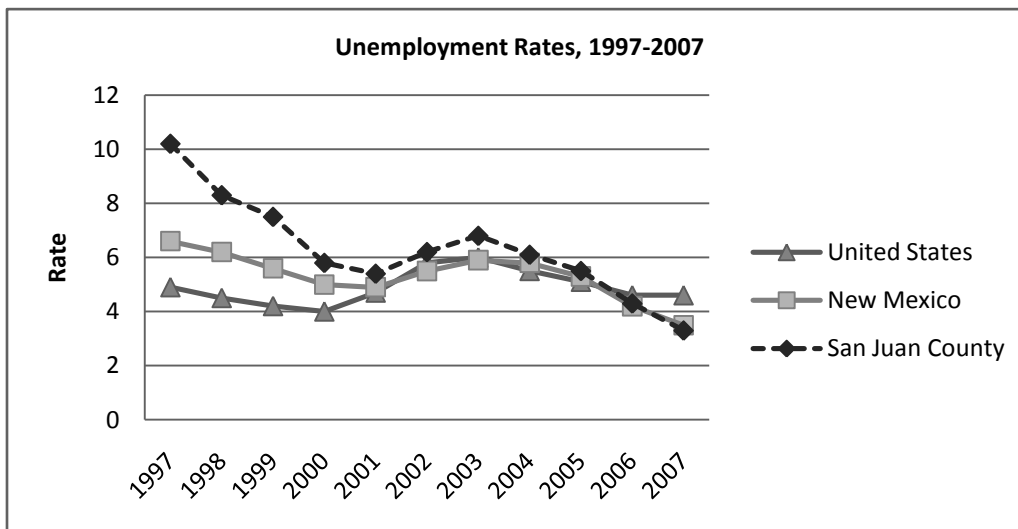


Figure 3.1.
Unemployment Rate, San Juan County, New Mexico and the U.S., 1997-2007

The past 10 years have witnessed a substantial decline in San Juan County's unemployment.

SOURCE: New Mexico Department of Labor, Economic Research and Analysis Bureau

It is important to note, however, that these rates do not include portions of the Navajo Nation within the bounds of San Juan County. In other words, not all unemployed persons who are living in the Navajo Nation within San Juan County are counted by either the state Department of Labor or the U.S. Bureau of Economic Analysis, the sources of the above-cited statistics. According to a February, 2007 Navajo Nation Council report to Congress, "Unemployment on the Navajo Nation hovers around 40 percent much higher than the national unemployment rate during the Great Depression."⁴⁶ In 2000, the unemployment rate on the Navajo Nation was 42%.⁴⁷

Income

A number of different income comparisons are available. Both per capita personal income and median household income are self-reported by census respondents, and values vary between methods of calculation by different branches of Census. The average wage/salary per job, by contrast, is calculated as total wage/salary disbursements divided by number of full and part-time workers. For the sake of comparison, all three values are reported. Median household income values are taken from the Small Area Estimates Branch of the U.S. Census in order to look at trends over time.

In 2005 San Juan County ranked 14th in the state for a per capita personal income of \$24,260. This was 87% of New Mexico's average, \$27,889, and 70% of the national average, \$34,471. The change from 2004 to 2005 in per capita personal income reflected a 6.8% increase, as compared to an increase of 4.5% for New Mexico. The average wage per job in San Juan County was \$33,233 in 2005, reflecting a 4.6% increase from 2004. In New Mexico, the average wage was \$32,876, up 3.8% from 2004.⁴⁸

Figure 3.2 below is presented to provide state and national comparisons over time, for the years 1997 - 2005. Values are not adjusted for inflation.

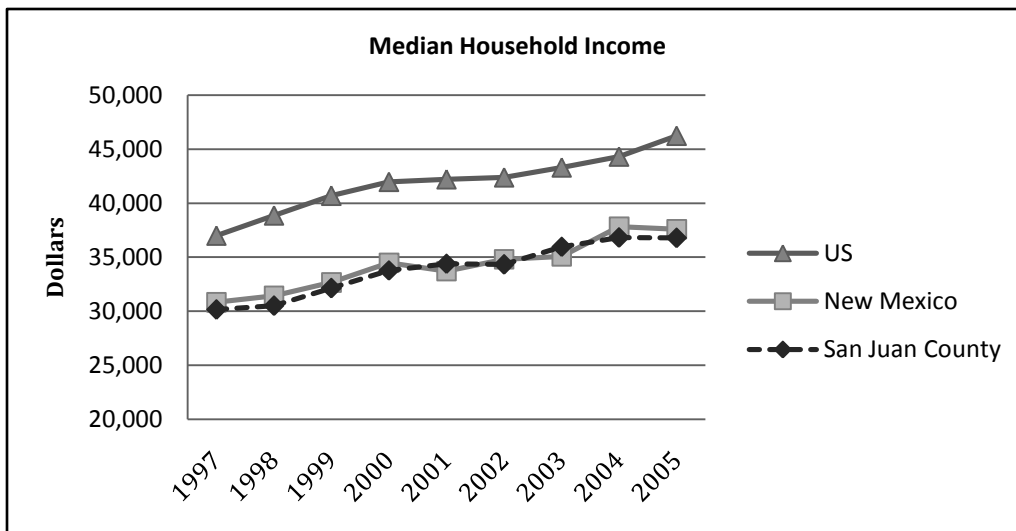


Figure 3.2. Median Household Income, for San Juan County, New Mexico and the United States, 1997-2005

The median household income in San Juan County in 2005 was \$36,796, compared to \$37,603 in New Mexico and \$46,242 in the U.S.⁴⁹

SOURCE: U.S. Census Bureau, Data Integration Division, Small Area Estimates Branch

Poverty

A review of economic secondary data would not be complete without highlighting the level of poverty in San Juan County. According to the U.S. Census, there were nearly 22,000 people in San Juan County, approximately 17.5%, who were living below the poverty level in 2005.⁴⁹ The level of poverty varies in different communities across the county, with some rural communities on the Navajo Nation experiencing upwards of 70% poverty.

Poverty has multiple health and social consequences. As summarized by Ross (2003) in a review of policy-related literature: "These may be summarized according to broad negative consequences of poverty: material want and deprivation, psychosocial impairment, social exclusion and negative health behaviors such as smoking and excessive drinking"⁵⁰ (p. 4).

Housing

Housing Supply

In San Juan County, the housing supply consisted of 44,940 housing units in 2006. This represents a modest 3.8% growth in housing units, with an addition of 1,719 residential units since 2000.⁵¹ Mobile homes represent a relatively large proportion of the housing supply in San Juan County, approximately one third (32.5%) of the housing units, compared to 17.2% in New Mexico, and 6.9% in the U.S. Mobile homes have likely represented an affordable and accessible way to 'own a home' in San Juan County, but they also tend to have a much shorter lifespan than other types of housing units, leaving home-owners faced with either abandoning the structure or paying expensive disposal fees. (Mobile Homes are distinguished from manufactured homes, and are defined as those structures "not" on a permanent foundation and situated on less than 10 acres.) From the Table 3.1 below, it can be noted that San Juan County also has a smaller proportion of duplex and multi-unit housing structures compared to New Mexico and the U.S.

Table 3.1. Housing Supply, San Juan County by Type, 2000 and 2006, with New Mexico and U.S. Comparisons

YEAR	2000		2006			
	<i>Number of Housing Units, San Juan County</i>	<i>San Juan County</i>	<i>Number of Housing Units, San Juan County</i>	<i>San Juan County</i>	<i>New Mexico</i>	<i>U.S.</i>
Total Housing Units	43,221	100%	44,940	100%		
Single Family	24,718	57.2%	25,858	57.5%	67.6%	67.1%
Duplex and Multifamily	3,841	8.9%	4,222	9.4%	14.9%	25.9%
Mobile Homes	14,402	33.3%	14,584	32.5%	17.2%	6.9%

SOURCE: U.S. Census Bureau, Census 2000 and 2006 American Community Survey

Growth & Demand

While the housing supply has grown modestly since 2000, the population in San Juan County has been growing at a faster rate than the housing supply. This does not appear to be true in New Mexico overall where the housing and population have been growing at more similar rates.

Table 3.2. Relative Growth in Population and Housing Units, San Juan County and New Mexico

	San Juan County	New Mexico
	<i>Percent Change from 2000 to 2006</i>	
Population Growth	9.7%	6.8%
Increase in Housing Units	3.8%	8.2%

SOURCES: U.S. Census Bureau, Census 2000 and 2006 American Community Survey; Population Estimates from Bureau of Business and Economic Research, UNM

San Juan County has experienced rapid population growth in the past 5 to 10 years, with a 9.7% increase in population between 2000 and 2006.⁸ The total number of housing units, however, has not grown at the same rate. When compared to other counties in New Mexico, San Juan County is ranked 25th of 33 counties in terms of growth of new housing structures between 2001 and 2005. Given the population growth, accompanied by steady growth in employment, San Juan County is a fertile housing market.

The “vacancy rate” overall in San Juan County, that is the percent of housing units that are presently unoccupied, is in the range of 14% vacancy. Vacancy rates within Farmington city proper and other incorporated areas of the county tend to be lower, generally below 10%.⁵¹ According to recent Census estimates, approximately 3% occupied housing units lack plumbing and/or kitchen facilities. However, a closer look at Census tables reveals that when looking only at “vacant” homes, about 35-40% of these are without kitchen or plumbing facilities.⁵²

Housing Affordability

The table below summarizes changes in the median income, home values, median rent and mortgages. As can be seen from the table, the housing crisis is a *national* one, and San Juan County is not an exception. Across the country, home prices have been rising at much faster rates than household income. San Juan County has also experienced exceedingly rapid changes in the cost of rental housing, with an increase of about 28%.

Table 3.3. Household Income, Home Values, Median Rent and Mortgage Values, 2000 and 2006

		2000	2006	% Change
San Juan County	Median Value Home	\$91,300	\$126,700	27.9%
	Household Income	\$33,791	\$40,517	16.6%
	Median Rent	\$459	\$637	27.9%
	Median Mortgage	\$850	\$927	8.3%
New Mexico	Median Value Home	\$108,100	\$141,200	23.4%
	Household Income	\$34,133	\$40,629	16.0%
	Median Rent	\$503	\$617	18.5%
	Median Mortgage	\$929	\$1,076	13.7%
U.S.	Median Value Home	\$119,600	\$185,200	35.4%
	Household Income	\$41,994	\$48,451	13.3%
	Median Rent	\$602	\$763	21.1%
	Median Mortgage	\$1,088	\$1,402	22.4%

SOURCE: U.S. Census Bureau, Census 2000 and 2006 American Community Survey

Housing Cost Burden

As can be seen from the table below, renters are particularly cost-burdened by housing in San Juan County. It should be noted that Table 3.4 below does include *un-mortgaged* homeowners. According to Census Bureau’s American Community Survey, 27% of mortgaged homeowners and 14% of non-mortgaged homeowners in San Juan County were cost burdened, that is, paying more than 30% of their household income for housing.

Table 3.4. Cost-Burdened* Homeowners and Renters , 2000 and 2006

Cost Burdened	San Juan County	New Mexico	U.S.
Homeowners			
2000	17.6%	21.9%	21.8%
2006	21.2%	23.7%	30.3%
Renters			
2000	31.7%	37.6%	36.8%
2006	39.4%	41.9%	45.9%

SOURCE: U.S. Census Bureau, Census 2000 and 2006 American Community Survey

*According to HUD guidelines, a household is considered “cost-burdened” when paying more than 30% of the gross household income for housing costs.⁵³

Homeownership Rate

The estimated homeownership rate for San Juan County is 73.7%, with a margin of error of +/- 4%. The national estimated rate is 67.3% +/- 0.3%. San Juan County's homeownership rates are actually higher than the national rates.⁵¹

Housing is clearly a complex topic. An in-depth housing needs assessment of affordability and availability across income ranges, its impact on sustaining population and employment growth, and limiting factors such as availability of public land, is beyond the scope of this general community needs assessment. The interested reader is encouraged to look at San Juan County's Growth Management Plan, available online.⁵⁴ The Plan provides an in-depth look at subdivision activity, building permits, as well as general growth in housing supply in incorporated and unincorporated areas of the county. It also summarizes an analysis of housing affordability by the City of Farmington's Community Development Block Grant program.

RESPONDENT SURVEY**ECONOMICS & HOUSING****Community Concerns**

The percentages of respondents who rated economics- and housing-related issues as being either moderate or major problems in the county are summarized below. Numbers in parentheses refer to the item's rank out of 30 issues overall.

Table 3.5. Economics & Housing -Related Community Concerns, Rated as either Moderate or Major Problem

ISSUE	2008	2004	2000	1996
Affordable housing	78.7% (6)	60.3% (13)	71%	71.2%
Available housing	68.7% (13)	no data	no data	no data
Unemployment or under employment	60.9% (18)	63.3% (12)	89%	74.3%
Overcrowded housing	56.3% (20)	41% (24)	32%	no data
Emergency food and shelter	55.8% (21)	47.8% (19)	68%	no data

Affordable housing is an increasing concern among San Juan County residents. An interesting change has occurred when comparing the rank-order of issues, compared to 2004. Affordable housing rose substantially in rank, whereas unemployment fell in rank. Residents' perceptions of priority issues parallels social indicator data described earlier. The finding also mirrors that of San Juan County's recent *County Survey* in which residents expressed that Affordable Housing was one of the greatest concerns.⁵⁵

Personal Household Concerns

The percentages of respondents who rated personal household concerns related to economics or housing as either moderate or major problems in their own households are summarized below.

Table 3.6. Economics & Housing-Related Personal Household Concerns, Rated as either Moderate or Major Problem

ISSUE	2008	2004	2000	1996
Top Ranked Economic/Housing-Related Household Concerns				
Money to buy clothes & shoes	35.6% (6)	25.9% (10)	10%	~33%
Money for utilities	35.4% (7)	23.6% (13)	42%	~33%
Housing needs major repairs	32.2% (12)	23.7% (11)	32%	~33%
Money to pay for housing	31.9% (13)	23.6% (12)	31%	~25%
Finding work	29.5% (14)	26.5% (9)	52%	42.7%
Additional Economic/Housing-Related Household Concerns				
Room in house	21.0% (18)	12% (27)	32%	22.4%
Getting electrical hookups to house or trailer	19.2% (25)	14% (25)	12%	25.2%

There is a cluster of top personal household concerns reflecting the ability to afford basic necessities. Approximately 1 out of 3 San Juan County households experience shortages of money for basic items such as clothes, utilities, and house repairs. While about 18% of residents in San Juan County are living below the federal

poverty levels, it appears that 1 in 3, or closer to 30%, have difficulty paying for basic costs of living. This strongly suggests that even households above poverty levels are experiencing financial stressors.

San Juan County residents are generally finding it less difficult to find work, but more difficult to pay for rising costs of housing. Once again, these results are congruent with social indicators described above, which depict a steady decline in unemployment coupled with an increase in housing costs.

Personal Financial

Income & Awareness of Programs

The current Respondent Survey included a section of questions designed to better understand the financial situation and challenges facing San Juan County residents. The section asked questions about income, debt, awareness of resources, and types of financial contributions.

In the current resident survey sample, the median household income range was \$30,000 – \$35,000. This reflects corrections made due to the apparent misunderstanding of the income question. (Upon inspection of self-reported income relative to reported rent/mortgage, it became clear that a portion of respondents were likely providing their personal income rather than household income. Because of this discrepancy, 35 reported income values were identified and removed from the calculation of median income.)

The Earned Income Tax Credit (EITC) is a federal aid program to assist low to moderate income households. When asked whether they qualify for EITC, 30.3% of the respondents recognized that they do qualify, 48.1% reported that they did not qualify, and 21.6% said they did not know. When asked whether they had ever received the EITC, 39.1% said they had received it, 45.4% said they have never received it, and 15.5% reported they did not know.

The United Way Help Line is a referral service for connecting people with resources and support programs, including financial programs. Among respondents, 65.4% had not heard of the United Way Help Line. These findings suggest ample room for increased awareness of these helpful resources and programs.

Debt

The survey asked respondents about both credit card debt and payday loans. Of survey respondents, 45.4% reported that they have credit card debt. Of those with credit card debt, 31.2% have a credit card balance of less than \$1000. Another 40.3% have a balance of \$1000-\$5000, 15.1% have a balance of \$5000-\$10,000, and 13.4% have a balance over \$10,000.

These findings resemble national statistics, in which the typical family's credit card balance is reportedly now almost 5% of their annual income, and approximately 40% of credit card holders carry a balance of less than \$1,000. About 15 percent are far less conservative in their use of credit cards and have total card balances in excess of \$10,000.⁵⁵

Another form of easily accessed debt is a payday loan, or short-term, high interest cash advance, typically borrowed against a future paycheck. Approximately 1 out of 5 (20.9%) San Juan County residents reported they received a payday loan in the past year.

Financial Contributions

When asked to whom they had given money within the last year, the largest percentage of respondents indicated they had given money to family members (62.7%), followed by Church donations (47.8%), Local Non-Profit Organizations (25.6%), San Juan United Way or Navajo United Way (18.2%), and other charitable organizations (13.9%).

Housing

The current survey included a section of questions devoted to housing, asking questions related to personal experiences with their own housing, as well as their perceptions of the housing problems in the county.

General Residence

The average number of years that survey respondents have lived in San Juan County is 24 years. The average household size reported by survey respondents was 3.5.

Of the respondents, 15 (3.7%) reported they were unemployed; 43 (10.7%) were retired, 4 (1%) reported not working due to disability and 35 (8.7%) reported they did not work outside the home. Of those who work, 50% are employed in Farmington.

Respondents were asked if they are currently homeowners or renters. The homeownership rate among survey respondents is 69.5%.

Finding and Affording Housing

Survey respondents moved an average of 2.4 times over the course of their residence in San Juan County. In order to better understand some of the challenges facing San Juan County residents looking for housing, respondents were asked whether they had experienced specific difficulties finding housing in the past 5 years. Findings are as follows:

- 31% had trouble finding a place to live they could afford
- 27.8% had trouble finding a place to live because of limited availability
- 17% had experienced barriers because of race, gender, family status, or other prejudices

In addition, a large majority (88.9%) of the respondents support the active involvement of city and county governments in the development of affordable housing.

Based on 329 respondents who answered the income question, minus those who clearly misinterpreted the income question, as described above, approximately 27% of the respondents are paying more than 30% of their gross household income for rent or mortgage. This result is similar to the degree of housing cost-burden described in the social indicator section above.

Need for Housing Upgrades and Remodeling

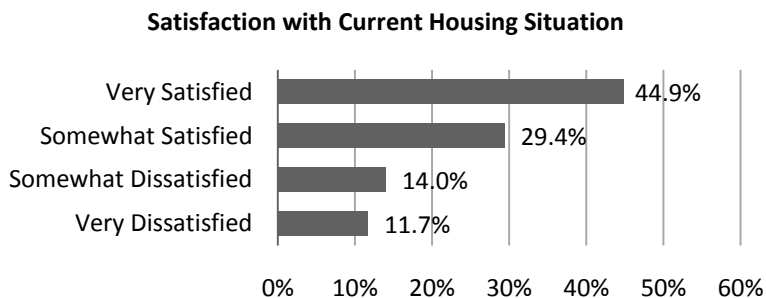
Respondents were asked whether their home or apartment needed to be remodeled or changed for a variety of specific reasons. Results are as follows:

- 20.2% to accommodate a family with children
- 9.7% for disability access
- 7.0% for an elderly household member
- 11.0% because of substandard living conditions
- 30.4% for greater energy efficiency
- 9.3% for other reasons (with most common reasons stated being plumbing, electrical, or needing more room for household members other than children)

The most frequent reason given for needing to change or remodel was to increase the “energy efficiency of their homes.” This is not surprising, as one fourth (24.9%) of the housing units in San Juan County were built before 1970, prior to codes requiring insulation and higher R-value energy efficient building materials. Indeed, half of all the housing units in San Juan County were built prior to 1981. The bigger burden of utility costs would likely fall on renters, as 30.8% of renter-occupied housing units were built prior to 1970, compared to 15.2% of owner-occupied housing.⁵⁶

Satisfaction with Current Housing Situation

It is clear that renters and homeowners in San Juan County are facing intense challenges related to affordable and available housing. On the positive side, 74.3% of residents report they are either “Somewhat Satisfied” or “Very Satisfied” with their current housing situation.



KEY INFORMANT SURVEY**ECONOMICS AND HOUSING****Housing**

Three sections of the key informant survey included service needs related to economics and housing. The tables below summarize their ratings. Percentages indicate how many key informants rated the needs as High or Moderate. (See *Appendix D* for complete survey results.)

Table 3.7. Community Needs Rated as Either Moderate or High Need by 50% or More of Key Informants

SERVICE NEED	%
Top-Ranked High Needs	
Availability of affordable rental housing	93.3% (1)
Housing assistance (short-term)	90.0% (2)
Housing assistance (long-term)	90.0% (2)
Moderate-High Housing Needs	
Availability of affordable homes for ownership	73.3%
Housing rehabilitation or repair	53.3%

Of all the service needs listed in the survey, the “Availability of rental housing” and “Housing assistance,” both short- and long-term, were rated as the highest priority needs by key informants.

Basic Materials Needs

Table 3.8. Community Needs Rated as Either Moderate or High Need by 50% or More of Key Informants

SERVICE NEED	%
Short-term shelter	70.0%
Financial assistance	66.7%

Out of a list of five community needs listed within the category of “Basic Material Needs,” the above two were rated as either Moderate or High Needs by over 50% or more of the key informants. The remaining three basic material needs, “Food,” “Utility bill assistance,” and “Clothing or furniture,” were rated as Slight to Moderate Needs.

Employment

Out of a list of eight service needs in the category of “Employment,” approximately half of the key informants rated these two issues as Moderate or High Needs.

Table 3.9. Community Needs Rated as Either Moderate or High Need by 50% or More of Key Informants

SERVICE NEED	%
Appropriate job market (better wages and job diversity)	56.7%
Job training	50.0%

Other items in this category that were rated as Slight to Moderate needs included “Vocational rehabilitation” and “Employment placement counseling.” Key informants were less knowledgeable about job training programs that use Spanish or Navajo as the language of instruction, with a large percentage (>30%) of key informants choosing “Don’t Know” on these items.

Services in Greatest Need of Expansion

The key informants who responded to this survey believed strongly that affordable housing is a top priority in San Juan County. When asked to list the services “MOST in need of expansion,” “Affordable housing” was listed most frequently, by 6 of the 30 respondents, with Substance Abuse close behind at 5. An additional three key informants listed it as the service “SECOND MOST in need of expansion or creation.” (See *Appendix D* for complete tables and results of the Key Informant Survey.)

TARGET-POPULATION SURVEY**ECONOMICS AND HOUSING**

In order to better understand the housing challenges faced by those most intensively affected, a target-population survey was conducted with homeless persons and clients of housing programs. The one-on-one interview consisted of two parts: a subset of community concerns (Part A) from the general survey, and an individual needs section, asking respondents about their most important immediate needs.

Interviews were conducted with a small number (n=28) of people attending a homeless resource fair in Farmington. The majority of respondents (20) were currently or recently homeless, or looking for “suitable” housing. Other respondents either did not respond to the question (3), were not homeless (3), or worked for agencies who serve the homeless population (2). A Navajo interviewer was available to conduct the survey in the Navajo language.

In regard to community problems, as would be expected, respondents in the homeless population rated “Affordable housing” higher than general survey respondents, right along with “DWI” and “Alcoholism/Drug abuse,” as highest priority issues. Their level of concern about affordable housing is similar to the observations made by key informants, many of whom are working directly with populations in need of direct services.

In the Individual Needs section, respondents were asked to identify their “Most important needs.” To assist in the process, they were given seven cards, each with a different need written on it and a small picture to depict the need. A picture was used to assist in literacy. Respondents were asked to pick out the cards that indicated what they needed most and that are most important at this time. They could choose as many as they wanted. They were also asked to pick out any additional cards that were of medium importance. After they selected their high and medium needs, respondents were asked to choose which needs were the *hardest* and the *easiest to find*. Finally, they were asked what services or agencies they had found most helpful.

The table below summarizes the findings. Numbers reflect how many respondents selected each need as “Most” or “Medium” important, and how many listed each as easiest or hardest to find.

Table 3.10. Individual Needs Selected by Number of Respondents in Target-Population

	Most Important	Medium Important	Hardest to Find	Easiest to Find
Safe, Affordable Housing	19	2	13	1
Money for Food	14	4	1	5
Medical or Dental Care	13	8	6	3
Transportation	11	3	4	1
Job, Employment	11	4	2	7
Social Support	10	4	3	7
Legal Advice	4	7	1	2

In responding about their individual needs, “safe, affordable housing” was chosen most frequently as “most important,” and also selected most often as “hardest to find.” Notice that while “Money for food,” “Job” and “Social support” appeared in the Most Important category for a large number of respondents, they were also experienced as the “Easiest to find” by at least some of the respondents. This may reflect the growth in employment opportunities and decrease in the unemployment rates, as discussed earlier.

4. CRIME & SAFETY

Community concerns about crime and violence are consistently high-priority concerns, from 2004 to the present, particularly gang-related activity, family violence, and property crimes, such as vandalism, theft and burglary.

Why is it important? Crimes are said to be a direct attack on the quality of life in a community. The amount of crime in a community is a key indicator of the quality of life, of the degree to which people feel safe to move freely in their neighborhoods and enjoy raising a family without undue worry and concern.

Section Highlights

- In addition to *community* concerns about crime, San Juan County survey respondents expressed more concern than in 2004 about their *personal* safety and the safety of their children at school.
- Key informants identified gang violence prevention as by far the most prominent need within the category of Public Safety. Overall, it was ranked equal in importance with DWI and alcoholism prevention and treatment.
- Consistent with residents' concern, major indicators of crime and violence are also staying generally consistent. Indicators with regard to juvenile arrests and referrals for crime are mixed. In general, San Juan County youth report higher rates of behaviors associated with violence than in the nation.
- There has been a steady increase in domestic violence cases brought before the courts in San Juan County over the past 10 years. There is also evidence that the degree of injury in domestic violence incidents is higher than in New Mexico overall.

SOCIAL INDICATORS

CRIME & SAFETY

Crime Index

The Index Crime Rate is a uniform measure of specific types of crimes and is comprised of two indices. The Violent Crime Index includes murder, forcible rape, robbery, and aggravated assault. Property crimes include burglary, larceny and theft, and motor vehicle theft.

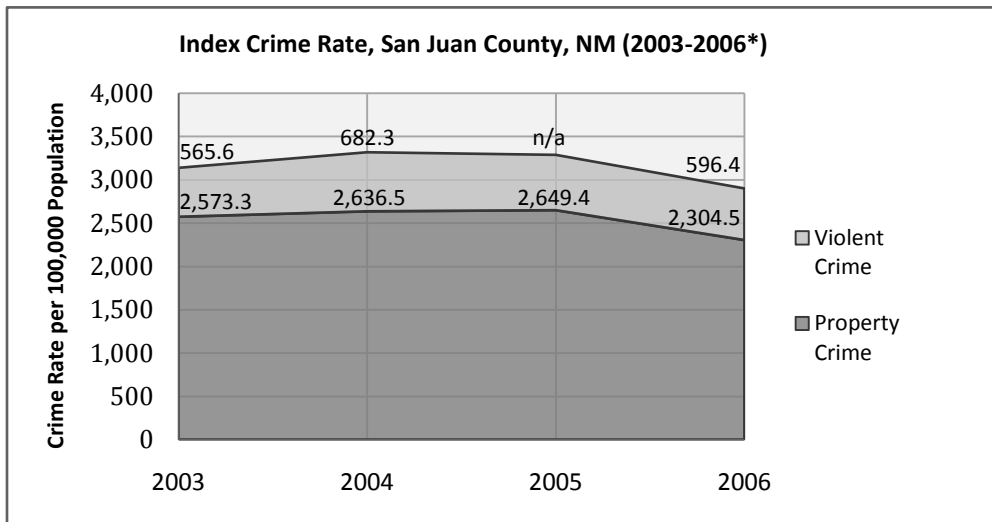


Figure 4.1. Index Crime Rate per 100,000 Population, for years 2003 – 2005, including Violent and Property Crime rates

SOURCE: FBI Uniform Crime Reports

*Numbers on graph are the Violent and Property Crime rates. The Violent Crime Index was not published by the FBI in 2005, so it has been imputed as the average of its neighboring years for the purpose of this graph.

Figure 4.1 above is a volume graph depicting the contributions of the Violent and Property Crime Indices to the overall Index Crime Rate in San Juan County. The overall height of the shaded areas represents the combination of violent and property crime.

As a *general* comparison, in 2006, the national rate of Index Crimes per 100,000 people was 3808 (473.5 violent crimes, 3,334.5 property crimes). FBI statisticians caution that comparisons between crime rates of different communities should be done with caution, as there is a range of unique conditions affecting local law enforcement entities.⁵⁷

Domestic Violence

As can be seen from the volume graph below, there has been a steady increase in domestic violence in San Juan County. In fiscal year 1998-99, there were 549 new Domestic Violence cases in the San Juan Magistrate courts (509 misdemeanor and 40 felony cases). In FY 2006-07, there were 806 (707 misdemeanors; 99 felony cases).⁵⁸

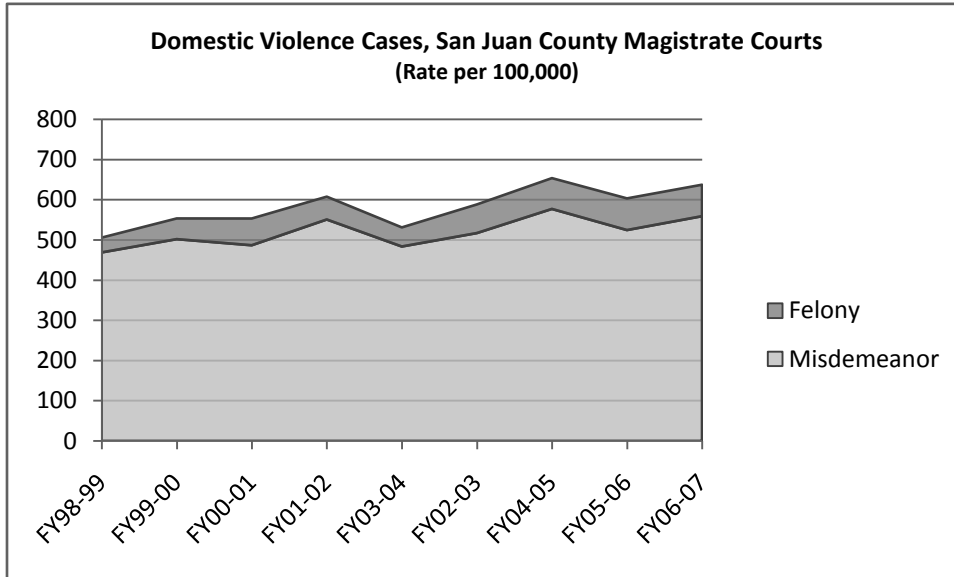


Figure 4.2. Domestic Violence, New Cases, San Juan County Magistrate Courts, for years FY 1999 – FY 2007

Trends in domestic violence cases in San Juan County's Magistrate courts reveal a steady increase in domestic violence in the last 12 years.

SOURCE: New Mexico Courts, Various Years' Reports

Felony Domestic Violence cases in New Mexico are those involving severe injury to one or more persons involved or involve the use of a deadly weapon.

Domestic violence cases seen by the Magistrate Courts of San Juan County is presented as a proxy indicator of the incidence of domestic violence. It is important to realize that numbers of cases were converted to rates per 100,000 population in order to “rule out” the role of sheer population growth. In this way, we are more confident to conclude that a trend is not simply due to increased population.

In 2006, the San Juan County Sheriff's Office investigated 436 domestic violence incidents. The Sheriff's Office domestic violence report provides an in-depth portrait, as they have compiled data consistent with the Coalition of Sexual Assault Programs, which maintains the New Mexico Interpersonal Violence Data Central Repository, the main statewide repository of domestic violence and sexual assault data. Of the 436 incidents, 201 (46%) involved use of alcohol or drugs; 294 (67%) involved injury. When compared to data compiled for New Mexico, there is a substantially higher degree of injury involvement in domestic violence incidents in San Juan County than in New Mexico overall, in which 33% of domestic violence incidents in 2006 involved injury.^{59, 60}

Note that these numbers do not reflect San Juan County totals, as they are those reported by the San Juan County Sheriff's Office only. However, a comprehensive report of state- and county-level data from 2004 reveals that while the overall *rate* of domestic violence is not higher in San Juan County compared to the state (10.2 per 1,000 vs. 15.3 per 1,000 in New Mexico), a relatively higher percentage of domestic violence incidents in San Juan County involve injury and the use of alcohol or drugs.⁶¹

Youth Violence & Safety Concerns

Juvenile Violent Crime

Juvenile arrests for violent crime serve as a leading indicator of community safety, as youths who commit violent crimes are more likely to continue violent behaviors as adults. Moreover, according to the National Association of Planning Councils, juvenile violent crime often reflects a community’s experiences with associated problems such as alcohol and drug use, domestic violence, child abuse, and gang violence.⁴ Because these rates are based on small *actual* numbers of arrests (fewer than 70),⁶² two-year averages are graphed to convey any possible trends over time and to avoid depicting the year-to-year fluctuations that are typical of rates based on small numbers.

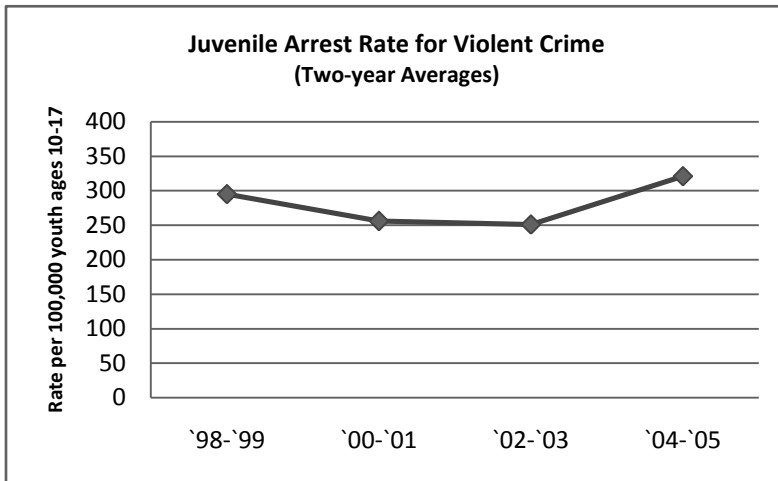


Figure 4.3. Juvenile Violent Crime Rate, Two-Year Averages, from 1998 – 2005

The graph of juvenile arrests for violent crime in San Juan County suggests a decline from 1998 -2003, followed by an increase in recent years. However, because the rates are based on few actual numbers, short-term trends should be interpreted with caution.

SOURCE: Office of Juvenile Justice and Delinquency Prevention

According to the “Juvenile Offenders and Victims: 2006 National Report,” the national rate of juvenile arrests for violent crime reached a peak in 1994, with a national rate of 509 violent crimes per 100,000 10-17 year olds. That rate has consistently fallen to below 300 in 2003.⁶³

Juvenile Justice Referrals

Another indicator of juvenile crime activity, the number of juveniles referred to probation, suggests a different trend for crime overall, whereas Figure 4.3 above depicted only violent crime.

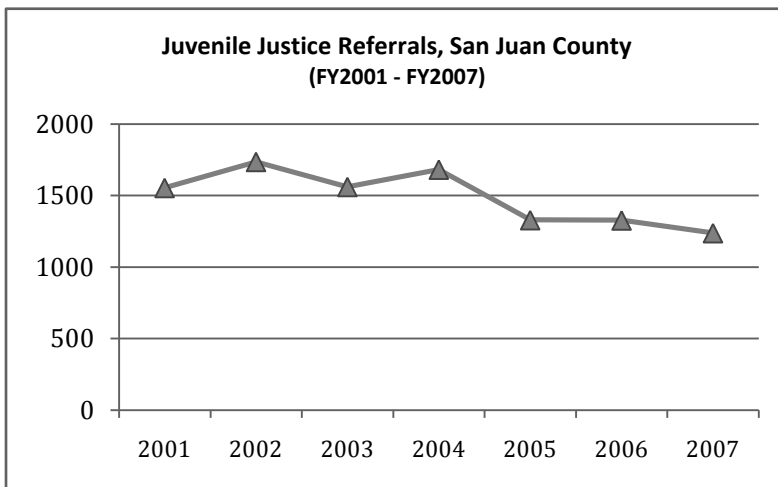


Figure 4.4. Juvenile Justice Referrals in San Juan County, FY 2001 to FY 2007

As can be seen from the graph, the number of juvenile justice referrals has declined steadily in San Juan County over the past 7 years, from a high of 1,736 referrals in 2002, to a low of 1,238 in 2007.⁶⁴

SOURCE: New Mexico Juvenile Justice Services, Child, Youth and Family Department

Self-Reported Behaviors Related to Violence and Perceptions of Safety

The Youth Risk and Resiliency Survey (YRRS) is a statewide survey of public school students, grades 9-12, administered every two years in participating school districts, that asks students to report on a variety of behaviors related to health, academics, violence and substance use.

As can be seen from the table below summarizing relevant items from the YRRS, in 2005, nearly one third of high school students in San Juan County reported they had carried a weapon at some point in the 30 days prior to the survey. Over one third of San Juan County youth had been in a physical fight in the past year. San Juan County youth generally reported higher rates of behaviors associated with violence, compared to the nation.^{65, 66}

Table 4.1. Behaviors Associated with Violence, 2005 YRRS, San Juan County and New Mexico; 2005 YRBS, U.S.

YRRS - Behavior	San Juan County	New Mexico	U.S.
Carried a weapon*	29.1%	24.5%	18.5%
Been in a Physical Fight**	40.5%	36.7%	35.9%
Threatened or injured with a weapon on school property**	12.1%	10.4%	7.9%
Skipped school because felt unsafe*	9.7%	8.6%	6.0%

SOURCE: Youth Risk & Resiliency Survey, San Juan County Report 2005; Youth Risk Behavior Surveillance, U.S., 2005

*In past 30 days

**In past 12 months

Parental concern over their child's safety at school serves as an indicator of safety perceptions. The "Parent Survey on the Quality of Education" administered to parents of children in San Juan County school districts asks parents of students of all ages a variety of questions related to their perceptions of the quality of education and their children's safety at school. In San Juan County, during the 2005-2006 school year, "the large majority of parents (92.3%) either agreed or strongly agreed with the statement, "My child is safe at school."⁶⁷

RESPONDENT SURVEY**CRIME & SAFETY****Community Concerns**

The percentages of respondents who rated crime-related issues as being either moderate or major problems in the county are summarized below. Numbers in parentheses refer to the item's rank out of 30 issues overall.

Table 4.2. Crime & Safety-Related Community Concerns, Rated as either Moderate or Major Problem

ISSUE	2008	2004	2000	1996
Top Ranked Crime-Related Community Concerns				
Vandalism, theft, or burglary	83.5% (4)	72.1% (5)	91%	81.6%
Gang-related activity	83.0% (5)	70.9% (6)	89%	76.7%
Family violence/abuse	78.0% (7)	68.5% (7)	88%	71.3%
Young people not respecting family traditions	77.4% (8)	75.9% (4)	66%	86.8%
Assault, rape or violent crime	71.3% (11)	56.7% (14)	93%	71.6%
Racial, ethnic tension or distrust	69.0% (12)	46.3% (21)	66%	no data
Additional Crime-Related Community Concerns				
Legal Services	52.3% (23)	46.5% (20)	73%	no data

Clearly, issues related to crime are high priorities in San Juan County. In the category of crime and violence, residents have remained consistent, in terms of overall rank, in their concern about crime, most notably gang-related activity and vandalism. An exception to this consistency is that residents appear to be more concerned than in the recent years about racial/ethnic tension. This issue rose in rank, from 21st in 2004 to 12th in 2008.

A focus group with a group of young adults yielded similar conclusions with regard to crime and safety. Young people as a group expressed that violence was of great concern, ranking it as the 4th highest priority issue, after issues related to Alcohol, DWI and Drug Abuse. (See *DWI, Alcohol & Other Substance Abuse* section.)

Personal Household Concerns

The percentages of respondents who rated personal household concerns related to crime and safety as either moderate or major problems in their own households are summarized below.

Table 4.3. Crime & Safety-Related Personal Household Concerns, Rated as either Moderate or Major

ISSUE	2008	2004	2000	1996
Afford legal help	37.0% (4)	33% (5)	50%	46.3%
Feeling safe walking in the streets	32.4% (11)	22.7% (15)	18%	38.0%
Child's safety at school	24.2% (15)	17.8% (20)	53%	~33%
Feeling safe and secure at home	23.2% (16)	14.6% (24)	19%	22.4%
Physical conflict in the household	16.7% (28)	10.2% (29)	7%	15.5%

More San Juan County residents are reporting feeling personally concerned about their own safety and the safety of their children at school than in the recent past. Nearly one in three respondents expressed moderate to major concern about the safety when walking in the streets. As can be seen from the table above, personal household concerns related to violence and safety have risen in rank, overall, compared to 2004.

Although the overall rank of “Physical conflict in the household” is low relative to other issues, it is striking that 16.7% expressed that physical conflict in their homes is a moderate or a major problem. Another 8.6% reported that physical conflict is a minor problem. As any amount of physical conflict is of concern, it should be noted that over one fourth (25.3%) of San Juan County residents report some degree of physical conflict in the household.

Of the small number of people who sought help for physical conflict in the household, equal numbers sought help from family, human service agencies, and police. For other problems, respondents went directly to the obvious resource when seeking help. For example, if their child was being bullied, they sought help from the school personnel.

Sensitive Questions

Section E of the respondent survey consisted of a series of eight questions considered to be more personal. They were asked in a manner that allowed for private reporting without the interviewer having to ask and record answers directly. (See *Methodology*.) From this set of eight sensitive questions, four pertain directly to domestic violence and abuse. The instructions ask the respondent to report on what has happened to them and/or their family in the last 12 months.

- 13.7% of the respondents reported that “a child in the family was a victim of bullying”
- 15.7% reported that a family member was “a victim of domestic violence”
- 6.2% indicated that a family member was “a victim of child abuse”
- 5.2% reported that a family member was “a victim of sexual abuse”

While crimes of this nature are notoriously underreported, it can be noted that there appears to be a degree of internal consistency in this survey. Recall that 16.7% of respondents indicated that “Physical conflict in the household” was a moderate or major problem in their household. Similarly, in the “Sensitive Questions” section of the survey, 15.7% reported that a family member was “a victim of domestic violence.”

These “sensitive” questions were asked in a way to allow for private reporting, as they are experiences that are typically underreported. An alternative method for asking the questions was developed for those who would be filling out the survey themselves in more public settings. (See *Methodology* for a complete description.) The method proved to be a viable alternative that unexpectedly resulted in higher reporting for some of the items.

When filling out the survey themselves, 16% of the respondents reported that “a child in the family was a victim of bullying,” 30% reported that a family member was “a victim of domestic violence,” 8% indicated that a family member was “a victim of child abuse,” and 8% reported that a family member was “a victim of sexual abuse.” It should be noted that those filling out the survey themselves did not differ with the demographic profile of those who were interviewed. Both samples were representative and random samples of San Juan County adult residents.

KEY INFORMANT SURVEY**CRIME & SAFETY****Household Violence and Related Issues**

The key informant survey included two sections of service needs related to Crime & Safety. The tables below summarize their ratings. Percentages indicate how many key informants rated the needs as High or Moderate.

Table 4.4. Community Needs Rated as either Moderate or High Need by 50% or More of Key Informants

SERVICE NEED	%
Services for victims of domestic assault (including youth)	56.7%
Services (example, counseling) for predators of domestic assault (including youth)	56.7%
Child protective services	53.3%
Adult protective services	50.0%

Out of a list of six community needs listed within the category of “Household Violence and Related Issues,” the above four were rated as either Moderate or High Needs by over 50% or more of the key informants. The remaining two “Abuse prevention training for parents “and “Services for victims of rape” were close behind the 50% cutoff at 46.7% and 43.3%, respectively.

Public Safety, Legal Services, and Consumer Protection

Of the 13 community needs listed within this category, one issue was rated as either moderate or high need by more than 50% of the key informants. This finding parallels respondents’ concern regarding the issue of gang activity.

Table 4.5. Community Needs Rated as either Moderate or High Need by 50% or More of Key Informants

SERVICE NEED	%
Gang violence prevention	70%

Four of the 13 community needs listed in this category were rated (by more than 30% of the key informants) as “Need is currently being met” or as “None,” in other words, not needed. For example, half of the key informants (50%) rated “Adult detention facilities” as a service need that is currently met. These four items are listed in the table below.

Table 4.6. Community Needs Rated as Either Currently Being Met or No Need by 30% or More of Key Informants

SERVICE NEED – MET or NO NEED	%
Adult detention facilities	50.0%
Juvenile detention facilities	46.7%
Probation and parole services	43.3%
Fire or disaster relief	36.7%

This represents a perception among key informants that detention service needs and disaster relief in the community are, at least in part, being met by existing services.

5. TRANSPORTATION, ACCESS TO SERVICES & RECREATION

Based on the Key Informants Survey, public transportation for elderly and disabled persons in particular was rated in the top 10 service needs in San Juan County.

Why is it important? In a rural area such as San Juan County transportation is a key factor in whether residents are able to access services, gain employment and participate in recreational and community activities. A compounding aspect of this equation is the high cost of gasoline, limiting in particular those who are already financially challenged. San Juan County's Growth Management Plan presents a comprehensive assessment of transportation issues in San Juan County and summarizes its degree of importance:

"The future economic and social health of San Juan County will depend to a large extent on how effectively its transportation system can accommodate both personal mobility and the movement of goods under a wide variety of changing circumstances."⁶⁸

Section Highlights

- In addition to transportation being a high-ranked service need, key informants also identified transportation as a major *barrier* to access and awareness of services.
- Limited public transportation services impact certain populations intensely, including persons with disabilities, those who are already financially burdened, and a growing population of seniors. This is particularly true for less able and less mobile persons living in rural areas.

SOCIAL INDICATORS**TRANSPORTATION, ACCESS TO SERVICES & RECREATION****Patterns of Transportation**

Due to many factors, the majority of transportation in San Juan County requires the use of motor vehicles to satisfy most travel purposes. For example, approximately 40% of San Juan County's population is classified as living in rural areas.

According to 2006 Census estimates, about 86% of workers in San Juan County drove to work alone, 9% carpooled, 3% worked at home, and an extremely small number (0.5%) took public transportation to work. The remaining 2% accounted for all other alternative means of transportation (such as biking, walking, motorcycles). Indeed, designated and maintained bikeway and pedestrian walkway systems are relatively scarce. The average commute time it takes San Juan County residents to get to work is 22.4 minutes. These findings are similar to other rural counties in New Mexico.⁶⁹

San Juan County's Growth Management Plan, 2007 provides an in-depth analysis of transportation patterns and projections.⁶⁸ The authors indicate that, "travel times can be expected to increase as employment grows and residential development takes place in areas of the county that are currently vacant." Interested readers are encouraged to read the Growth Management Plan which describes areas of need and proposed expansion including roadway systems, pedestrian safety and mobility, the bikeway system, the public transportation system and overall safety. With goals that include promoting public involvement, inter-governmental coordination, transportation alternatives that are free of barriers to people of all ages and abilities and overall energy efficiency.

Service Populations

It is clear that public transportation services are either limited or altogether absent from most areas of the county. Populations that are most effected by limited transportation services are people who are financially challenged, seniors, and those who are disabled or less mobile. According to 2006 U.S. Census⁶⁹ estimates, in San Juan County:

- 8% of people, 16 to 64 years old, report having a disability
- 47% of those 65 and older report having a disability
- 18% of people were living in poverty
- 18% of people 65 years old and over were living in poverty

Moreover, with a growing population of people over 65, the need for transportation services, and for senior services in general, such as Home Health Care, can be expected to increase.

A striking example of the deleterious effect of extremely limited transportation in rural areas can be seen in the findings in the 2007 Needs Assessment, "The Needs of Native Americans with Disabilities," by the Native American Disability Law Center, Inc. Not only is "public transportation scarce and often inaccessible," it was found that "60% of the population surveyed could not afford gas for their cars." Moreover, "47% could not get transportation."⁷⁰

RESPONDENT SURVEY TRANSPORTATION, ACCESS TO SERVICES & RECREATION
Community Concerns

The percentages of respondents who rated transportation and services-related issues as being either moderate or major concerns in the county are summarized below. Numbers in parentheses refer to the rank (of 30) of the issue overall.

Table 5.1. Transportation and Access-Related Community Concerns, Rated as either a Moderate or Major Problem

ISSUE	2008	2004	2000*	1996
Inadequate public transportation	62.8% (16)	55.2% (15)	90%	57.5%
Shortage of recreational facilities or programs	52.8% (22)	48.9% (18)	21%	no data
Services and access for the disabled	48.2% (26)	39.8% (25)	3%	67.0%
Adequate senior services	44.8% (29)	33.7% (29)	58%	45.2%

*Recall that the year 2000 Needs Assessment was a follow-up survey that included a convenience sample of fewer (n=156) Other years' assessments are based on larger, random samples (n>300). Moreover, the wide fluctuations in results from 2000 suggest that comparisons to this year are less useful.

Community concern about "Inadequate public transportation" was rated as a moderate or major problem by nearly two thirds of San Juan County residents, and was ranked similarly in the results in 2004.

Personal Household Concerns

The percentages of respondents who rated "transportation and access" issues as either moderate or major problems for them or someone in their households are summarized below.

Table 5.2. Transportation and Access-Related Personal Household Concerns, Rated as either Moderate or Major

ISSUE	2008	2004	2000	1996
Affording recreational activities	33.3% (10)	29.8% (7)	22%	40.4%
Transportation or access for a disabled person	19.9% (22)	21.6% (17)	23%	~33.3%

One third of San Juan County residents express a moderate or major concern in their households related to "Affording recreation activities." From written interviewer comments, a reason given for difficulty affording recreational activities was the cost of gasoline. Thus a limiting factor was the cost of transportation to the recreation.

Open-Ended Comments

When respondents were asked if there were any *other* problems in the county or in their household, transportation-related issues were mentioned more frequently than any other. Specific issues can be categorized as follows:

- Poor road conditions
- General transportation difficulties
- Public transportation (not accessible, schedules, routes, etc.)
- Transportation particularly difficult for seniors and disabled
- Traffic issues (roads, unsafe drivers, and congestion)
- Public transportation in Shiprock

Existing Transportation Uses

Subsections in the Respondent Survey included three questions related to transportation in San Juan County.

While 42.8% of the respondents reside in Farmington, the overwhelming majority (90%) of respondents reported they do “most of their shopping” in Farmington. When asked if they have a car they can use, 89.6% of the respondents reported they did.

The Red Apple Transit is a public bus system managed by the General Services Department of the City of Farmington. Hours are from 7 a.m. to 6 p.m., weekdays and Saturdays, with no Sunday service. Respondents reported their use of the Red Apple Transit is as follows:

- 5.5% Daily Use
- 1.5% Weekly Use
- 2.5% Once a Month
- 90.5% Never

SERVICES SURVEY**TRANSPORTATION, ACCESS TO SERVICES & RECREATION**

To better understand availability of transportation services, Senior Centers and transportation services were called and asked key questions about service and use. As would be expected transportation services are most accessible in the urban portion of the county. The following examples describe some of the transportation options available:

- *Senior Centers* - provide pick-up services for daily meals and pre-scheduled rides to doctor appointments. (*Must be 50 or older.*) The outlying areas such as Blanco have one day a week when seniors can be taken to town for shopping and appointments. The general consensus is that the seniors most in need of transportation are usually the ones who have difficulty affording services that charge, such as taxi service in Farmington.
- *Discounted Services* - If a person has Medicare, Medicaid or insurance that covers transportation, there are transportation sources that offer free or discounted service. Navajo Transport Services and Safe-ride are two examples.
- *Public Transportation* - The Red Apple Transit provides transportation from stops in Aztec, Bloomfield, or Kirtland into Farmington, and back. Buses run three times a day. In addition to the Red Apple routes within Farmington, persons can pre-arrange (with a 24-hour advance) for PMS Dial-a-Ride to pick them up and take them anywhere within Farmington's city limits. Anyone who has Medicaid, or who is a Senior or Student, is charged \$1 per ride.
- *Rural Public Transit* - Navajo Transit operates a single route in the county between Farmington and Shiprock Monday through Friday, with some continued service to Window Rock.

In addition to transportation, other services identified as being most needed by less mobile populations were general helping services such as winterizing and summerizing homes, assistance with household chores and handyman tasks, and snow shoveling. The feedback was two-fold, that difficulty paying for such services is one issue and another is the extreme lack of businesses/people offering these services. An issue when pricing this type of service is the distance a service person may have to drive to accommodate clients, increasing the cost beyond those who really need the help.

KEY INFORMANT SURVEY *TRANSPORTATION, ACCESS TO SERVICES & RECREATION*

Transportation

The key informant survey included three sections of service needs with items related to transportation, recreation, or access to services. The tables below summarize their ratings. Percentages indicate how many key informants rated the needs as High or Moderate.

Table 5.3. Community Needs Rated as either Moderate or High Need by 50% or More of Key Informants

SERVICE NEED	%
Public transportation (for elderly and disabled)	83.3%
Public transportation (for all)	73.3%

The two items in the category of “Transportation” were rated as either Moderate or High Needs by over 50% or more of the key informants. Public transportation for elderly and disabled persons ranked among the top 10 needs, out of 109 items.

Recreation

Table 5.4. Community Needs Rated as either Moderate or High Need by 50% or More of Key Informants

SERVICE NEED	%
Transportation to youth recreation	63.3%
Youth recreation services	53.3%

The issues in Table 5.4 above are good examples of the ways in which transportation is a limiting factor or barrier. Activities may exist, but people have to be able to get to them.

System-Wide Issues

Table 5.5. Community Needs Rated as either Moderate or High Need by 50% or More of Key Informants

SERVICE NEED	%
Planning and coordination of services	60.0%
Community organizing	53.3%
Information and referral	53.3%

All three items in the category of “System-Wide Issues” were identified by key informants as substantial issues of need. See the discussion below for related open-ended comments under “Barriers.”

Specific Population Groups in Need of Services

Key informants were asked to rate the degree to which specific populations are in need of service. Of the key informants, 51.6% rated Physically Disabled persons as a population with “Extremely” or “Very Serious” need for services. This would include disabled persons specialized needs for transportation.

Services in Greatest Need of Expansion

When asked to list the services most in need of expansion, seven of the 30 key informants wrote that “Transportation” was either the *most* or *second most* “service in need of expansion” in San Juan County. In written comments below, key informants elaborated upon the extent to which transportation is a barrier to receiving services.

Barriers

In the short narratives section of the survey, key informants were asked to describe any “barriers that might prevent people from using existing services.” The significance of transportation and its role in access to services is supported by the prevalence of comments (14) that mentioned “transportation” specifically.

Other common categories of response to this question centered on the need to work together as a community to increase *access* to and *awareness* of services, including:

- A need for greater cohesion between agencies
- Combining efforts that promote services
- More central access points for services, such as Community Centers

These responses are consistent with past needs assessment reports suggesting that community building and collaboration are an ongoing process.

6. EDUCATION

While similar percentages of San Juan County youth complete high school, fewer high school students go on to receive college degrees than in New Mexico and the nation.

Why is it important? Education provides environments rich in stimulation for positive development, literacy, and success. In addition, the education level of parents is a key influence on the health outcomes of the family and, low educational levels predict long-term poverty. According to the Child Trends DataBank:

“Young adults who have completed higher levels of education are more likely than those who have not to achieve economic success. Although many jobs have minimum educational requirements, completing more years of education protects against unemployment. Further, higher levels of educational attainment lead to higher wages and income: In 2000, Americans with bachelor's degrees or higher earned a median income that was more than double that of their peers with only high school diplomas.”⁷¹

Section Highlights

- Over the past 12 years, key informants have consistently perceived a very high need to lower the high school dropout rate in San Juan County. Although it is seen as a long-standing problem, social indicators suggest there is an even bigger issue with educational attainment at upper levels of education.
- Nearly two out of three residents expressed concern about illiteracy and the quality of public education in San Juan County. And about one out of five San Juan County residents experience “reading well enough to get along” as a problem.

SOCIAL INDICATORS

EDUCATION

Dropout Rate

The High School dropout rate is a commonly used social indicator related to education. It is calculated as a percent by dividing the number of dropouts by the number of students enrolled in grades 9-12 on the 40th day of enrollment.

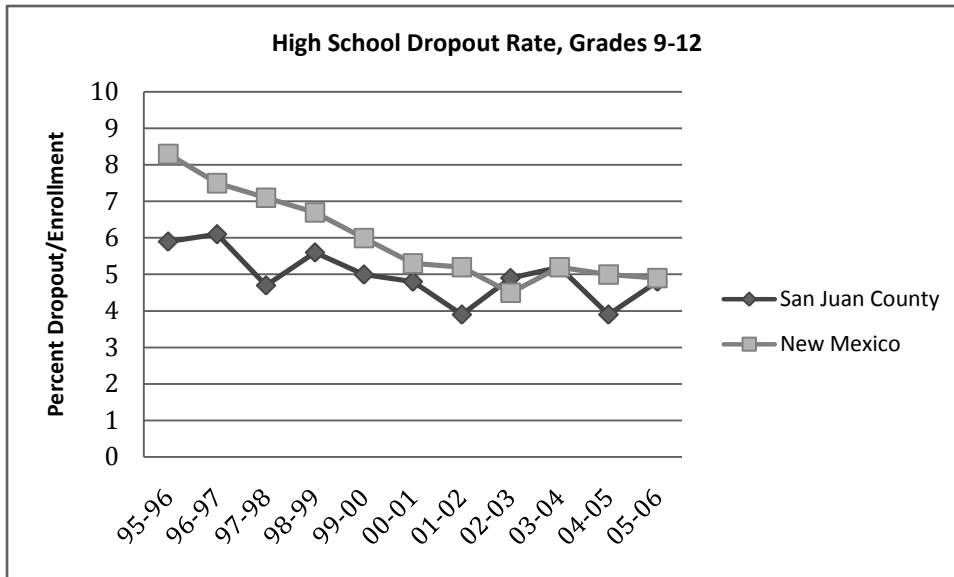


Figure 6.1. High School Dropout Rate, Grades 9-12, for San Juan County and New Mexico, School Years 1995-1996 through 2005-2006

The graph illustrates a gradual decline in the dropout rate for San Juan County.

SOURCE: New Mexico Department of Public Education

As seen in the graph over time, San Juan County’s overall dropout rate of 4.8 in the 2005-06 school year mirrors that of the state’s rate of 4.9 for the same year. For this year, San Juan County’s four school districts (Farmington, Central, Aztec and Bloomfield) were similar to one another, within +/- .2 of the county’s value.⁷² In the 2001-02 school year, New Mexico ranked 35th in the nation for the 9-12 grade dropout rate.⁷³

Graduation Rates

While dropout rates provide one indicator, the other side of the coin is the “graduation rate,” and this value is *not* the same as 100% minus the dropout rate. In order to better understand and ultimately encourage state initiatives aimed at preparing young people for college, the Editorial Projects’ Education Research Center published a comprehensive, national study of college and work readiness in the K-12 education system entitled “Diplomas Count: The Graduation Project 2007.” The study points to the great deal of work yet to be done with regard to defining college and work readiness, and establishing formal curricula.

The EP uses the Cumulative Promotion Index (CPI) method to calculate graduation rates in a manner that represents graduating from high school as a *process* rather than a single event. The CPI method of calculating graduation rates essentially estimates the likelihood that a 9th grader will complete high school on time with a regular diploma.

The national CPI graduation rate for the 2003-04 school year was approximately 70%; New Mexico’s is 60.1%, and the graduate rates for San Juan County’s four school districts were in the 50-60% range.⁷⁴

Educational Attainment

In 2005, approximately 80% of the population, 25 years of age or older in San Juan County had received at least a High School Diploma or equivalent, compared to 82% in New Mexico, and 84.3% in the nation.⁷⁵

Figure 6.2 below depicts the levels of educational attainment for San Juan County with state and national comparisons. Overall, a relative fewer number of people pursue educational degrees beyond high school in San Juan County, compared to New Mexico and the nation.

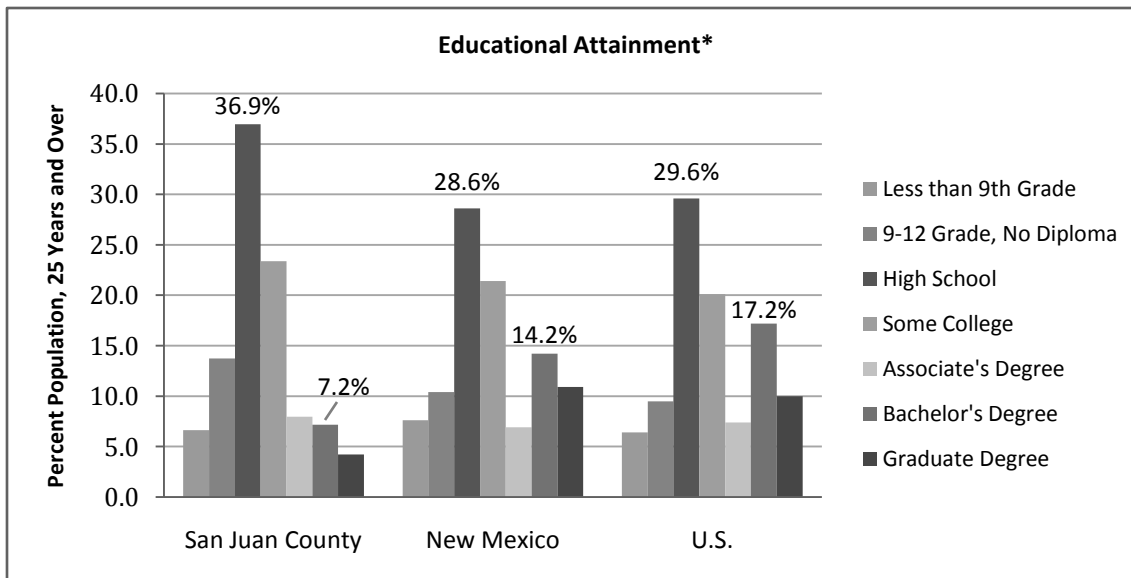


Figure 6.2.
Level of Educational Attainment in 2005, for San Juan County, New Mexico and the U.S.

SOURCE: 2005 American Community Survey, U.S. Census Bureau

*Percentages are given for High School and for Bachelor's Degree levels of education. Note that the higher percentage for High School is not an indicator that more people in San Juan County graduate high school. Rather, it reflects the higher percentage of high school students who do not pursue college degrees.

Achievement

One final social indicator is presented as a benchmark measure of educational achievement: the percentage of 4th graders who are at or above proficiency level in reading. The importance of this indicator is eloquently summarized by the national Child Trends DataBank:

“The ability to read proficiently is a fundamental skill that affects the learning experiences and school performance of children and adolescents. Students who are competent readers, as measured by their performance on reading tests, are more likely to perform well in other subjects, such as math and science. Reading achievement also predicts one's likelihood of graduating from high school and attending college. Reading skills also influence students' well-being as adults. For instance, illiterate adults find it difficult to function in society, as many basic decision-making skills require reading proficiency. People who are not able to fill out an application because of limited reading or writing skills are likely to have difficulty finding a job. Strong reading skills protect against unemployment in early adulthood. Research has confirmed that performance on adult literacy tests helps to explain differences in wages. Further, adults with limited reading abilities are likely to pass these limitations on to their children.”⁷⁶

For the 2005-06 school year, 50.2% of San Juan County 4th graders scored at or above proficiency level in reading, compared to 53% of New Mexico 4th graders.⁷⁷

RESPONDENT SURVEY**EDUCATION****Community Concerns**

The percentages of respondents who rated education-related issues as being either moderate or major problems in the county are summarized below. Numbers in parentheses refer to the rank (of 30) of the issue overall.

Table 6.1. Education-Related Community Concerns, Rated as either Moderate or Major Problems

ISSUE	2008	2004	2000	1996
Illiteracy	62.2% (17)	54.1% (16)	38%	66.5%
Quality of public education	60.0% (19)	53.5% (17)	67%	no data
After-school programs	48.5% (25)	43.9% (22)	26%	no data

Personal Household Concerns

The percentages of respondents who rated personal household concerns related to education as either moderate or major problems in their own households are summarized below.

Table 6.2. Education-Related Personal Household Concerns, Rated as either Moderate or Major

ISSUE	2008	2004	2000	1996
Help for child at school	20.4% (21)	16.9% (22)	25%	24.8%
Reading well enough to get along	18.7% (26)	12.6% (26)	3%	21.5%

As discussed earlier in the Social Indicators, literacy, and reading ability are key factors in one's ability to navigate the world. Notice that 18.7% of respondents expressed that they, or someone in their household, has moderate to major difficulty with "Reading well enough to get along." An additional 9.6% rate this as a "minor" problem. Together, this suggests that about one fourth of San Juan County residents experience reading as a challenge.

Education

Educational attainment as estimated by the Census was discussed earlier in the social indicators section. The table below summarizes the self-reported level of education among respondents. A somewhat higher proportion of respondents reported they had 'attended some college' or 'received Bachelor's degree or higher,' as compared to Census estimates for the county. Otherwise, the resident survey respondents are generally representative of San Juan County in terms of level of education.

Table 6.3. Level of Educational Attainment, Respondent Sample

Never attended school or only attended kindergarten	0.5%
Grades 1 through 8 (Elementary)	2.7%
Grades 9 through 11 (Some high school)	8.5%
Grade 12 or GED (High school graduate)	29.1%
College 1 year to 3 years (Some college or technical school)	40.4%
College 4 years or more (College graduate)	18.9%

KEY INFORMANT SURVEY**EDUCATION****Education**

The key informant survey included two sections of service needs related to Education. The tables below summarize their ratings. Percentages indicate how many key informants rated the needs as High or Moderate.

Table 6.4. Community Needs Rated as either Moderate or High Need by 50% or More of Key Informants

SERVICE NEED	%
Lower high school dropout rate	90.0%
Special programs for “at risk” students	63.3%
Special programs for low achieving students	56.7%
Lack of money for education	53.3%
Literacy training and other educational programs	53.3%
Quality public schools	50.0%

Out of a list of 13 community needs within the category of “Education,” the above six were rated as either Moderate or High Needs by over 50% or more of the key informants. The perception among key informants in this and in past years’ surveys is that the dropout rate is a substantial problem.

Key informants were less knowledgeable about the need for language instruction for Navajo children and English language instruction for Navajo speakers, as 30% selected “Don’t Know” on both of these items.

Recreation Services Related to Education

These two community needs below were rated as either moderate or high need by more than 50% of the key informants.

Table 6.5. Community Needs Rated as Either Moderate or High Need by 50% or More of Key Informants

SERVICE NEED	%
After school programs for youth	56.7%
Organized non-sport school activities	53.3%

Two of the 5 needs within the “Recreation” category were related to educational programming. The other items in this category are discussed in the *Transportation* section.

7. ENVIRONMENT

Two out of three San Juan County residents are concerned about the quality of the environment. Indicators strongly point to the need for serious attention and ongoing support of environmental issues.

Why is it important? San Juan County and the Four Corners Region have a diverse and highly valued landscape that has drawn people to live here, enjoying the surrounding natural beauty. San Juan County's Growth Management Plan eloquently summarizes the importance of the environment and its protection:

"San Juan County is located in an area of unique natural beauty with an abundance of natural resources. As the population of the county has grown and become more urbanized, people regard environmental issues in the area as quality of life issues. While many recognize the important role that energy-related industries (oil and gas, and power plants) play in the local economy, county residents expect these companies to protect the region's air and water as much as they can from environmental harm that can be caused by their operations"⁷⁸ (p. V-1).

Section Highlights

- According to the most recent data available, San Juan County is the worst county in New Mexico for release of toxic materials into the environment, and it is in the top 10% of the worst counties in the United States for particulate matter pollutants released by industrial facilities.
- The measurements of ozone are notably high for a rural area, according to the Air Quality Bureau, and dangerously close to the EPA's quality standard for the maximum acceptable level.
- Another pollutant that is of concern in the Four Corners is mercury, a toxic heavy metal known to build up and remain in the ecosystem. Mercury can be found at toxic levels in fish in many areas in San Juan County.
- According to the New Mexico Oil Conservation Division, San Juan County has had by far the most incidents of groundwater contamination related to oil and gas pits, compared to other counties in New Mexico.
- Trash, junk and the physical appearance of the county are frequently mentioned concerns on this and similar community surveys.

SOCIAL INDICATORS**ENVIRONMENT**

According to *Scorecard*, a pollution information website, San Juan County is the worst county in New Mexico for release of toxic materials to the environment, and is ranked in the top 10% of worst counties in the United States for toxic releases to the environment.

San Juan County's major industrial facilities, released 5,734,315 pounds of toxic waste into the environment in the year 2002 (the most recent year available). The second highest county in New Mexico for release of toxic materials was Grant County, with 3,506,880 pounds.⁷⁹ These values are reported by industrial facilities required to report their environmental releases and waste management practices annually to the Environmental Protection Agency.

Air Quality

The U.S. Environmental Protection Agency (EPA) has established ambient air quality standards for six "criteria" pollutants. Three of these six pollutants, ozone, nitrates (formed from Oxides of Nitrogen) and particulate matter, are of particular concern in the Four Corners region due to increased oil and gas operations, power plants, and general growth. Research on the effects of prolonged exposures to relatively low levels of ozone have found reductions in lung function and respiratory discomfort.⁸⁰

According to a comprehensive and in-depth report by the Four Corners Air Quality Task Force, a multi-entity effort formed to look at air quality issues in the Four Corners region, "this area has not exceeded the federal health standards for these pollutants, but air monitoring in the region has shown that concentrations are *approaching federal ambient air quality standards for ozone*"⁸⁰ (p. vii). (Italics added.)

Ozone

The Air Quality Bureau operates [three] monitoring stations in San Juan County that measure ozone, one station west of Farmington near PNM San Juan Generating Station, one north of Bloomfield near the Bloomfield Gas Corridor, and a newly installed station near Navajo Lake, which began monitoring on 3/23/06. Real-time results can be viewed online at <http://air.state.nm.us/>.

The EPA's "ozone standard" is .08 parts per million (ppm). This is the quality standard for comparing the monitoring stations' 3-year averages of the 4th highest 8-hour average per year. These 3-year average levels for the Farmington and Bloomfield stations have ranged between .068 to .076 ppm over the last 7 years. A 3-yr average is not yet available for the Navajo Lake station, but the first two years values have been .079 ppm.

The measurements of ozone from these stations are notably high for a rural area. According to the Air Quality Bureau (ABQ), "most areas with high ground-level ozone concentrations are densely-populated cities." Moreover, the AQB continues, "if ozone concentrations in San Juan County [were to] exceed the federal ozone standards, the New Mexico Environment Department would have to implement a plan to reduce air pollution in order to protect public health," an endeavor that would have a significant economic impact for the area."⁸¹

The New Mexico Department of Health, in collaboration with the University of New Mexico, are monitoring the connection between high levels of ozone pollution and emergency department / urgent care visits for asthma, particularly among pediatric and geriatric populations. Other studies in more populated areas have demonstrated a clear relationship between pediatric ER visits for asthma and ozone levels.^{82, 83}

Particulate Matter (PM)

Particle pollution, also known as particulate matter, is pollution that results from a variety of sources, including vehicle exhaust, wood burning, mining and utility smokestacks. Particulate matter air pollution is especially harmful to people with lung disease such as asthma, chronic bronchitis and emphysema. According to *Scorecard*, a pollution information website, San Juan County is in the top 10% of the worst counties in the United States for PM-2.5 emissions, PM-10 emissions, and sulfur dioxide emissions. Power plants are the major contributor of these three pollutants.⁷⁹

Water Quality (Surface and Ground)

The San Juan Watershed Group (SJWG) began meeting in 2001 to discuss concerns and develop management strategies related to water quality in the San Juan Basin. In the Group's Management Plan it was noted that the Surface Water Quality Bureau has identified "all parts of the San Juan, Animas, and La Plata Rivers as being impaired by one or more pollutants."⁸⁴

One of the pollutants under observation is mercury, a toxic heavy metal that can, even in small amounts, cause physiological problems, illness, and even death, according to Dr. Grossman, a Durango physician researching the effects of mercury on pregnant women and their newborn infants.⁸⁵ Mercury is a heavy metal that is released into the environment from coal-fired power plants, as well as disposal of common household products and equipment, and mining. The Environmental Protection Agency established the Clean Air Mercury Rule in 2005 to permanently limit and reduce mercury emissions from coal-fired power plants through the year 2018.

According to the Four Corners Air Quality Task Force, mercury is a pollutant that is of concern in the Four Corners region. Mercury builds up and remains in the ecosystem and can be found in toxic levels in fish in many areas in San Juan County.⁸⁰ Navajo Reservoir, Lake Farmington, and all three analyzed segments of the San Juan River are on the "2004-2006 303(d) List" for fish tissue mercury. The *303(d) List* provides guidelines for limiting fish consumption due to mercury contamination, particularly by persons who are sensitive to the effects (pregnant women, nursing mothers, women planning pregnancies and children under age 18).⁸⁶ The SJWG suggests that the primary sources of fish tissue mercury in the San Juan Basin are most likely atmospheric depositions, and runoff from areas impacted by historic and current mining.

Mercury is but one pollutant related to water quality in San Juan County. The New Mexico Oil Conservation Division (OCD) examines and publishes data related to groundwater contamination of all types, particularly as related to the activities of oil and gas mining. According to the OCD, there have been a total of 743 documented groundwater incidents related to the oil and gas industry in New Mexico. About half of these contain complete information on the counties in which pit contamination events occurred. "The existing data show that San Juan County, by far, had the most incidents of groundwater contamination related to oil and gas pits."⁸⁷

RESPONDENT SURVEY**ENVIRONMENT****Community Concerns**

The percentages of respondents who rated environment-related issue as being either moderate or major concerns in the county are summarized below. The number in parentheses refer to the rank (of 30) of the issue overall.

Table 7.1. Environment-Related Community Concerns, Rated as either Moderate or Major Problem

ISSUE	2008	2004	2000	1996
Environmental concerns	68.3% (14)	67.6% (9)	94%	64.5%

“Environmental concerns (air pollution, water pollution, cutting forests, destroying the land)” was rated as a moderate or major problem by over two thirds of San Juan County residents. It ranked somewhat higher (9th) in 2004 than on the current survey (14th of 30).

Additional Comments

When asked if there were other issues or concerns in the county that they had not been asked about, two frequently mentioned concerns were trash and illegal dumping, and a desire for zoning and enforcement of existing zoning restrictions.

Respondents to a different community survey conducted by San Juan County concurred. The San Juan County Growth Management Plan identified that “the presence of trash and junk and in particular, junk cars, has been one of the issues ranked highest by residents of San Juan County through the county survey, the Growth Management Plan Town Hall meeting, sub-area meetings, and other public meetings”⁷⁸ (p. 8). On the county survey, over 800 of the 1,400 respondents stated they are not satisfied with the physical appearance of the county (e.g., trash and weeds). When asked if there were additional comments, the most frequent additional comments dealt with Trash/Junk.⁸⁸

V. SUMMARY, CONCLUSIONS & RECOMMENDATIONS

Respondent Survey: Year-to-Year Comparisons

Part A: Community Concerns

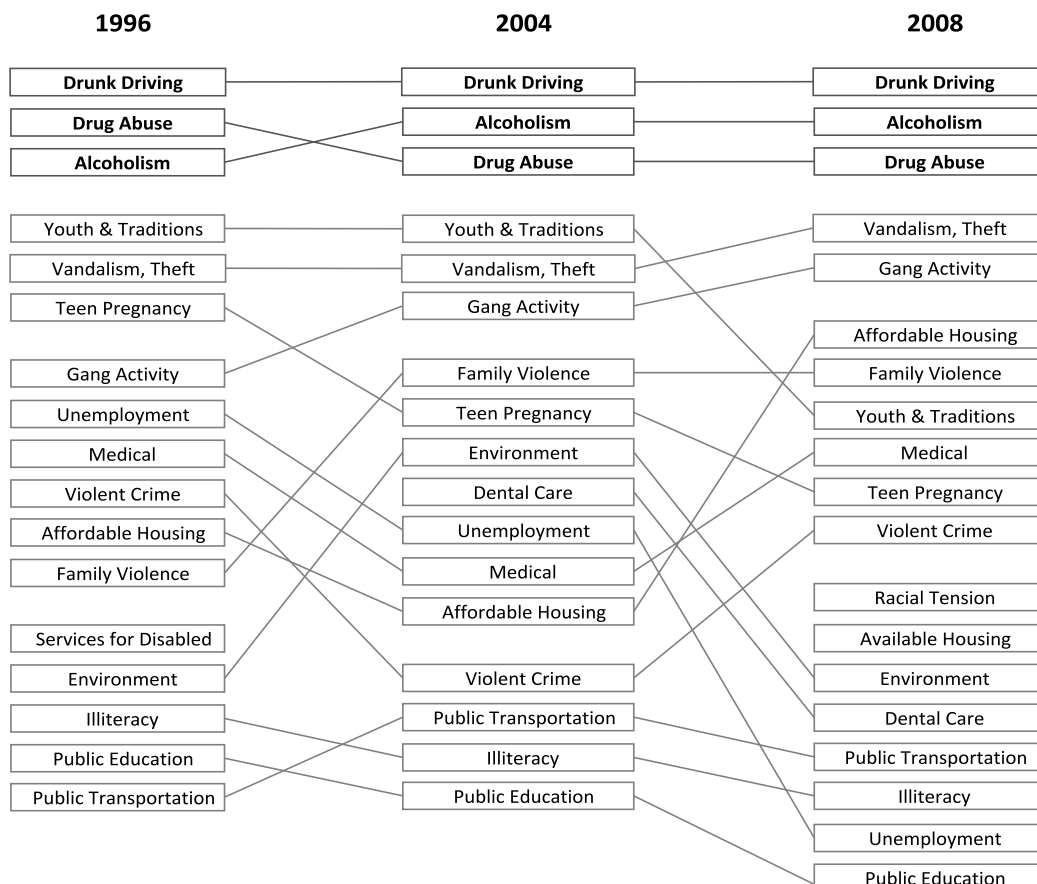
The graphic below depicts the year-to-year comparisons for Part A of the Respondent Survey. Recall that Part A asked residents to rate problems in San Juan County. Items are grouped by percentage clusters. *(Surveys shown are those based on random samples only.)*

Summary of Trends and Consistencies

Issues related to drunk driving, alcoholism and drug abuse have been consistently identified as prominent concerns by more than 90% of residents for all survey years. Similarly, vandalism and gang-related activity have been top-ranked priorities across all survey years.

Four trends stand out, consistent with social indicator data: (1) a gradual decrease in concern regarding teen pregnancy, consistent with actual decline in teen pregnancy rate; (2) a decline in concern regarding unemployment, also consistent with a decreased unemployment rate over the past 12 years; (3) a substantial increase in concern related to affordable housing, consistent with increases in cost of housing relative to income; and (4) an increased in concern regarding problems of family violence and abuse since 1996.

Table V.1. Comparisons of Respondent Survey, Part A, Years 1996, 2004 and 2008



Part B: Personal Household Concerns

The graphic below depicts the year-to-year comparisons for Part B of the Respondent Survey. Part B asked residents to rate personal household problems according to how much of a problem the issue had been for them or for someone in their households within the 12 months prior to the survey. *(Surveys shown are those based on random samples only.)*

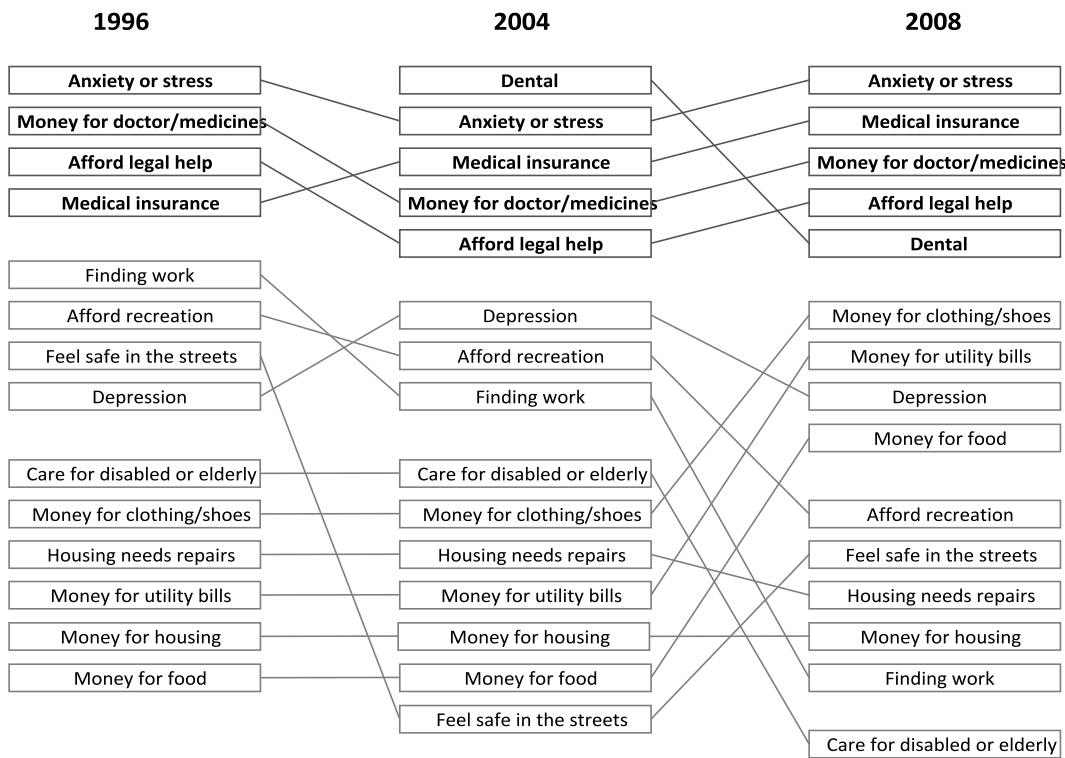
Summary of Trends and Consistencies

Anxiety or stress represents the most consistently top-ranked personal problem experienced by San Juan County residents, right along with issues related to affordability/availability of medical care and of legal help.

Household problems related to affording both medical care and basic material needs are prominent challenges facing San Juan County residents. Financial hardship is clearly a root issue that runs throughout. Having enough money for basic essentials including clothes, cost of utilities, and money for food have risen in recent years, while affording recreational activities has declined. Residents are likely facing a degree of financial burden that is forcing them to prioritize.

Problems related to finding work have decreased over the past 12 years, consistent with positive economic indicators of growth and employment. However, the degree of financial burden expressed on other items suggests that while residents are more likely to be employed, they may not be making a wage that would ensure financial stability and security.

Table V.2. Comparisons of Respondent Survey, Part B, Years 1996, 2004 and 2008



Key Informant Survey – Top-Ranked Community Service Needs

Below are the top-ranked community service needs rated as either Moderate or High Need by 70% or more of the respondents on the Key Informant Survey. *(Only the current year survey is shown. In general, year-to-year comparisons of the results of key informant surveys are less useful, as they are based on a small group (~30-50) who are not randomly selected. However, the interested reader can find the top 15 ranked service needs for all four survey years at the end of Appendix D.)*

Table V.3. Key Informant Survey, Top-Ranked Community Service Needs

Service Need	High + Moderate Need
Availability of affordable rental housing	93.3%
Housing assistance (short term)	90.0%
Housing assistance (long term)	90.0%
Lower High School drop-out rate	90.0%
Public transportation (for elderly and disabled)	83.3%
Treatment for other substances (marijuana, meth, etc.) (youth)	83.3%
Treatment for other substances (marijuana, meth, etc.) (adult)	83.3%
Prevention of other drug use (marijuana, meth, etc.) (youth)	83.3%
Prevention of other drug use (marijuana, meth, etc.) (adult)	80.0%
Low cost child care	73.3%
Availability of affordable homes for ownership	73.3%
Public transportation (for all)	73.3%
Alcoholism treatment (youth)	70.0%
Alcohol use prevention (adult)	70.0%
Alcoholism treatment (adult)	70.0%
DWI prevention (youth)	70.0%
Gang violence prevention	70.0%
Crisis intervention for mental illness	70.0%
Short-term shelter	70.0%

Summary of Key Findings

The above rankings of the 2008 Informant Survey substantiate the conclusion that issues of affordability and financial hardship are at the core. Affordable and available housing, higher educational attainment, which typically results in higher salaried employment, along with public transportation, and low cost child care are clearly identified as highly needed services.

Ongoing community needs related to substance abuse treatment and prevention are also high priorities, just as they have been in previous years' surveys, realizing that these are the *top 19* ranked service needs out of *109* items ranked by key informants. (For the complete list of all 109 items, see *Appendix D.*)

Conclusions & Recommendations

Based on highest ranked priorities of county-wide and personal household problems, in combination with social indicator data, conclusions and recommendations are:

- 1.** DWI, alcoholism and other substance abuse issues are the highest ranked community problems in San Juan County.
 - The ongoing work and effort in county-wide prevention and treatment of alcoholism, substance abuse and efforts to reduce drinking and driving has been accompanied by signs of improvement (e.g., fewer alcohol-related crashes, active DWI enforcement) that have not yet penetrated public awareness and identity. This priority issue proves to be an intransigent problem, however, with the need for continued vigilant effort.
 - Continued efforts aimed at changing community norms related to excessive alcohol use and to drinking and driving are suggested, as are efforts aimed at increasing protective factors such as family and youth mentoring and school-based prevention programs.
 - While it is a recognized problem, it was found that residents in San Juan County actually overestimate the degree to which young people in the county engage in alcohol-and substance abuse related behaviors, including drinking and driving. Correcting these misperceptions with more accurate and positive portrayals of San Juan County youth could contribute to greater self-efficacy and ultimately to a reduction of risk behaviors.

- 2.** In residents' personal and immediate experience, anxiety and stress, affordable, available and accessible health care services, in addition to general financial strain, are the most pressing problems.
 - Stress is a fundamental variable that should not be overlooked or underestimated, as it affects residents' ability to cope with challenges of all kinds, and is connected in degree to physical health, substance use, increased accident rates, and conflict in relationships. Employee- and community-based programs aimed at stress management are encouraged, including recreational, physical exercise, as well as focused mental health counseling. Programs specifically designed to help residents alleviate financial burden and related stress, including life-skills courses that teach budget management, are highly encouraged.
 - It is anticipated that long-term economic / job development and diverse economic growth will in the long run contribute to greater financial solvency among San Juan County residents. San Juan County's Growth Management Plan⁸⁸ outlines a comprehensive structure of implementing positive and responsible growth, including suggestions for attracting new industries and business, and building a diverse job market.
 - As was described in *Section 6: Education*, San Juan County residents are less likely to complete advanced college degrees than in other areas. In terms of long-term strategies to reduce poverty, continued focus on programs aimed at increasing high-school graduation rates, educational attainment, and career preparation will be beneficial.

- 3.** Affordable housing, both rental and for ownership, is a strong need which has been increasing in severity. Energy efficiency is the highest housing upgrade need. Three related areas are considered:
- Ongoing efforts are necessary that provide assistance for residents to move along the continuum, from homelessness through stable homeownership. It was noted that renters are especially cost-burdened, and affordable rental housing is an immediate need in the county.
 - Clearly, affordable housing is a serious need, including safe, decent and affordable housing near schools and places of work. The population has been growing faster than the housing supply, and the cost of housing has been outpacing income. Planners are encouraged to consider the existing *values* of residents when planning types of housing developments. For example, it could be surmised that many San Juan County residents have a desire for independence, choosing less-expensive mobile-home situations in more rural areas that allow them to have animals and fewer restrictions, rather than apartment-style situations. That is not to say that multi-unit, multi-family housing developments are not needed. But further examination of housing supply and demand, and what residents want and are willing to pay for will be fruitful and should precede any strategic plan.
 - A third area is that of energy efficiency. Continued and innovative programs are recommended that: (a) teach residents to utilize basic strategies for enhancing the energy efficiency of their homes; (b) help residents afford existing utility costs and energy efficient upgrades, and (c) in the long run, and for new construction, explore alternative building methods that produce efficient heating and cooling.
- 4.** Crime, safety, and family violence are prominent concerns among San Juan County residents.
- It is important to continue monitoring social indicator data related to property and violent crime, juvenile crime, bullying and perceptions of safety. Violence prevention programs in schools, such as anti-bullying initiatives, are also encouraged.
 - Ongoing and continued building of school- and community-based programs that provide family and parenting support and classes on positive discipline and relationship skills are highly encouraged, as these strategies are core to violence prevention. Research strongly suggests that connectedness to school and/or work and family/community caring relationships are protective factors that result in lower rates of risk and law-violating behaviors.⁶³
- 5.** Better access to and awareness of existing services for everyone and particularly for high-need or less-mobile populations is a clearly recognized need.
- In every SJCP Needs Assessment survey year since 1996, key informants have described a need for increased access to and awareness of services. At a systems level is the need for greater cohesion and collaboration between agencies in order to reduce duplication of services and pool resources for promoting existing services. Community Centers, both existing and newly planned, could be funded as central access points for services of all kinds, and for ongoing adult and family needs assessments.
 - All support mechanisms around transportation represent a critical aspect of access to services. A study is recommended to truly assess and better define the parameters of a system that will effectively get people who need access (e.g., rural, elderly, residents with disability, financially burdened) where they need to go (e.g., medical appointments, shopping, social events, other services) in a financially feasible manner.

Suggestions for Future Needs Assessments

The current community needs assessment was a replication of past investigations, and was necessarily broad in scope. It is suggested that interim needs assessments be conducted which are more focused on distinct areas in need of improvement. An update of social indicator data after the 2010 Census will be beneficial.

It has been said that the "Instrument is an intervention." In other words, the nature of a survey instrument contributes to the process of building a *community identity*. Survey instruments should be modified to include asset-based assessments, asking residents about both community and personal strengths. Along these lines, future needs assessments would greatly benefit from inviting participants to give solution-based ideas, and encouraging them to choose problems that they would be willing to give effort, time and money to working on. Doing so would personally engage residents in an active process of creating a vision for the future of their community, thereby grounding the assessment process itself in the vision of an empowered community.

"As a single footstep will not make a path on the earth, so a single thought will not make a pathway in the mind. To make a deep physical path, we walk again and again. To make a deep mental path, we must think over and over the kind of thoughts we wish to dominate our lives."

~ Henry David Thoreau, *American philosopher*

APPENDIX A: DATA SOURCES & REFERENCES

Social indicator references and data sources are listed below. Data sources are organized within section, and numbered references are consecutive throughout.

SECTION	INDICATOR	REFERENCES AND DATA SOURCES
Methodology	Needs Assessments, San Juan County Partnership	¹ 1996 San Juan County Needs Assessment, March, 1995 W. Larry Gregory, Ph.D. San Juan County Partnership, Inc.
		² 2000 Needs Assessment of San Juan County: A Follow-up Survey Jo Kinberger, LISW & Bill Kaul San Juan County Partnership, Inc.
		³ 2004 San Juan County Needs Assessment Carol Pierce Phillips San Juan County Partnership, Inc. http://www.sjcpartnership.org/Needs_Assessment_2005.pdf
	Social Indicators – Suggested References	⁴ 2005 Leading Social Indicators: Measuring What’s Important, Making a Difference National Association of Planning Councils http://www.socialindicators.com/documents/NAPC_SocialIndicators.pdf http://www.communityplanning.org/
		⁵ United Way, State of Caring Index <i>National State of Caring, Home Page</i> http://national.unitedway.org/stateofcaring/
		⁶ Child Trends DataBank http://www.childtrendsdatbank.org/
Demographics	Population; Median Age	⁷ U.S. Census Bureau, 2006 American Community Survey http://factfinder.census.gov
	Number of Households	⁸ Population Estimates and Projections Bureau of Business and Economic Research, University of New Mexico http://www.unm.edu/~bber
	Gender; Ethnicity	⁹ U.S. Census Bureau, State and County Quick Facts http://quickfacts.census.gov/qfd/states/35/35045.html
DWI, Alcohol & Other Substance Abuse	Alcohol-Related Chronic Disease	¹⁰ <i>New Mexico State Epidemiology Profile Strategic Prevention Framework - State Incentive Grant (SPF-SIG) (Spring, 2005)</i> Substance Abuse Epidemiology Unit New Mexico Department of Health http://www.health.state.nm.us/pdf/SPF-SIG_State_Epi_Report_v3.2.pdf
	Alcohol-Related Injury Deaths	¹¹ <i>New Mexico Selected Health Statistics Annual Report for 2005</i> Santa Fe, New Mexico: New Mexico Department of Health Bureau of Vital Records and Health Statistics, August, 2007 http://www.health.state.nm.us/epi/hdata.html
		¹² <i>New Mexico Office of the Medical Investigator: 2006 Annual Report</i> http://omi.unm.edu/About/reports.aspx (Unpublished tables for county-level data provided courtesy of New Mexico OMI.)

SECTION	INDICATOR	REFERENCES AND DATA SOURCES
DWI, Alcohol & Other Substance Abuse, cont.	Motor Vehicle Fatalities; Alcohol-Involved Crash Fatalities	¹³ New Mexico Traffic Safety Bureau, as processed by the Division of Government Research, University of New Mexico http://www.unm.edu/~dgrint/ (County & State Data)
	National Traffic Statistics	¹⁴ U.S. Department of Transportation's Fatal Analysis Reporting System National Highway Traffic Safety Administration http://www.nhtsa.dot.gov
		¹⁵ <i>Alcohol Epidemiologic Data System</i> . Yi, H., Chen, C.M., and Williams, G.D. Surveillance Report #76: Trends in Alcohol-Related Fatal Traffic Crashes, United States, 1982–2004. Bethesda, MD: National Institute on Alcohol Abuse and Alcoholism, Division of Epidemiology and Prevention Research (August 2006) Data from the Fatality Analysis Reporting System (FARS), National Traffic Highway Safety Administration http://www.niaaa.nih.gov/Resources/DatabaseResources/QuickFacts/TrafficCrashes/
		¹⁶ National Center for Statistics and Analysis of the National Highway Traffic Safety Administration http://www-nrd.nhtsa.dot.gov
	<i>Note regarding calculation of rates</i>	¹⁷ State and county rates for fatality and injury crashes were calculated using July 1 Population Estimates by the Bureau of Business and Economic Research, University of New Mexico http://www.unm.edu/~bber/demo/bbercos.htm
	Alcohol-Involved Motor Vehicle Injury Crashes	¹⁸ New Mexico Traffic Safety Bureau, as processed by the UNM Division of Government Research, Available online, DWI Resource Center, Inc. http://www.dwiresourcecenter.org/datacenter/research.shtml
	DWI Arrests and Convictions; Youth DWI Arrests	¹⁹ New Mexico Motor Vehicle Division, as processed by the UNM Division of Government Research, Available online, DWI Resource Center, Inc. http://www.dwiresourcecenter.org/datacenter/research.shtml
		²⁰ <i>DWI in San Juan County: A Problem Statement</i> DWI Highlights, March 2005 A DWI Resource Center, Inc. Publication http://www.dwiresourcecenter.org
Youth: Episodic Heavy Drinking; Drinking and Driving; First-time Use	²¹ <i>2005 New Mexico Youth Risk and Resiliency Survey (YRRS): San Juan County Report</i> New Mexico Department of Health http://www.health.state.nm.us/yrrs.html	
	²² <i>Youth Risk Behavior Surveillance — United States, 2005</i> Morbidity and Mortality Weekly Report June 9, 2006 / Vol. 55 / No. SS-5 Department of Health and Human Services Centers for Disease Control and Prevention http://www.cdc.gov/mmwr/preview/mmwrhtml/ss5505a1.htm	
<i>Additional Reference</i>	²³ <i>The National Survey on Drug Use and Health Report, October, 2004</i> Office of Applied Studies, Substance Abuse and Mental Health Services Administration (SAMHSA) http://www.oas.samhsa.gov/2k4/ageDependence/ageDependence.htm	

SECTION	INDICATOR	REFERENCES AND DATA SOURCES
Health & Wellness	Low Birth Weight; Low or No Prenatal Care; First Trimester Prenatal Care; Infant Mortality	²⁴ <i>2006 Vital Statistics Natality Summary</i> Bureau of Vital Records and Health Statistics Epidemiology and Response Division, Santa Fe, NM: New Mexico Department of Health, October 2007 http://www.health.state.nm.us/epi/hdata.html
		²⁵ <i>KIDS COUNT Data Book, 2007</i> (State and County Profiles) New Mexico Voices for Children http://www.nmvoices.org/kidscount.htm
		²⁶ <i>2007 KIDS COUNT Data Book: State Profiles of Child Well-being</i> (State and U.S. Profiles) Annie E. Casey Foundation, 2007 http://www.aecf.org/upload/PublicationFiles/databook_2007.pdf
	National Low or Late Prenatal Care; First Trimester Prenatal Care	²⁷ <i>FastSTATS – Prenatal Care</i> U.S. Department of Health and Human Services Centers for Disease Control and Prevention National Center for Health Statistics http://www.cdc.gov/nchs/fastats/prenatal.htm
	Teen Birth Rate; Births to Single Mothers	²⁸ <i>2003 San Juan County Health Profile; Selected Health Statistics Annual Reports for 2003; 2004; and 2005.</i> Santa Fe, New Mexico: New Mexico Department of Health Bureau of Vital Records and Health Statistics, 2005; July, 2006; August, 2007 http://www.health.state.nm.us/epi/hdata.html
	Adequate Level of Prenatal Care (Kotelchuck Index)	²⁹ <i>New Mexico Pregnancy Risk Assessment (PRAMS) County Data Tables, Birth Years 1998-2003</i> Santa Fe, NM: NM Department of Health, June 2005 http://www.health.state.nm.us/phd/prams/
	Children & Households Receiving Aid	³⁰ U.S. Census Bureau, 2006 American Community Survey Table B09001 http://factfinder.census.gov
	Children in Poverty	³¹ U.S. Census Bureau, Small Area Income & Poverty Estimates http://www.census.gov/hhes/www/saipe/index.html
	Percentage of Students Receiving Free and Reduced Lunches	³² <i>KIDS COUNT Data Book, 2007</i> New Mexico Voices for Children http://www.nmvoices.org/kidscount.htm (County total calculated from school district data.)
Food Insecurity	³³ <i>New Mexico Pregnancy Risk Assessment (PRAMS) County Data Tables, Birth Years 1998-2003</i> Santa Fe, NM: NM Department of Health, June 2005 http://www.health.state.nm.us/phd/prams/	
	³⁴ <i>2005 New Mexico Youth Risk and Resiliency Survey (YRRS): San Juan County Report</i> New Mexico Department of Health http://www.health.state.nm.us/yrrs.html	
Additional Reference	³⁵ <i>Hunger: Its Impact on Children's Health and Mental Health</i> Weinreb, L., MD, et al., Pediatrics, Vol. 110 No. 4 October 2002 http://www.pediatrics.org/cgi/content/full/110/4/e41	

SECTION	INDICATOR	REFERENCES AND DATA SOURCES
Health & Wellness, cont.	Child Abuse, Substantiated and Unsubstantiated Cases	³⁶ 360 Degrees County Profiles Protective Services, Children, Youth Families Department, State of New Mexico http://www.cyfd.org/pscounty_profiles.htm (Q 2, 2008, unpublished county data provided, courtesy of CYFD.)
	Leading Causes of Death	³⁷ New Mexico Selected Health Statistics Annual Report for 2005 Santa Fe, New Mexico: New Mexico Department of Health Bureau of Vital Records and Health Statistics, August, 2007 http://www.health.state.nm.us/epi/hdata.html
	Health Care Professionals	³⁸ Geographic Access Data System & Selected Health Professionals, 2006 (December, 2007) New Mexico Health Policy Commission www.hpc.state.nm.us
	Nursing Professionals, National Information on Nursing Shortage	³⁹ Health Resources and Services Administration US Department of Health and Human Services, Bureau of Health Professionals http://bhpr.hrsa.gov/healthworkforce/ (National rate calculated from number of estimated active RN in United States with U.S. Census, 2006 American Community Survey population estimate.)
	Nursing Shortage, I.H.S., Navajo Nation	⁴⁰ Matthew Merrill, R.N., Acting Nurse Recruiter Northern Navajo Medical Center, Shiprock, NM (Personal Conversation)
	Medical Insurance	⁴¹ Insure New Mexico! Council Report to Governor Bill Richardson, January 21, 2005 http://www.insurenwemexico.state.nm.us/ ⁴² 2007 County Financing of Health Care (December 2007) New Mexico Health Policy Commission www.hpc.state.nm.us
	Additional Reference	⁴³ SJC Services and Planning Community Survey San Juan County Growth Management Plan Appendix A: Survey Results http://www.sjcounty.net/GrowthManagement.aspx
Economics & Housing	Job Growth	⁴⁴ New Mexico Department of Workforce Solutions Economic Research & Analysis Bureau Monthly News Release - Employment & Unemployment – (March 6, 2008) http://www.workforceconnection.state.nm.us/
	Unemployment	⁴⁵ New Mexico Department of Labor Economic Research and Analysis Bureau, 2006 Table A. Released 4/20/07; prepared by Bureau of Business and Economic Research, University of New Mexico http://www.unm.edu/~bber/
	Unemployment, Navajo Nation	⁴⁶ Navajo Nation Council Office of the Speaker Press Release, February, 2007 http://www.navajonationcouncil.org ⁴⁷ U.S. Census Bureau, Census 2000 Extracted by Trib Choudhary, Support Services Department, Division of Economic Development http://www.navajobusiness.com/fastFacts/Overview.htm

SECTION	INDICATOR	REFERENCES AND DATA SOURCES
Economics & Housing, cont.	Per Capita Income	⁴⁸ <i>BEARFACTS 1995 – 2005, New Mexico [35000]; San Juan, New Mexico [35045]</i> U.S. Department of Commerce, Bureau of Economic Analysis, April 26, 2007 http://www.bea.gov/bea/regional/bearfacts/
	Median Income; Poverty	⁴⁹ U.S. Census Bureau, Data Integration Division, Small Area Estimates Branch http://www.census.gov/hhes/www/saipe
	Reference	⁵⁰ Ross, D.P.(2003) <i>Policy Approaches to Address the Impact of Poverty on Health: A Scan of Policy Literature</i> Canadian Institute for Health Information http://dsp-psd.communication.gc.ca/Collection/H118-11-2003-2E.pdf
	Housing Supply; Median Home Values; Median Mortgage and Rent; Owner/Renter Costs as Percentage of Household Income; Homeownership; Vacancy Rate	⁵¹ U.S. Census Bureau Census 2000, Summary File 3 (SF 3) - DP-4. Profile of Selected Housing Characteristics: 2000; 2006 American Community Survey http://factfinder.census.gov
	Plumbing and Kitchen Facilities for Housing Units	⁵² U.S. Census Bureau, 2006 American Community Survey Tables B25047, B25048, B25051, B25052 http://factfinder.census.gov (Values for “Unoccupied” calculated from “All” and “Occupied Units.”)
		⁵³ U.S. Department of Housing and Urban Development (HUD) Appendix B, Glossary, Housing Problems http://www.huduser.org/publications/affhsg/worstcase/appendixb.html
	National Credit Card Debt Statistics	⁵⁴ Credit card industry facts and personal debt statistics (2006-2007) http://www.creditcards.com/statistics/credit-card-industry-facts-and-personal-debt-statistics.php ; Data Source: http://www.myfico.com
	Additional Reference	⁵⁵ <i>San Juan County Growth Management Plan, July 2007: X. Housing Element</i> Prepared by: Architectural Research Consultants, Inc., and Northwest New Mexico Council of Governments Available online: http://www.sjcounty.net/GrowthManagement.aspx
	Age of Housing Units	⁵⁶ U.S. Census Bureau, 2006 American Community Survey Table B25034 http://factfinder.census.gov
Crime & Safety	Index Crime Rate	⁵⁷ <i>Crime in the United States</i> FBI Uniform Crime Reports Annual Reports, 2003, 2004, 2005 & 2006 http://www.fbi.gov/ucr/ucr.htm
	Domestic Violence	⁵⁸ New Mexico State Court Annual Reports, Various Fiscal Years New Mexico Courts http://www.nmcourts.com/newface/annualrp/index.html
		⁵⁹ San Juan County Sheriff’s Office <i>Law Enforcement Domestic Violence Data Collection Form Quarterly Reports, 2006</i> http://www.sjcsso.com (See: Other News & Info › SJCSO Public › Department Statistics)

SECTION	INDICATOR	REFERENCES AND DATA SOURCES
Crime & Safety, cont.	Domestic Violence, cont.	⁶⁰ <i>2006 Domestic Violence Statistics – New Mexico</i> Betty Caponera, Ph.D. July 2007 National Coalition Against Domestic Violence http://www.ncadv.org/files/NewMexico.pdf
		⁶¹ <i>Incidence and Nature of Domestic Violence in New Mexico V: An Analysis of 2004 Data from The New Mexico Interpersonal Violence Data Central Repository</i> Betty Caponera, Ph.D. June 2005 National Coalition Against Domestic Violence http://www.swcp.com/nmcsaas/reports.html
	Juvenile Violent Crime	⁶² Office of Juvenile Justice and Delinquency Prevention <i>Easy Access to FBI Arrest Statistics, 1994 – 2005</i> , Puzzanchera, C., Adams, B., Snyder, H., and Kang, W. (2007) Available online: http://ojjdp.ncjrs.gov/ojstatbb/ezaucr/
		⁶³ <i>Juvenile Offenders and Victims: 2006 National Report</i> Office of Juvenile Justice and Delinquency Prevention U.S. Department of Justice http://ojjdp.ncjrs.org/ojstatbb/nr2006/
	Juvenile Justice Referrals	⁶⁴ <i>New Mexico Juvenile Justice Services Fiscal Year 2007, Annual Report (Published January, 2008)</i> Children, Youth and Families Department
Self-Reported Youth Violence and Safety Behaviors		⁶⁵ <i>2005 New Mexico Youth Risk and Resiliency Survey (YRRS): San Juan County Report</i> New Mexico Department of Health http://www.health.state.nm.us/yrrs.html
		⁶⁶ <i>Youth Risk Behavior Surveillance — United States, 2005</i> Morbidity and Mortality Weekly Report June 9, 2006 / Vol. 55 / No. SS-5 Department of Health and Human Services Centers for Disease Control and Prevention http://www.cdc.gov/mmwr/preview/mmwrhtml/ss5505a1.htm
Parent Survey, Child's Safety in School		⁶⁷ <i>Quality of Education Reports, various years</i> New Mexico State Department of Education, Data Collection and Reporting Unit http://www.ped.state.nm.us/div/is/data/resources/ (County total calculated from district data.)
Transportation, Access to Services & Recreation	Reference	⁶⁸ <i>San Juan County Growth Management Plan, July 2007</i> <i>VII. Transportation Element</i> Prepared by: Architectural Research Consultants, Incorporated, and Northwest New Mexico Council of Governments Available online: http://www.sjcounty.net/GrowthManagement.aspx
	Transportation Patterns; Service Populations	⁶⁹ U.S. Census Bureau 2006 American Community Survey http://factfinder.census.gov
	Service Population, Navajo Nation	⁷⁰ <i>The Needs of Native Americans with Disabilities: 2007 Needs Assessment</i> Native American Disability Law Center, Inc.

SECTION	INDICATOR	REFERENCES AND DATA SOURCES
Education	Reference	⁷¹ <i>Educational Attainment</i> Child Trends DataBank http://www.childtrendsdatbank.org/indicators/6EducationalAttainment.cfm
	Dropout Rates, County, State and National	⁷² <i>Annual Dropout Reports</i> , various years New Mexico State Department of Education, Data Collection and Reporting Unit http://www.ped.state.nm.us/div/is/data/resources/
		⁷³ <i>Dropout Rates in the U.S.</i> Institute of Educational Sciences U.S. Department of Education National Center for Education Statistics http://nces.ed.gov/pubs2007/dropout05/index.asp
	Graduation Rates	⁷⁴ <i>Diplomas Count: The Graduation Project, 2007;</i> <i>Ready for What?: New Mexico - A Special State-Focused Supplement to Education Weekly's Diplomas Count</i> , and <i>Special District Reports</i> EPE Research Center, Editorial Projects in Education http://www.edweek.org/go/dc07
	Educational Attainment	⁷⁵ U.S. Census Bureau 2006 American Community Survey http://factfinder.census.gov
	Reference	⁷⁶ <i>Reading Proficiency</i> Child Trends DataBank http://www.childtrendsdatbank.org/indicators/29ReadingProficiency.cfm
	4 th Grade Reading Proficiency	⁷⁷ New Mexico Public Education Department <i>District Report Cards</i> http://www.ped.state.nm.us/ (County total calculated from district data.)
Environment	General Reference	⁷⁸ <i>San Juan County Growth Management Plan, July 2007:</i> <i>V. Environment Element</i> Prepared by: Architectural Research Consultants, Inc., and Northwest New Mexico Council of Governments Available online: http://www.sjcounty.net/GrowthManagement.aspx
	Toxic Environment Releases	⁷⁹ <i>Environmental Release Report: SAN JUAN County, NM</i> http://www.scorecard.org/env-releases/county.tcl?fips_county_code=35045
	Air Quality	⁸⁰ <i>Report of Mitigation Options, November, 2007</i> Four Corners Air Quality Task Force http://www.nmenv.state.nm.us/aqb/4C/
	Ozone Data	⁸¹ Air Quality Bureau New Mexico Environment Department http://www.nmenv.state.nm.us/aqb/projects/Ozone.html http://www.nmenv.state.nm.us/aqb/projects/Ozone-Data.html
	Asthma and Ozone	⁸² <i>Studies on the Relationship Between Asthma Emergency Department Visits and Ozone: Part II</i> , Presented by Orrin Myers, PhD University of New Mexico http://www.nmenv.state.nm.us/aqb/ozonetf/Asthma%20and%20Ozone%20Part%20II.pdf

SECTION	INDICATOR	REFERENCES AND DATA SOURCES
Environment, cont.	Asthma and Ozone, cont.	⁸³ <i>Studies on the Relationship Between Asthma Emergency Department Visits and Ozone</i> Presented by Glenda Hubbard, MPH, September 15, 2005 New Mexico Department of Health www.nmenv.state.nm.us/aqb/ozonetf/Asthma%20and%20Ozone%20Part%20I.pdf
	Water Quality; Mercury	⁸⁴ <i>San Juan Basin Watershed Management Plan, January 2005</i> San Juan Basin Watershed Group http://www.nmenv.state.nm.us/swqb/Projects/SanJuan/BasinPlan/SanJuanBasinPlan.pdf
	<i>Mercury, General Reference</i>	⁸⁵ Mercury Study Flyer and Questionnaire http://www.mercury-matters.org
	Mercury	⁸⁶ The Integrated 2004-2006 CWA §§303(d)/305(b) List and documents related to mercury contamination are available online at the New Mexico Environment Department website: http://www.nmenv.state.nm.us/swqb/
	Groundwater Contamination	⁸⁷ New Mexico Oil Conservation Division Data Source: http://www.emnrd.state.nm.us/ocd/ Reference: http://www.earthworksaction.org/NM_GW_Contamination.cfm#COUNTIES
	<i>Reference</i>	⁸⁸ <i>San Juan County Growth Management Plan, July 2007: Appendix B: Excerpts from Town Hall Meeting Presentations Section IX, Economic</i> Prepared by: Architectural Research Consultants, Inc., and Northwest New Mexico Council of Governments Available online: http://www.sjcounty.net/GrowthManagement.aspx

APPENDIX B: COMMUNITY CONCERNS

In the table below are the items listed in Section A of the Respondent Survey. The combined ratings of moderate and major problem were used to determine the rank order.

ITEM/PROBLEM	Major + Moderate	Major Problem	Moderate Problem	Minor Problem	Not a Problem	Don't Know
1. Drunk driving	95.3%	76.8%	18.5%	2.5%	1.5%	0.8%
2. Alcoholism or excessive drinking	94.0%	77.9%	16.0%	3.8%	1.5%	0.8%
3. Drug abuse	92.8%	76.8%	16.0%	4.3%	1.3%	1.8%
4. Vandalism, theft, or burglary	83.5%	52.3%	31.3%	11.0%	3.5%	2.0%
5. Gang-related activity	83.0%	54.8%	28.3%	7.5%	3.3%	6.3%
6. Affordable housing	78.7%	53.4%	25.3%	11.0%	6.5%	3.8%
7. Family violence or abuse	78.0%	46.0%	32.0%	9.8%	3.8%	8.5%
8. Young people not learning or respecting family traditions	77.4%	51.1%	26.3%	9.5%	4.8%	8.3%
9. Availability, accessibility, or affordability of medical care	73.5%	48.3%	25.3%	12.3%	9.3%	5.0%
10. Teenage pregnancy	72.9%	45.6%	27.3%	8.8%	3.0%	15.3%
11. Assault, rape, or violent crime	71.3%	35.5%	35.8%	15.3%	5.0%	8.5%
12. Racial or ethnic tension or distrust	69.0%	38.5%	30.5%	17.5%	9.0%	4.5%
13. Available housing	68.7%	40.6%	28.1%	16.5%	7.8%	7.0%
14. Environmental concerns (air pollution, water pollution, cutting forests, destroying the land)	68.3%	39.7%	28.6%	15.8%	13.1%	2.8%
15. Availability, accessibility, or affordability of dental care	64.9%	39.8%	25.1%	14.5%	9.0%	11.5%
16. Inadequate public transportation	62.8%	32.0%	30.8%	16.0%	14.0%	7.3%
17. Illiteracy (people not being able to read)	62.2%	28.8%	33.3%	16.5%	10.5%	10.8%
18. Unemployment or under employment	60.9%	34.6%	26.3%	18.5%	13.5%	7.0%
19. Quality of public education	60.0%	31.5%	28.5%	16.3%	16.0%	7.8%
20. Overcrowded housing	56.3%	32.0%	24.3%	13.0%	10.5%	20.3%
21. Emergency food and shelter	55.8%	29.8%	26.0%	18.3%	8.3%	17.8%
22. Shortage of recreational facilities or programs	52.8%	31.7%	21.1%	23.1%	18.3%	5.8%
23. Availability, accessibility, or affordability of legal services	52.3%	29.1%	23.1%	16.3%	11.8%	19.6%
24. Shortage of child day care	50.6%	26.6%	24.1%	15.8%	10.5%	23.1%
25. After-school programs	48.5%	24.8%	23.8%	19.3%	12.3%	20.0%
26. Services and access for the disabled	48.2%	23.1%	25.1%	18.8%	10.8%	22.1%
27. Mental illness or mental problems	46.9%	19.0%	27.8%	21.6%	9.0%	22.6%
28. Teenage suicide	46.5%	19.8%	26.8%	23.0%	9.3%	21.3%
29. Adequate senior services	44.8%	19.4%	25.4%	18.4%	16.1%	20.7%
30. Availability of health care during pregnancy	38.6%	16.8%	21.8%	18.3%	16.0%	27.1%

APPENDIX C: HOUSEHOLD CONCERNS

In the table below are the items listed in Section B of the Respondent Survey. The combined ratings of moderate and major problem were used to determine the rank order.

ITEM/PROBLEM	Major + Moderate	Major Problem	Moderate Problem	Minor Problem	Not a Problem	Don't Know
1. Anxiety or stress	44.4%	20.7%	23.7%	22.2%	31.3%	2.0%
2. Paying for or getting medical insurance	41.5%	25.8%	15.7%	10.9%	45.6%	2.0%
3. Enough money to pay the doctor or buy prescription medicines	39.2%	23.5%	15.7%	11.6%	47.1%	2.0%
4. Being able to afford legal help	37.0%	23.5%	13.4%	10.1%	42.3%	10.6%
5. Availability, accessibility or affordability of dental care	36.6%	22.0%	14.6%	11.1%	48.7%	3.5%
6. Enough money to buy needed clothing and shoes	35.6%	17.7%	17.9%	14.1%	49.7%	0.5%
7. Enough money to pay the utility bills	35.4%	18.2%	17.2%	15.7%	48.4%	0.5%
8. Depression	35.1%	15.2%	19.9%	19.4%	43.2%	2.3%
9. Enough money for food	33.4%	18.7%	14.7%	14.2%	51.9%	0.5%
10. Affording recreational activities	33.3%	14.0%	19.3%	16.3%	46.8%	3.6%
11. Feeling safe and secure walking on the streets	32.4%	12.7%	19.7%	21.5%	44.1%	2.0%
12. Housing that needs major repairs	32.2%	15.7%	16.5%	18.5%	48.9%	0.5%
13. Enough money to pay for housing	31.9%	16.7%	15.2%	14.4%	52.9%	0.8%
14. Finding work	29.5%	14.6%	14.9%	11.9%	57.3%	1.3%
15. Your child's safety at school	24.2%	8.1%	16.2%	8.8%	57.8%	9.1%
16. Feeling safe and secure at home	23.2%	8.1%	15.2%	13.1%	62.1%	1.5%
17. Home health care for someone with a disability or serious illness, or for an elderly person	22.0%	13.6%	8.3%	8.8%	55.8%	13.4%
18. Room in your house for all the people who live there	21.0%	10.4%	10.6%	11.4%	67.4%	0.3%
19. Finding or affording child day care	20.5%	9.8%	10.6%	9.6%	60.6%	9.3%
20. Children or teenager's behavior or emotional problems	20.5%	9.1%	11.4%	14.4%	59.8%	5.3%
21. Getting adequate help for your child at school	20.4%	5.9%	14.5%	12.2%	58.8%	8.7%
22. Special transportation or availability of access for a disabled person	19.9%	11.6%	8.3%	9.3%	56.6%	14.1%
23. Alcohol and/or drug problem	19.7%	11.1%	8.6%	8.3%	69.9%	2.0%
24. Adult day care for someone with a disability or serious illness, or for an elderly person	19.7%	9.8%	9.8%	7.6%	57.3%	15.4%
25. Getting electrical hook-ups to your house / trailer	19.2%	9.1%	10.1%	7.1%	70.5%	3.3%
26. Reading well enough to get along	18.7%	6.8%	11.9%	9.6%	69.9%	1.8%
27. Finding after-school child care	17.7%	7.3%	10.4%	8.6%	63.9%	9.8%
28. Physical conflict in the household	16.7%	6.8%	9.9%	8.6%	72.4%	2.3%
29. Getting parenting training	15.7%	4.8%	10.9%	7.8%	64.1%	12.4%
30. Getting pre-natal care	13.4%	3.5%	9.9%	6.1%	65.3%	15.2%

APPENDIX D: KEY INFORMANT SURVEY RESULTS

In the table below are the results of Part A of the Key Informant Survey. The data are rank-ordered within categories. Combined ratings of High and Moderate Need were used to determine the rank order.

SERVICE NEED	High + Moderate	High Need	Moderate Need	Slight Need	No Need	Need Met	Don't Know
Housing							
Availability of affordable rental housing	93.3%	66.7%	26.7%	3.3%	0.0%	0.0%	3.3%
Housing assistance (short term)	90.0%	56.7%	33.3%	6.7%	0.0%	0.0%	3.3%
Housing assistance (long term)	90.0%	56.7%	33.3%	3.3%	0.0%	0.0%	6.7%
Availability of affordable homes for ownership	73.3%	50.0%	23.3%	10.0%	6.7%	0.0%	10.0%
Housing rehabilitation or repair	53.3%	20.0%	33.3%	16.7%	3.3%	6.7%	16.7%
Basic Material Needs							
Short-term shelter	70.0%	23.3%	46.7%	20.0%	0.0%	3.3%	3.3%
Financial assistance	66.7%	20.0%	46.7%	16.7%	0.0%	3.3%	10.0%
Food	46.7%	20.0%	26.7%	36.7%	0.0%	3.3%	10.0%
Utility bill assistance	43.3%	20.0%	23.3%	30.0%	3.3%	10.0%	10.0%
Clothing or furniture	33.3%	3.3%	30.0%	46.7%	3.3%	3.3%	10.0%
Physical Health							
Infant health care	60.0%	23.3%	36.7%	16.7%	0.0%	3.3%	16.7%
Nutrition counseling	56.7%	33.3%	23.3%	26.7%	0.0%	3.3%	13.3%
Environmental quality (air, water, land)	56.7%	33.3%	23.3%	23.3%	6.7%	0.0%	13.3%
Dental care	56.7%	33.3%	23.3%	16.7%	3.3%	10.0%	10.0%
Outpatient medical care	53.3%	20.0%	33.3%	23.3%	0.0%	6.7%	13.3%
Caregiver relief (for companions of disabled or terminally ill)	53.3%	13.3%	40.0%	20.0%	0.0%	0.0%	23.3%
Pre-natal care	50.0%	33.3%	16.7%	23.3%	0.0%	6.7%	16.7%
Home-health care (skilled)	50.0%	13.3%	36.7%	26.7%	0.0%	10.0%	13.3%
Diabetes prevention and/or treatment services	43.3%	26.7%	16.7%	16.7%	0.0%	10.0%	26.7%
Adult day care for the disabled	43.3%	23.3%	20.0%	20.0%	0.0%	0.0%	36.7%
Long-term hospitalization or nursing home care	43.3%	20.0%	23.3%	26.7%	3.3%	6.7%	16.7%
Homemaker or chore services	33.3%	10.0%	23.3%	30.0%	3.3%	10.0%	20.0%
Short-term inpatient treatment for physical illness	26.7%	13.3%	13.3%	40.0%	0.0%	3.3%	26.7%
Family planning	23.3%	13.3%	10.0%	33.3%	0.0%	13.3%	23.3%
Congregate or home delivered meals	20.0%	10.0%	10.0%	36.7%	3.3%	13.3%	26.7%
Services for persons with AIDS	20.0%	6.7%	13.3%	26.7%	3.3%	3.3%	46.7%
Transportation							
Public transportation (for elderly and disabled)	83.3%	50.0%	33.3%	6.7%	0.0%	3.3%	6.7%
Public transportation (for all)	73.3%	40.0%	33.3%	20.0%	0.0%	6.7%	0.0%

SERVICE NEED	High + Moderate	High Need	Moderate Need	Slight Need	No Need	Need Met	Don't Know
Employment							
Appropriate job market (better wages and job diversity)	56.7%	26.7%	30.0%	20.0%	10.0%	10.0%	0.0%
Job training	50.0%	23.3%	26.7%	33.3%	3.3%	6.7%	3.3%
Vocational rehabilitation	43.3%	13.3%	30.0%	36.7%	0.0%	6.7%	10.0%
Job training for the disabled	33.3%	16.7%	16.7%	33.3%	0.0%	6.7%	23.3%
Employee assistance programs	33.3%	3.3%	30.0%	30.0%	0.0%	13.3%	20.0%
Job training using Navajo as the language of instruction	30.0%	6.7%	23.3%	20.0%	10.0%	6.7%	30.0%
Employment placement programs	26.7%	3.3%	23.3%	46.7%	0.0%	13.3%	13.3%
Job training using Spanish as the language of instruction	23.3%	3.3%	20.0%	23.3%	13.3%	6.7%	33.3%
Recreation							
Transportation to youth recreation	63.3%	33.3%	30.0%	30.0%	0.0%	0.0%	6.7%
After school programs for youth	56.7%	23.3%	33.3%	33.3%	0.0%	3.3%	6.7%
Youth recreation services	53.3%	30.0%	23.3%	33.3%	3.3%	3.3%	6.7%
Organized non-sport school activities	53.3%	23.3%	30.0%	16.7%	6.7%	3.3%	16.7%
Adult recreation services	30.0%	16.7%	13.3%	43.3%	13.3%	6.7%	6.7%
Household Violence and Related Issues							
Services for victims of domestic assault (including youth)	56.7%	23.3%	33.3%	13.3%	3.3%	6.7%	16.7%
Services (e.g., counseling) for perpetrators of domestic assault (including youth)	56.7%	20.0%	36.7%	6.7%	0.0%	6.7%	20.0%
Child protective services	53.3%	23.3%	30.0%	20.0%	0.0%	6.7%	16.7%
Adult protective services	50.0%	13.3%	36.7%	16.7%	0.0%	6.7%	23.3%
Abuse prevention training for parents	46.7%	26.7%	20.0%	20.0%	0.0%	10.0%	20.0%
Services for victims of rape	43.3%	16.7%	26.7%	16.7%	3.3%	10.0%	23.3%
Education							
Lower High School drop-out rate	90.0%	56.7%	33.3%	6.7%	0.0%	0.0%	3.3%
Special programs for "at risk" students	63.3%	23.3%	40.0%	23.3%	6.7%	3.3%	3.3%
Special programs for low achieving students	56.7%	23.3%	33.3%	26.7%	6.7%	3.3%	6.7%
Lack of money for education	53.3%	30.0%	23.3%	26.7%	0.0%	0.0%	16.7%
Literacy training and other educational programs	53.3%	30.0%	23.3%	23.3%	3.3%	3.3%	16.7%
Quality public schools	50.0%	20.0%	30.0%	26.7%	10.0%	3.3%	6.7%
Special programs for gifted students	40.0%	16.7%	23.3%	26.7%	10.0%	6.7%	16.7%
Head Start	36.7%	13.3%	23.3%	26.7%	3.3%	16.7%	16.7%
Local four-year college	33.3%	23.3%	10.0%	40.0%	16.7%	10.0%	0.0%
Art and/or music instruction	33.3%	16.7%	16.7%	33.3%	0.0%	16.7%	16.7%
English language instruction for Spanish speakers	30.0%	10.0%	20.0%	30.0%	10.0%	3.3%	26.7%
Navajo language instruction for Navajo children	26.7%	16.7%	10.0%	20.0%	13.3%	10.0%	30.0%
English language instruction for Navajo speakers	26.7%	10.0%	16.7%	30.0%	10.0%	3.3%	30.0%

SERVICE NEED	High + Moderate	High Need	Moderate Need	Slight Need	No Need	Need Met	Don't Know
Family Support and Mental Health							
Low cost child care	73.3%	50.0%	23.3%	13.3%	0.0%	0.0%	6.7%
Crisis intervention for mental illness	70.0%	33.3%	36.7%	13.3%	0.0%	0.0%	16.7%
Parenting skills training	63.3%	30.0%	33.3%	10.0%	3.3%	6.7%	13.3%
Low cost counseling	60.0%	30.0%	30.0%	20.0%	0.0%	6.7%	10.0%
Family Support and Mental Health	60.0%	30.0%	30.0%	20.0%	0.0%	3.3%	16.7%
Short-term treatment for mental illness	53.3%	30.0%	23.3%	23.3%	0.0%	0.0%	23.3%
Outpatient counseling	53.3%	26.7%	26.7%	20.0%	3.3%	3.3%	16.7%
Child mentoring supports	50.0%	13.3%	36.7%	30.0%	0.0%	10.0%	10.0%
Long-term hospitalization & residential care for mental disorders	46.7%	26.7%	20.0%	10.0%	6.7%	0.0%	36.7%
Safe House for runaways	46.7%	20.0%	26.7%	26.7%	3.3%	3.3%	20.0%
Foster care for children & adolescents	46.7%	16.7%	30.0%	20.0%	3.3%	0.0%	30.0%
Family mentoring supports	46.7%	13.3%	33.3%	36.7%	0.0%	0.0%	16.7%
Caregiver relief for companions of mentally disordered	46.7%	10.0%	36.7%	16.7%	0.0%	0.0%	36.7%
Adult day care (Alzheimer's, DD, MI)	43.3%	23.3%	20.0%	23.3%	3.3%	0.0%	26.7%
Adoption services	33.3%	6.7%	26.7%	10.0%	3.3%	6.7%	43.3%
Friendly visiting or telephone reassurance	26.7%	6.7%	20.0%	23.3%	0.0%	6.7%	40.0%
Public Safety, Legal Services and Consumer Protection							
Gang violence prevention	70.0%	36.7%	33.3%	13.3%	6.7%	6.7%	3.3%
DWI education through judiciary referral/requirement	46.7%	30.0%	16.7%	20.0%	6.7%	20.0%	6.7%
Delinquency prevention or diversion	46.7%	13.3%	33.3%	23.3%	6.7%	6.7%	16.7%
Crime prevention	43.3%	23.3%	20.0%	36.7%	3.3%	10.0%	6.7%
Legal services	43.3%	10.0%	33.3%	30.0%	3.3%	6.7%	16.7%
Budget and credit counseling	36.7%	13.3%	23.3%	43.3%	0.0%	6.7%	13.3%
Consumer protection	23.3%	6.7%	16.7%	36.7%	6.7%	6.7%	23.3%
Tax preparation assistance	23.3%	6.7%	16.7%	36.7%	6.7%	13.3%	20.0%
Juvenile detention facilities	23.3%	3.3%	20.0%	20.0%	20.0%	26.7%	10.0%
Probation or parole services	23.3%	0.0%	23.3%	26.7%	20.0%	23.3%	6.7%
Rescue services	16.7%	0.0%	16.7%	33.3%	3.3%	20.0%	26.7%
Fire or disaster relief	13.3%	6.7%	6.7%	43.3%	16.7%	20.0%	6.7%
Adult detention facilities	13.3%	3.3%	10.0%	30.0%	23.3%	26.7%	6.7%
System-Wide Issues							
Planning and coordination of services	60.0%	26.7%	33.3%	26.7%	3.3%	6.7%	3.3%
Community organizing	53.3%	16.7%	36.7%	30.0%	6.7%	6.7%	3.3%
Information and referral	53.3%	6.7%	46.7%	26.7%	6.7%	6.7%	6.7%

SERVICE NEED	High + Moderate	High Need	Moderate Need	Slight Need	No Need	Need Met	Don't Know
Substance Abuse Services							
Treatment for other substances (marijuana, meth, etc.) (youth)	83.3%	50.0%	33.3%	3.3%	3.3%	6.7%	3.3%
Treatment for other substances (marijuana, meth, etc.) (adult)	83.3%	50.0%	33.3%	3.3%	3.3%	6.7%	3.3%
Prevention of other drug use (marijuana, meth, etc.) (youth)	83.3%	46.7%	36.7%	3.3%	3.3%	3.3%	3.3%
Prevention of other drug use (marijuana, meth, etc.) (adult)	80.0%	43.3%	36.7%	6.7%	3.3%	3.3%	6.7%
Alcoholism treatment (youth)	70.0%	46.7%	23.3%	10.0%	3.3%	10.0%	6.7%
Alcohol use prevention (adult)	70.0%	40.0%	30.0%	10.0%	0.0%	10.0%	10.0%
Alcoholism treatment (adult)	70.0%	40.0%	30.0%	6.7%	3.3%	13.3%	6.7%
DWI prevention (youth)	70.0%	36.7%	33.3%	13.3%	0.0%	10.0%	6.7%
Alcohol use prevention (youth)	66.7%	40.0%	26.7%	13.3%	0.0%	10.0%	10.0%
DWI prevention (adult)	66.7%	36.7%	30.0%	13.3%	0.0%	10.0%	10.0%
Residential substance abuse treatment programs (adult)	63.3%	43.3%	20.0%	20.0%	3.3%	6.7%	6.7%
Residential substance abuse treatment programs (youth)	60.0%	46.7%	13.3%	23.3%	3.3%	6.7%	6.7%
Cigarette smoking prevention (youth)	56.7%	16.7%	40.0%	10.0%	6.7%	10.0%	16.7%
Cigarette smoking prevention (adult)	43.3%	13.3%	30.0%	20.0%	6.7%	10.0%	20.0%
Cigarette smoking treatment (youth)	43.3%	6.7%	36.7%	20.0%	6.7%	13.3%	16.7%
Cigarette smoking treatment (adult)	33.3%	6.7%	26.7%	23.3%	6.7%	16.7%	20.0%
Substance abuse treatment for HIV infected persons	16.7%	13.3%	3.3%	13.3%	3.3%	6.7%	60.0%

In the table below are the results of Part C of the Key Informant Survey. Combined ratings of Extremely Serious and Very Serious Need for Services were used to determine the rank order.

SERVICE POPULATIONS	Extremely + Very	Extremely Serious	Very Serious	Somewhat Serious	Not Serious	Don't Know
Alcoholics/Drug Addicts	86%	38%	48%	10%	0%	0%
Poor	83%	38%	45%	14%	0%	3%
Chronic mentally ill	76%	31%	45%	14%	0%	3%
Children and youth	62%	24%	38%	28%	3%	7%
Single parent families	62%	10%	52%	21%	3%	14%
Physically disabled	55%	28%	28%	28%	0%	10%
Women	48%	24%	24%	38%	7%	7%
Developmentally disabled	45%	21%	24%	34%	3%	7%
Navajos	45%	17%	28%	41%	7%	7%
Undocumented individuals/families	31%	10%	21%	38%	7%	17%
Hispanics/Latinos	28%	10%	17%	41%	14%	14%
Gays and lesbians	24%	7%	17%	14%	24%	31%

Below are the top 15 High Need Areas Ranked in the Key Informant Survey for years 1996, 2000, 2004 & 2008. *(Important Note: The ranking of the needs in this table are based on High Need only rankings. The order, therefore, is somewhat different than presented previously, in which the rank orders are based on the combined ratings of High and Moderate Needs.)*

1996	2000	2004	2008
Availability of affordable rental housing	Treatment of other substances (youth)	DWI Prevention (youth)	Availability of affordable rental housing
Availability of affordable homes for ownership	Residential substance abuse treatment (youth)	Prevention of other drug use (youth)	Housing assistance (short term)
Alcoholism treatment (youth)	Treatment of other substances (adult)	DWI Prevention (adult)	Housing assistance (long term)
Gang violence prevention	Prevention of other drug use (youth)	Alcoholism treatment (adult)	Lower High School drop-out rate
Local four year college	DWI Prevention (youth)	Prevention of other drug use (adult)	Public transportation (for elderly and disabled)
DWI Prevention (youth)	Alcohol use prevention (youth)	Alcoholism treatment (youth)	Availability of affordable homes for ownership
Alcohol use prevention (youth)	Alcoholism treatment (youth)	Treatment of other substances (adult)	Treatment for other substances (marijuana, meth, etc.) (youth)
Alcohol use prevention (adult)	Prevention of other drug use (adult)	Treatment of other substances (youth)	Treatment for other substances (marijuana, meth, etc.) (adult)
Abuse prevention training for parents	Short-term treatment for mental illness	Availability of affordable rental housing	Low cost child care
Treatment of other substances (adult)	Alcohol use prevention (adult)	Low cost counseling	Prevention of other drug use (marijuana, meth, etc.) (youth)
Treatment of other substances (youth)	Low cost counseling	Lower high school drop-out rate	Alcoholism treatment (youth)
Prevention of other drug use (youth)	Low cost child care	Alcohol use prevention (youth)	Residential substance abuse treatment programs (youth)
DWI Prevention (adult)	Long-term hospitalization/care for mental disorders	Alcohol use prevention (adult)	Prevention of other drug use (marijuana, meth, etc.) (adult)
Prevention of other drug use (adult)	DWI Prevention (adult)	Residential substance abuse treatment (youth)	Residential substance abuse treatment programs (adult)
Residential substance abuse treatment (youth)	Alcoholism treatment (adult)	Abuse prevention training for parents	Public transportation (for all)

APPENDIX E: RESPONDENT SURVEY INSTRUMENT

Respondent Questionnaire

Interviewer name _____

INTERVIEW NUMBER: _____

SECTION ORDER: *A-B-C-D-E-F-G-Demo*

Interview Date ____/____/07

INFORMATION IN CAPITAL LETTERS IS FOR THE INTERVIEWER ONLY AND IS NOT TO BE READ TO THE RESPONDENT.

FIRST, INTRODUCE YOURSELF, SHOW YOUR ID, AND THANK THE RESPONDENT FOR AGREEING TO THE INTERVIEW. EXPLAIN THE PURPOSE BY READING THE FOLLOWING:

“Today I will be asking you questions about our county, like what kinds of problems you think we have and what kinds of services we need. There are no right or wrong answers to these questions. I will also be asking you questions about what kinds of challenges you or your family might have had while living here.

Something very important for you to realize is that your answers are strictly confidential. Your name will not be written down with your answers. We will be interviewing over 300 people, and no one will know who said what.

The information we get will be used by human service agencies, county, tribal and city planners to help decide how to spend tax dollars and donations. When you are finished answering all of the questions, I will give you a gift card in appreciation of your assistance. Do you have any questions?” [ANSWER]

IF THE RESPONDENT EXPRESSES A DESIRE TO FILL OUT THE QUESTIONNAIRE BY THEMSELVES, THEY MAY DO SO. IN THIS CASE SIMPLY MAKE YOURSELF AVAILABLE IF HELP IS ASKED FOR.

SECTION A

Sometimes people see problems in our county. Here is a list of common problems people sometimes talk about. For each one, please rate whether or not you felt it was a problem here in San Juan County during the past year. For each one, rate whether you believe it: [GIVE THEM THE CUE CARD TO LOOK AT WHILE YOU READ THE ITEMS.]

- Score = 0 is not a problem for your community
- Score = 1 is a minor problem for your community
- Score = 2 is a moderate problem for your community
- Score = 3 is a major problem for your community
- Score = “n/s” not sure or don’t know

0 1 2 3 n/s	1. Environmental concerns (air pollution, water pollution, cutting forests, destroying the land)
0 1 2 3 n/s	2. Inadequate public transportation
0 1 2 3 n/s	3. Quality of public education
0 1 2 3 n/s	4. Unemployment or under employment
0 1 2 3 n/s	5. Alcoholism or excessive drinking
0 1 2 3 n/s	6. Drunk driving
0 1 2 3 n/s	7. Drug abuse
0 1 2 3 n/s	8. Gang-related activity
0 1 2 3 n/s	9. Vandalism, theft, or burglary
0 1 2 3 n/s	10. Teenage pregnancy
0 1 2 3 n/s	11. Availability, accessibility, or affordability of legal services
0 1 2 3 n/s	12. Family violence or abuse
0 1 2 3 n/s	13. Assault, rape, or violent crime
0 1 2 3 n/s	14. Illiteracy (people not being able to read)
0 1 2 3 n/s	15. Shortage of child day care
0 1 2 3 n/s	16. Mental illness or mental problems
0 1 2 3 n/s	17. Teenage suicide
0 1 2 3 n/s	18. Shortage of recreational facilities or programs
0 1 2 3 n/s	19. Affordable housing
0 1 2 3 n/s	20. Emergency food and shelter
0 1 2 3 n/s	21. Overcrowded housing
0 1 2 3 n/s	22. Availability, accessibility, or affordability of medical care
0 1 2 3 n/s	23. Racial or ethnic tension or distrust
0 1 2 3 n/s	24. Available housing
0 1 2 3 n/s	25. After-school programs
0 1 2 3 n/s	26. Services and access for the disabled
0 1 2 3 n/s	27. Availability of health care during pregnancy
0 1 2 3 n/s	28. Adequate senior services
0 1 2 3 n/s	29. Young people not learning or respecting family traditions
0 1 2 3 n/s	30. Availability, accessibility, or affordability of dental care

“Are there any other problems in San Juan County that you are aware of that I didn’t ask about?”

[RECORD BELOW, AND GET A RATING]

SECTION B

Keeping in mind that your answers to this survey are strictly confidential, please tell me whether any of the problems I read to you have been a problem for you or someone in your household over the past year. [CUE CARD] Please rate it as:

- Score = 0 not a problem for you
- Score = 1 a minor problem for you
- Score = 2 a moderate problem for you
- Score = 3 a major problem for you
- Score = “n/s” not sure or don’t know

Part II: For items with Score = 3, ask:

“Did you seek help for this problem?”	[IF YES] “Who did you go to, or where did you go for help?”
---------------------------------------	---

Part I: Rate items 1-30

0	1	2	3	n/s		Yes	No	
					1. Room in your house for all the people who live there			
					2. Housing that needs major repairs			
					3. Enough money for food			
					4. Enough money to pay for housing			
					5. Enough money to pay the utility bills			
					6. Enough money to buy needed clothing and shoes			
					7. Being able to afford legal help			
					8. Paying for or getting medical insurance			
					9. Enough money to pay the doctor or buy prescription medicines			
					10. Home health care for someone with a disability or serious illness, or for an elderly person			
					11. Adult day care for someone with a disability or serious illness, or for an elderly person			
					12. Special transportation or availability of access for a disabled person			
					13. Reading well enough to get along			
					14. Finding work			
					15. Affording recreational activities			
					16. Anxiety or stress			
					17. Depression			
					18. Alcohol and/or drug problem			
					19. Physical conflict in the household			
					20. Children or teenager’s behavior or emotional problems			
					21. Finding or affording child day care			
					22. Finding after-school child care			
					23. Feeling safe and secure at home			
					24. Feeling safe and secure walking on the streets			
					25. Getting parenting training			
					26. Getting pre-natal care			
					27. Getting electrical hook-ups to your house or trailer			
					28. Getting adequate help for your child at school			
					29. Your child’s safety at school			
					30. Availability, accessibility or affordability of dental care			

Were there any other problems that you or others in your household had in the past year that I didn’t ask about?



REMEMBER TO COMPLETE PART II

SECTION C

In order to better understand the health needs and concerns of San Juan County residents, this is a set of health-related questions we would like you to answer.

1. Do you use tobacco products? Yes No [IF YES] “How often per day?” _____
2. Do you drink alcohol? Yes No [IF YES] “How much per week?” _____
3. How often do you engage in at least 30 minutes of physical exercise? Do you exercise:
 - Never
 - 2-3 times per week
 - 4-5 times per week
 - Daily

4. According to your height and weight, would you say that you are?
 - Underweight
 - Overweight
 - Average weight for your height

5. Here is a list of health problems that people experience. Did you have any of these during the last year?
 - a. Diabetes Yes No
 - b. High blood pressure or Yes No
 other heart problems
 - c. Asthma or other breathing difficulties Yes No
 - d. Cirrhosis or other chronic liver condition Yes No
 - e. Cancer Yes No
 - f. Other (Specify)_____

[IF YES to any of the above], “Are you receiving medical attention?” Yes No

6. In the last 12 months, have any children in your household experienced health problems? Yes No

[IF YES] “If comfortable answering, what was the health problem?” _____

How would you rate your overall physical health? Would you say that you are in:

- Poor Health
- Fair Health
- Good Health
- Excellent Health

7. What health care services do you seek outside of San Juan County because they are not available here?

8. Now I want to ask you how happy or satisfied you are with your life, taken as a whole. Would you say you are:
 - Very Dissatisfied
 - Somewhat Dissatisfied
 - Somewhat Satisfied
 - Very Satisfied

SECTION D

I would like to ask a few questions about your perceptions about high-school aged young people in San Juan County. How many young people do you think: [PROVIDE CUE CARD.]

1 = Very Few

2 = Some

3 = About Half

4 = Most

5 = Almost All

“n/s” = Not Sure or Don’t Know

1 2 3 4 5 n/s	1. Wear their seat belts most of the time.
1 2 3 4 5 n/s	2. Drink alcohol, 1 or more times a month.
1 2 3 4 5 n/s	3. In the last month, drove a vehicle after they had been drinking alcohol.
1 2 3 4 5 n/s	4. In the last month, rode in a vehicle that was driven by someone who had been drinking alcohol.
1 2 3 4 5 n/s	5. Are safe drivers.
1 2 3 4 5 n/s	6. Used methamphetamines in the last month.
1 2 3 4 5 n/s	7. Smoke cigarettes, 1 or more times a month.

SECTION E

FOR THIS NEXT SET OF QUESTIONS, YOU WILL GIVE THE PARTICIPANT THE TAPE RECORDER WITH THE RECORDED QUESTIONS. THEY WILL LISTEN TO THE RECORDED QUESTIONS ON THE HEADSET AND RECORD THEIR ANSWERS ON THE SURVEY INSTRUMENT. MAKE SURE THAT YOU HAVE SET THE TAPE RECORDER TO THE SECTION OF THE TAPE CONTAINING THE LANGUAGE PREFERENCE FOR THE RESPONDENT. HELP THE RESPONDENT ADJUST THE HEADPHONES IF NECESSARY.

“For this set of questions, I am going to give you a tape recorder and headset to listen to. I don’t know what the exact order of the questions is, but they are more personal-type questions, and we are doing it this way so that you can answer the personal questions without having to give me the answer directly.

Please give your answers on the survey by putting a plus to indicate “YES” and a minus to indicate “NO” to each of the questions. Please answer these questions based on what has happened to you and/or your family in the past 12 months only. If you do not wish to answer a question, just leave your answer blank and move on to the next question. When you are done, please let me know and we will go on to complete the survey.”

[GIVE RESPONDENT THE ANSWER SHEET TO FILL OUT.]

SECTION E: Responses

YES = + NO = -

- | | |
|----------|----------|
| 1. _____ | 2. _____ |
| 3. _____ | 4. _____ |
| 5. _____ | 6. _____ |
| 7. _____ | 8. _____ |

Questions below did not appear in original survey. They were answered using the audio tape procedure or postcard protocol. See Methodology for description.

1. Did you use any type of illegal drugs?
2. Were you addicted to prescription medications?
3. Did you drive a car or truck after having more than 3 or 4 drinks in a couple of hours?
4. Did a family member have a drug or alcohol problem?
5. Was a child in your family a victim of bullying?
6. Were any family members a victim of domestic violence?
7. Were any family members a victim of child abuse?
8. Were any family members a victim of sexual abuse?

SECTION F

In this section, I'm going to ask you some questions about where you live and your housing situation.

1. How long have you lived in San Juan County in total? [YEARS] _____
2. What city or area of the county do you live in? _____
3. What is the zip code where you get your mail? _____
4. What city or area of the county do you work in? _____
5. Where do you do most of your shopping? _____
6. Are you a homeowner? Yes No
 Are you renting your home/apartment? Yes No
7. How would you rate your overall satisfaction with your current housing situation? Would you say you are:
 - Very Dissatisfied
 - Somewhat Dissatisfied
 - Somewhat Satisfied
 - Very Satisfied
8. Does your home or apartment need to be remodeled or changed for any of the following reasons:
 [CHECK ALL THAT APPLY.]
 - Family with children
 - Disability access
 - Elderly household member
 - Substandard living conditions
 - Energy efficiency
 - Other special needs (Specify) _____
9. How much does your household currently spend for rent or mortgage per month, not including utilities? Would you say that you spend: [PROVIDE CUE CARD OR FILL IN EXACT AMOUNT IF GIVEN] _____

<input type="checkbox"/> Less than \$300	<input type="checkbox"/> \$651-\$750	<input type="checkbox"/> \$1051-\$1150	<input type="checkbox"/> \$1451-\$1550	<input type="checkbox"/> \$1851-\$1950
<input type="checkbox"/> \$300-\$450	<input type="checkbox"/> \$751-\$850	<input type="checkbox"/> \$1151-\$1250	<input type="checkbox"/> \$1551-\$1650	<input type="checkbox"/> \$1951-\$2050
<input type="checkbox"/> \$451-\$550	<input type="checkbox"/> \$851-\$950	<input type="checkbox"/> \$1251-\$1350	<input type="checkbox"/> \$1651-\$1750	<input type="checkbox"/> More than \$2050
<input type="checkbox"/> \$551-\$650	<input type="checkbox"/> \$951-\$1050	<input type="checkbox"/> \$1351-\$1450	<input type="checkbox"/> \$1751-\$1850	
10. How many people live in your household?" _____
11. How many times have you moved during your time in San Juan County? _____
12. During the past 5 years, have you had trouble finding a place to live that you could afford, because rent or mortgage was too expensive? Yes No
13. During the past 5 years, have you had trouble finding a place to live because of limited availability, in other words, there weren't places available to rent or buy? Yes No
14. Have you ever experienced barriers to renting or buying a home or apartment because of race, color, national origin, religion, family status, gender, disability or sexual orientation? Yes No
15. Should the cities of Aztec, Bloomfield, and Farmington, and San Juan County support the development of affordable housing? Yes No

SECTION G

In this section, I am going to ask a few questions related to bills and finances.

1. In the past year, have you received any payday loans or short-term cash loans? Yes No

2. Do you have a car you can use? Yes No

3. How often do you use the Red Apple Transit? Do you use it:
 - Never
 - Once a month
 - Weekly
 - Daily

4. Do you have any credit card debt? Yes No
 [IF YES], "Is your total credit card debt:"
 - Less than \$1000
 - \$1000-\$5000
 - \$5001-\$10,000
 - More than \$10,000

5. Do you qualify for earned income tax credit? Yes No Don't Know

6. Have you ever received earned income tax credit? Yes No Don't Know

7. Are you aware of the San Juan United Way Help Line? Yes No

8. In the last year, have you given money to any of the following: (CHECK ALL THAT APPLY.)
 - Family
 - Church
 - San Juan United Way or Navajo United Way
 - Other local non-profit organizations
 - Other: _____

9. Counting all sources of income, including earnings from jobs, unemployment insurance, pensions, welfare, and counting income from everyone living in your home, which of the following ranges did your gross household income, that is, your income before taxes, fall into last year? [PROVIDE CUE CARD.]

<input type="checkbox"/> Less than \$10,000	<input type="checkbox"/> \$30,001-\$35,000	<input type="checkbox"/> \$70,001-\$80,000
<input type="checkbox"/> \$10,001-\$15,000	<input type="checkbox"/> \$35,001-\$40,000	<input type="checkbox"/> \$80,001-\$90,000
<input type="checkbox"/> \$15,001-\$20,000	<input type="checkbox"/> \$40,001-\$50,000	<input type="checkbox"/> \$90,001-\$100,000
<input type="checkbox"/> \$20,001-\$25,000	<input type="checkbox"/> \$50,001-\$60,000	<input type="checkbox"/> \$100,001-\$125,000
<input type="checkbox"/> \$25,001-\$30,000	<input type="checkbox"/> \$60,001-\$70,000	<input type="checkbox"/> More than \$125,000

SECTION DEMOGRAPHICS.

This final set of questions covers common demographic questions.

1. [CHECK GENDER OF RESPONDENT]: FEMALE MALE

2. What is your Ethnicity? Are you:
 [PROVIDE CUE CARD. SOME PERSONS MAY FEEL THEY ARE MORE THAN ONE ETHNICITY.
 CHECK ALL THAT APPLY]
 - African American
 - Asian American
 - Hispanic/Latino American
 - Native American/Navajo
 - Caucasian (White, Anglo)
 - Other (Specify): _____

3. “What is your age?” [FILL IN AGE]: _____
 [FOR SOME, AGE MAY BE A SENSITIVE ISSUE. IF SO, CHECK AN APPROXIMATE AGE RANGE]:

<input type="checkbox"/> 18-25	<input type="checkbox"/> 61-70
<input type="checkbox"/> 26-30	<input type="checkbox"/> 71-80
<input type="checkbox"/> 31-40	<input type="checkbox"/> 81-90
<input type="checkbox"/> 41-50	<input type="checkbox"/> 91-100
<input type="checkbox"/> 51-60	<input type="checkbox"/> Over 100

4. “What is the highest grade or year of school you completed?”
 - Never attended school or only attended kindergarten
 - Grades 1 through 8 (Elementary)
 - Grades 9 through 11 (Some high school)
 - Grade 12 or GED (High school graduate)
 - College 1 year to 3 years (Some college or technical school)
 - College 4 years or more (College graduate)

“That was the last question. Our supervisor, Natalie Salvatore will be calling a small number of people we interview to make sure everything went OK. Thank you for your time and for participating in the survey.”

[GIVE THEM THEIR GIFT CERTIFICATE AND ASK THEM TO SIGN THE RECEIPT BOOK WITH JUST THEIR FIRST NAME.] [SIGN YOUR NAME BELOW INDICATING THAT YOU HAVE COMPLETED THE INTERVIEW.]

Interviewer Signature: _____

[PLACE THE COMPLETED INTERVIEW IN AN ENVELOPE AND SEAL IT WHILE THE RESPONDENT IS OBSERVING YOU.]

APPENDIX F: KEY INFORMANT SURVEY INSTRUMENT

Key Informant Questionnaire

ID: _____

Thank you for taking the time to complete this survey for San Juan County Partnership's Community Needs Assessment. Please return the survey in the next few days using the enclosed envelope.

DEMOGRAPHICS

GENDER: Female () Male ()

ETHNICITY: _____

AGE: 20-25 () 26-30 () 31-40 () 41-50 () 51-60 () 61-70 () 71+ ()

LENGTH OF RESIDENCE IN SAN JUAN COUNTY: _____ Years.

ORGANIZATIONAL DESCRIPTION

Number of Clients or Customers Served Per Year: _____

What is the typical clientele served by your organization? (For example, age, gender, presenting problem or most common service provided.)

Portion or Area of County Served: _____

Annual Operating Budget: _____

Total Number of Employees: _____

Ethnicity of Employees: percent Anglo _____ percent Native American _____ percent Hispanic _____

Could your organization benefit from additional funding? Please explain.

What percentage increase in your budget would you need to serve all potential clients and not turn anyone away?

What is your organization's greatest need?

If you could add another service in your organization, what would it be?

Part A. Potential Community Needs by Category

For the items listed below, please indicate your rating of our local need relative to that item. Indicate your opinion by circling the appropriate number, using the scale below:

- (1) = HIGH NEED that is currently not being met
 (2) = MODERATE NEED that is currently not being met
 (3) = SLIGHT NEED that is currently not being met
 (4) = NO NEED
 (5) = NEED CURRENTLY BEING MET in the community
 (DK) = DON'T KNOW

HOUSING	HN	MN	SN	None	Nmet	_____
Housing assistance (long-term)	1	2	3	4	5	DK
Housing assistance (short-term)	1	2	3	4	5	DK
Housing rehabilitation or repair	1	2	3	4	5	DK
Availability of affordable rental housing	1	2	3	4	5	DK
Availability of affordable homes for ownership	1	2	3	4	5	DK
BASIC MATERIAL NEEDS	HN	MN	SN	None	Nmet	_____
Financial assistance	1	2	3	4	5	DK
Food	1	2	3	4	5	DK
Short-term shelter	1	2	3	4	5	DK
Clothing or furniture	1	2	3	4	5	DK
Utility bill assistance	1	2	3	4	5	DK
PHYSICAL HEALTH	HN	MN	SN	None	Nmet	_____
Dental care	1	2	3	4	5	DK
Pre-natal care	1	2	3	4	5	DK
Family planning	1	2	3	4	5	DK
Infant health care	1	2	3	4	5	DK
Nutrition counseling	1	2	3	4	5	DK
Outpatient medical care	1	2	3	4	5	DK
Home-health care (skilled)	1	2	3	4	5	DK
Homemaker or chore services	1	2	3	4	5	DK
Adult day care for the disabled	1	2	3	4	5	DK
Services for persons with AIDS	1	2	3	4	5	DK
Congregate or home-delivered meals	1	2	3	4	5	DK
Environmental quality (air, water, land)	1	2	3	4	5	DK
Diabetes prevention and/or treatment services	1	2	3	4	5	DK
Long-term hospitalization or nursing home care	1	2	3	4	5	DK
Short-term inpatient treatment for physical illness	1	2	3	4	5	DK
Caregiver relief (for companions of disabled or terminally ill)	1	2	3	4	5	DK
TRANSPORTATION	HN	MN	SN	None	Nmet	_____
Public transportation (for all)	1	2	3	4	5	DK
Public transportation (for elderly and disabled)	1	2	3	4	5	DK

EMPLOYMENT	HN	MN	SN	None	Nmet	_____
Job training	1	2	3	4	5	DK
Vocational rehabilitation	1	2	3	4	5	DK
Job training for the disabled	1	2	3	4	5	DK
Employee assistance programs	1	2	3	4	5	DK
Employment placement counseling	1	2	3	4	5	DK
Appropriate job market (better wages and job diversity)	1	2	3	4	5	DK
Job training using Spanish as the language of instruction	1	2	3	4	5	DK
Job training using Navajo as the language of instruction	1	2	3	4	5	DK
RECREATION	HN	MN	SN	None	Nmet	_____
Adult recreation services	1	2	3	4	5	DK
Youth recreation services	1	2	3	4	5	DK
Transportation to youth recreation	1	2	3	4	5	DK
After school programs for youth	1	2	3	4	5	DK
Organized non-sport school activities	1	2	3	4	5	DK
HOUSEHOLD VIOLENCE AND RELATED ISSUES	HN	MN	SN	None	Nmet	_____
Child protective services	1	2	3	4	5	DK
Adult protective services	1	2	3	4	5	DK
Services for victims of rape	1	2	3	4	5	DK
Abuse prevention training for parents	1	2	3	4	5	DK
Services for victims of domestic assault (including youth)	1	2	3	4	5	DK
Services (e.g., counseling) for perpetrators of domestic assault (including youth)	1	2	3	4	5	DK
EDUCATION	HN	MN	SN	None	Nmet	_____
Head Start	1	2	3	4	5	DK
Quality public schools	1	2	3	4	5	DK
Local four-year college	1	2	3	4	5	DK
Art and/or music instruction	1	2	3	4	5	DK
Lack of money for education	1	2	3	4	5	DK
Lower High School drop-out rate	1	2	3	4	5	DK
Special programs for gifted students	1	2	3	4	5	DK
Special programs for “at risk” students	1	2	3	4	5	DK
Special programs for low achieving students	1	2	3	4	5	DK
Navajo language instruction for Navajo children	1	2	3	4	5	DK
Literacy training and other educational programs	1	2	3	4	5	DK
English language instruction for Navajo speakers	1	2	3	4	5	DK
English language instruction for Spanish speakers	1	2	3	4	5	DK

FAMILY SUPPORT AND MENTAL HEALTH	HN	MN	SN	None	Nmet	_____
Adoption services	1	2	3	4	5	DK
Low cost child care	1	2	3	4	5	DK
Low cost counseling	1	2	3	4	5	DK
Outpatient counseling	1	2	3	4	5	DK
Parenting skills training	1	2	3	4	5	DK
Safe House for runaways	1	2	3	4	5	DK
Child mentoring supports	1	2	3	4	5	DK
Family mentoring supports	1	2	3	4	5	DK
Crisis intervention for mental illness	1	2	3	4	5	DK
Foster care for children & adolescents	1	2	3	4	5	DK
Family Support and Mental Health	1	2	3	4	5	DK
Adult day care (Alzheimer's, DD, MI)	1	2	3	4	5	DK
Short-term treatment for mental illness	1	2	3	4	5	DK
Friendly visiting or telephone reassurance	1	2	3	4	5	DK
Caregiver relief for companions of mentally disordered, including retardation	1	2	3	4	5	DK
Long-term hospitalization & residential care for mental disorders, including retardation	1	2	3	4	5	DK

PUBLIC SAFETY, LEGAL SERVICES, AND CONSUMER PROTECTION

	HN	MN	SN	None	Nmet	_____
Legal services	1	2	3	4	5	DK
Rescue services	1	2	3	4	5	DK
Crime prevention	1	2	3	4	5	DK
Fire or disaster relief	1	2	3	4	5	DK
Consumer protection	1	2	3	4	5	DK
Adult detention facilities	1	2	3	4	5	DK
Gang violence prevention	1	2	3	4	5	DK
Tax preparation assistance	1	2	3	4	5	DK
Juvenile detention facilities	1	2	3	4	5	DK
Probation or parole services	1	2	3	4	5	DK
Budget and credit counseling	1	2	3	4	5	DK
Delinquency prevention or diversion	1	2	3	4	5	DK
DWI education through judiciary referral/requirement	1	2	3	4	5	DK

SYSTEM-WIDE ISSUES

	HN	MN	SN	None	Nmet	_____
Community organizing	1	2	3	4	5	DK
Information and referral	1	2	3	4	5	DK
Planning and coordination of services	1	2	3	4	5	DK

SUBSTANCE ABUSE SERVICES	HN	MN	SN	None	Nmet	_____
DWI prevention (adult)	1	2	3	4	5	DK
DWI prevention (youth)	1	2	3	4	5	DK
Alcoholism treatment (adult)	1	2	3	4	5	DK
Alcoholism treatment (youth)	1	2	3	4	5	DK
Alcohol use prevention (adult)	1	2	3	4	5	DK
Alcohol use prevention (youth)	1	2	3	4	5	DK
Cigarette smoking treatment (adult)	1	2	3	4	5	DK
Cigarette smoking treatment (youth)	1	2	3	4	5	DK
Cigarette smoking prevention (adult)	1	2	3	4	5	DK
Cigarette smoking prevention (youth)	1	2	3	4	5	DK
Substance abuse treatment for HIV infected persons	1	2	3	4	5	DK
Residential substance abuse treatment programs (adult)	1	2	3	4	5	DK
Residential substance abuse treatment programs (youth)	1	2	3	4	5	DK
Prevention of other drug use (marijuana, meth, etc.) (adult)	1	2	3	4	5	DK
Prevention of other drug use (marijuana, meth, etc.) (youth)	1	2	3	4	5	DK
Treatment for other substances (marijuana, meth, etc.) (adult)	1	2	3	4	5	DK
Treatment for other substances (marijuana, meth, etc.) (youth)	1	2	3	4	5	DK

Part B. Please provide your opinions using short narrative responses to each of the following questions.

In your opinion, what is the service MOST in need of expansion in San Juan County (or, if services unavailable, most in need of creating):

In your opinion, what is the service SECOND MOST in need of expansion or creation:

List any services that are especially needed in Spanish or Navajo that are not currently being provided in that language.

List any services that should be cut back or eliminated:

Can any resources be shifted or redirected to be more effective? If so, please explain.

Are there any systemic problems in our community which limit the effectiveness of services? If so, please explain.

Please indicate any barriers that might prevent people from using existing services in San Juan County.

Part C. How serious is the need for services for the following population groups?

(1) = EXTREMELY SERIOUS

(2) = VERY SERIOUS

(3) = SOMEWHAT SERIOUS

(4) = NOT SERIOUS

(DK) = DON'T KNOW

	ES	VS	SS	NS	DK
Poor	1	2	3	4	5
Women	1	2	3	4	5
Navajos	1	2	3	4	5
Gays and lesbians	1	2	3	4	5
Hispanics/Latinos	1	2	3	4	5
Children and youth	1	2	3	4	5
Physically disabled	1	2	3	4	5
Chronic mentally ill	1	2	3	4	5
Single parent families	1	2	3	4	5
Alcoholics/Drug Addicts	1	2	3	4	5
Developmentally disabled	1	2	3	4	5
Undocumented individuals/families	1	2	3	4	5
Other (fill in)_____	1	2	3	4	5

THANK YOU FOR YOUR PARTICIPATION.

Please return the questionnaire in the envelope that has been provided. A SJCP Needs Assessment Coordinator will be calling you in a few days to record any other comments you would like to add.

APPENDIX G: PHONE PROTOCOL

Phone Protocol

STEP 1

From the list of phone numbers you are provided, enter a phone number in the phone log. Keep track of the numbers you use by placing a checkmark next to the numbers on the original list. Call each number a minimum of 4 times, preferably at different times of the day and on different days in order to attempt to reach an adult in the home.

STEP 2

After you have called the number four times, if no one answers, you may choose to call a fifth time to leave a message. This is *optional*, as it requires you to provide your call-back information and to be willing to receive calls from potential respondents. If you choose to leave a message, use the standard phone script below, adding, “If you are interested, please call _____” [insert your call-back information.]

STEP 3

Record all call attempts in the phone log, as shown in the examples below. Indicate when you called each number and the result. (Note the time as a one-hour block, for example 11-12.) All calls made will result in one of the following:

- 4 to 5 calls without a response (Example 1)
- “Yes” with a scheduled appointment (Example 2)
- “No thank you” (Example 3)

Phone Log (Example)

Phone Number	Call Attempts: Date / Time of Day										Said Yes* /No
	Call 1		Call 2		Call 3		Call 4		Call 5 / Message		
	DATE	TIME	DATE	TIME	DATE	TIME	DATE	TIME	DATE	TIME	
<i>123-4568- Example 1</i>	10/3	10-11	10/3	2-3	10/4	9-10	10/5	4-5	10/6	1-2 Msg	
<i>123-4569- Example 2</i>	10/3	10-11	10/3	2-3	10/4	9-10					Yes
<i>123-4560- Example 3</i>	10/3	10-11	10/3	2-3							No

Phone Script

“Hello, my name is _____ and I am calling on behalf of San Juan County Partnership. We are surveying over 300 people in order to better understand the needs of San Juan County residents.

Your opinions and experiences are very valuable in this process. If you are interested, my reason for calling is to set up an interview with you to complete the survey. The survey is confidential, and will take about 30 minutes to complete. For participating, you will receive a \$15 gift card to Safeway, City Market or Wal-Mart.

Would you be interested?”

Making an Appointment

If the person is interested, gather the necessary information to make the appointment. If there is any question as to their age, confirm that they are 18 years old. Offer to meet them at their home, or if they prefer, at the nearest public location -- see location list. Answer any questions they have. End the call by reminding them of the time and place of the interview, and let them know you will give them a reminder call on the day of their appointment.

Fill out an Appointment Sheet entry for each interview you schedule and for each interview that is scheduled for you.

- If you are scheduling an interview for someone else, tentatively schedule the appointment based on the interviewer's schedule, and let the respondent know that the ***interviewer will call to confirm the appointment***. Fill out the appointment sheet entry with all the information you have. Call the interviewer with the appointment information.
- If someone else schedules an interview for you, fill out an entry in your appointment sheet, indicating the caller who scheduled the interview for you. ***Call the respondent to confirm the appointment or to reschedule if necessary***.
- If you are scheduling an interview for yourself, fill out an entry in the appointment sheet, putting your name as both the caller and the interviewer.
- If you must reschedule, indicate that the interview was not completed on the original entry, and then fill out a new appointment sheet entry for the rescheduled time and date.

NOTE: Only the interviewer who actually completes the interview will fill out the "Survey Number," "Reminder Call Date" and "Interview Completed Date" in the Appointment Sheet entry.

Appointment Sheet (Example)

<i>Phone Number</i>	<i>Call Date</i>	<i>Respondent's first name</i>	<i>Location of interview</i>	<i>Date of Interview</i>	<i>Time of Interview</i>	<i>Reminder Call Date</i>	<i>Name of Caller</i>	<i>Survey #</i>	<i>Interview Complete Date</i>
							<i>Name of Interviewer</i>		
123-4567-Example	10/3	Charles	Farmington Public Library	10/5	1:30	10/5, 10am	John Doe	123	10/5
							Mary Smith		

APPENDIX H: POSTCARD

The image below is of the postcard sent to 4,000 randomly selected San Juan County residents inviting them to participate in the resident survey. The original postcard was printed in 2-color with orange highlights.

FANTASTIC OPPORTUNITY!

San Juan County
PARTNERSHIP

\$15
Gift Card

Spend 20 to 30 minutes,
receive a \$15 Gift Card!

Your Input and Experiences Matter!
YOU have been randomly selected to participate in San Juan County Partnership's Needs Assessment. For completing a confidential survey about resident needs in San Juan County, you receive a \$15 gift card to Wal-Mart, Safeway, or Hastings.
If you can't make it to the times below, call Shannon at 360-4522 to set up an appointment. We will meet with you at your convenience.

Take this card with you when you go shopping!

We will be at the following locations on days listed below.

Look for the Partnership Needs Assessment banner near the entrance.

Mon, Nov. 19	Wal-Mart, West Main, Farmington, 1-6 p.m.
Tues, Nov. 20	
Wed, Nov. 21	Safeway, East Main, Farmington, 11-5 p.m.
Fri, Nov. 23	Hastings, 20th Street, 11-5 p.m.
Sat, Nov. 24	
Sun, Nov. 25	Sam's Club, East Main, Farmington, 11-5 p.m.

A Limited to the first 150. Must be 18 or older. One per household.
For more information, call San Juan County Partnership at 566-5867.

Address side

Information side