



100% Community Survey Doña Ana County: Need and Access to Health Care Services

2019 TO 2024

Center for Community Analysis
New Mexico State University



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Responses

- Total valid responses: 1,106
- 331 on paper, 775 online
- 76 responses (23% of paper responses) from Mesilla Valley County of Hope



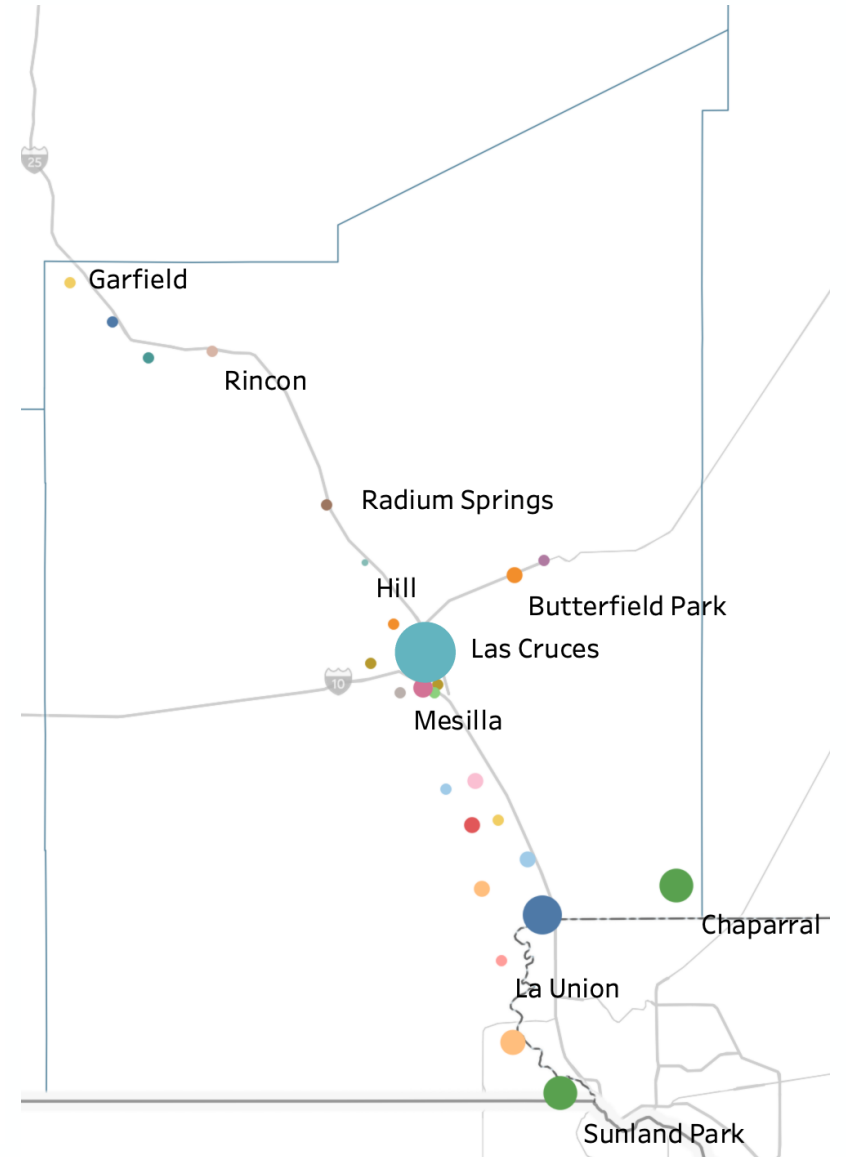
Responses by subgroup

Demographic	Subgroup	Count	Percent
Race/Ethnicity	Asian alone (non-Hispanic)	5	1%
	Black or African American alone (non-Hispanic)	18	2%
	Hispanic or Latino (of any race)	696	73%
	Middle Eastern or North African alone (non-Hispanic)	10	1%
	Native American or Alaska Native alone (non-Hispanic)	18	2%
	Native Hawaiian or Other Pacific Islander alone (non-Hispanic)	9	1%
	White alone (non-Hispanic)	178	19%
	Some other race alone, or mixed race (non-Hispanic)	13	1%
	Total	947	
Language Spoken at Home	English Only	537	53%
	Other Language/Bilingual	478	47%
	Total	1015	
Nativity	US-born	633	64%
	Foreign-born	360	36%
	Total	993	
Gender Identity	Woman	673	67%
	Man	307	31%
	Other	26	3%
	Total	1006	
Household Income	\$24,999 or less	304	33%
	\$25,000 - \$54,999	355	39%
	\$55,000 or more	257	28%
	Total	916	
Age	18 - 24	41	4%
	25 - 29	100	14%
	30 - 39	314	31%
	40 - 49	230	23%
	50 - 59	140	14%
	60 or older	182	18%
	Total	1007	
Household with Children	Responsible for children under 18	653	60%
	No children under 18	427	40%
	Total	1080	



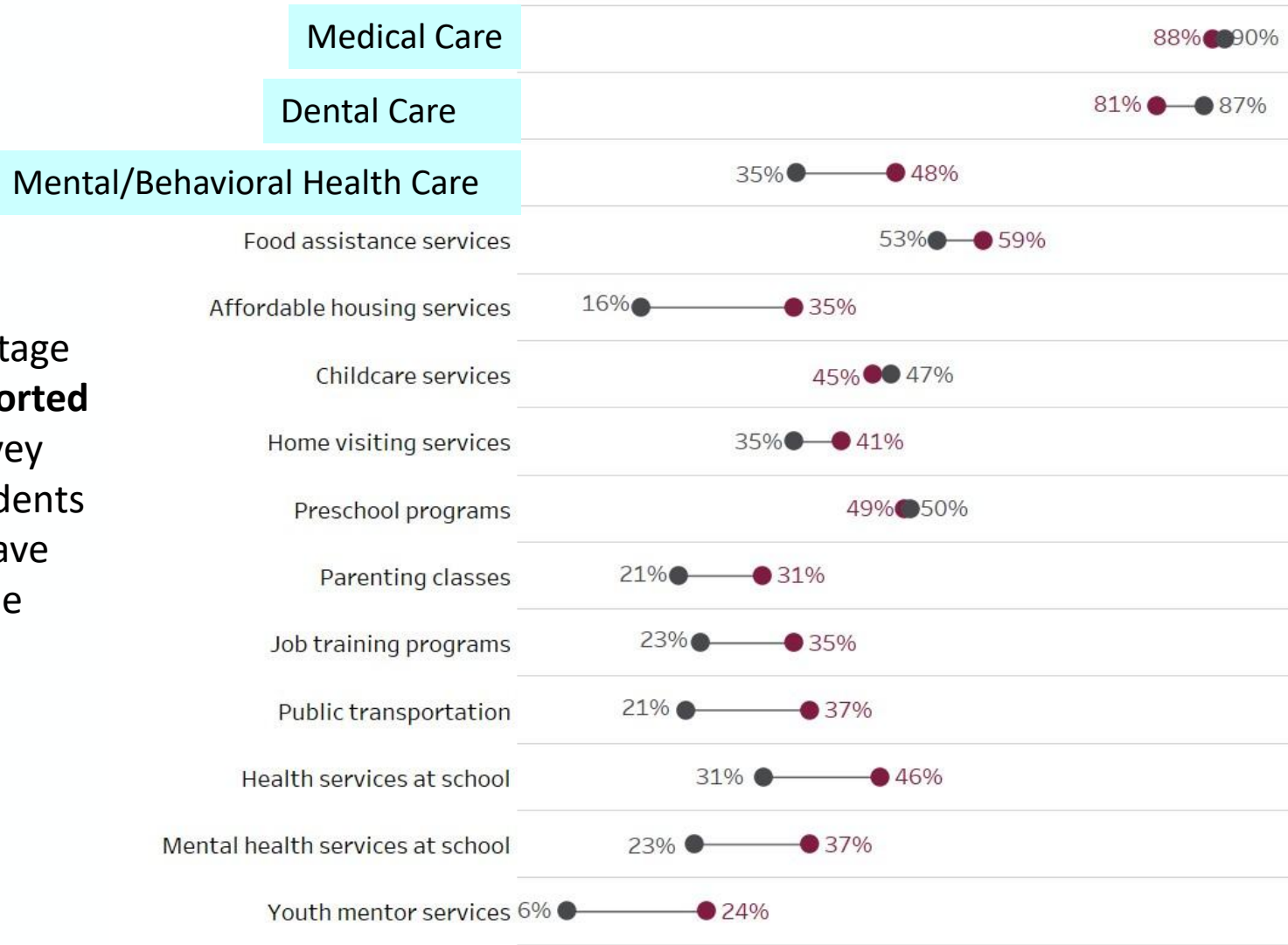
Responses by neighborhood

Neighborhood	N	%
Las Cruces	311	29%
Anthony	130	12%
Sunland Park	95	9%
Chaparral	93	9%
Santa Teresa	51	5%
Mesilla Park	37	3%
Mesquite	22	2%
Butterfield Park	20	2%
Berino	20	2%
La Mesa	17	2%
Chamberino	17	2%
Rincon	14	1%
Radium Springs	14	1%
La Union	13	1%
Fairacres	12	1%
Salem	11	1%
Mesilla	11	1%
Hatch	11	1%
Vado	10	1%
University Park	10	1%
Tortugas	8	1%
San Miguel	8	1%
Organ	8	1%
Garfield	8	1%
San Ysidro	6	1%
Hill	4	0%



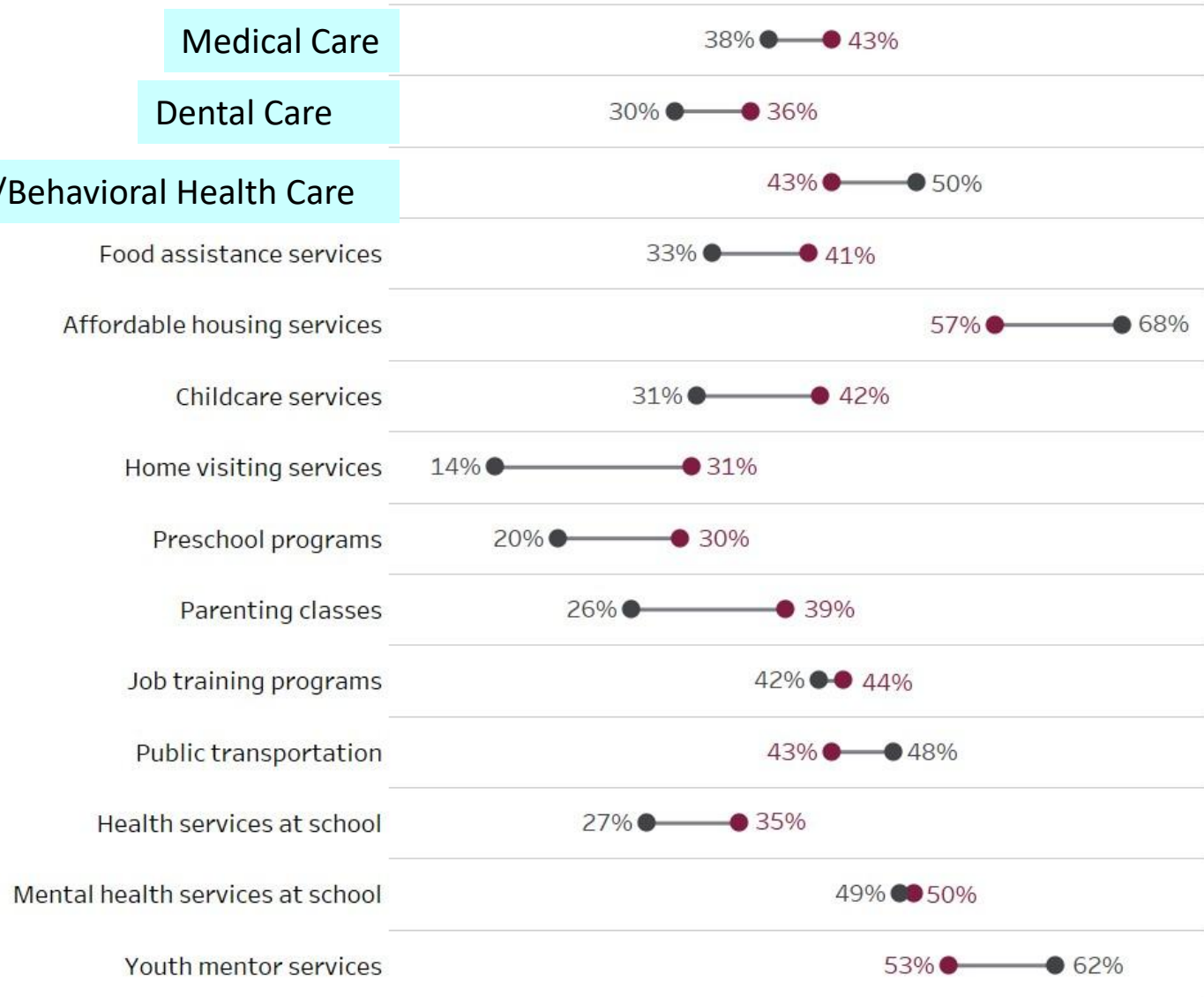
Needs

Difference in the percentage of respondents who **reported needing services** by survey year. (Percent of respondents who answered, “Yes, I have needed this service in the past 12 months.”)



Difficulties

Difference in the percentage of respondents who **reported needing services and had difficulty getting services** by survey year. (Percent of respondents who answered, “Yes, I have had difficulty getting this service in the past 12 months.”)



Medical Care Barriers

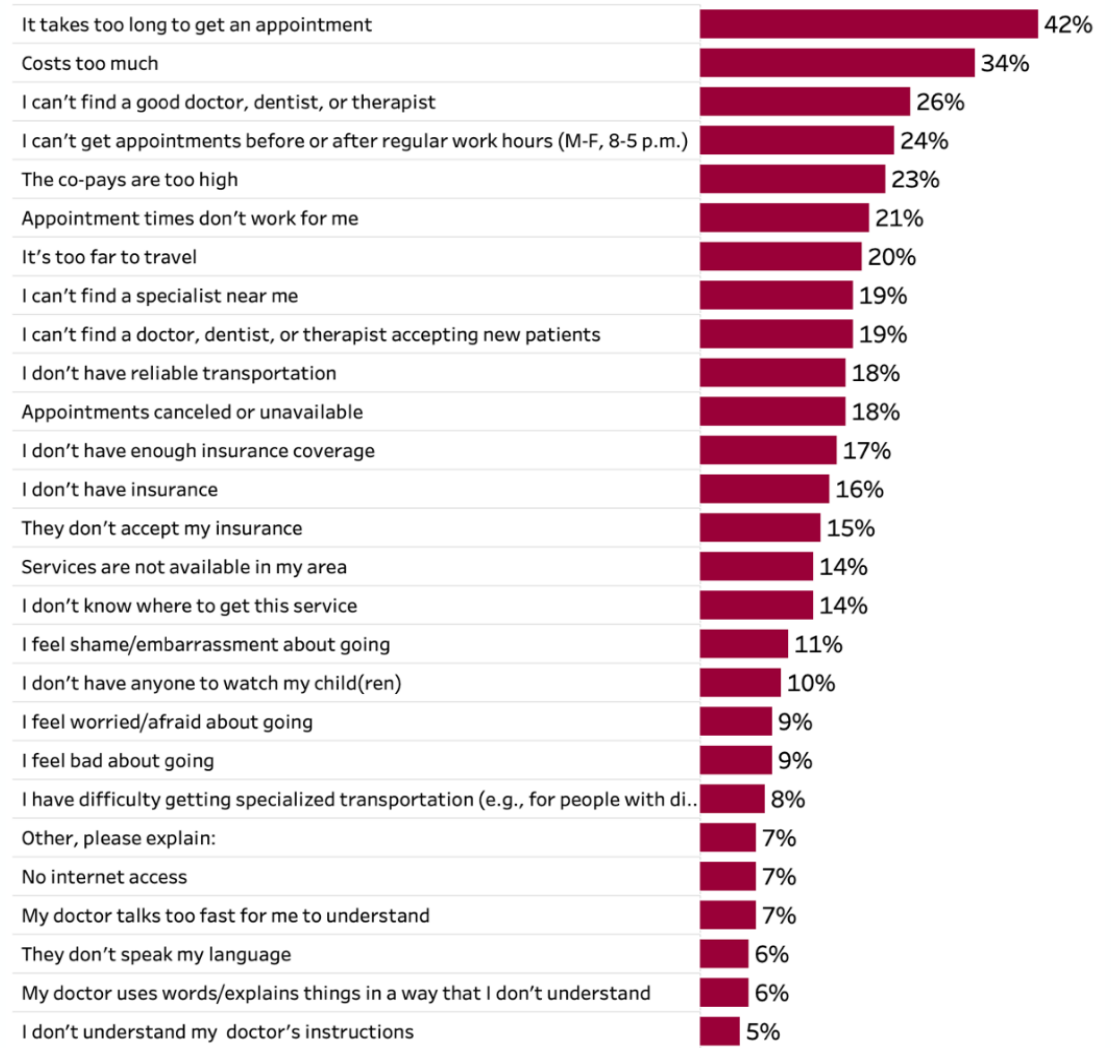
“better more adequate health care so you don't have to wait 6-9+ months for an appointment or procedures/surgeries”

“Having shorter wait times at the doctor's office would be great. Also, having more options to doctors nearby, we only have one.”

“Wait lists are incredibly long. Specialty visits are at times nonexistent, and it takes 2 plus months to access.”

“The copays are so high even with insurance .”

Difficulties accessing **medical care** services (% of respondents 2024):



Medical Care Quality:

58% Good-Very Good

In general, how would you rate the quality of medical care you have received?	Count	Percent
Very bad	19	2%
Bad	36	4%
Average	328	34%
Good	360	38%
Very good	193	20%
I don't know because I haven't been able to get this service	15	2%
Total	951	100.0%



Medical Need: Statistically significant differences by subgroup

- Respondents with a higher level of education were more likely to report needing medical care.
- Households earning 55K or more a year were more likely to report needing medical care.
- US-born respondents were more likely (91%) than foreign-born respondents (85%) to report needing medical care.
- Men are less likely to have needed medical care than women or non-binary/other genders.



Medical Difficulty: Statistically significant differences by subgroup for respondents needing medical care

- Respondents living in an extended or multi-generational family were more likely (51%) to report difficulty accessing medical care than those not in such a family (40%).
- Individuals living in a Tribal community were significantly more likely (64%) to report difficulty accessing medical care than those not in a Tribal community (39%).
- Difficulty accessing medical care also varied by school district, with respondents in Hatch reporting the highest rate of difficulty (64%), followed by LCPS (49%) and Gadsden (39%).

Dental Care Barriers

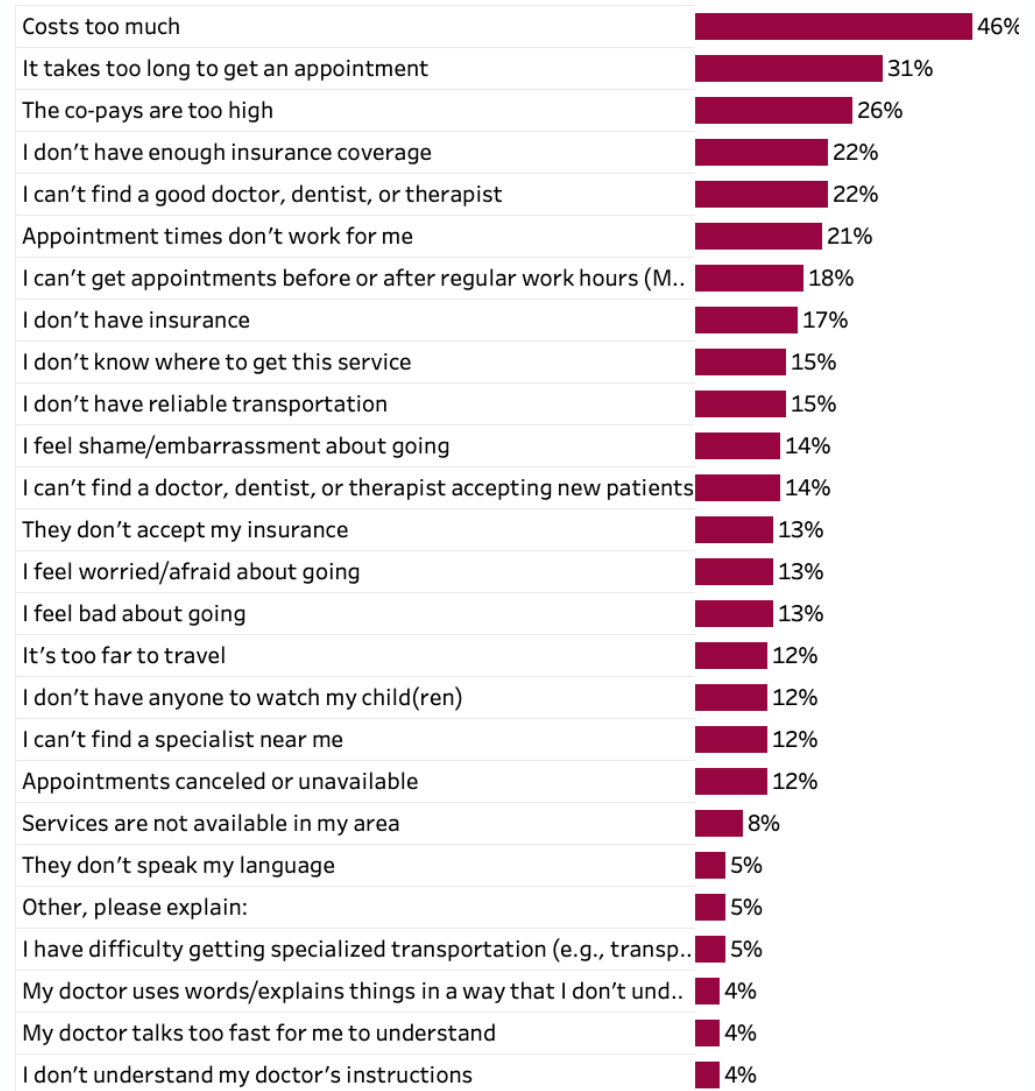
“Medical is really really really bad here...and I am from here...it is cheaper for me to go to EGYPT and get all my dental done”

To support families, we need...

“Health fairs for children: dentist, opticians. Better medical care in Hatch (we don’t have enough pediatricians and dentists)”

“Have access to affordable good quality Dental and Orthodontic care for families.”

Difficulties I’ve had getting the following service:



Dental Care Quality:

55% Good-Very Good

In general, how would you rate the quality of dental care you have received?	Count	Percent
Very bad	20	2%
Bad	41	5%
Average	271	33%
Good	283	35%
Very good	161	20%
I don't know because I haven't been able to get this service	41	5%
Total	817	100%



Dental Care Need: Statistically significant differences by subgroup

- Respondents with a higher level of education were more likely to report needing dental care.
- Households earning 55K or more a year were more likely to report needing dental care.
- US-born respondents were more likely (86%) than foreign-born respondents (73%) to report needing dental care.



Dental Care Difficulty: Statistically significant differences by subgroup for respondents needing dental care

- Respondents with a household income of \$24,999 or less were more likely (39%) to report difficulty accessing dental care than those earning \$55,000 or more (29%).
- Individuals who speak English "Not at all" or "Not well" were significantly more likely (51%) to report difficulty getting dental care than those who speak English "Well" or "Very well" (33%).
- Respondents living in a Tribal community were more likely (62%) to have difficulty accessing dental care compared to those not living in a Tribal community (32%).

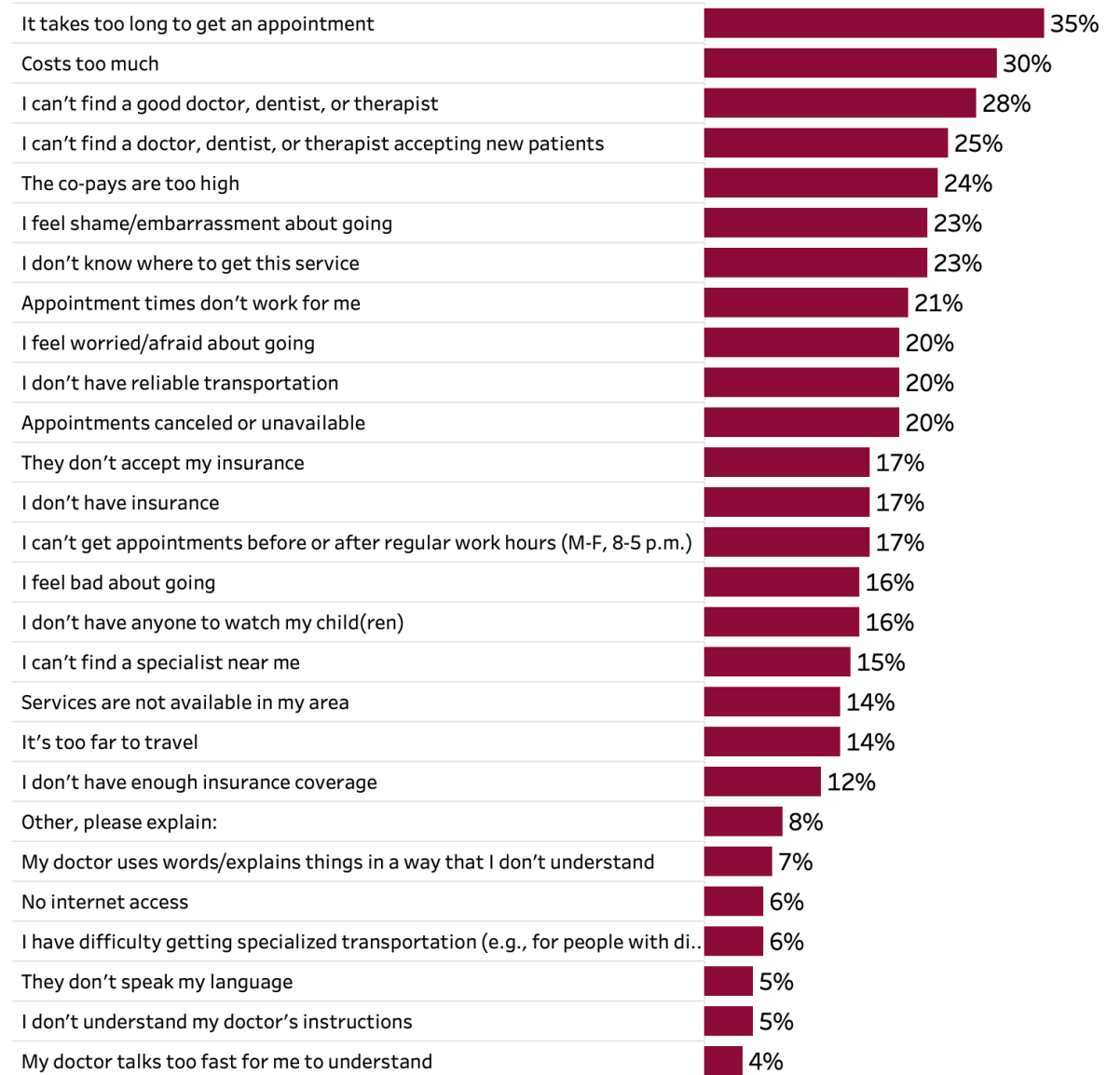


Mental & Behavioral Health Care Barriers:

“Having to wait over a year for an appointment in mental health because there aren’t enough physicians available is ridiculous”

“Sunland Park is a highly underserved community with much -needed resources that you can only get in nearby cities. Mental health and physical health is of great concern not being adequately addressed with the minimal assistance and resources that are monopolized by these organizations.”

More mental health options who also take low - income medical insurance.”



Mental/Behavioral Health Care Quality:

52% Good-Very Good

In general, how would you rate the quality of mental health care you have received?	Count	Percent
Very bad	21	4%
Bad	34	7%
Average	154	31%
Good	162	33%
Very good	92	19%
I don't know because I haven't been able to get this service	34	7%
Total	497	100%

Mental Health Need: Statistically significant differences by subgroup

- The need for mental or behavioral health care varied by the school district the respondent had a child attending. Respondents with children attending Las Cruces Public School district reported the highest rate of need (64%), followed by Hatch (52%), Gadsden (46%), and private schools (33%).

Mental Health Care Difficulty: Statistically significant differences by subgroup for respondents needing care

- Respondents with a household income of \$55K or more were more likely (54%) to report difficulty accessing mental or behavioral health care than those earning less than \$55K (39%).
- Respondents living in a Tribal community were more likely (58%) to have difficulty accessing mental or behavioral health care compared to those not living in a Tribal community (40%).



About this survey

The 100% Community Survey for Doña Ana County was first conducted in 2019. The survey was conducted again between April and August 2024. The surveys were available in Spanish and English, online and on paper. The [Doña Ana County Resilience Leaders](#) promoted the survey through personal contacts, community events, and locations providing services, such as medical and behavioral health centers and food distribution sites. The survey was distributed through school district, city, and county outreach methods. An initial sample of 1,338 survey responses was collected. [NMSU's Center for Community Analysis](#) collected responses and analyzed the results. After eliminating responses from those who did not consent, did not answer any service-related questions, or reported living in another county, the final sample consisted of 1,106 valid respondents (775 online and 331 on paper). The survey aims to understand the level of need and access to basic surviving and thriving services. We hope the results serve as a jumping-off point, providing insight into areas that may merit further exploration. To learn more about the **100% Community Survey**, please visit [NMSU's Anna Age Eight Institute](#).



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