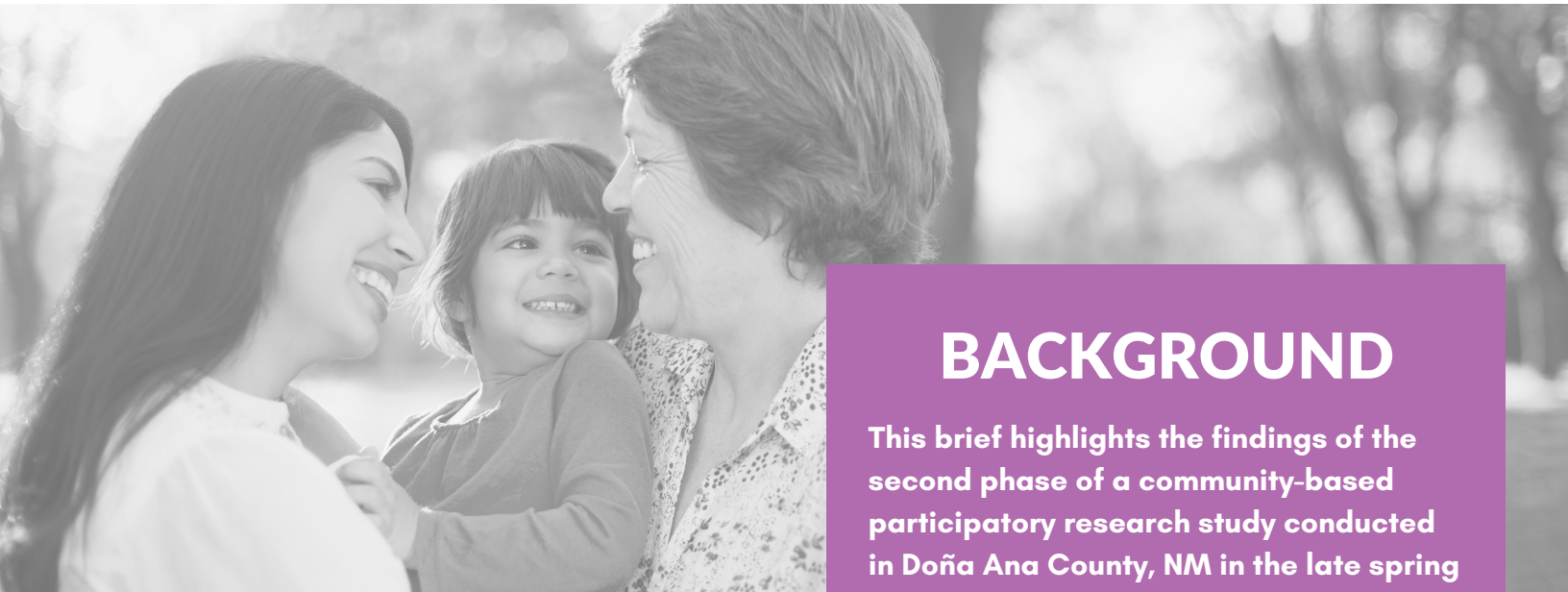


# STRENGTHENING BORDER FAMILIES

**Frontline Practitioner Perspectives on Service Access for Immigrant Families with Young Children in Doña Ana County, NM**



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## DATA HIGHLIGHTS

Frontline workers offered insight about various facets of service access for the immigrant community including challenges with engagement, language access, immigrant trust in community services, successful approaches to engaging with immigrants, and changes during the COVID-19 pandemic. Participants also offered recommendations about how best to meet the unique needs of the immigrant community in Doña Ana County.

## BACKGROUND

This brief highlights the findings of the second phase of a community-based participatory research study conducted in Doña Ana County, NM in the late spring of 2021. This phase elicited the perspectives of frontline practitioners who work directly with immigrant families across a variety of service settings in the community about the accessibility and quality of services for immigrant families with young children (IFYC). Researchers collected 80 online surveys from practitioners at 35 community-based organizations and conducted 5 follow-up focus groups with 17 participants to delve deeper into key themes that arose through the surveys. Participants also offered their insight on the greatest needs of the immigrant community and recommendations on how best to meet these needs, including via the concept of a “one-stop-shop” for services for immigrant families.

# IMMIGRANT ENGAGEMENT

## CHALLENGES WITH ENGAGEMENT

The majority of participants (85.1%) reported that their organizations experience challenges engaging with the immigrant community at least sometimes, including 23.8% who often experience challenges and 8.8% who always experience challenges. Additionally, most participants (72.6%) thought that immigrant families have felt at least somewhat comfortable receiving services at their agency, while 18.8% thought families have felt somewhat uncomfortable and 7.5% extremely uncomfortable. Participants cited the following as the top 10 reasons families do not access needed services.

**FIGURE 1. TOP 10 REASONS FAMILIES DO NOT ACCESS SERVICES**

1. **FEAR**
2. **LACK OF INFO/AWARENESS**
3. **LEGAL STATUS & ELIGIBILITY ISSUES**
4. **COST BARRIERS**
5. **LANGUAGE BARRIERS**
6. **MISTRUST/DISTRUST**
7. **LACK OF INFO ABOUT ELIGIBILITY**
8. **TRANSPORTATION ISSUES**
9. **HESITANT TO SEEK SERVICES**
10. **LACK OF AGENCY CAPACITY**

## PARTICIPANT & AGENCY CHARACTERISTICS

A total 80 surveys were collected from frontline practitioners from 35 different community agencies in Doña Ana County that provide a number of services to the community, including social services, education, early intervention or home visiting, mental health services, health services, community organizing, food, childcare, legal services, income assistance and housing. Of these 80 participants:

- 81.3% identified as Hispanic or Latino.
- 88.8% reported being proficient in another language, and 85% in Spanish.
- 55% had worked at their organization for less than 5 years, and 26.3% had worked at their organization for 5–10 years.
- 67.5% reported that their agencies primarily serve Las Cruces, NM. However, a number of other smaller towns, *colonias* and communities are also served by these agencies, including Anthony, Vado, Chaparral, Hatch, Mesquite, Berino, Santa Teresa, Sunland Park, La Union, and others.
- On average, participants had worked with immigrants or on immigration issues for 9.2 years, and 52.9% of their work is with immigrants.

**Table 1. Survey Participant Demographics**

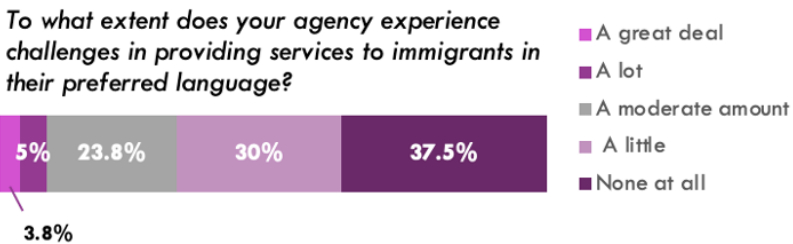
	n	%
<b>Race &amp; Ethnicity</b>		
Hispanic or Latino	65	81.3%
Multiple race or ethnicity	5	6.3%
Other	10	12.5%
<b>Proficiency in another language</b>		
Any other language	71	88.8%
Spanish	68	85.0%
<b>Job/Position Type</b>		
Caseworkers/Social Workers	21	26.3%
Management/Administration	15	18.8%
Clinicians	15	18.8%
Community Outreach/ Promotoras	15	18.8%
Educators	10	12.5%
Legal Service Providers	4	5.0%

# LANGUAGE ACCESS

More than half of the participants (62.6%) reported that their agency experiences challenges in providing services to immigrants in their preferred language at least a little. The main types of language access challenges cited included a lack of or need

for bilingual staff, a lack of resources for languages other than Spanish, lack of funding or cost barriers within the agency, and document translation challenges. Some focus group participants reported that their agencies do not prioritize the hiring of and/or do not have enough bilingual and bicultural staff and that they are not aware of formal language access plans within their organizations. Participants also noted a need to intentionally create content for immigrant families e.g., for education and outreach, as opposed to relying on translation of content originally created in English.

Figure 2. Challenges in language appropriate service provision



# TRUST IN SERVICES

The majority of participants reported that they felt immigrants trust the services that their agency provides either “a lot” (48.8%) or “a great deal” (31.3%). Key contributors to trust include relationship and rapport building, provision of language appropriate services, information sharing and education, and having service providers with relatable experiences (e.g., being immigrants themselves). Several focus group participants elevated the importance of frontline practitioners being representative of the immigrant population and of using *promotoras*, who are already established in the communities and act as trusted messengers. They also talked about the importance of partnering with other organizations who are already trusted messengers with the immigrant community.

“If you show up with a *promotora*, you're in. They really are beneficial. They're everywhere. Every community has them, so they have been a big help to us... *promotoras*, they're magic.”  
-Social services provider”

# ENGAGEMENT APPROACHES

Participants highlighted the main approaches they utilize to engage immigrant families as: information sharing, education, and/or outreach (88.8%), providing language services (86.3%), cultivating and leveraging trust (76.3%), interagency collaboration (65%), and case management (57.5%). Additional strategies mentioned to address the challenges they encounter with engagement, included maintaining confidentiality, being adaptable and flexible in service provision, implementing low-cost services and sliding fee scales, advocating for clients, utilizing community organizers and/or *promotoras*, and having relatable experiences or backgrounds to immigrant families.

## CHANGES DURING COVID-19

The majority of participants (71.3%) reported that they have noticed changes in immigrant families accessing their services during the COVID pandemic at least a moderate amount. Primary changes described include a greater need for assistance with meeting various basic needs (e.g., food, housing, utilities), a lack of access to technology and internet, school and education-related challenges, barriers due to agency closures, and increased employment and income needs.

Participants reported that during COVID immigrant families have relied on trusted community agencies for information and resources and on family and friends.

“

I have seen incredible resiliency in the families I've worked with. I think this is due in part to strong inter-family networks that have allowed social support structures to remain in place despite the pandemic.  
-Legal services provider

”

## MEETING THE COMMUNITY'S NEEDS

Participants offered insight on what is most needed to meet the unique needs of the immigrant community in Doña Ana County. The top 10 concerns of immigrant families as identified by survey participants include:

- employment/unemployment
- fear of repercussions due to legal status
- health services or lack of health insurance
- housing
- income
- lack of legal status/ immigration services needed
- education
- lack of knowledge about services or eligibility
- mental health
- food & nutrition needs

In order to address these needs and concerns of immigrant families, participants identified the following needed changes:

- 1. Resource and information sharing:** More education and outreach is necessary to provide immigrant families with information and increase awareness about the services available in the community in an accessible manner.
- 2. Access to more services:** The majority of services are located in Las Cruces, while the smaller communities outside Las Cruces lack a variety of services. This lack of services in families' own communities is compounded by a lack of adequate transportation and geographic barriers like the Border Patrol checkpoints.
- 3. Improved language access:** More bilingual staff and more information in different languages are necessary.
- 4. A one-stop-shop:** There is a need for a one-stop-shop or a “no wrong door” approach for services for immigrant families.

- 5. Free or lower-cost services:** There is a need to lower cost barriers to services by providing more free, low-cost, and/or flexible payment services. Often even the seemingly nominal fees charged by agencies for services, forms, documentation, etc. can still be barriers for families.
- 6. More specialized staff:** More staff who are trained in immigration issues and working with immigrant populations are needed. The challenges and experiences of immigrants are very unique, requiring specialized knowledge.

## WHERE FAMILIES GET SERVICES

Participants identified the following community agencies as the primary places that immigrant families go to access services for variety of needs, including heath, education, childcare, child behavioral issues, unemployment and income, mental health, housing food, and legal advice.

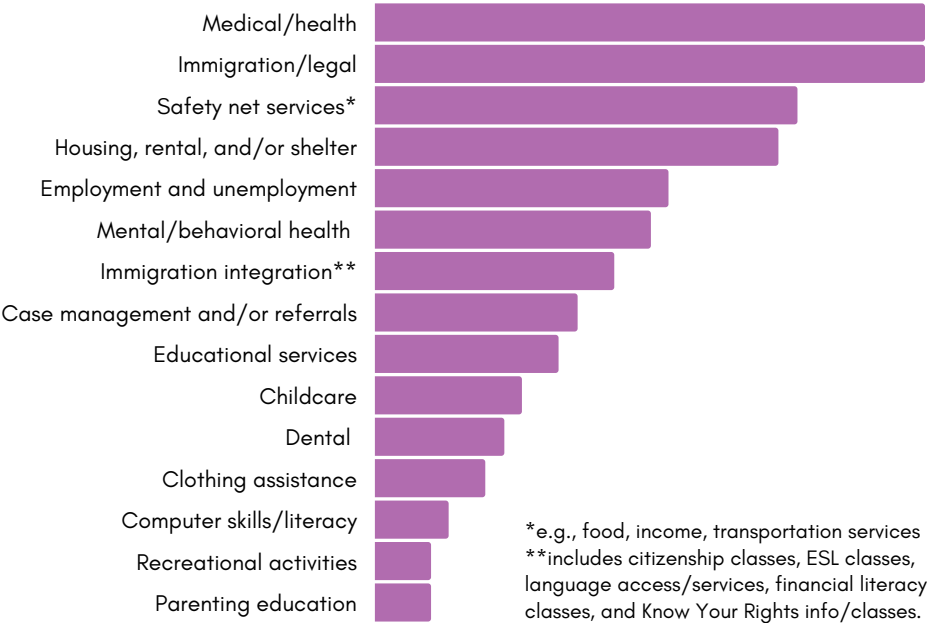
**Figure 3. Where families go when they need help**

 <b>HEALTH NEEDS</b> <ol style="list-style-type: none"> <li>1. La Clinica de Familia (LCDF)</li> <li>2. Ben Archer Health Centers</li> <li>3. Local clinics or hospitals</li> <li>4. Amador Health Center</li> <li>5. Mexico</li> </ol>	 <b>MENTAL HEALTH NEEDS</b> <ol style="list-style-type: none"> <li>1. La Clinica de Familia (LCDF)</li> <li>2. Amanecer Community Counseling</li> <li>3. Amador Health Center</li> <li>4. Ben Archer Health Centers</li> <li>5. Aprendamos Family of Services</li> </ol>
 <b>EDUCATIONAL NEEDS</b> <ol style="list-style-type: none"> <li>1. Las Cruces Public Schools</li> <li>2. Doña Ana Community College</li> <li>3. Gadsden Independent School District</li> <li>4. Head Start/Early Head Start</li> <li>5. Hatch Public Schools</li> </ol>	 <b>HOUSING NEEDS</b> <ol style="list-style-type: none"> <li>1. Family and friends</li> <li>2. Churches</li> <li>3. Community of Hope</li> <li>4. La Casa, Inc.</li> <li>5. Gospel Rescue Mission</li> </ol>
 <b>CHILDCARE NEEDS</b> <ol style="list-style-type: none"> <li>1. Family and friends</li> <li>2. Children, Youth &amp; Families Dept (CYFD)</li> <li>3. Head Start/Early Head Start</li> <li>4. Jardin de los Niños</li> <li>5. New Mexico Pre-K</li> </ol>	 <b>FOOD NEEDS</b> <ol style="list-style-type: none"> <li>1. Churches</li> <li>2. Casa de Peregrinos</li> <li>3. NM Human Services Dept</li> <li>4. SNAP/Food stamps</li> <li>5. Roadrunner Food Bank</li> </ol>
 <b>CHILD BEHAVIORAL ISSUES</b> <ol style="list-style-type: none"> <li>1. La Clinica de Familia (LCDF)</li> <li>2. Schools</li> <li>3. Amanecer Community Counseling</li> <li>4. Aprendamos Family of Services</li> <li>5. Ben Archer Health Centers</li> </ol>	 <b>LEGAL ADVICE</b> <ol style="list-style-type: none"> <li>1. New Mexico Legal Aid</li> <li>2. Catholic Charities of Southern NM</li> <li>3. Free legal clinics or services</li> <li>4. Colonias Development Council</li> <li>5. Churches</li> </ol>
 <b>UNEMPLOYMENT OR INCOME NEEDS</b> <ol style="list-style-type: none"> <li>1. NM Human Services Dept</li> <li>2. NM Workforce Solutions</li> <li>3. Family and friends</li> <li>4. NM Workforce Connection</li> <li>5. Churches</li> </ol>	

# THE ONE-STOP-SHOP

Finally, participants were asked to provide their ideas on the concept of a one-stop shop for services for immigrants in the community. Figure 4 to the right demonstrates the various types of services that participants felt should be included in a one-stop-shop. Participants also provided recommendations for the location and format of a one-stop-shop to make it accessible for immigrant families throughout the county, recommending that it potentially have multiple locations or function as a mobile unit. Participants also highlighted that it should be staffed by bilingual and bicultural providers who have experience serving the immigrant community and who have relateable life experiences.

**Figure 4. Recommended Services for a One-Stop-Shop**



## NEXT STEPS

Phase three of this study commenced in early 2022 and aims to conduct 240 in-person surveys and follow up focus groups directly with immigrant families with young children (ages 0-8 years old) in Doña Ana County to elicit their perspectives on the key barriers and facilitators to accessing services in the community and on the idea of the one-stop-shop, including what it should look like, where it should be located, and who should run it. The research team is also in the process of conducting a complementary community resource mapping project to identify and map out the existing services and providers available to immigrant families across the county and the degree to which their services are inclusive of immigrant families’ needs. These two pieces will collectively inform the development of a pilot of the one-stop-shop concept.

## ACKNOWLEDGMENTS

This research is supported by the W.K. Kellogg Foundation. The authors thank the frontline practitioners and community agency representatives who participated in surveys and focus groups to provide their perspectives on barriers and facilitators to service access among immigrant families in southern New Mexico as well as their community agency partners and community advisory group for their support and insight. The authors also thank the Center for Law and Social Policy and the Migration Policy Institute for their input and guidance. The authors are grateful to its graduate student Vanessa Mendoza for her research assistance.