CAMPAIGN 2022 FUNDING REQUEST SUMMARY

Agency Name: _____

Program Title	New or Existing Program	2021 Requested Funding	2022 Requested Funding
		$	$
		$	$
		$	$
		$	$
		$	$
Total Dollar Amount		$	$

Agency Signature

_____

Date

_____

FUNDING APPLICATION
FOR THE PERIOD
January 1, 2022 through December 31, 2022

SUBMITTAL DEADLINE: JANUARY 7, 2022

Please do not copy and paste from previous year applications, as the application has slightly changed.

Please direct all questions to:

THRIVE IN SOUTHERN NEW MEXICO
1601 10TH STREET SUITE A
ALAMOGORDO, NM 88310
(575)-437-8400

TO: Potential 2022 THRIVE Partner Agencies
FROM: THRIVE in Southern New Mexico Funds Allocation Committee (FAC)
Subject: **2022** Funding Application

Thank you so much for looking to THRIVE in Southern New Mexico to further the good works of your agency! Together, as we increase our organized capacity to help one another, we will make even more significant differences in the lives of many people. Enclosed you will find a funding application packet for Campaign 2022.

The deadline for returning the required information is **January 7, 2022.** Applications should be mailed to P.O. Box 14, Alamogordo, NM, 88311, or may be hand delivered to Stephanie Hale, Executive Director at THRIVE in Southern New Mexico, 1601 10th Street, Suite A, Alamogordo, NM 88310. **PLEASE NOTE: APPLICATIONS WILL NOT BE ACCEPTED, POSTMARKED OR IN PERSON, AFTER THIS DATE.**

THRIVE will be conducting a mandatory application training. **Attendance of this training is mandatory and considered part of the application process.** Training sessions will be conducted on the following dates:

Tuesday, October 19th 8:00AM
Wednesday, October 20th 10:00AM
Thursday, October 21st 2:00PM

Please RSVP to stephanie@letsthrivenm.org which date you will be attending (only one training class needs to be attended). **The person/s attending MUST be the one/s responsible for completing the Funding Application.**

THRIVE considers the Funds Allocations Committee (FAC) review process of paramount importance. A team of community volunteers, along with the THRIVE administration, will carefully scrutinize all applications and evaluate the need each agency meets within the community as well as how the program proposes to meet those needs. The FAC, on behalf of the THRIVE in Southern New Mexico Board of Directors, believe in being fully accountable to the thousands of people whose pledges assist THRIVE approved agencies.

Agencies meeting all eligibility requirements and who have submitted a complete application packet will be invited to present their proposals and programs to the Funds Allocation Committee on the following dates: **March 1, 2, or 3, 2022**. All eligible agencies will be notified in writing of their designated time slot and date. **Please come prepared to deliver a 15 minute presentation. Those of you that are submitting two programs to be funded will have twenty (20) minutes (10 minutes per program). Presentations must be kept to the time specified.**

Prior to this presentation, FAC teams will be conducting Site Visits at each agency that has a presentation. The agency will be contacted to arrange a time and date. The Site Visits will start the week of February 7, 2022, and go through February 25, 2022.

Thank you again. If you need additional information or have any problems while working on your funding application, please feel free to call the THRIVE office, (575)-437-8400.

<u>THRIVE IN SOUTHERN NEW MEXICO</u>

ELIGIBILITY REQUIREMENTS – AGENCY LEVEL

To be eligible to apply and receive funding through THRIVE in Southern New Mexico's funding process; an **Agency must meet all of the following criteria:**

- Be recognized as an organization exempt from federal income tax under I.R.S. Section **501(c)(3)** of the Internal Revenue Code 1986.

- Be primarily involved in providing program(s) and services that are **health, education or human-service related.**

- Have an independent governing body of voting members who are resident volunteers. This governing body has the authority to decide policy and strategic direction with respect to the agency's programs, administration and finances, in accordance with the organization's By-Laws, and who shall meet at least four times per year. **Paid staff must not be a voting member of the Board.**

- **Maintain a non-discrimination policy or plan** that does not discriminate on the basis of race, cultural heritage, religion, gender, national origin, age, marital status, sexual orientation, veteran status or status as a qualified disabled or handicapped individual.

- **Have an annual audit or financial review performed by a certified accountant that is licensed and in good standing with the State of New Mexico.** Organizations with annual revenue totaling **less than $500,000** may have their financial statements reviewed by an independent accountant (CPA) in lieu of an audit.

- **Agency's record of address must be in Otero or Lincoln County.**

- **Agency has been in business for a minimum of three (3) years.**

ELIGILIBILTY REQUIREMENTS – PROGRAM LEVEL

To be eligible to be considered for THRIVE in Southern New Mexico's funding process, **a program must:**

- Meet the funding expectations and requirements for the focus areas of **Education, Health, and Self-Sufficiency** and strategies under which the request is made.

PLEASE INCLUDE THIS CHECKLIST WITH FUNDING APPLICATION
2022 Application for Funding Checklist

Funding applications and all required documentation should be mailed to THRIVE in Southern New Mexico (P.O. Box 14, Alamogordo, NM 88311) or dropped by the THRIVE office at 1601 10th Street, Suite A, Alamogordo, no later than **January 7, 2022,** for consideration for the 2022 funding cycle. **Please complete your application thoroughly and arrange application materials and attachments in the order provided in the checklist. ONE APPLICATION PER PROGRAM.**

Incomplete applications WILL NOT be processed or considered.

REQUIRED DOCUMENTATION – Submit one (1) complete original package from the below list, unstapled, with binder clip only.

1.   _____ Complete Funding Application and Agency On-Site Visit Questionnaire;

2.   _____ Certificate of Participation for the mandatory Funds Allocation Training Workshop;

3.   _____ Copy of the most current Agency's Board of Directors meeting minutes approving submittal of the THRIVE Funding Application;

4.   _____ Current Board of Directors Contact Listing;

5.   _____ Copy of the Agency's By-Laws (most current version);

6.   _____ Proof of "good standing" status as a 501(c)3 agency, go to website www.portal.sos.state.nm.us/corps, look up your corporation and print;

7.   _____ Most recent Audit Report or Financial Review;

8.   _____ IRS Form 990 – Return of Organization Exempt From Income Tax;

9.   _____ IRS Determination Letter for 501(c)3 Status Designation;

10.   _____ Any brochures, literature, posters, media, etc. that depicts the Agency as a THRIVE Partner Agency (if previously funded);

11.   _____ Provide "Success Story" related materials as needed;

12.   _____ Non-Discrimination Certification;

13.   _____ Anti-Terrorism Compliance and Charitable Status Certification.

Section A: AGENCY Information – General

Please provide the following information about the governing agency that is/will be responsible for providing the program for which funding is being requested.

AGENCY NAME:

AGENCY EIN/TAX NUMBER:

PHYSICAL ADDRESS:

MAILING ADDRESS:

EXECUTIVE DIRECTOR:

EXECUTIVE DIRECTOR'S PHONE NUMBER:

EXECUTIVE DIRECTOR'S E-MAIL ADDRESS:

WEB SITE:

Indicate the total number of programs for which this agency is requesting funding: _____

[NOTE: Only two (2) programs per agency may request funding]

Submitted by

_____

Prepared by

_____

Title

_____

Section B: **AGENCY Information – Governing Body**

1. Is the agency a 501(c)(3) program in good standing? Please provide proof of good standing as an attachment.

2. Do any paid staff members of the agency sit as voting members on the governing board?

3. Board of Directors:

    a. What is the size of your present Board?

    b. When does the Board Meet?

    c. Do you keep official minutes of Board meetings? If so, attach your most current minutes.

    d. Please attach the most current list of Board Officers and Directors with contact information and mailing addresses.

    e. Please attach current version of the agency's bylaws and indicate the date that they were last updated.

        Last Updated On: _____

    f. Briefly describe the role of your organization's Board of Directors, including how your board carries out its responsibilities for financial and programmatic oversights?

Section C: AGENCY Information – Financial Management

Please provide the following information about the financial management of the agency that is/will be responsible for providing the program for which funding is being requested.

1.   Was an audit or audit review completed by a Certified Public Accountant (CPA) at the end of the last fiscal year? If not, please provide an explanation for not using a CPA or not having an audit completed?

2.   Does the agency currently have any unsatisfied judgments or tax liens? If so, please explain the circumstances.

3.   Are FICA and taxes paid? If no, please explain the circumstances.

4.   What percentage of the total agency budget is used for Administrative costs?

5.   What percentage of the total agency budget is used for fundraising?

6.   Please describe the supplementary fundraising activities the agency has conducted during the past year. Note the results of these activities including both the actual and projected amounts of funds raised.

7.   Please note the months that the supplementary fundraising activities will be conducted in the 2022 calendar year.

8.   Are fees charged for any of your programs or services? If yes, describe the fee structure (sliding scale, age, etc.).

9.   What percent of your services are free?

10.   Are two (2) signatures required on all checks written?

11.   Non-Compliance Issues: Please list any non-compliance issues for the present and past two years for your agency. List corrective actions taken and give dates that the non-compliance was cleared. Only list serious non-compliance issues that will affect the Agency's operations.

PLEASE NOTE: Partner Agency Fundraising Activities during THRIVE in Southern New Mexico's <u>Active Campaign Period</u> of September 1st through October 31st, 2022 is strictly prohibited. This includes any fundraising that is advertised as "benefiting" Partner Agency by another organization.

I have read and accept the above restriction (please sign below):

Name_____

Date _____

Section D: **PROGRAM Applicant Information**

Please provide the following information about the program for which the Agency is requesting funding.

1.   Program Name:

2.   Physical Address:

3.   Mailing Address:

4.   Program Contact Person:

5.   Program Contact E-Mail Address:

6.   Program Phone Number:

7.   What is the mission statement of this program?

8.   Is this program directly related to Education, Health, or Self-Sufficiency? Please read below and type in the word/words Education, Health, or Self-Sufficiency and number/numbers that apply to this program request for funding.   See **Attachment (A),** About Results-Based Accountability (pages 24 through 33).

      a. **Education**
1. All children are born healthy and develop on track.
2. All children are fully prepared to enter the educational system.
3. All students progress successfully through elementary school.
4. All students progress successfully through middle school.
5. All students graduate high school within 5 years, ready for school, life or work.
6. All individuals have opportunity to utilize some form of post-secondary education, from trade schools to 4-year universities.

   b. Health
1. All individuals and families receive affordable and equitable health services.
2. All individuals and families live in a safe environment.
3. All individuals and families exhibit healthy behaviors.
4. All individuals and families live in a health promoting environment.

   c. Self-Sufficiency
1. All individuals and families have adequate and sustainable resources to support their needs.
2. All individuals and families have the skills, knowledge, and relationships they need to effectively increase and manage their income.
3. All vulnerable populations are safe, socially engaged, and live with dignity.

9. Please share the measurable purpose of this program. How was the local need identified? (Provide statistical data/research behind the program.

10. What strategies will be, or are implemented, for the program's intended results?

11. How will the outcomes of this program be measured?

12. Attach a sample(s) of the program measurement tool(s). This is required.

13.   List below, the total Revenues and Expenses for **the Agency (as a whole, not just the program)**. Use information from the submitted audited Financial Statement.

Agency Total Revenues	Agency Total Expenses

14.   Use the table below to list all sources of funding and/or revenue and dollar amounts the agency receives for **this program only**. Include foundation grants, government funding, fundraising efforts, program service fees, THRIVE funding, thrift shop, and any other forms of funding.

Please be prepared to discuss and have accurate knowledge of the information listed on the worksheet below

Revenue From	Current Fiscal Year	Next Fiscal Year (Projected)
	$	$
	$	$
	$	$
	$	$
	$	$
	$	$
	$	$
	$	$
	$	$
	$	$
	$	$
	$	$
	$	$
	$	$
TOTAL REVENUES	$	$

15.   Use the table below to list all expenses directly related to **the program** for which funding is being requested.

Please be prepared to discuss and have accurate knowledge of the information listed on the worksheet below

Expense	Current Fiscal Year	Next Fiscal Year (Projected)
	$	$
	$	$
	$	$
	$	$
	$	$
	$	$
	$	$
	$	$
	$	$
	$	$
	$	$
	$	$
	$	$
	$	$
	$	$
TOTAL EXPENSES	$	$

16.   Please list all services that are provided as part of this program.

17.   Please describe the target population for this program? Be specific as to Education, Health, or Self-Sufficiency.

18.   What are the hours of operation for this program? Please be complete and specific.

19.   What is the geographic area(s) served by this program?

20.   Please share a "success story" from this program.

21.   Use the table below to describe the results of this program from the past, present and projected fiscal year.

Population	# Served During Past FY	# Served During Current FY	Projected # to be Served Next FY
ADULTS			
Male			
Female			
General			
CHILDREN (12 & UNDER)			
Male			
Female			
General			
TEENS (13-18 Years)			
Male			
Female			
General			
SENIORS (65 & Over)			
Male			
Female			
General			
OTHER (Please Specify)			
TOTALS			

22.   Please provide a brief description of the program in 100 words or less. (This is an opportunity to provide any additional information not asked for above that you would like the Funds Allocation Committee to be aware of.)

Section E: **Certification and Approval**

The undersigned certify that this proposal was considered and approved for submission by the requesting agency's Board of Directors and that all information contained within is complete and accurate.

Agency Board President

_____

Executive Director

_____

Program Director

_____

Section F: Agency On-Site Visit Questionnaire (Please complete)

Agency Name _____

Date of Visit _____
          (Note: Any no or N/A answers need to be explained)

1) **What program(s) are you applying to THRIVE for funding assistance? Explain increases and/or decreases, and same amounts of continuing programs from last year's funding request (if applicable).**

2) **What is the Focus Area/s (education, health, and self-sufficiency)? Give a brief explanation on how the program <u>directly</u> relates to the selected Focus area/s.**

3) **What would you like to highlight about your organization on our visit today?**

4) **Where do you see your organization in the next five (5) years? Is THRIVE still a factor in the funding process and why?**

5) **Beyond THRIVE, what are the funding sources of the program your organization is requesting assistance for?**

    a. **What steps are being taken within your organization to make this program self-sustaining?**

6) **Check each event below that was attended. If the REQUIRED events were not attended and or participated in please explain reason below? Due to COVID 19 this question requires no answers.**

EVENT	PARTICIPATED
2021 Annual General Meeting	
Day of Caring	
THRIVE Agency Fair at Gerald Champion **REQUIRED**	
2021 Campaign Pledge Participation by agency's employees	
Agency requesting a THRIVE Presentation, from THRIVE staff, to employees	

7) **Referring to above chart, of the four events that are not required, list below two events that your agency can participate in 2022 (if we are allowed to hold events in 2022).**

8) **List below where the THRIVE logo is used. (i.e. brochures, newsletters, emails, etc.)**

9) What questions do you have for us?

Funds Allocation Committee Member/s Signature and date:

_____

_____

_____

_____

_____

SECTION F
ATTACHMENT A

Part I: **Please refer to attached graph. Campaign year 2022 funding requests will be voted on by the FAC in March. Type in the below space the justification/justifications for requesting the amount shown on the graph. List items affecting the requested funding for this program (i.e.-no grants available for this program, loss from Federal/State grants, increased expenses). Please list items and approximate dollar amounts.**

<mark>The graph will be sent via email with the Training Certificate.</mark>

NON-DISCRIMINATION CERTIFICATE

In compliance with the Federal Directive on non-discrimination Standard of Voluntary Health and Welfare Services, we

Name of Organization _____

Hereby state that we are complying with the federal directive:

1. No person is excluded from service because of race, ethnicity, gender, age, or physical disabilities.

2. There is no segregation of those served on the basis of race, ethnicity, gender, age, or physical disabilities.

3. There is no discrimination with regard to hiring, assignment, promotion or other conditions of staff employment on basis of race, ethnicity, gender, age, or physical disabilities.

4. Governing bodies are open to representation from all segments of the public, regardless of race, ethnicity, age, gender, or physical disabilities.

Signed

_____

Title

_____

Date

_____

Anti-Terrorism Compliance and Charitable Status

In compliance with the USA Patriot Act and other counterterrorism laws, **THRIVE in Southern New Mexico** requires that each agency certify the following:

"I hereby certify on behalf of _____ that all THRIVE funds and donations will be used in compliance with all applicable anti-terrorist financing and asset control laws, statutes, and executive orders."

Additionally, I hereby certify that the above named organization is eligible to receive charitable contributions as defined under section 170(c) of the Internal Revenue Code.

Print Name

_____

Title

_____

Signature

_____

Date

_____

ATTACHMENT A

About Results-Based Accountability

**THRIVE staff and volunteers are using Results-Based Accountability (RBA)
Concepts to improve Community Funding investment outcomes.**

For more detailed information about Results-Based Accountability, go to www.raguide.org or www.resultsaccountability.com. Results-Based Accountability concepts and materials were developed by Mark Friedman, author of *Trying Hard is Not Good Enough* (Trafford 2005) and founder and director of the Santa Fe-based Fiscal Policy Studies Institute.

What is RBA?

RBA is a disciplined way of thinking and taking action used by communities to improve the lives of children, families, and the community as a whole. RBA is also used by agencies to improve the performance of their programs.

How does RBA work?

RBA starts with ends and works backward, step by step, towards means. For communities, the ends are conditions of well-being for children, families and the community as a whole. For programs, the ends are how customers are better off when the program works the way it should.

Results-Based Accountability:

•gets from talk to action quickly;

•is a simple, common sense process that everyone can understand;

•helps groups to surface and challenge assumptions that can be barriers to innovation;

•builds collaboration and consensus; and

•uses data and transparency to ensure accountability for both the well-being of children, families, and communities, and for the performance of programs.

The following definitions apply:

Results Accountability has two components:

1) **Population Accountability -** a group of partners takes on responsibility for the well-being of a population in a geographic area

2) **Performance Accountability** - a manager or group of managers takes responsibility for the performance of a program, agency or service system

Result – a population condition of well-being for children, adults, families and communities, stated in plain language

Indicator – a measure that helps quantify the achievement of a result

Baseline – what the measures show about where we have been and where we are headed

Turning the Curve – what success looks like if we do better than the baseline

Strategy – a coherent collection of actions that has a reasoned chance of improving results

Performance Measure – a universal measure of how well a program, agency or service system is working. The most important performance measures tell us whether program customers are better off. There are several types of performance measures:

•Measures that answer the question "How much did we do?"
•Measures that answer the question "How well did we do it?"
•Measures that answer the question "Is anyone better off (#)?"
•Measures that answer the question "Is anyone better off (%)?"

There are different categories of being better off: Skills/Knowledge, Attitude/Opinion, Behavior, and Circumstance

Targets – the articulation of target levels of performance expressed in measurable terms and specified time frames, against which actual achievement is compared

THRIVE in Southern New Mexico
Focus Areas

Definitions:

Result – (or outcome or goal) is a population condition of well-being for children, adults, families and communities, stated in plain language

Indicator – (or benchmark) is a measure that helps quantify the achievement of a result

Strategy – is a coherent collection of actions that has a reasoned chance of improving results

Performance Measure – is a universal measure of how well a program, agency or service system is working. The most important performance measures tell us whether program customers are better off. There are three types of performance measures:

1. Measures that answer the question "How much did we do?"
2. Measures that answer the question "How well did we do it?"
3. Measures that answer the question "Is anyone better off?" (There are four categories of being better off: skills/knowledge, attitude/opinion, behavior, and circumstance)

Education

Result 1: All children are born healthy and develop on track.

Indicator 1: Percent of children born at "normal" birth weight (2500-3999 grams)[i]
Indicator 2: Rate of substantiated child abuse and neglect (victim rate per 1000 children)[ii]
Indicator 3: Percent of children under 5 years of age in families with income below the federal poverty levels.

Strategy 1.1: Promote healthy developmental growth of children via parenting supports, education, pre-natal care and preventative health services
Strategy 1.2: Strengthen parenting skills and resources to promote early learning and interaction at home
Strategy 1.3: Support parent and children's services to reduce child abuse and neglect for children of any age
Strategy 1.4: Improve food and housing security for low-income households with children of any age

Result 2: All children are fully prepared to enter the educational system.

Indicator 1: Percent of children who enter school ready to learn.
Indicator 2: Percent of first time parents involved in educational programs on preparing children for school.
Indicator 3: Percent of children ages 3 and 4 enrolled in pre-school programs.
Indicator 4: Percent of first time parents receiving home visits.

Strategy 2.1: Promote social, emotional, cognitive, and physical readiness of children entering the education system
Strategy 2.2: Improve availability of early intake and needs assessment programs to identify at-risk and/or developmental delays
Strategy 2.3: Improve access to HQECE/four and five star programs
Strategy 2.4: Improve resources/support for families, parents, and caregivers that increase likelihood of educational success.
Strategy 2.5: Improve access to books and literacy programs for pre-school children

Result 3: All students progress successfully through elementary school.

Indicator 1: Habitual truancy rates among elementary school students.
Indicator 2: Percent of 3rd grade students proficient in reading.
Indicator 3: percent of 3rd grade students proficient in math.
Indicator 4: Percent of children who have problematic behaviors/behavior referrals.

Strategy 3.1: Provide supportive services to families of students at risk of poor academic outcomes.
Strategy 3.2: Promote programs to encourage successful early learning habits
Strategy 3.3: Improve access to after-care/summer learning and educational programs
Strategy 3.4: Increase resources available for family/child mental health needs assessments and interventions
Strategy 3.5: Improve access to books and literacy programs for elementary school children
Strategy 3.6: Improve re-integration into the school system for early-grade students who move frequently

Result 4: All students progress successfully through middle school.

Indicator 1: Habitual truancy rates among middle school Students.
Indicator 2: Percent of 8th grade students proficient in reading.
Indicator 3: Percent of 8th grade students proficient in math.
Indicator 4: Percent of middle school students who have attempted suicide.
Indicator 5: Deaths due to self-inflicted injury/suicide.

Strategy 4.1: Provide supportive services to students and the families of students at risk of poor academic outcomes
Strategy 4.2: Improve mid-school student participation in after-school and summer extracurricular learning activities (ELT)
Strategy 4.3: Improve tutoring resources/options for at-risk mid-school students failing core courses
Strategy 4.4: Strengthen family involvement and support structure for mid-school students
Strategy 4.5: Improve resources to intervene and address truancy patterns in middle schools
Strategy 4.6: Increase resources available for family/child mental health needs assessments and interventions

Result 5: All students graduate high school within 5 years, ready for school, life or work.

Indicator 1: Four-year graduation rates.
Indicator 2: High school dropout rate.
Indicator 3: Habitual truancy rates among high school students.
Indicator 4: Percent of youth ages 16-19 not enrolled in school and not in the work force (i.e. disconnected youth)
Indicator 5: Percent of adults ages (25-64) who have not completed high school (or attained a GED)
Indicator 6: Percent of high school students who have attempted Suicide.
Indicator 7: Deaths due to self-inflicted injury/suicide per 100,000 people aged 15-24.

Strategy 5.1: Reintegrate students not attending school including students involved in the juvenile justice system

Strategy 5.2: Strengthen family involvement and support structure for high school, GED and disconnected youth

Strategy 5.3: Support programs designed to enhance teen's social and emotional intelligence

Strategy 5.4: Increase student participation in after-school and summer extracurricular activities

Strategy 5.5: Increase tutoring resources/options for high school students

Strategy 5.6: Improve resources to intervene and address truancy patterns in high schools

Strategy 5.7: Increase resources available for family/youth mental health needs assessments and interventions

Result 6: All individuals have opportunity to utilize some form of post-secondary education, from trade schools to 4-year universities.

Indicator 1: Percent of high school graduates who enlist in the military or enroll in a postsecondary institution (including trade schools, two year colleges, and four-year universities)[xxiv]

Indicator 2: Number of certificates and degrees awarded by CNM, UNM

Indicator 3: Adult literacy rate

Strategy 6.1: Improve counseling services for recent high-school graduates regarding educational and post-secondary opportunities

Strategy 6.2: Improve access/availability of GED, adult basic skills education, alternative educational/training certifications online and evening classes

Strategy 6.3: Improve affordable child-care services/options to allow career/school focus

Strategy 6.4: Promote and improve access to adult literacy

HEALTH

Result 1: All individuals and families receive affordable and equitable health services.

Indicator 1: Percent of total population without health insurance.
Indicator 2: Percent of children without health insurance.
Indicator 3: Ratio of population to primary care physicians, dentists, and mental health providers.
Indicator 4: Percent of community members who say they know how to access the health services they need.

Strategy 1.1: Facilitate connection to health insurance
Strategy 1.2 Facilitate connections to health and wellness programs
Strategy 1.3: Address gaps in health services

Result 2: All individuals and families live in a safe environment.

Indicator 1: Interpersonal violence incidence rate.
Indicator 2: Childhood abuse and neglect substantiations.
Indicator 3: Suicide rates.

Strategy 2.1: De-stigmatize help-seeking behavior through education and awareness
Strategy 2.2: Address gaps in services
Strategy 2.3: Support individuals and families to be in safe living environments
Strategy 2.4: Provide primary prevention services
Strategy 2.5: Early identification and timely, appropriate intervention for individuals and families

Result 3: All individuals and families exhibit healthy behaviors.

Indicator 1: Percent of youth who use tobacco
Indicator 2: Percent of adults who use tobacco
Indicator 3: Percent of youth who use alcohol
Indicator 4: Percent of adults who abuse alcohol
Indicator 5: Percent of youth who misuse other substances
Indicator 6: Percent of adults who misuse other substances
Indicator 7: Teen birth rate
Indicator 8: Percent of reported STDs and HIV/AIDS for all

Strategy 3.1: Increase access to school and/or community based health centers and other school and/or community based programs available to individuals and families
Strategy 3.2: Provide primary prevention services
Strategy 3.3: Utilize evidence based strategies and clinical interventions for smoking cessation and treatment of alcohol and substance misuse

Result 4: All individuals and families live in a health promoting environment.

Indicator 1: Access to parks (percent of population living within half a mile from park)[xliii]
Indicator 2: Access to healthful foods (percent of population that lives in poverty and more than 10 miles from a grocery store)
Indicator 3: Obesity rate
Indicator 4: Physical activity rate
Strategy 4.1: Increase access to and availability of healthy food sources
Strategy 4.2: Provide nutrition education
Strategy 4.3: Increase access to safe places to be physically active

SELF-SUFFICIENCY

Result 1: All individuals and families have adequate and sustainable resources to support their needs.

Indicator 1: Percent of occupied housing units with no available vehicles

Indicator 2: Percent of working age population that uses public transportation to get to work
Indicator 3: Percent of housing units in which more than 35% of gross income is spent on rent or owner cost
Indicator 4: Percent of food-insecure households
Indicator 5: Percent of individuals below the poverty level

Strategy 1.1: Provide supportive services that meet basic and emergency needs for individuals and families, including housing and shelter, transportation, food and nutrition, mental and physical health care, child care, income supports, and elder care
Strategy 1.2: Provide comprehensive supportive services to promote ability to withstand future crises and improve sustainability

Result 2: All individuals and families have the skills, knowledge, and relationships they need to effectively increase and manage their income.

Indicator 1: Percent of households that are unbanked or underbanked
Indicator 2: Median household income in the past 12 months (adjusted for inflation)
Indicator 3: Percent of tax filers that receive the Earned Income Tax Credit (EITC)
Indicator 4: Percent unemployment
Indicator 5: Percent of population 25 and over with highest level of educational attainment of an Associate's degree
Indicator 6: Percent of population 25 and over with highest level of educational attainment of "some college" but no degree

Strategy 2.1: Strengthen skills through reengagement in education, including (but not limited to) high school, GED, postsecondary, and adult basic educational attainment
Strategy 2.2: Provide job training opportunities, including vocational education, apprenticeships, on-the-job training, and certification
Strategy 2.3: Provide support for job seekers through career exploration, preparation for employment, job coaching, job placement, and job retention
Strategy 2.4: Maximize use of tax credits for low-income individuals and families
Strategy 2.5: Increase financial literacy through programs which provide desired defaults, offer appropriate incentives, simplify the cost of information, demand a commitment, and use social strategies
Strategy 2.6: Increase access to mainstream financial products and services

Result 3: All vulnerable populations are safe, socially engaged, and live with dignity.

Indicator 1: Percent of population under 18 living below the poverty line
Indicator 2: Percent of population over 65 living below the poverty line
Indicator 3: Percent of population employed, by disability status

Strategy 3.1: Increase neighborhood safety
Strategy 3.2: Provide safe, supportive, and connective environments for vulnerable children, seniors, individuals with disabilities, and other vulnerable populations
Strategy 3.3: Provide supportive services to ensure that adults can live independently to the extent possible, while also developing capacity and maintaining a sense of purpose

Data Sources

[i]Source: NM Indicator Based Information System (IBIS). (2009-2011). Birth Data > Infant Birth Rate.

[ii]Source: CYFD. (2009 – 2013). 360 Degrees County Profiles Archives.

[iii]Source: American Community Survey. 1-Year Estimates. (2009, 2010, 2011). B17001.

[iv]Seeking data.

[v]Seeking data.

[vi]Source: American Community Survey. 1-Year Estimates. (2009, 2010, 2011). S1401. Note: Both public and private programs included. Seeking data on Percent of children ages 0-5 enrolled in High Quality Early Care and Education (HQECE / four and five star)

[vii]Seeking data.

[viii]Source: NM PED (2010-2012).

[ix]Source: NM PED (2010-2012).

[x]Source: NM PED (2010-2012).

[xi]Seeking data.

[xii]Source: NM PED (2010-2012).

[xiii]Source: NM PED (2010-2012).

[xiv]Source: NM PED (2010-2012).

[xv]Source: Youth Risk and Resiliency Survey (YRRS), 2009, 2009. Students asked, "Have you ever tried to kill yourself?" (Q30).

Note: No 2009 data for Sandoval County.

[xvi]Seeking data.

[xvii]Source: NM PED (2010-2012)

[xviii]Source: NM PED (2010-2012)

[xix]Source: NM PED (2010-2012)

[xx]Source: American Community Survey. 1-Year Estimates. (2009, 2010, 2011). B14005.

[xxi]Source: American Community Survey: 1-Year Estimates. (2009, 2010, 2011). S2301.

[xxii]Source: Youth Risk and Resiliency Survey (YRRS), 2007, 2009, and 2011. Students were asked, "During the past 12 months, how many times did you actually attempt suicide?" (Q26). Above figure plots responses of 1 or more times.

[xxiii]Source: NM Indicator Based Information System (IBIS). (2009-2011). Injury Mortality > Injury Crude Rates >Self-Inflicted Injuries/Suicide.

[xxiv]Seeking data.

[xxv]Source: CNM, Office of Planning and Institutional Effectiveness

[xxvi]Source: UNM Fact Book. (2011-12, p.59)

[xxvii]Seeking data.

[xxviii]Source: American Community Survey. 1-Year Estimates. (2009, 2010, 2011). S2701.

[xxix]Source: American Community Survey. 1-Year Estimates. (2009, 2010, 2011). S2701.Health Surveys > BRFSS > Crude Rates > Access to Healthcare. Respondents were asked, "Do you have any kind of health care coverage, including health insurance, prepaid plans such as HMOs, or government plans such as Medicare?" Figure presents percentage of respondents that answered "yes".

[xxx]Source: Data taken from NM County Health Rankings 2013, Robert Wood Johnson Foundation. Primary source: Health Resources and Services Administration, Area Resource File, 2011-12.

[xxxi]Seeking data.

[xxxii]Source for domestic violence incidence rate, per 1,000 people: Data taken from "Incidence and Nature of Domestic Violence in New Mexico XI" (2012). Primary source: New Mexico Interpersonal Violence Data Central Repository. Note: Missing data points reflect incomplete reporting.

[xxxiii]Source: CYFD. (2009 – 2013). 360 Degrees County Profiles Archives.

[xxxiv]Source: NM Indicator based Information System (IBIS). (2009-2011). Injury Mortality > Injury Crude Rates > Self-Inflicted Injuries/Suicide.

[xxxv] Source for current smokers in middle school: Youth Risk and Resiliency Survey (YRRS), High School Survey, Q33.Students were asked, "During the past 30 days, on how many days did you smoke cigarettes?" The above figure plots students responding 1 or more days. Source for current smokers in high school: Youth Risk and Resiliency Survey (YRRS), Middle School Survey, Q45. Students were asked, "During the past 30 days, on how many days did you smoke cigarettes?" The figure plots students responding 1 or more days.

xxxvi Source: NM Indicator Based Information System (IBIS). (2008-2011). Health Surveys > BRFSS > Crude Rates > Addictive and Abused Substances.

xxxvii Source for binge drinkers – middle school: Youth Risk and Resiliency Survey (YRRS), High School Survey, Q36. Students were asked, "During the past 30 days, on how many days did you have 5 or more drinks of alcohol in a row, that is, within a couple of hours?" The figure plots students responding 1 or more days.

Source for binge drinkers – high school: Youth Risk and Resiliency Survey (YRRS), Middle School Survey, Q36.Students were asked, "During the past 30 days, on how many days did you have 5 or more drinks of alcohol in a row, that is, within a couple of hours?" The figure plots students responding 1 or more days.

xxxviii Source: NM Indicator Based Information System (IBIS). (2008-2011). Health Surveys > BRFSS > Crude Rates > Addictive and Abused Substances.

xxxix Source for current marijuana users – middle school: Youth Risk and Resiliency (YRRS), Middle School Survey, Q43. Students were asked, "During the past 30 days, how many times did you use marijuana?" The figure plots students responding 1 or more times.
Source for current marijuana users – high school: Youth Risk and Resiliency (YRRS), high School Survey, Q56. Students were asked, "During the past 30 days, how many times did you use marijuana?" The figure plots students responding 1 or more times. Source for cocaine use – middle school: Youth Risk and Resiliency Survey (YRRS), Middle School Survey, Q44. Students were asked, "Have you ever used cocaine, including powder, crack, or freebase?" The figure plots students responding "Yes".

Source for cocaine use – high school: Youth Risk and Resiliency Survey (YRRS), Middle School Survey, Q44. Students were asked, "Have you ever used cocaine, including powder, crack, or freebase?" The figure plots students responding "Yes". xl Seeking data.
xli Source for ages 10-14: NM Indicator Based Information System (IBIS). (2008-2011). Birth Data > Adolescent Births > Girls Age 10-14. Source for ages 15-19: NM Indicators. Based Information System (IBIS). (2008-2011). Birth Data > Adolescent Births > Girls Age 15-19

xlii Source for sexually transmitted infections (chlamydia rate per 100,000 population): Data taken from NM County Health Rankings 2011-13, Robert Wood Johnson Foundation. Primary source National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention (2008-10).Source for HIV prevalence rate per 100,000: Data taken from NM County Health Rankings 2011-13,Robert Wood Johnson Foundation. Primary source National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention (2007- 09).
xliii Source: ephtracking.cdc.gov > Community Design > Access to Parks.

xliv Source: Data taken from NM County Health Rankings 2013, Robert Wood Johnson Foundation. Primary source USDA Food Environment Atlas. 2012.

xlv Source: NM Indicator Based Information System (IBIS). (2008-2010). Health Surveys > BRFSS > Crude Rates > Physical Activity and Nutrition.8
xlvi Source: NM Indicator Based Information System (IBIS). (2008-2010). Health Surveys > BRFSS > Crude Rates > Physical Activity and Nutrition. Respondents were asked, "During the past month, other than your regular job, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise?" Figure presents percentage of respondents that answered "yes".

xlvii Such as through farmer's markets, community gardens, food pantries, healthful food delivery services, school meals and by increasing access to WIC and SNAP.

xlviii Specifically cited the federal recommendations for promoting healthy lifestyles in children which include: community-widecampaigns, access to safe places to be physically active, individually adapted plans for physical activity, school based programs such as PE and recess activities and social support. CDC.gov has a great power-point presentation on promoting physical activity and covers all of these in detail).

xlix Source: American Community Survey. 1-Year Estimates. (2009, 2010, 2011). DP04. l Source: American Community Survey. 1-Year Estimates. (2009, 2010, 2011). BO8101.
li Source for rent: American Community Survey. 1-Year Estimates. (2009, 2010, 2011). DP04. Source for ownership: American Community Survey. 1-Year Estimates. (2009, 2010, 2011). DP04.
lii Source: FeedingAmerica.org
liii Source: American Community Survey. 1-Year Estimates. (2009, 2010, 2011). S1701.
liv Source for unbanked: FDIC National Survey of Unbanked and Underbanked Households. (2009, 2011). Households are identified as "unbanked" if they answered "no" to the question, "Do you or does anyone in your household currently have a checking or savings account?". Source for underbanked: FDIC National Survey of Unbanked and Underbanked Households.

(2009, 2011). Underbanked households are defined as those households that have a checking and/or a savings account and had used non-bank money orders, non-bank check cashing services, non-bank remittances, payday loans, rent-to-own services, pawn shops, or refund anticipation loans (RALs) in the past 12 months.

[lv] Source: American Community Survey. 1-Year Estimates. (2009, 2010, 2011). B19013.

[lvi] Source for percentage of tax filers that receive the Earned Income Tax Credit: Brookings.edu. Source for average EITC return for tax filers that receive EITC: Brookings.edu.

[lvii] Source: New Mexico Department of Workforce Solutions, Economic Research and Analysis Bureau. (2012). [lviii] Source: American Community Survey. 1-Year Estimates. (2009, 2010, 2011). CP02.

[lix] Source: American Community Survey. 1-Year Estimates. (2009, 2010, 2011). CP02 [lx] Source: American Community Survey. 1-Year Estimates. (2009, 2010, 2011). S1701. [lxi] Source: American Community Survey. 1-Year Estimates. (2009, 2010, 2011). S1701.

[lxii] Source for percentage employed, by disability status: American Community Survey. 1-Year Estimates. (2009, 2010, 2011). S1811. Source for percentage of population with earnings of less than $15K over the last 12 months, by disability status: American Community Survey. 1-Year Estimates. (2009, 2010, 2011). S1811. Source for percentage of population living below the poverty level, by disability status: American Community Survey. 1-Year Estimates. (2009, 2010, 2011). S1811.