THE HEART OF GENDER JUSTICE IN NEW MEXICO:

Intersectionality, Economic Security, and Health Equity

NEW MEXICO WOMEN.ORG

Advancing Opportunities for Women and Girls.

PART 1: Community Dialogues

THE HEART OF GENDER JUSTICE IN NEW MEXICO:

Intersectionality, Economic Security, and Health Equity

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Appreciations

Notes and Disclaimer

About NewMexicoWomen.Org

NewMexicoWomen.Org, a program of New Mexico Community Foundation, is the only fund of its kind in the state working to advance opportunities for women and girls so they can lead self-sufficient, healthy, and empowered lives. NMW.O pursues its mission via a three-pronged strategy, which is to educate, lead, and invest. We educate through research and communications, seeking to bring public attention to gender issues with a goal of influencing policy. We lead through facilitating alliances among nonprofits, funders, and other sectors in order to concentrate resources, foster collaboration, and build capacity. Finally, we increase philanthropic investments in programs serving women and girls statewide through our donor education and strategic grant making efforts.

Dedicated to the the women and girls of New Mexico whose resiliency, creativity, and beauty are a source of inspiration.

"I imagine a New Mexico where women take up more space — where women are professors, farmers, doctors, storytellers, policy makers, artists, leaders and where we get paid equally for our work. I dream of a New Mexico where girls and women don't just have choices, but where we are the architects of our own opportunities. Women hold the blueprints for structures yet unimagined, and we are the future of New Mexico." —Dr. Patricia Trujillo

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EXECUTIVE SUMMARY

From the summer of 2016 to the beginning of 2017, NewMexicoWomen.Org (NMW.O), in collaboration with a research team from the University of New Mexico (UNM), undertook a research and community engagement project with the aim of deepening our knowledge about how to most effectively advance gender equity work in New Mexico. The goal was to identify priorities at the intersection of health equity and economic security for women and girls in New Mexico. In the early stages of this process, we also discovered a dearth of research on gender, health, and economic equity in New Mexico.

In order to address this gap, increase our knowledge, and ensure our programming is rooted in the needs and experiences of communities, NMW.O conducted a series of seven community engagement dialogues around the state. The dialogues were held in Española, Albuquerque, Las Cruces, Silver City, and Gallup, as well as two dialogues in Santa Fe comprised of groups from around the state (see Appendix 1 for list of participating organizations). Participants also joined from surrounding communities including La Mesilla, Hobbs, Deming, Lordsburg, various colonias[1], Zuni Pueblo, Navajo Nation, Santo Domingo Pueblo, Laguna Pueblo and the Eight Northern Pueblos. Participants were largely community and nonprofit leaders from organizations working with women and girls in rural and low income communities and communities of color. During the dialogues, participants discussed their own as well as their communities' experiences of gender, health equity, and economic security. These responses were then organized into various themes outlined in this report. Below are the key findings that surfaced throughout the course of the dialogues.

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1   The U.S. Department of Housing and Urban Development (HUD) defines colonias as rural communities in close proximity to the U.S-Mexico border, lacking access to basic services such as water, sewer, or housing. Retrieved 4 November 2016 from http://bber.unm.edu/colonias.

KEY FINDINGS

1. *Strengths-based Approach*

Participants across the state described how they would like to shift the narrative of their communities, and New Mexico in general, to highlight strengths and assets, rather than focus on deficits. In analyzing social issues, it is critical to move from a deficit model, that locates the causes of social problems within individuals and communities themselves, to a model that locates the causes at the structural and social determinant level.

2. *Social Determinants*

A core message communities emphasized across the state was the critical role and profound impact that underlying root cause, social determinants have upon women's health and economic equity. The key social determinants raised by participants in the dialogues were historical trauma, patriarchy and sexism, structural racism, socioeconomic inequality, the environment, government underinvestment in social services, and immigration.

3. *Root Causes*

Social determinants lie at the heart of gender justice in New Mexico. It is critical that work for gender equity addresses these root causes in order to disrupt and rebuild our gendered societal narratives and structures.

4. *Communities Most Impacted*

Building healthier and more economically secure communities requires focusing on the women who are most impacted by social determinants, including: women of color, young women and girls, elders, LGBTQ-identifying people, immigrants, and rural and low income communities—with the recognition that identities are fluid between groups and men and boys are also constrained and damaged by patriarchy.

5. *Community-based Strategies*

Participants discussed specific elements that shape women's health and economic security and the strategies and efforts needed to move towards gender justice. These various strategies and efforts included the following: *Community organizing, promoting culturally rooted healing, improving mental health services and access, retaining and promoting culture, supporting rituals and rites of passage, improving healthcare access, improving breastfeeding education and support, improving access to healthy and culturally appropriate foods, working for reproductive justice, ending gender-based violence, promoting healthy bodies with a body justice lens, and improving education.*

RECOMMENDATIONS FOR FUNDERS AND FOUNDATIONS

1. Participants pointed out that the financial systems allowing for accumulation of excess wealth that then lead to the creation of philanthropic foundations are usually the very same mechanisms that contribute to the impoverishment and marginalization of communities. They discussed how perpetuating this economic model does not address the root causes of inequality.

2. Foundations should be led, advised, and staffed by individuals from impacted communities. In relation to funders in New Mexico, this means consciously investing in leadership from low income and rural communities, as well as communities of color—especially women of color.

3. Funders should support communities most impacted by historical and structural inequities including: women of color, young women and girls, elders, LGBTQ-identifying people, immigrants, and rural and low income communities—with the recognition that identities are fluid between groups and men and boys are also constrained and damaged by patriarchy.

4. Funders should recognize community members as experts in identifying the best solutions for their communities. Community organizing and civic engagement were brought up as the most effective ways to build power in communities and create long-term change.

5. Communities described some best funding practices as: funding general operations, making multi-year investments, simplifying the application process and acknowledging culturally appropriate evaluation tools. Additionally, participants mentioned the need to fund with a gender lens, including supporting childcare stipends and parental leave options.

6. Communities described the need for funder support for community healing and individual healing. Participants described longer-term, culturally rooted healing as an underlying need and factor linked to other issues impacting women, such as substance abuse, gender-based violence, and mental health.

7. Participants described the need for investment in the health and wellness of organizers, activists, service providers and individuals working in nonprofits via supporting retreats and self-care, as well as offering fellowships and sabbaticals.

8. Funders should bring a gender and social justice lens to funding and policymaking. Communities described the need to educate funders and policymakers on the social determinants of health and economic equity, as they are not always aware of the intersectional, layered, and nuanced histories and realities shaping community experiences and efforts.

NEWMEXICOWOMEN.ORG PRIORITIES

Based upon these findings, NewMexicoWomen.Org has chosen to focus on Gender Justice and Healing. NMW.O defines gender justice as a commitment to end patriarchy and create a world free from misogyny. We have chosen to focus on gender justice, as it encompasses many elements of social, economic, and environmental justice through a gender lens. Through this project, we learned these underlying determinants have a profound effect upon women and community well-being. Further, the focus on gender justice acknowledges that men and gender-nonconforming people are also constrained by patriarchal gender roles and norms. NMW.O defines healing as the process of restoring health from an unbalanced or unhealthy state. NMW.O is choosing to prioritize healing, as communities across the state emphasized it as both a powerful restorative process and outcome unto itself.

STRUCTURE

This report is the result of seven community engagement dialogues and represents the qualitative findings and stories shared by community representatives across the state. The findings are organized into the following sections: The first section describes asset and deficit frameworks in this research; the second section describes the impacts of social and structural determinants upon women and girls; the third section addresses the elements of healthy communities of women and girls; and the fourth section offers key recommendations for funders and foundations.

This report is not intended to be a comprehensive research paper about the landscape of gender, health, and economic equity in New Mexico. Rather, it is intended to serve as a compilation of community voices and perspectives from across the state, highlighting the lived experiences of communities. It is meant to be an educational and informative tool for community partners, policymakers, donors, funders, and others. It will also inform the strategies, focus areas, and activities NMW.O undertakes over the next few years. Ultimately, the report's objective is to provide a knowledge base of community expertise and experience that can be used to advance meaningful change in the lives of women and girls across the state.

RESEARCH METHODOLOGY

Weavers from Tres Manos Weaving of New Mexico

As mentioned previously, the purpose of the community dialogues was to explore the intersections of gender, health equity, and economic security in order to address an existing research gap and to inform and shape NMW.O's roles and focus areas. The dialogues were also a space to discuss and share lived gender experiences to further inform this report. The authors consulted with a team of researchers from the University of New Mexico (UNM). Over a series of meetings, the UNM and NMW.O teams collaboratively developed the methodology for this study. The UNM researchers provided the consent and demographic forms and gave feedback on the dialogue format and guiding questions of the community dialogues.

Following this, NewMexicoWomen.Org led a series of seven community engagement dialogues held in Española, Albuquerque, Las Cruces, Silver City, and Gallup, as well as two groups in Santa Fe. Participants also joined from surrounding communities including La Mesilla, Hobbs, Deming, Lordsburg, various colonias, Zuni Pueblo, Navajo Nation, Santo Domingo Pueblo, Laguna Pueblo and the Eight Northern Pueblos. Overall, there were 50 participants in the dialogues. Participants were largely community and nonprofit leaders from organizations led by or working with women

and girls in rural and low income communities and communities of color in New Mexico (see Appendix 1 for a full list of participating organizations). These participants were selected as they were previous grantees or grant applicants of NMW.O and/or New Mexico Community Foundation (NMCF), as well as other organizations NMW.O and NMCF were acquainted with through our statewide programmatic work. Several academics working on gender from communities around the state were also specifically invited. A draft participant list was also shared with the research team from UNM who reviewed it and added several organizations. Table 1 below describes the gender, age, and racial composition of the dialogue participants. In addition, participants present were asked to describe the core constituents served by their organizations, which is captured in Table 2. Participants were told ahead of time they would receive a symbolic gift for their participation. At the end of each dialogue, participants were given a $25 prepaid charge card to honor their time and participation.

DEMOGRAPHIC COMPOSITION OF DIALOGUE PARTICIPANTS					
Gender	Percentage	Age	Percentage	Race	Percentage
Female	86%	Between 18 − 30	12%	Hispanic/Latin(a) Mestiz(a)	31%
Male	8%	Between 31 − 45	54%	Hispanic/Latin(a) White	17%
Gender nonconforming	4%	Between 46 − 65	20%	Hispanic/Latin(a) Indigena/from an Indigenous Pueblo of Latin America	10%
Chose not to respond	2%	66 and over	10%	White	31%
		Chose not to respond	4%	Native American	13%
				Black	2%
				Asian/Pacific Islander/Hawaiian	2%
				Middle Eastern/Arab	6%
				Other	4%

Table 1. Demographic Composition of Participants

[Note: Participants answered the question of race with more than one variable.]

CORE CONSTITUENTS SERVED BY PARTICIPATING ORGANIZATIONS	
Core Constituents	Percentage
Women and girls	42%
Men and boys	42%
LGBTQ+ communities	69%
Rural communities	77%
Urban communities	33%
Frontier communities	31%
Border communities	44%
Immigrant communities	50%
Native American and Tribal communities	56%
Latina/Mestiza/Chicana communities	67%
African American communities	23%
Caucasian/Anglo communities	31%
Low income communities	83%
Middle income communities	33%
All income groups	42%

Table 2. Core Constituents Served by Participating Organizations

[Note: Participants answered the question with more than one variable.]

All community dialogues were facilitated by two to four female staff members of NewMexicoWomen.Org and New Mexico Community Foundation, all of whom have extensive knowledge and experience in the areas of gender and social justice. Each dialogue began with an introduction, completion of relevant demographic and consent forms, guided breathing exercise, and reading of a poem. This was followed by a presentation of the Layers of Intersectionality Diagram (see Figure 1 on page 15 and see Appendix 2 for a full glossary of terms). Participants were then invited to draw and describe some of the elements that have influenced their health, economic opportunities and lived experiences. A selection of these drawings and short descriptions appear throughout this report. An outline of how the community dialogues were conducted appears in Appendix 3.
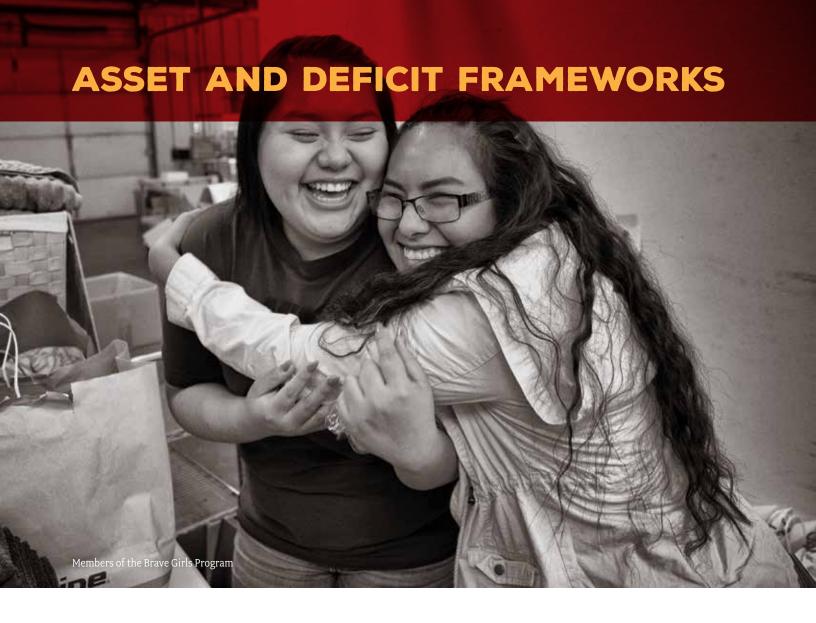
Following this exercise, various questions related to the health and economic equity landscape were discussed. Potential roles for funders in terms of supporting organizations and communities across the state were also part of the conversations. The three primary questions asked during the community dialogues by the facilitators were the same in every conversation. These three core questions focused on three primary topic areas and were as follows:

1. Do these larger issues such as patriarchy, racism and historical trauma affect you and your community's daily health and economic situation? In what ways?

2. Describe three key things that make your community healthy and economically secure, or that could make your community healthier and more economically secure.

3. How can NewMexicoWomen.Org and other funders and philanthropic foundations better support your work?

During the conversations, the facilitators also asked other sub-questions related to the three core questions. For a complete list of questions asked during the community dialogues, see Appendix 4. The recording of each community dialogue was then transcribed by a professional transcription company. The project leader and primary author of this report (who was also present at every dialogue) read and examined all of the transcripts for the purpose of organizing the topics discussed and distilling the most commonly discussed topics, as well as other topics that emerged significant to a given community. The project leader noted the major core themes and topics that emerged from each community dialogue. Subtopics falling under these core themes and topics were noted and organized underneath their respective thematic areas. The process for this involved the project leader inputting participant's quotes verbatim from community dialogues into an organizational framework (comprised of the core themes and subtopics discussed in the community dialogues). After lengthy study of the topics emerging from the community dialogues, the project leader drafted a report describing the core themes and subtopics that emerged, with some of the participants' specific quotes stated in their relevant section. If a topic was mentioned briefly or infrequently in the community dialogues, it was not included in this draft report.

This preliminary draft was then sent out to members of the NMW.O Advisory Council comprised of diverse representatives from around New Mexico who are living and working in the communities served by NMW.O. The members of the Council who reviewed the report included a professor of English and Chicana studies who also is Director of Equity and Diversity at a local university, Executive Director of a statewide organization aimed at eliminating violence against Native American women, and a lawyer and donor, as well as a youth representative working in the field of trafficking and homelessness. The Advisory Council provided feedback and insights on the draft, based on their professional, academic and lived experiences. The feedback crystalized the themes and topics described in the draft report as well as suggested clarifying language and vocabulary. These insights from the Advisory Council were recorded and incorporated into the report.

The revised report was then sent to all 50 of the community dialogue participants for their initial review and feedback. Approximately 14 participants provided feedback. Feedback included suggestions about improving the structure of the report, elucidating the language in the report, and clarifying their own quotes. This feedback was then incorporated into the final report. As mentioned previously, the report's objective is to provide a knowledge base of community expertise and experience that can be used to advance meaningful change in the lives of women and girls across New Mexico. Alongside this qualitative research report, a complementary quantitative research report from a team at UNM analyzing the link between economic security and women's health status by race and ethnicity will also be available.

ASSET AND DEFICIT FRAMEWORKS

Members of the Brave Girls Program

Section Summary: *Participants across the state described how they would like to shift the narrative about their communities and New Mexico in general, to one that highlights strengths and assets, rather than focuses on deficits. However, many challenging issues confronting communities across the state were shared. This report seeks to move beyond a deficit model, that locates the causes of social problems within individuals and communities themselves, to a model that locates the causes at the structural and social determinant level.*

In this report, we have tried to represent accurately the responses we heard from participants, in terms of both challenges that press upon and strengths that bring resilience to their communities. Where possible, effort has been made to adopt and frame this narrative report with a strengths-based lens. Indeed, we heard from communities across the state they would like to shift the narrative to one that highlights strengths and assets, rather than deficits. For example, a participant from Gallup explained:

> *"There is a tremendous amount of wealth and richness because of the cultural background and histories that live here. How do we start to shift the narrative, primarily at a systematic level, from the deficits to the wealth of the communities that we live in? I think that language, to me, has such a powerful impact."*
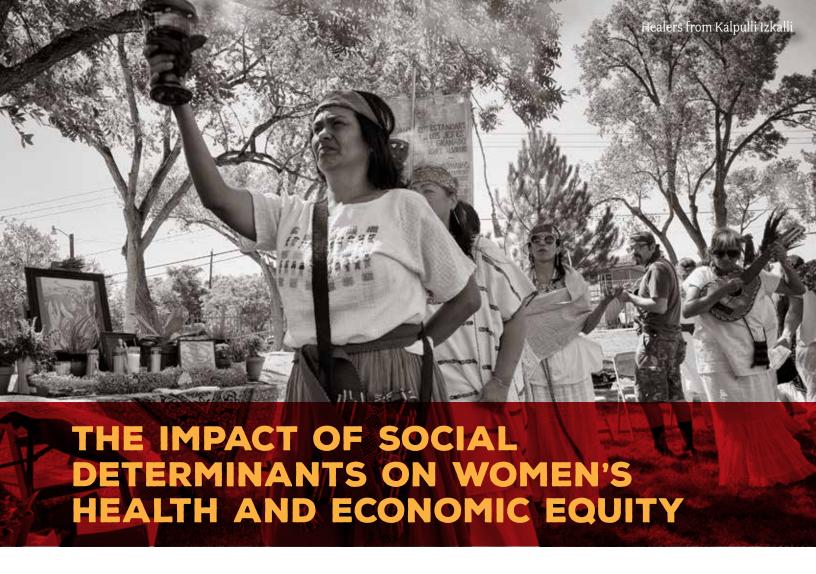
VOCABULARY OF CHALLENGES AND STRENGTHS

It was striking throughout the community dialogues that a common set of vocabulary was used by participants to describe their individual and communal experiences related to the discussion topics. Communities throughout the state shared powerful examples of resiliency, resourcefulness, and strength. For example, participants mentioned that, despite deep rooted historical trauma and challenges faced by their communities, the following aspects of culture are just as prominent and are, in some cases, powerful forms of resistance: ancestral wisdom, creativity, traditional food, youth leadership, elders, spiritual practice, rites of passage, deep cultural roots and traditions, resourcefulness, informal community networks, sisterhood, medicine of grandmothers, persistence, matriarchal culture, ability of groups to organize themselves to affect change, and importance of family and community ties. Additionally, participants across the state highlighted the need to shift the narrative from one focused on the deficits of communities to one that celebrates and focuses on the strengths and assets of communities.

However, alongside the vocabulary and experiences described above, similar language, analogies, and metaphors were used across the state to convey the deep challenges and emotional toll on individuals and communities. The following language was used consistently throughout the state to describe organizational work and community experiences: endurance, isolation, survival mode, trauma, putting out fires, bailing water, too busy surviving, sense of drowning, and being in reactive mode. Underscoring this language was the observation of it being extremely difficult for individuals and communities to think creatively about potential changes when they feel stuck in a constant mode of survival. This perspective honors the depth and breadth of community partners' lived experiences and acknowledges the limitation that statistics and traditional research have in fully portraying the profound lived experiences of communities across New Mexico.

This report discusses many challenges facing communities statewide, and it is difficult to present the findings with only an asset-based approach. However, even when discussing such challenges faced by communities, it is important to note we are seeking to move beyond a deficit ideology[2] that locates deficits and causes of social problems within individuals and communities themselves. Instead in this report, we seek to identify the causal factors of problems at the structural and social determinant level (see section below on Impact of Social Determinants). For additional notes around language and terminology, see Appendix 5.

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2   "Briefly, deficit ideology is a worldview that explains and justifies outcome inequalities—standardized test scores or levels of educational attainment, for example—by pointing to supposed deficiencies within disenfranchised individuals and communities. Simultaneously, and of equal importance, deficit ideology discounts sociopolitical context, such as the systemic conditions (racism, economic injustice, and so on) that grant some people greater social, political, and economic access, such as that to high-quality schooling, than others. The function of deficit ideology...is to justify existing social conditions by identifying the problem of inequality as located within, rather than as pressing upon, disenfranchised communities so that efforts to redress inequalities focus on "fixing" disenfranchised people rather than the conditions which disenfranchise them." Gorski, Paul C. *Unlearning Deficit Ideology and the Scornful Gaze: Thoughts on Authenticating the Class Discourse in Education.* http://www.edchange.org/publications/deficit-ideology-scornful-gaze.pdf. Retrieved 15 October 2016.

THE IMPACT OF SOCIAL DETERMINANTS ON WOMEN'S HEALTH AND ECONOMIC EQUITY

Section Summary: The engagement and research process began by considering the social determinants, or root causes, of health in New Mexico that often act as barriers to equity for all. The key social determinants raised by participants in the dialogues, as well as outlined in the sections below, were: historical trauma, patriarchy and sexism, structural racism, socio-economic inequality, the environment, government underinvestment in social services, and immigration. The core message communities emphasized across the state was the critical role and profound impact these underlying root cause, social determinants have upon women and their communities' well-being.

The engagement and research process began by considering the social determinants of health, or root causes, in New Mexico that often act as barriers to overall equity. Social determinants of health are, "The conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life. These forces and systems include economic policies and systems, development agendas, social norms, social policies and political systems."[3] Indeed, "At any given time, these factors interact to moderate health and well-being within New Mexico's political, economic, environmental, cultural, ideological, ethnic and racial context. In short, a woman's health is shaped by factors within and outside the health care system."[4]

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3   Http://www.who.int/social_determinants/en/. Retrieved October 12, 2016.
4   Cacari Stone, L. & Howell, V. *Women's Health Inequalities in New Mexico: Challenges & Policy Options*. Con Alma Health Foundation Issue Brief. 2008.

It is essential to first discuss these social determinants, as they are the root causes of most of the health and economic equity issues we are seeking to address. There are a myriad of determinants that may shape communities' actual lived experiences. Understanding the impacts of social determinants of health on diverse communities of women is best understood using an intersectional feminist lens. This lens extends beyond gender and recognizes that one's other social locations such as race, class, ability, sexuality, religion, age and environment influence one's lived experiences, especially in the context of one's gender. It acknowledges that structures and systems of power, patterns of oppression, and identities are not only interrelated; they are bound together and influenced by each other.[5],[6] Ultimately, an intersectional feminist analysis allows communities and individuals to articulate the multiple aspects of identity and experience that both enrich their health and lives and potentially compound and complicate them.
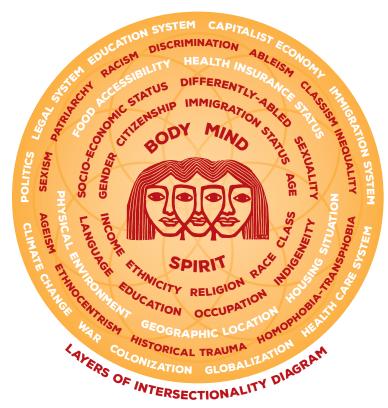

Figure 1. Layers of Intersectionality Diagram

In the community engagement dialogues, the conversations began with a presentation of the intersectional diagram mentioned above, which includes many determinants (see Figure 1), and participants were asked the following question: Do these larger issues such as patriarchy, racism, and historical trauma, etc. affect you and your community's daily health and economic situation? In what ways?

With the diagram in front of them, participants largely spoke about patriarchy, historical trauma, and racism. Acknowledgments of socioeconomic inequality were usually tied to other experiences or specific outcomes. There was also mention of the physical environment, as well as structural government underinvestment or divestment in services. The section below outlines the threads of the discussion concerning social and structural determinants.

HISTORICAL AND INTERGENERATIONAL TRAUMA

Section Summary: *Participants discussed the effects of historical and intergenerational trauma, which include many issues leading to long-term damage from loss of one's culture. However, parallel to and intertwined with the legacy of historical trauma is the view of their communities as resilient and strong.*

There are various conceptual frameworks of historical and intergenerational trauma. For the purposes of this report, Sotero's (2006) framework of three phases will be used. The first phase entails the dominant culture perpetrating mass traumas on a population, resulting in cultural, familial, societal, and economic devastation. The second phase occurs when the original generation of the population responds to the trauma with biological, societal, and psychological symptoms. The final phase is when the initial responses to trauma are conveyed to successive generations through environmental and psychological factors, as well as prejudice and discrimination. These traumas resulted in outcomes and symptoms that continue today.[7]

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5   Collins, P.H. & Bilge, S. *Intersectionality.* Polity Press, Cambridge, UK; 2016.

6   Hankivsky, O. *Introduction to the Intersectionality-Based Policy Analysis Framework.* Paper presented at: International Journal of Qualitative Methods. 2012.

7   Sotero, M. *A conceptual model of historical trauma: Implications for public health practice and research.* Journal of Health Disparities Research and Practice, 1(1), 2006, Pp. 93-108.

Effects of Historical Trauma

Participants spoke about their experiences with historical and intergenerational trauma in relation to colonization by both the Spanish and the Anglos, and the effects on their respective communities. "It's like our communities are sick. I don't even like to use the word sick. We're imbalanced…Colonization is probably one of the underlying things." Trauma was also mentioned in relation to immigration and refugee experiences, as well as experiences with discrimination. It is important to understand that different forms of trauma play into broader intersectional identities and lived experiences. For example, historical and intergenerational trauma were described as key causes of the following issues (in alphabetical order):

- Family systems breakdown
- Gender-based violence
- Loss of breastfeeding culture
- Loss of connection to traditional foods
- Mental health issues
- Obesity and body shaming
- Overall poor health
- Substance abuse and addiction

One key question that surfaced was how individuals and communities are expected to "jump suddenly from intergenerational trauma to economic and health security" when there are so many layers and barriers in between. For communities and individuals operating in triage situations; consistent, effective, and long-term direct services are essential to provide a stable base, with deeper healing work only possible after stability is achieved. For instance, there is often an immediate crisis to address, such as substance abuse, paired with deeper trauma that may require long-term healing strategies:

> "There are these deep-seated, long-term traumas, and there are the short-term things along the way. It's the constant struggle of how to connect the two. Basic healthcare for us, food security, paths to citizenship: all of these things that our communities need immediately to just be secure. Then—how do we also link that to the long-term healing of trauma that existed before we were here?" – Albuquerque participant

Another concern raised in relation to this topic was the long-term damage from loss of one's culture. For example, in Gallup a participant from the Navajo Nation described how breastfeeding, a crucial element of both tradition and health outcomes, has been deeply damaged by colonization and ongoing effects of historical trauma:

> "Breastfeeding is tradition. It's a part of our culture. That was what made our people healthier. Our ancestors were taken away from home. They were put in boarding schools. They didn't have their role models of parents there. They were just taught however they were treated. They brought it home. Then that's where we started losing the breastfeeding."

Naming Historical Trauma

Participants emphasized the need to name historical and intergenerational traumas in family and community contexts. Within the participating communities, trauma, while often a product of systemic oppression, was described as often being accompanied by internalized feelings of pain, guilt, and shame in relation to colonization, immigration, and poverty. There is a critical need to talk about how systems of oppression are expressed through individual experiences and the emotional ramifications thereof:

> "Nobody ever talks about the historical trauma that has occurred in these communities with colonialism . . . There's a lot of pain. If we could start talking about some of these identity issues with our children . . . and look at the assets that come with a community such as Española." – Española participant

Similar to the aforementioned section on the impact of social determinants, naming historical trauma helps both individuals and communities locate their specific health and economic experiences in the context of history and not simply in the context of individual blame or "poor decision-making." For example, one participant explained, "I can say no, it's not just us. We didn't make ourselves sick. This is trauma. This is historical stuff. We can't just feel better, even if you do take a pill." It also helps individuals to begin to understand the causes and effects of their own traumatic experiences. For example, another participant from Española described:

> "Growing up in my community, I felt anger. I felt hurt. I have felt shame. Then when people began to talk about . . . historical trauma and all of these things, then it began to make sense, like, oh, this isn't just me."

Healing Historical Trauma

In a similar vein, participants described healing as key in order for communities to understand and learn about their history through an empowerment lens. Participants explained that, by understanding the systems that produced and reproduce intergenerational trauma, individuals and communities can be better positioned to then transform their own trauma. Further, healing and politics must go together: Policies at the state and community levels must support, complement, and reflect communities' efforts to heal. Specifically, if policies perpetuate the same structural conditions that created historical trauma, then communities and individuals will face difficulty healing.

However, parallel to and intertwined with the legacy of historical trauma was the view of their communities as resilient and strong with a wealth of generational family heritage, coming-of-age rites of passage, cultural legacies, and histories that are deeply empowering and healing. Traumatic legacies and also often the related adverse childhood experiences can be reversed and healed through utilizing both traditional and culturally appropriate Western healing modalities.

PATRIARCHY AND SEXISM

Section Summary: Participants in the dialogues referred to many instances where unequal power relations between the sexes affect their lives, especially regarding work, interactions with authority, and at the institutional level. Most pointedly, the communities discussed the damaging effects of patriarchy and sexism in relation to discrimination towards members of the LGBTQ community and the impact of sexist messages on young women and girls.

Patriarchy is a term describing our societal relations and structures characterized by both current and historic unequal power relations between women and men whereby women are systematically oppressed and disadvantaged.[8] Participants explained there are different manifestations of patriarchy and sexism depending upon, for example, one's race, class, sexual orientation, immigration status,

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8   Retrieved 10 October 2016 from http://londonfeministnetwork.org.uk/home/patriarchy.

BRAVE GIRLS AT THE LEADERSHIP INSTITUTE AT SANTA FE INDIAN SCHOOL

Members of the Brave Girls Program

"It's important for the [Brave Girls] to understand history and [look] at the imposition of policies that have been created to really break down Natives and our Tribes. It's important that we share that history, looking at all these policies and . . . at the strands of colonization that are still very present today, and help the girls understand why our communities are the way they are and why our families have broken down the way they have been broken down. Just to give a little background into current situations within their own lives and things that they're dealing with: that's huge."

NEW MEXICAN, PALESTINIAN AMERICAN, AND MUSLIM

"I'm a Muslim American, and I'm under a lot of pressure. As I speak to you right now, Islamophobia has hit us hard as Muslim Americans, as Palestinian Americans. I was born in Dearborn, Michigan and grew up in New Mexico, but for many years I lived in Palestine. My father and mother were adamant that we get to know relatives and know the history and the language. That experience really is a lot of my identity and my sense of belonging. Colonization has hit Palestine, and it has hit New Mexico. I didn't see the full picture until I got older—the books never taught us, [but it's] a big part of what my identity is. I'm an activist and I'm a business owner. I'm a human rights activist on every front—gender equality for women, for men, and for the LGBTQ community. It's affected my health, I won't lie . . . Xenophobia, racism and you throw in everything else—it really is affecting my daily life. I get bombarded with racism, a lot of hate speech. I worry about my kids. Right now I'm in a panicked state of mind."

linguistic abilities, and place of birth. Expressions of patriarchy often depend upon where one is situated in one's community. For example, in southern New Mexico, a group of immigrant women organizing for roads in Vado faced specific discriminations, while a U.S.-born, Latina nonprofit leader faced other distinct discriminations. Each were experiencing forms of patriarchy and sexism, but with variations depending upon the other intersections and nuances of their identities. In another example from southern New Mexico, a participant in the Las Cruces dialogue described the gendered assumptions regarding who had authority in her workplace:

> "I work on a farm and supervise two males slightly younger than me, and it's interesting that the assumption whenever anyone gets to the field is that one of [the men] would be in charge. It would never be me. Also . . . it was a struggle to get responsive technical assistance for a particular situation until my White male counterpart made the call."

Effects of Patriarchy on the LGBTQ Community

Members of the LGBTQ community described their experiences of discrimination, violence, fear, and isolation, stemming from similar, embedded patriarchal attitudes. For example, a participant from Santa Fe described, "How unsafe I feel a lot, being a woman and being gay. Being out with my family and my daughter, who's almost three, and what people say, or how they relate to me and my wife." Another participant from the transgender community described how transphobia deeply impacts her community and how, "My community experiences a lot of violence. There's a lot of people working very hard to keep trans people from moving throughout the world, just from accessing public space. Physical safety goes along with that violence, and then a lot of my sisters, a disproportionate number, get murdered every year."

Patriarchy and Authority

Participants across the state related that, in interactions with authority, women are often treated as if they possess "opinions" while men are treated as if they possess facts. Women's opinions have to be corroborated, usually by men or a male-led institution. In another example of the various manifestations of patriarchy, immigrant women workers around the state are organizing against sexual harassment and humiliation, in addition to leading fights against wage theft and other workplace violations. Given the cross section of experiences described above, it is clear manifestations of patriarchy in New Mexico are deeply intersectional and vary according to one's multiple and layered identities.

An important point related to patriarchy and sexism that also emerged from community dialogues was how most law enforcement authorities are men who possess deep and implicit gender/racial biases. This then leads to victim blaming in gender-based violence and sexual assault cases, situations in which law enforcement should be protecting survivors and are instead discrediting, blaming, and further traumatizing survivors. In a similar vein, participants raised the topic of "toxic masculinity," a lack of healthy male behaviors in young men and the consequences for both men and women. Participants explained that, in some communities, men used to have more rites of passage to learn about and move into healthy masculine roles, but these rites have been eroded, leading to a lack of healthy gender roles and dynamics. Communities feel a need to reeducate our society about healthy and non-binary gender roles, with the underlying issue being that patriarchy is deeply damaging to men as well as women. Indeed, a participant from Las Cruces described how, "I think men also need spaces to be able to be who they are, and I don't think they really have that many spaces to move in the world that allow them to show a feminine side, show an emotional side. I think that's hard."

Effects of Patriarchy on Young Women

Participants from organizations serving young women described the damaging effects of internalized patriarchy and sexism on young women. For example, a partner who works with young women in Hobbs explained that, when asked about their longer-terms dreams, many young women would describe marrying a man who works in the oil industry. While a valid choice, young women could potentially have additional dreams, beyond their choice of partner. Indeed, "A lot of what I see with the girls is nobody has really treated them as though they were capable or that they can be independent on their own."

Patriarchal Norms and Narratives

There were also broader descriptions of gendered norms, roles, and sexism at institutional levels across the state. Specific gender roles are internalized not just by young women, but also young men. The result is our societal structures and adult relationships are shaped by rigid and damaging ideas around gender. The impacts of such limited ideas should not be understated, as they inform and shape everything from politics to education to sexual and gender-based violence. For example:

> "Our work . . . preventing sexual . . . and dating violence is about addressing rapists. But in order to really address [these issues], we have to look at the gender norms, the rigid gender norms that create this mess—for instance, the myths that men always want to have sex; men can't help themselves." – Española participant

Matriarchal and Feminine Ways

Alongside these discussions, we heard powerful descriptions of feminine ways of being and matriarchal systems of support. Women described a gender-based support system in their community as a "sense of network that is very resilient and very unspoken." In a powerful example of matriarchal ways of being, a participant from the Navajo Nation described being raised in a matriarchal familial structure and the struggle to live in a mainstream patriarchal society. For example, her paternal grandmother ran the family ranch, and her aunt is now in charge. She described the difficulty of learning how and when to voice her opinions outside of a matriarchal context and balance living in both worlds.

GENDER NORMS EXERCISE WITH SOLACE CRISIS TREATMENT CENTER

"We do this gender box activity with seventh graders. We say, 'Okay, here's what it means to be a man. Here's what it means to be a woman.' I sit in the chair, and they tell me exactly how to sit, like this or like this, and they tell me what kind of jobs I should have and what I should eat (meat or salad, beer or a Diet Coke or Frappuccinos), and jobs either with power, physical power or money power, or jobs that are nurturing. The lists that they make are the same lists that would've been made 40 years ago, technology and pop culture references aside. The difference is that they don't believe in [these expectations] as much, but they still really, really clearly know what the expectations are, and they even more clearly know how they'll be punished if they move too far outside of those expectations."

"SPAGHETTI STRAPS" AT GIRLS INC. OF SANTA FE

"One of our girls this summer said she went to her school orientation over at her high school. One of the administrators was giving a presentation on dress code, explaining what girls could and could not wear, explaining that basically, 'You can't wear this spaghetti-strapped tank tops because it's distracting for the boys.' One of our girls, who is 14, stood up and challenged the school administration, and said, 'I think this is completely not okay that our dress code is basically based on what boys can and cannot handle. Why don't we train the boys to actually be able to handle themselves and different situations?'"

STRUCTURAL RACISM

Section Summary: *When discussing structural racism, participants related their experiences with racism to colonization, patriarchy, and immigration. "White privilege," implicit bias, and one's skin color were identified as issues communities must contend with, while the ways immigrants navigate through the world are often fraught with discrimination.*

Racism was usually discussed in relation to colonization, patriarchy, and immigration. It is important to note that racism in New Mexico is not defined by a Black-White binary. Many communities described racism in terms relevant to their context and often intersecting with gender, immigration, and other identities. Additionally, because racism also plays out in relation to colonial histories, immigration status, gender, and between communities of color, many instead referred to it as discrimination. Also, there was a perception in some non-Black communities of color that racism is "between Black and White people."

White Privilege

However, some participants did explicitly refer to "white privilege" and how it affects communities and women of color on a daily basis in terms of their access to resources, services, and treatment in general. A White participant in Albuquerque described how his experience of white privilege had allowed his family to "benefit economically from racism . . . historically, through FHA loans and the Homestead Act. Some of my ancestors were given free land, Native people's land for free, and we were given access to credit. We were able to accrue wealth, whereas people of color were not."[9]

Implicit Bias

Another topic of discussion was implicit bias. One organization in Las Cruces explained, "The other thing we talk about is stereotyped threat and implicit bias. All the unconscious thoughts that we have about one another that then shape policy or shape our attitudes . . . [implicit biases] also can make the rules that we play by and the way that we plan, particularly for women of color." This organization has been in discussion with the Las Cruces Police Department in regards to implicit bias training as a way to interrupt stereotyping and racial and gender biases.

Other participants specifically referred to skin color and race when speaking about their experiences. For example, in describing and drawing her lived experience, one participant used the color brown to depict her skin and described her skin color as a factor that has influenced her health. She stated, "Thinking back on my history from the time I was little, I don't think I was treated right, and maybe they could have done more." Another participant described the story of her mother, a woman of color, who had a Master's degree in education but cleaned houses to earn a living. In relation to this, the participant explained that even purportedly equal opportunities may not mean equal outcomes when there are still deep, underlying structural barriers and biases in place. In other dialogues, structural racism was not called by name, but rather implied in situations where, as examples, there were no Spanish language services offered, a systemic lack of opportunities for a given community of color existed, or there were environmentally unsafe and toxic industries in proximity to communities of color.

Race, Immigration and Xenophobia

In relation to immigration and experiences of immigrants, the language used was mostly centered on discrimination in general, as well as paternalism specifically. An additional emphasis was placed on immigrant identity as multidimensional and not monolithic, which will be discussed in more depth in the immigration section below. Relating to multiple and layered identities, Muslim participants in Las Cruces and Albuquerque described their experiences of Islamophobia and xenophobia, compounding other forms of racial discrimination. Finally, it is important to mention that participants described how exhausting and distracting it is for women and women of color to constantly be forced to deal with the effects of structural racism and patriarchy. Indeed, as one Española participant described, ". . . There's a fatigue there . . . is what I'm trying to say out loud."

HOMESTEADERS

"Something that I always say when I'm telling the story of Hidalgo County [is that] there are two reasons why people didn't leave in the past. One, because they couldn't—either they're living on a fixed income and they don't have the ability or the capacity to leave, for whatever reason. Then the other one is the generational families. [There are] generations and generations of huge families, and so their support system is there. My family, we're six generations. My granddaughters will be sixth generation ranchers in Hidalgo. They've been there since the Homestead Act.[10] The heritage, the roots, the ability to live near grandparents, great-grandparents, hear the stories of how they brought their wagons in, and why their house is right here because the wagon broke down right there. Just the stories that we're able to tell them, and it really does give the kids the roots, to say, 'I had people who suffered, who endured, and built something.'"

10 Ibid.

9   The Homestead Act was signed into law by President Abraham Lincoln on May 20, 1862 and encouraged Western migration by providing settlers 160 acres of "public land." In exchange, homesteaders paid a small filing fee and were required to complete five years of continuous residence before receiving ownership of the land. After six months of residency, homesteaders also had the option of purchasing the land from the government for $1.25 per acre. The Homestead Act led to the distribution of 80 million acres of public land by 1900. Retrieved 15 October 2016 from https://www.loc.gov/rr/program/bib/ourdocs/Homestead.html. The Homestead Act also had detrimental effects on Native American communities, as it further dispossessed and displaced them from their ancestral lands. Retrieved 15 October 2016 from http://www.ndstudies.org/media/homesteading_displaced_native_americans.

SOCIOECONOMIC INEQUALITY

Section Summary: *The participants discussed ways in which women's work as caregivers is consistently undervalued, the fact that New Mexico needs to improve economic opportunities in industry, and varying cultural constructions and norms surrounding money and wealth. Most strikingly, participants described the conflict they feel between existing in a mainstream capitalist economy and being part of an economic system they feel is built upon inequality.*

Socioeconomic inequality was often construed as a precondition of health, as well as intersecting with other issue areas, such as paid parental leave or lack of sick leave for immigrant, undocumented, and low-wage workers. Overall, a central point raised across the state was economic security has an immense impact on health through one's insurance coverage and access, as well as one's ability to pay for healthcare.

Intersecting Identities Shape Socioeconomic Status

As mentioned above, many of the points raised intersected with other issue areas, identities, and lived experiences. For example, immigrant socioeconomic stability was characterized by one's status and factors beyond that, such as being employed in low-wage work in the more dangerous and unstable industries, lack of sick leave and workplace protections, and wage theft. Similarly, for single mothers, low income women, and women in general, economic stability was fundamentally linked to access to affordable and quality childcare, pay equality, pregnancy fairness and accommodations, and parental leave. Additionally, for rural areas, access to reliable transport was brought up as a key element to economic security.

Gendered Access to Credit

Participants also raised the issue of access to credit for women and women of color as an area critical to building community assets and that, up until less than 50

URBAN CHICANA WITH RANCHERA ROOTS

"I was born and raised in Albuquerque. My parents were both from the ranch. My dad is from Northern New Mexico. Then my mom is from the East Mountains. That's where they were for generations. There's a huge privilege of being born with citizenship, but there's also the reality of being a second-class citizen. My parents didn't speak English until they went to school. Their names were changed by the school system, so they have their American names and their given names. They go by their American names because that's just their reality. By the time I was six years old, I knew that English was the only language you could speak outside the home. I don't even know what my language was . . . English or Spanish or both. It's completely shaped how I interact with the world."

A weaver from Tres Manos Weaving of New Mexico

years ago, it was not possible to obtain credit without a male co-signer. Indeed, a participant in Las Cruces described how, "Women could not get a loan without a male co-signer up until 1986 in New Mexico. I think our ability to access credit as women—we're generations behind that."[11]

"Women's Work"

Another critical point raised in multiple community dialogues was that women's work as caregivers is persistently unseen and undervalued, both in the sense that it is not compensated and is gendered, essentialized, and seen as an implicit function of women. These norms impact women's economic opportunities and the trajectory of their employment. Another gendered dimension described was how, in the past, women could make a dozen tamales or burritos and sell them for cash, whereas now, due to more restrictive health and safety regulations, this method of earning money is more difficult. The result is women's informal cash economies of survival are increasingly constrained, eroding women's earning power and economic agency. On the other hand, participants described how women support and sustain each other through informal networks of families and friends. There was an element of healing and support amongst women described in many communities. Further, many communities have ideas of how to strengthen women's agency, such as through shared commercial, community kitchens.

Alternative Economic Opportunities and Structures

A related issue discussed was creating decent economic opportunities beyond, or in addition to, what currently exists. Communities working in oil and gas in both the northern and southern areas of the state, as well as those working in mining, described a lack of alternative opportunities; boom and bust cycles; and a lack of sustained, safe, and decent employment. There were suggestions concerning improving current industries and workplaces through building community power via community organizing and unionization. There were also suggestions related to the need to diversify employment and invest in women entrepreneurs and small, women-owned businesses. Further still, some participants thought we need to look beyond existing economic norms to alternative models. Many businesses and entrepreneurial ideas fail, leaving families and communities with little or nothing. Questions were posed around how other economic structures, such as co-operative enterprises, social enterprises, and time banking, could leverage community resources beyond individual profit models.

Varied Cultural Perspectives on Money and Wealth

Another key point was raised in relation to cultural constructions and norms surrounding money and wealth. Participants from several tribal and pueblo communities described how the notion of working to "accumulate wealth" is not present in or not a core cultural aspect of their communities. Instead, if one has more, one immediately does more or gives more away and does not necessarily try to keep and accumulate more. Further, colonization and ongoing structural inequalities have also resulted in a lack of intergenerational wealth in indigenous as well as many other communities of color. In relation to this, a similar point was raised about the need for financial literacy and planning related to longer-term saving and financial stability, both for individuals and community organizations.

However, in relation to the points above, participants also described the conflicting ideologies of wanting and needing their organizations and communities to succeed in a mainstream capitalist economy, while at the same time struggling with the implications of being involved in a system built on inequality and deeply detrimental to the well-being of the environment and community. This was particularly salient for communities reliant on extractive economies such as oil, gas, and mining, as well as the national laboratories. Participants commented that part of their environmental and social justice work is aimed at dismantling these industries and structures that have historically harmed, and continue to damage, the environment. At the same time, these industries and structures underpin local economic development, job opportunities, and

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11 In 1974, the U.S. Senate passed the Equal Credit Opportunity Act, making it illegal to discriminate against someone based on their gender, race, religion and national origin. Prior to this, many women were not able to apply for credit. NMW.O could not find any outside information substantiating the claim that women in New Mexico were not able to get a loan without a male co-signer until 1986.

financial resources. Communities across the state expressed similar sentiments of living with multiple worldviews and concerns around this topic and asked, "How do you invest in young people and ensure communities have resources in society without helping to prop up a system that also disadvantages them?"

Another topic raised in relation to socioeconomic inequality was conceptions of poverty. Who defines what wealth and poverty look like? Participants from the Navajo Nation stated, "Outsiders view poverty differently than we do." Other participants from farming communities described their communities as wealthy in terms of foods, music, relationships with each other, and their land. However, a mainstream view and defined thresholds of poverty may deem these communities as "poor." The points participants made did not seek to minimize the needs of communities, nor did the ideas paint a generalist or patronizing picture of "poor, but happy" communities. Rather, they were deeper reflections about what real economic equity and security means across cultures and contexts:

> *"A lot of our people—like my auntie — [don't] have running water. She has solar power, but she doesn't have sewage either. She has an outhouse still. If you were to ask her, she wouldn't consider herself poor. Everybody else thinks she's living in poverty. She's perfectly happy where she's at. There's that fine line about what economic security may mean from the Western world to indigenous cultures." — Gallup participant*

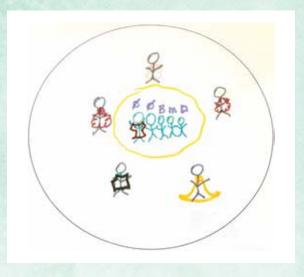### *Historical Trauma and Socioeconomic Equity*

Finally, the point was raised again and again that "skipping to economic stability" is very challenging for communities that have experienced traumas and borne the brunt of ongoing structural inequalities. While economic security and development programs are encouraged and supported by the nonprofit sector, it is problematic to propose and implement individual economic development solutions to what are really ongoing structural inequalities constraining communities as a whole. Additionally, the point was made that it is extremely difficult for individuals and communities to think creatively about how things could be different when they feel stuck in a continual mode of survival.

ENVIRONMENT

Section Summary: *Most critically, participants talked about the challenge of different groups, such as those in mining, ranging, indigenous, and environmental communities, with differing agendas being able to find common ground when making decisions on issues related to land and water use. In addition, participants felt low income communities and communities of color are experiencing the detrimental effects of environmental contamination in a disproportionate way.*

WEARING THE BIG COAT

"I grew up in a blue collar family. It felt like my father was always wearing this big coat. He always had two jobs to get us by. I actually had to fight him to go to college. I wanted to go to college, and he said he didn't feel like I needed it because he and his father had gotten by without it. Then I got a bachelor's; my next brother got a master's; and now my youngest brother has a doctorate. Now, I still feel like—I feel like we'll always wear this heavy coat. Our whole family has this super strong work ethic. We just can never stop. I feel like I have to wear a superhero cape. My superhero cape lately is choking me really badly. It's just like you never feel like you can take that coat off and just relax."

Communities across the state described how environmental contamination and pollution are affecting community health. In Española, the broader Rio Arriba county, and the Eight Northern Pueblos area; Los Alamos National Laboratory and the oil and gas industries were mentioned as key actors influencing and potentially harming community health. Participants in Silver City discussed how challenging it is for disparate groups such as the mining community, ranching community, indigenous community, and environmentalists to engage in discussions about the environment, as well as land and water use. In Gallup, participants mentioned the 2015 Gold King mine spill[12] and the legacy of contamination from the uranium mines on their health and lived environment:

"Everybody on the reservation was thinking, 'Oh, we don't live by a uranium mine, so we're okay.' What they're not realizing is that those uranium mines were never cleaned up. It's still seeping into our groundwater. All the way to Fort Defiance area, our uranium levels are in violation of whatever standards they need to fulfill." — Gallup participant

The environment was also depicted as a critical part of people's health and vital to recreation and being outdoors. Communities expressed the devastating effects of losing access to outdoor spaces that are safe and clean. For example, the presence of superfund sites in some communities constrains or shapes those communities' interactions with their environment. This point was usually discussed in relation to both race and class—the implication being that low income communities and communities of color are experiencing the detrimental effects of environmental contamination in a disproportionate way.

CLEAN WATER ON THE NAVAJO NATION

"Clean water is a huge issue right now nationwide or even worldwide . . . Our uranium levels are in violation of whatever standards they need to fulfill. Also, the Gold King mine spill from Colorado. That's another point of concern for me because it went down our waterways. It was really sad. Then of course, the whole thing up there with The Standing Rock Sioux in North Dakota with the pipeline, because if that's going to happen there and they don't abide by the tribe's rights, it's going to happen down here."

GOVERNMENT UNDERINVESTMENT IN SOCIAL SERVICES

Section Summary: *Participants have little trust in many social services and believe government services do not take into account the lived experiences of communities. They believe greater education is needed for government officials and policymakers on issues such as gender, race, colonization, and historical trauma.*

Participants across the state described the structural underinvestment in health and economic support services, particularly in rural communities, which involved a lack of consistent services and sustained safety nets. The result is little trust in services, as one day services are open and available, and the next day they are defunded and closed. Underinvestment was also expressed by perceptions that government and policymakers are either not listening or not held accountable to the communities they purportedly represent. Indeed, one participant in Albuquerque explained, "Policymakers are very boldly unafraid of their communities. They're like, 'Hmm, I have money in my war chest; I don't need you.'" Similarly, a participant in Silver City described how, "You have the governor come down, and without any discrimination at all, say, 'Everybody give up five percent of your budget.' We were already in survival mode. Now we're in survival mode minus five percent."

Another point raised was government and policymakers often lack deeper education and analysis of gender, race, and historical trauma. As a result, many community members feel their government services and policies do not represent the lived experiences of communities. Participants described contexts where government services are out of touch with community needs to the extent that, "Government services are oppressing communities and [are] culturally insensitive." For example, in Silver City, the food distribution center was sent chicken feet as the protein to distribute to families. This was in

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12 "We're not going to know the health impacts of the exposure to the water for five to 10 years, maybe more. And it's not just direct exposure, the community is also concerned about eating food that's been watered with contaminated water, or eating livestock that has consumed the water." Ethel Branch, the Attorney General of the Navajo Nation. Retrieved 7 December 2016 from http://thehill.com/policy/energy-environment/291564-navajo-nation-sues-epa-over-mine-spill.

addition to the typical food they are given, including hot Cheetos and maple frosting. Participants explained that these actions convey to communities their lack of worth in the eyes of the government and their elected officials. Overall, the need for deeper education of policymakers and government officials on gender, race, colonization, and historical trauma was described as key.

IMMIGRATION

Section Summary: *Participants explained how the immigrant community feels the impact of discrimination and many workplace disparities, including lack of general workplace protections, sick leave, wage theft, and more. In addition, New Mexicans feel that experiences with immigration and relationships with borders in our state are layered, complex, and intergenerational.*

Increasingly, public health literature and academia are considering immigration as a social determinant of health due to the specific and enormous influence it has on health outcomes.[15] Given the huge implications of immigration on the lived experiences of women and communities, this report considers it a social determinant of health. The impact of immigration on the lived experiences of women was raised in numerous contexts across the state—both in the north and south. Participants described discrimination and paternalism faced by immigrants, as well as the specifically anti-Mexican sentiment and experiences. Others described how, even as their class and location shifted, "The border is with you wherever you are." Finally, participants also discussed refugee experiences with immigration.

Multidimensional Effects of Immigration

As mentioned above, many key issues impacting the immigrant community intersect with other low-wage workers or women in general. Specific aspects mentioned in relation to immigration included general workplace protections, sick leave, wage theft, access to healthcare, government services in Spanish, long-term services for refugee resettlement, and government services in other languages. These issues are also compounded by one's legal status as a documented or undocumented immigrant and how that shapes lived experiences with

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THE BORDER IS WITH YOU WHEREVER YOU ARE

"I was born [and grew up] in Chihuahua, Mexico. I was there in escuela.[13] I was there until I was 13 years old. It's important to know that the border is with you wherever you are. Even if you are in the U.S. That's part of who we are—it's ingrained. In Mexico, there were stars, because a lot of the evenings there was no TV. Learning about the stars and connecting with nature and the sun was so important. We had an apple orchard, a farm, and there was a pila, or a well. It's important to be grounded to mother earth. I think what was also important for me was my tia and my abuela,[14] the female energy that I grew up around, and how I carry that to the U.S., and actually they're around still nearby."

13 School
14 My aunt and grandmother

Healers from Kalpulli Izkalli

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15 Retrieved 18 October 2016 from https://www.ncbi.nlm.nih.gov/pubmed/25494053.

health and economic access and opportunities. Namely, undocumented people have highly constrained access to both decent and fair employment, as well as healthcare. Additionally, gender dimensions and dynamics of immigration were also discussed. For example, gender-based violence was described as something many immigrant women experience during migration. On the other hand, immigrant women were also described as key organizers in their communities, leading campaigns against wage theft and sexual harassment.

Generational New Mexican Experience

Finally, it is important to note that many multi-generational New Mexicans described how, even though they were born in New Mexico or Texas, their experience was that, "We didn't cross the border, but the border crossed us." Namely, even when status and place of birth are not in question, experiences with immigration and relationships with borders in New Mexico are layered, complex, and intergenerational.

THE BORDER CROSSED US

"We didn't cross the border, the border crossed us. My family dates way back when it was Mexico. There was a lot of discrimination. My father—en paz descance[16]—he was born in 1907, so he would be way over 100 years old right now—he [fought in] World War II. My father went to school until the second grade because he couldn't speak English. And my mother went to school until seventh grade. She had a little bit more education. My father didn't speak English very well. He didn't speak Spanish very well either. By the time he got to that school age, you weren't taught and encouraged in your own language. I actually hear a lot of northern New Mexicans speak the way my father did. Some people never even learned how to read or write in either language."

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16 Rest in peace

FROM LAOS TO NEW MEXICO

"Sticky rice is the heart of Lao food. That was how we brought community together [because] food is extremely important to us . . . My family came as refugees or they came undocumented. A lot of the stories I heard when I was growing up was when they were working in the fields in Laos, they would get this packet of sticky rice every day, and that would be their meal for the whole day. When we came to the U.S., [sticky rice was] the glue that held us all together. In our home, we could be Lao, we could be Chinese, we could celebrate our own culture, but outside we were Americanized. Being American was so important for my family because they were undocumented for so long, which meant they had no access to health care . . . When they finally got citizenship, [we] celebrated this. We are American. Now we have rights to different things. That was really critical for us, but we also knew how important it was to maintain our cultural identity."

Weavers from Tres Manos Weaving of New Mexico

BUILDING GENDER JUSTICE:
Healthy and Economically Secure Communities

Section Summary: *Participants discussed other specific elements that shape their community's health and economic security and the various strategies and efforts needed to move towards gender equity in their communities. One key strategy reported was to support women who are most impacted, including women of color, young women and girls, elders, LGBTQ-identifying people, low income women, immigrant women and rural communities—with the recognition that identities are fluid between groups and men and boys are also constrained and damaged by patriarchy.*

Beyond the social and structural determinants described above, participants were also engaged about more specific elements that shape their community's health and economic security. Participants were asked to "Describe three key things that **make** your community healthy and economically secure, or that **could make** your community healthier and more economically secure." The responses ranged from aspects such as eating traditional foods to improving access to mental health services to supporting the leadership of rural women of color. To elucidate, core communities of people and strategies that emerged are described below.

BUILDING HEALTHY AND ECONOMICALLY SECURE COMMUNITIES

In working for gender equity and social change in New Mexico, it is critical to consider which communities are most impacted by the social and structural determinants of health and economic equity described above. This then helps organizations, policymakers, and funders develop priorities and programming in line with community needs. The findings from the dialogues highlighted that women and girls of color and women and girls in low income and rural communities are most impacted. Additionally, communities across the state clearly noted the experiences of young women and the need to provide more support for them in an effort to build healthier communities. Further, immigrant women and the LGBTQ community were also brought up as particularly impacted.

Women and Communities of Color

The need to work with women and communities of color and support organizations led by primarily women of color was emphasized in several conversations across the state. The social determinants mentioned above have deeper impact upon women of color across the state due to how various histories and structures of oppression have played out. Given the role women of color play in sustaining their own communities across generations, it is critical to pay specific attention to them and rectify the inequalities facing them and their communities.

Young Women: The Future of Gender Justice

As mentioned, communities across the state emphasized the need to focus upon services for young women. Participants stressed that mentorships; as well as development of leadership pipelines, internships, and coming-of-age rituals; are critical to ensuring young women are supported. Indeed, research shows that youth who have some form of mentorship and adult guidance at home, in school, or in their community are more likely to succeed academically and less likely to engage in risky behaviors including violence, substance abuse, and unsafe sex.[17] Similarly, participants described how the aforementioned mentoring activities create a connection to purpose and culture for young women.

Members of the Brave Girls Program

Working with young women is particularly important in contexts of adverse childhood experiences[18] or trauma. Community members pointed to evidence of how the impact of these adverse experiences can be reversed or healed through working with young women in positive ways that incorporate one's culture and heritage and build self-esteem.

17 O'Donnell, K. *Indicators Report: A Statistical Resource Guide to Women and Girls in New Mexico.* NewMexicoWomen.Org. 2013. Page 21. Retrieved 8 October 2016 from https://nmcf.wufoo.com/forms/m1xvw1ef03bdrq8/.

18 *Adverse childhood experiences (ACEs) are potentially traumatic events that can have negative, lasting effects on health and well-being.* Retrieved 18 October 2016 from http://www.childtrends.org/wp-content/uploads/2014/07/Brief-adverse-childhood-experiences_FINAL.pdf.

Key needs and focus areas discussed in relation to young women during the dialogues included the following:

- Mentorship programs demonstrating to young women the various options and possibilities available to them. Young women then have access to these mentors, whom they can call upon as advisors to help guide them in making life decisions. Similarly, participants highlighted the need to simply pay attention to young women and show them that their opinions and dreams matter.

- Paid internships as a way to "nurture the next generation" and help young people develop skills and opportunities.

- Reproductive justice curricula and engagement, including comprehensive sexual education, healthy sexuality, and healthy relationship behaviors and boundaries. Additionally, access to birth control and resources and education around reproductive rights and choices.

- Gender studies and education to reframe and counter the sexist messages young women unwittingly internalize. Instead, present young women with powerful and healthy messages.

- Scholarship programs to support young women in their pursuits of higher education.

- Science, Technology, Engineering and Math, or STEM education for young women. These are often employment areas in which women and especially women of color are historically underrepresented. Simultaneously, STEM careers offer some of the highest paying jobs.[19]

- Trade school opportunities for young women. Again, many trade sectors are male dominated and also well paid. A narrative shift needs to occur around the purported gendered nature of jobs like plumbing and mechanics.

- Financial and economic literacy programs for young women regarding the resources available to them, skills needed to navigate their finances, how to save money, what to expect as they grow up, and how to be stable and prepared for the adult world.

MYPOWER, INC. IN HOBBS

"We have seen a paradigm shift, especially because we start with fifth grade girls, and then work all the way to middle school. For instance, I had one conversation with my students, and I said, 'Let's dream big.' One of my girls goes, 'What do you mean dream big?' I said, 'If you could have anything in the world, what would you want?' She goes, 'Well, if I got pregnant…,' and she was in fifth grade. I said, 'Okay, we're going to learn how to dream, right here, right now. Close your eyes.' I said, 'Imagine the White House. Can you see where the President lives?' 'Oh, yeah, everyone can see that.' 'Now imagine a pink elephant on top of the White House.' They're giggling. 'Can you see the pink elephant?' 'Yes.' 'Now, can you see a beach ball? The elephant is chasing the beach ball, and you're chasing the elephant chasing the beach ball. Now, the FBI is on the White House and they're after you. You're causing a ruckus.' The girls are giggling. I said, 'Could you see all that? Did you feel it? Did you feel the excitement, the fear of being caught?' 'Yes.' 'That is dreaming, so if resources were not a problem, if education were not a problem, if how you grew up was not a problem, what would you want to become?' Now that little girl wants to become a lawyer. She's in ninth grade and she's confident. She's moving forward in her life and dreaming and is not scared to dream, and now has the ability to dream past her current circumstance."

Elders and Intergenerational Connectivity

When elders were present, though, they cautioned against privileging programming for youth at the risk of further isolating and excluding the elderly and suggested more intergenerational approaches with women of all ages. A participant from an organization in Albuquerque described that elders often are the keepers of ancestral wisdom and cautioned that exclusively youth-led or youth-focused programs may inadvertently miss or neglect that critical component, whereas more

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19   STEM jobs offer a substantial salary premium. The average advertised salary for entry-level STEM jobs requiring a BA or higher is $66,123 compared to $52,299 for non-STEM jobs. This difference of approximately $14,000 represents a 26% premium. At the sub-BA level, the average advertised entry-level salary is $47,856 for STEM jobs and $37,424 for non-STEM jobs. This difference of over $10,000 represents a 28% premium. Retrieved 7 December 2016 from http://burning-glass.com/research/stem.

intergenerational approaches can encourage transmission of knowledge and honor both the wisdom of youth and elders. Similarly, an organization from Mesilla described gatherings at their weaving factory where younger and older women share what is happening in their lives. The elders often help the younger women problem solve, and they "show each other how to be strong and continue." Finally, in another statement about the need for programming inclusive of the elderly community, a participant in Silver City described, "When you get to reach a certain age, people start to look through you."

Weavers from Tres Manos Weaving of New Mexico

The Family

Another critical point raised focused on the family as the center point of community wellness. For example, a participant from Hobbs described how, "[We] can inspire these young women to just conquer the world, but then they go home to their family, and the family is not educated on the resources available. . .It's important for us to bridge the gap with the families and parents." Community members also described the power, support, and challenges family connections bring into their lives. Namely, many communities are deeply family-oriented and collectively support each other in important ways. However, across the state, communities also described how devastating family breakdown can be. Overall, participants expressed that while retaining a gender lens in their work is critical, it is important to contextualize work to support each woman or girl within the framework of her entire family.

Intersecting Identities

Some communities were mentioned frequently in multiple dialogues. Noted were low income women and the specific struggles and barriers of their experiences. Similarly, immigrant and refugee women and their experiences and needs were often mentioned. The vulnerabilities of this community are amplified by language barriers and legal status (whether one is documented or undocumented). The specific needs and experiences of the LGBTQ community were also raised as a crucial element in working for gender justice. Finally, across the state, participants commented on the critical need to work with men and boys around healthy masculinity as a way to counter the perpetuation of damaging patriarchal attitudes and behaviors.

FROM MISSOURI TO NEW MEXICO

"I actually grew up in the middle of Missouri, outside of St. Louis. I moved to New Mexico about 14 years ago, but I really ran away from my family because my family's fairly racist and fairly homophobic, and I am gay. So that was a really big conflict within myself. It's actually taken me even being an adult to kind of come to terms with the doubt within myself. They're a fairly religious family, and even people that aren't really religious are just very homophobic. It's been an interesting thing for me to move to New Mexico. I also didn't really grow up in a family that supported women and girls to be very strong, smart, and bold. I was the first in my family to go to college, and that was really never encouraged at all. It was always like my family works in factories and call centers. For me to even go to college, my mom was mad and cried. Now that I have a daughter, it's really plain to me how much I'm redefining myself and redefining what messages I want to give to her."

Rural and Low Income Communities

The need for investment in women and girls in rural and low income communities was mentioned across the state. Communities with low population densities that are not situated along the I-25 corridor described a lack of investment in their communities on the part of funders and government. These communities believed this underinvestment occurs because rural services cover a smaller number of people that may not seem significant in comparison with urban locations. Similarly, the ability to have trainings and capacity development support locally in their communities remains a significant challenge. It is difficult to get trainers and others from larger cities to travel to rural locations. Further, while an increasing number of organizations are offering webinars and online video options as an alternative to in-person training, rural communities explained they struggle with adequate broadband access and reliability.

PATHWAYS TO BUILDING GENDER JUSTICE

Section Summary: Participants discussed other specific elements shaping their communities' health and economic security, as well as the various strategies and efforts needed to move towards gender equity in their communities. These various strategies and efforts included the following:

- *Community organizing and civic engagement*
- *Promoting culturally rooted individual and community healing*
- *Improving mental health services and access*
- *Retaining and promoting culture, rituals and rites of passage*
- *Improving healthcare access*
- *Improving breastfeeding education and support*

- *Improving access to healthy and culturally appropriate foods*
- *Working for reproductive justice*
- *Ending gender-based violence*
- *Promoting healthy bodies with a body justice lens*
- *Improving education*

Building Community Power: Community Organizing and Civic Engagement

In terms of strategies, community organizing and civic engagement were brought up as some of the most effective ways to build power in communities and create long-term change. A key point made was community organizing groups are even more powerful when they are knowledgeable of, partner with, or incorporate some direct service delivery into their work. This means they are even more effective as they support communities by addressing immediate needs, as well as longer-term strategies, to collectively create change.

Another core point raised by participants across the state was that community organizing is a model that fundamentally believes communities should build their own power and make their own decisions about how best to solve problems impacting their own communities. This was particularly noted for rural, low income, and immigrant communities, as well as communities of color, that are under resourced. Many participants emphasized that civic engagement and community organizing are the most powerful ways for communities to be heard and create change over the longer term. Indeed:

> *"Community organizing is when you believe that our community actually is the expert, and that we have the best ideas on how to solve the problems. That is what pushes past paternalism, and sexism, and racism, and patriarchy: When people say, 'You know what? We believe communities are the experts.'" —Santa Fe participant*

Further, communities discussed how to cultivate civic engagement and build power over the longer term. Examples included "creating candidate pipelines that reflect our communities" and electing more women of color into political office. Another suggestion was changing campaign financing so "a working parent who has interest actually can run for public office." A participant in Albuquerque described how access to resources for communities depends upon the political atmosphere in

the county, state, and federal governments and that those in office affect "every single thing that we do." The importance of voting, running for office, and being civically engaged were emphasized as longer-term methods for communities to build power and make progress on social justice issues.

Promoting Culturally Rooted Individual and Community Healing

Across the state, communities discussed longer-term healing as an underlying need and factor linked to issues impacting their communities such as substance abuse, gender-based violence, and mental health. Healing was mentioned as a core element of healthy communities. Of course, "healing" is a broad term referring to the process of restoring health from an unbalanced or unhealthy state. It should be contextualized by the ways in which communities frame and discuss the concept. Typically, it was discussed in relation to the ongoing legacies of colonization and structural racism:

> *"We have got to focus on just the healing. To us, then that became resistance. And that was decolonizing. That's a different way of thinking, changing the way that we think which changes people. Healing in that way, so that we can resist." — Albuquerque participant*

Various types and spaces of healing were mentioned, including healing gardens, healing through land and traditional medicines, and healing through ceremonies and rituals specific to each community's cultural and spiritual traditions. The need for women's spaces of healing was a common theme across the state. This included a women's jewelry collective in Santa Fe comprised of immigrant women who are survivors of sexual and domestic violence and gather every week "in a space outside of that minute of crisis to find healing and talk about all these systems. They're talking about violence, what that looks like in their communities, while making jewelry."

Similarly, participants in Las Cruces explained, "There can be a transformation just by circling in with women and having other strong women hold space for the truth, that's whatever truth of the trauma that you've experienced in your life." They described healing through spirituality, self-care, ritual, and ceremony. Participants engaged in healing work in Doña Ana

County explained, "We talk about how we've been made wrong as women. That women's ways have been made wrong, and so we're interested in celebrating women's ways of healing and being in community." Additionally, referring to the community engagement dialogue held for this report, they explained:

> "It's important to honor the fact that we need spaces like this as women to just meet. A lot of women have suffered trauma under a male influence, so when you have a male [present], it's about being trauma-informed." – Las Cruces participant

Healing was also discussed in relation to substance abuse. For example, a participant from the Navajo Nation explained the benefit of the Methamphetamine and Suicide Prevention Initiative (MSPI) that has "traditional healers that will go out to the site and actually do the . . . male ceremony—the sweat lodge. Since those traditional healers are already getting paid from that MSPI grant, the families really don't have to pay the healers."

Another important point mentioned was that, in many communities, although longer-term healing is seen as critical, it is also vying for a place on a priority list full of many seemingly more urgent and acute issues to address. Participants described feeling overwhelmed and at over-capacity in general. For example, in Silver City, a participant explained, "Okay, so we have three hours' worth of stuff to get done in an hour and a half, and how are we going to [do a] 'ten minutes to heal kind of thing?'"

Trust and consistency were also mentioned as critical components of mainstream mental health services. Particularly in rural communities, participants described multiple instances where communities slowly build trust with an organization or service provider, only to have that organization shut its doors due to lack of resources. The results are devastating:

> "That just tells the [community members], 'There is no point. I am a worthless piece of crap.' Because every time that happens, it's like saying, 'You suck. You're alone.' I don't think we're healing. I don't think we're healing. I think we are enabling everybody to hold on, and that's the best we can do—despite our intentions." – Silver City participant

THREE HOUSES IN NORTHERN NEW MEXICO

"I grew up in three houses. One was my Gramma's house in El Guache, where I have the honor and privilege of living right now; my Gramma Pepa's house in Taos; and then my parents' house . . . they struck out on their own and put a single-wide down in Arroyo Seco. When I think about grounded-ness and health and where I come from, it's from these three places combined. Part of that is being on the Acequia[20] de los Salazares in El Guache and Acequia de los Molinos in Taos. The Acequias [were] very male-centered spaces for so long, and now that my dad has passed away, my mom and I have really been the ones to go into those spaces and have a different relationship to this water that's been running through our life. The property that was my grandmother's is also on the Ohkay Owingeh land grant. There is a sense of having long roots, but also understanding the relationship to the indigenous communities that are our neighbors and how we have struggled historically, but also learned from each other. There's a little place in the fence that I've cut, and I just go by the Rio Grande and have a really centering place. That [space] feels like part of my health, [and] the river is part of it."

20 A community-operated watercourse or irrigation canal.

Improving Mental Health Services and Access

As mentioned above, participants across the state described a context of structural underinvestment (and in some cases divestment) in mental health and substance abuse recovery services, with decreasing resources available, especially in rural communities. Rural communities described a lack of consistent services and safety nets. The result is very little trust in services, as one day they are open and available, and the next they are defunded and closed.

There were several populations mentioned as specifically lacking services around the state. The LGBTQ community was brought up as needing increased mental health support, particularly for transgender individuals in rural areas and young LGBTQ people struggling to overcome societal stigma. Indeed, "For our LGBTQ young people, mental health was something huge. One in six young LGBTQ people in New Mexico have attempted or have planned suicide. That is huge." Access to quality and appropriate mental health services is critical considering the primary cause for suicide is untreated depression. Similarly, communities around the state described a "serious shortage of Spanish-speaking counselors" and Spanish-speaking services.

This lack of consistency, combined with histories of colonization, dispossession, and structural racism, means many communities do not trust or feel safe with mental health services and government services in general. An example was given of someone with schizophrenia avoiding mental health services because, "The family was like, 'They're giving you pills and it's making you sick' type thing." Others described

For a free, 24 hours a day, seven days a week service that provides suicidal persons or those around them with support, dial 1-866-HELP-1-NM in New Mexico and 1-800-SUICIDE nationally.

how many mental health services lack cultural competency and community knowledge and can actually do harm to communities. Finally, participants described that many instead turn to their families and spiritual leaders for help.

Another important point made regarding mental health was in relation to trauma and stigma. Namely, that mental health issues often are surrounded by a great deal of stigma and seen as an individual's fault or type of moral failure. Communities mentioned the need to reframe these false assumptions and communicate openly about mental health issues. This was linked to the reality that mental health conditions are still criminalized due to our state's lack of capacity to handle such conditions. For example, a participant in Las Cruces described how:

> "Fifty percent of the occupancy at our jail right now, at the Doña Ana County Detention Center, are people that are waiting for mental health pretrial competency—mental health support and assessments. Women typically have a 30 percent higher rate of being jailed with mental health conditions than male counterparts. We need to figure out a way to provide mental health services asap."[21]

Retaining and Promoting Culture, Rituals and Rites of Passage

Communities described the richness of their culture, connection to their ancestors, and community relationships as ways to heal and shift the narrative from a deficit to an asset lens. A key point raised emphasized the importance of community and kinship relationships in maintaining culture. Such relationships and rites of passage help transmit and promote values such as respect, courage, and perseverance. These seemingly "soft" skills and knowledge, particularly in relation to one's culture and community, were described as key in leading to more "hard" competencies and measurable educational outcomes. For example, a participant in the Gallup dialogue described how Zuni Pueblo schools have adopted an approach that involves:

> "Coming into the school, teaching the children to greet each other in the Zuni way and the English way. The relational issues are the ones that change the students' performance on tests. If you look at those skills, it's greeting each other . . . giving each other affirmations and validating young people for bringing something to the table."

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21 The Dona Ana County Detention Center (DACDC), in a 2007 lawsuit initiated by residents of the DACDC to redress the violations of their rights, "acknowledge that at least thirty to forty percent of the individuals detained in DACDC have a mental disability requiring some sort of therapeutic service or support." Further, they admitted that "there are approximately nine hundred people housed in the DACDC, which has a capacity for 846 beds." Retrieved 8 December 2016 from https://www.aclu-nm.org/wp content/uploads/2010/05/Complaint11_7_07.pdf?556820.

Additionally, culture and spiritual practice were described across the state as means to both deal with stress and serve one's community. Participants in Gallup described their ancestral values teach that, "We take care of each other. We cooperate with each other. We love each other. We listen to each other. We give each other a place for their own voice to be heard." The relationship elements of community were described as critical to the extent that, "I think we're each other's problems. We're each other's solutions as well," meaning that healthy and supportive communities are critical for both individual and societal well-being.

Similarly, communities across the state described the need for rituals and rites of passage for both men and women of various ages. These were described as ways to transition into adulthood and learn about gender and one's responsibilities towards family and community. Rites of passage were also described in relation to becoming sexually active, becoming a parent, and becoming an elder. Further, they were framed as potential mechanisms through which to learn healthy gender roles and dynamics. Additionally, rites of passage were seen as crucial means to transmit cultural knowledge and wisdom through generations.

Participants from tribal and pueblo communities around Gallup described the importance of a coming-of-age ceremony marking a young woman's transition to adulthood. However, they also commented how, "A lot of the girls are not doing that anymore, because their parents can't afford it, and they're not ready to do it when it comes time. They just skip it. Then [the girls] lose out on all that." They also stated that many young men have not gone through rites of passage that used to be key transitions. Instead, "You have guys running around the reservation 30 and 40 years old still acting like adolescents, because nothing ever happened to tell them, 'Hey, you're a young adult now. This is a whole different set of rules and responsibilities.'"

Additionally, participants in other communities described how rites of passage have become diluted and related to material things like buying one's first car, rather than the internal and relational dimensions of different periods of one's life. For example, in relation to sexuality and parenting, one participant from Española described:

> "Our rite of passage experiences now, especially for young people in our community, mostly revolve around acquisition of goods and bling-bling . . . But this sexual rite of passage is a doorway through which we can talk about the complexity and the transformative potential of a parenting relationship."

Improving Healthcare Access

Also raised in the community dialogues was the critical role of stable and decent employment in securing healthcare access and being able to afford quality care and medical bills. In Las Cruces, participants discussed the need for "a paradigm shift in terms of health access as a human right" and discussed how this is not part of the national dialogue. Further, they gave

A healer from Kalpulli Izkalli

the example of a recent study[22] that compared women in Juarez, Mexico and Vado, a colonia[23] in southern New Mexico. Participants explained, "From the health perspective, women in Juarez were better off than the women in Vado. They had more access to healthcare. In Mexico, [healthcare] is a human right. Mexico has four different options and they can also go to a pharmacist."

Another occurrence mentioned was that even when individuals have access to health insurance or Medicaid, such insurance often does not cover the healthcare options these individuals would prefer to use. For example, things like herbal medicine, chiropractors, acupuncture, and curanderismo[24] are not covered by many, if not most, insurance programs. Community members explained, "They don't reimburse you for that sort of thing. That's very frustrating. I feel they're not respecting our traditions and our choices, really honoring our choices." Participants also described a medical and mental health culture of, "pills, pills, pills" and feeling like prescription medications were being pushed upon them.

Another interesting topic related to healthcare brought up in numerous locations was the idea of trust. A participant from Gallup explained how trust issues with Indian Health Services and negative experiences as a child had led her to develop "white coat syndrome," where she feels

GROWING UP IN SANTO DOMINGO

"I grew up with my mom, her two older sisters and a lot of my older cousins, so I had a lot of aunts. I considered everybody my aunt or my grandma that was older than me because a lot of my first cousins . . . [are] a lot older than me, so they're more like aunts or second moms. My mom lived just ten minutes outside of our community, but over the summer, she gave me to my aunts to live in the village with them because they're about 20 years older than her. I would do all the housework for my aunts, and then they would teach me what I needed to know about our community in Santo Domingo. I learned a lot about community and responsibilities, the roles of women from my upbringing, and I think it was my mom's way of teaching me the traditional values in my community because she lost her parents when she was a teenager. Then, for whatever reason, she was sent away to live with non-Native people outside of New Mexico for years, and so she didn't grow up with a lot of traditional teachings early on. My upbringing really shaped who I am now and the things that I'm interested in. I really cling to my community, and I try to learn as much as I can from the women in my family still, both on my mom and dad's side of the family."

anxiety around doctors and in medical settings. Similarly, a participant working with young women in Santa Fe described how many young women do not feel safe or comfortable visiting the local Teen Parent Center or utilizing services related to reproductive health. Similar experiences were described in relation to undocumented women who are seeking care, but fear deportation. Access and willingness to use the local healthcare system is often dependent upon and shaped by relationships of trust. Similarly, another point mentioned was a lack of healthcare services and, particularly, mental health services available in Spanish. These conversations reveal that physical access to care does not necessarily mean individuals will use it.

Finally, another challenge discussed was that for rural communities, access to healthcare is often determined by access to transportation. With a lack of healthcare and other services in rural areas, people may spend hours driving or are simply not able to access care. For example, in March 2016, Alta Vista Regional Hospital in Las Vegas closed its Obstetrics Department. Alta Vista's Obstetrics Department served a wide portion of northeastern New Mexico, from Santa Rosa to Springer. Women and their families now have to travel much longer distances, in some cases over 80 miles and a steep mountain pass, to Santa Fe, Taos, Albuquerque, or Raton to access relevant care. The closure has already had devastating consequences, including the death of a Las Vegas mom and her unborn son from a weather related car accident while returning from an OB/GYN appointment in Santa Fe that previously would have been in Las Vegas. As a certified Nurse-Midwife explained in a written testimony to the Health and Human Services Committee, "Many of these women come from outlying areas and

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22 Retrieved 10 November 2016 from https://www.researchgate.net/publication/266787396_Latinas'_perspectives_and_experiences_on_health_and_access_to_health_care_in_the_US-Mexico_border_region. NMW.O could not find further information about this particular study.

23 The U.S. Department of Housing and Urban Development (HUD) defines colonias as rural communities in close proximity to the U.S-Mexico border, lacking access to basic services such as water, sewer, or housing. Retrieved 4 November 2016 from http://bber.unm.edu/colonias.

24 Curanderismo can be defined as a folk healing tradition of the Southwestern United States, Latin America, Mexico, as well as other countries. Retrieved 3 November 2016 from http://curanderismo.unm.edu/2016%20Summer%20Class/Final_2016_Summer_Syllabus.pdf.

already have a one- to two-hour drive to get to Las Vegas. I feel it is inexcusable to decrease access to care to women that already shoulder some of the worst health disparities in our state."[25] This case reflects the ongoing gaps and disparities in healthcare coverage for women and their families living in rural communities.

Improving Breastfeeding Education and Support

Breastfeeding was referenced extensively in the Gallup dialogue by a participant who described breastfeeding as a form of food sovereignty for women that leads to healthier mothers, babies, and entire communities. There is also a vast body of research demonstrating the health benefits of breastfeeding to both mother and baby.[26] Families may choose to use formula for a variety of valid reasons, often very necessary for their family. However, community experts shared extensive and potent knowledge regarding the benefits of breastfeeding.

NAVAJO NATION BREASTFEEDING COALITION

"At the Navajo Nation Breastfeeding Coalition, we encourage and support breastfeeding initiatives across the Navajo Nation and indigenous communities across the country. Breastfeeding is food sovereignty. You don't have to rely on the formula. You don't have to rely on the government to purchase formula. Also, it has been shown through research that breastfeeding reduces the risk of obesity later. It also reduces the risk of diabetes later. Many mothers who have diabetes and choose to breastfeed actually don't need their medication. Breastfeeding actually keeps their insulin levels in check.

Figure 2: Guide to Newborn Stomach Size[28]

A newborn's stomach is the size of a cherry. And the fiber around it is very stubborn. When the mom is breastfeeding, the first few days it's colostrum.[27] With colostrum, the first day, all the [babies] need is about one teaspoon to get them through the entire day. Although they're breastfeeding maybe eight to ten times that day, the baby is only getting a few drops during that day, because the tissues of the stomach are not meant to expand yet. Yet, you have the hospitals and well-meaning people in the community that are shoving maybe two to four ounces of formula down that baby's throat (see Figure 2 for illustration) . . . They're teaching the baby how to overeat already. With breastfeeding, there's an enzyme inside the breast milk that tells the baby's brain, 'Okay. It's time to stop. You're full.'"

27 A yellowish liquid, especially rich in immune factors, secreted by the mammary gland a few days before and after birth. Retrieved 1 December 2016 from http://www.medicinenet.com/script/main/art.asp?articlekey=2798.

28 Guide to Newborn Stomach Size figure retrieved 11 November 2016 from: https://blog.honest.com/breastfeeding-basics-is-your-baby-getting-enough-breastmilk/#.

25 Retrieved 19 November 2016 from https://www.nmlegis.gov/handouts/LHHS%20070616%20Item%2011%20Public%20Comment.pdf.

26 Evidence highlights that breastfed infants have less severe respiratory tract infections, less ear infections, a reduction in gastrointestinal infections, less incidence of Sudden Infant Death Syndrome (SIDS), a decrease in the development of asthma and eczema, less likelihood of developing celiac disease, a reduction in developing inflammatory bowel disease, a decrease in adolescent and adult obesity, decrease in types 1 and 2 diabetes, and a reduction in the risk of acute lymphocytic leukemia. Breastfeeding also improves neurodevelopmental outcomes and IQ scores. For mothers, the benefits include a decreased risk of type 2 diabetes, rheumatoid arthritis, adult cardiovascular disease, and breast and ovarian cancer. Retrieved 7 December 2016 from http://www.theatlantic.com/health/archive/2012/04/the-benefits-of-breastfeeding/255206/The Atlantic.

Improving Access to Healthy and Culturally Appropriate Foods

Another important point reiterated was the importance of access to quality, healthy, and affordable food, access which is tied closely to socioeconomic status. One-third of New Mexico's counties are classified as food deserts. Many rural residents drive as much as 70 miles each way to access the closest grocery store. The cost of food in rural contexts is also deeply prohibitive; for example, a basket of food that costs $55 in an urban setting costs $85 in a smaller-scale, rural setting.[29] A participant in Silver City described:

> *"The food in Texas is cheaper. I will buy the same things at Walmart here and the exact same things in Austin, and my bill is $20.00 cheaper in Austin. Also, it's more expensive here than it is in Albuquerque. If you have a community that . . . struggles to survive day by day, why is the food so incredibly expensive?"*

Additionally, without adequate food retail in their communities, residents must spend their food dollars elsewhere, taking money and jobs out of rural communities. In fact, there is a correlation between lack of food retail and the dissolution of rural communities.[30] Across rural New Mexico, this void has been filled by Family Dollar and Dollar General stores, where rural residents increasingly purchase their food and other household items. Both stores were included in a 2015 toxicity study finding that 81% of their household products, including items used to serve and cook food, contained at least one hazardous chemical above levels of concern, and 49% of products contained two or more.[31] In relation to food accessibility, a participant from Española valley described how, in a town of 10,000 people, there are, "26 fast food restaurants, and 80% of fresh food produced in the valley is exported to Santa Fe and Los Alamos." Studies demonstrate that the food environment and types of foods easily accessible in a given community have a direct impact on health.[32] Individuals without quality grocery stores in their community eat less fresh fruits and vegetables and have higher rates of obesity, diabetes, and heart disease. This issue is of critical concern for low income and rural communities, as well as communities of color.

However, in contrast to this, food was also described as a powerful and important aspect of people's culture and even as medicine itself. Communities detailed how people, particularly youth, are increasingly interested in growing their own healthy and traditional foods. However, many communities also described being disconnected from their traditional and healthier foods. For example, a participant in the Gallup dialogue stated:

> *"For my Navajo heritage, we're losing our cultural ways of life. Fry bread is . . . not a traditional food. Sheep was also brought to us, and it's very greasy. Our traditional foods are roots and berries and also the wild game . . . like deer and elk. A lot of our younger generation have lost the taste for the wild game. I think part of the education is trying to re-encourage the cultural ways of life, starting with food."*

Finally, the critical subject of child food security was raised. Participants stated New Mexico had made significant progress. However, "We now have fallen back completely. . .There are always issues with SNAP, and we are consistently underinvesting in children."[33] Nutrition begins at conception, and it is crucial to ensure women and children receive adequate nutrition. Further, child nutrition is then linked to a whole host of other developmental outcomes for children.[34] A participant from Silver City described, "We have a huge percentage of children who aren't ready to be in kindergarten from the very fundamental [fact] that they haven't had appropriate nutrition. Now, there are all kinds of other things that are connected to that, but they don't arrive at kindergarten having had enough nutrition to be prepared to learn."

29 Retrieved 9 October 2016 from http://www.farmtotablenm.org/wp-content/uploads/2013/01/NM_Food_Gap_Task_Force_Final_Report-December_20081.pdf.
30 Retrieved 9 October 2016 from http://www.farmtotablenm.org/wp-content/uploads/2013/01/NM_Food_Gap_Task_Force_Final_Report-December_20081.pdf.
31 Retrieved 9 October 2016 from http://www.ecocenter.org/healthy-stuff/reports/dollar-store-report.
32 Retrieved 9 October 2016 from http://www.farmtotablenm.org/wp-content/uploads/2013/01/NM_Food_Gap_Task_Force_Final_Report-December_20081.pdf.
33 "About 30% of the 512,460 children in New Mexico suffer from hunger, according to the [2013 report by Feeding America], which looked at data from the Consumer Population Survey and Bureau of Labor Statistics." Retrieved 19 December 2016 from http://articles.latimes.com/2013/jun/11/nation/la-na-nn-ff-new-mexico-childhood-hunger-20130611.
34 For a comprehensive list of negative health outcomes associated with children who do not receive proper nutrition, see http://www.feedingamerica.org/hunger-in-america/impact-of-hunger/child-hunger/child-development.html.

Working for Reproductive Justice

This report frames and understands reproductive health from a reproductive justice perspective defined as:

"Reproductive justice is when all people have the social, economic, and political resources and power to make healthy decisions about their bodies, their families, their sexuality, and their reproduction for themselves and their families. Reproductive justice is inherently connected to multiple social justice and reproductive rights issues."[35]

As such, reproductive health refers to a broader spectrum of issues than may be typically included in the reproductive health category. Participants in the dialogues often used similar language to frame their lived experiences, for example, discussing the environment and contamination as an aspect of their reproductive health and reproductive justice. Others referred to specific issue areas impacting reproductive health outcomes. Below are some of the key topics raised related to reproductive justice:

- Access to birth control and comprehensive sexual education, particularly for but not limited to young women

- Access to school-based health centers or other health clinics for young people

- Access to affordable abortion across the state, particularly in rural areas; additionally, the need to address narratives and taboos around abortion and a woman's right to choose

- Support for pregnant women in the workplace and beyond

- Access to midwifery and doula services as the original support for pregnant women in New Mexico, not a new "alternative" needing approval

- Support for young parents to stay in school and have access to opportunities available to their peers

- Affordable and accessible pre- and post-natal care including physical, mental, and spiritual support for miscarriages and stillbirths

- Access to mental health support for postpartum depression

- Paid parental leave that aligns with international standards, ensuring equality and better health and economic outcomes

- Breastfeeding support and education as a critical component of food sovereignty and better health outcomes

- Affordable, quality childcare and focus on early childhood education as a critical developmental period

- Family-friendly policies at work and in educational institutions, especially at many rural colleges and community colleges where many of the students are single mothers

Another important topic cited in relation to reproductive justice was "teen pregnancy prevention" and changing approaches to discourse around this topic. Partners at MyPower, Inc. in Hobbs stated teen pregnancy prevention as their top priority. They described teen pregnancy as "something that costs us all as a state. We pay billions of dollars on this. It would bring economic well-being if we can have these girls go to college and not become dependent on the system, and do well for them-selves and become productive members of society without having a child while they're a teenager. It would help our econo-my as a whole, and it would help our state." Their work focuses on young women and advocating for access to sex education and birth control and prevention of unwanted teen pregnancies.

However, not all community partners share this perspective. Partners at Young Women United (YWU) recently published a report titled, "Dismantling Teen Pregnancy Prevention,"[36] to which they referred during the Albuquerque dialogue. They described being funded throughout the 1990s on the premise of working on "teen pregnancy prevention." However, as their

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35 Zimmerman, K., Miao, V. *Fertile Ground: Women Organizing at the Intersection of Environmental Justice and Reproductive Justice.* Oakland, CA. Movement Strategy Center. 2009.
36 Cadena, M., Rivera, R.Z., Esparza, T., & Cadena, D. *Dismantling Teen Pregnancy Prevention.* Albuquerque, New Mexico: Young Women United, 2016.

work by and for young women of color has developed and gained a stronger resource base, they have become more vocal that for many "young parents in New Mexico . . . the frame of teen pregnancy prevention is really shameful and stigmatizing, especially to young women of color."

Often this discourse frames young parents, and particularly young women of color, as the "culprits of losing so much money and the downgrade of our economy" due to the cost burden of young parents on the medical system. Instead, YWU's approach highlights the deeper, long-term structural inequalities in society shaping young women's lives and choices and seeks to prioritize the agency of young people to make meaningful, informed decisions about their own bodies and lives.

These various community voices are vital to informing statewide gender equity and justice work. Many of the key findings from this report reveal the social and structural determinants of health and economic equity, which are often root causes of issues, including those related to young parenting, reproductive health access, and reproductive rights. Given the deep-seated patriarchy and sexism facing young women in communities across New Mexico, it is important to avoid further problematizing and stigmatizing their bodies, and particularly the bodies of young women of color. It is critical to undertake and support work that both: (a) gives young women agency and choice around their reproductive health and (b) acknowledges and addresses the structural inequality, racism and patriarchal conditions that impact and shape young women's lives and choices.

Ending Gender-based Violence

Another key issue related to reproductive justice brought up around the state was gender-based violence. It was often discussed with broader social and structural determinants of health, such as patriarchy and historical trauma, viewed as causal factors. For example, deeply embedded patriarchal attitudes around appropriate behavior for men and women and whether women are perceived as honest and believable often lead to victim-blaming and discrediting survivors of gender-based violence. This is particularly true with law enforcement communities that are male dominated. Indeed, a participant from Las Cruces described, "When [the officers] encounter particular young women, it's like a thousand and one excuses for why a woman got herself into that situation," rather than actually protecting and serving survivors of violence.

Additionally, other communities described historical trauma as a causal factor in relation to gender-based violence. For example, a participant in Gallup described how, "Our ancestors were taken away from home. They were put in boarding schools. They didn't have their role models of parents there. They were just taught however they were treated. They brought [what they learned] home." Traumatic experiences from colonialism and systemic violence against specific communities have then produced further cycles of violence.

Participants also discussed cycles of violence in relation to our society as a whole—meaning, as a society, violence is perpetrated by the military and police and then echoes through our institutions, communities, and families. Indeed, a participant from Silver City explained, "We have really abusive relationships with the different layers of systems that are in our community. When you can't even get away from it at the national level—I think it's pervasive in our society at every level. I think in a lot of ways, women haven't made nearly as much progress as we'd like to think that we have because a lot of the abuse is open and acceptable on some level." The implication is that to truly address gender-based violence at its roots would necessitate also discussing and addressing the other forms of more acceptable, state-sanctioned violence that occur daily.

On a positive note, participants working in this field also described the slow but incremental shifts that have occurred in terms of sexual and gender-based violence prevention work:

> "The anti-violence movement across the country has really started to shift . . . First, we had to shift away from the victim blaming and teaching folks not to get sexually assaulted. Then we hung out for a long time in the 'You have to go and tell the details of your story in order to get access to basic care' [model]. We're still trying to move away from that, and it's really hard." – Santa Fe participant

As mentioned above, another critical issue is access to appropriate mental health services. This is essential for both survivors and their families and is particularly an issue for Spanish-speaking and rural communities. Finally, communities described the burnout that occurs for people working in the field of gender-based violence. Namely, there is secondary trauma and exhaustion from working in this field and a critical need to support individuals and organizations to obtain the space, time, and services to take care of themselves.

Promoting Healthy Bodies and Body Justice

Another subject discussed throughout the dialogues was healthy bodies and the emerging idea of body justice. This concept intersects with many of the topics outlined above and is intended to capture several aspects related to the dialogues. First is that physical well-being and healthy bodies are an issue of justice and not simply personal choice and responsibility. This was brought up particularly in relation to obesity, as the cause and blame for obesity is usually placed solely upon the individual. However, communities described how structural and environmental causes affect obesity and the health of one's body in general. For example, historical trauma, childhood trauma, and various forms of abuse can dramatically impact one's relationship to food and one's own body. Participants across the state often used this framework and language. For example, a participant from Gallup described, "All my life, from the time I was little, I was always on the heavy side. I never really understood why. I just know that I used to like to eat. Now when I really reflect back, it's because I realized when I was little, I was an emotional eater. . . historical trauma was one of the things [that caused it]." Additionally, the presence of and access to healthy and affordable food are also essential. As the above section on food detailed, many communities are located in food deserts or have limited access to healthy and affordable foods. This is particularly true for low income and rural communities, as well as communities of color.

Similarly, a participant from Española described how time, access, and ability to exercise are also linked fundamentally to environment and socioeconomic status. For example, in relation to outdoor exercise, in Santa Fe there are many more bike trails and sidewalks that make the city walkable and bikeable than, for example, in Española. Additionally, the presence of superfund sites within one's town can make it more challenging to be physically active outdoors. There are also issues of safety regarding in which neighborhoods or towns it is safe to exercise outdoors. Similarly, there are cultural norms and stigmas around outdoor exercise. In one location, an individual walking down the sidewalk may be perceived as exercising, while in another location, the person may be perceived as a sex worker.

Another subject raised regarding body justice was gender norms on acceptable bodies. A participant from the transgender community asked, "Who has the power to determine and tell us about our bodies, what is acceptable, and who has the power to determine masculinity and femininity? For those of us who embrace that binary, and for those of us who don't." The participant also described issues of transphobia that impact one's safety and access to public space.

DEFINING ACCEPTABLE BODIES

"There are things that keep me up at night. Healthcare first: having . . . access for me, access for my son. He's seven. Also affordability. I'm a single parent. Having a secure job for the first time in many, many, many years has made a huge difference in my life. I just worry about income and my ability to provide for my son. For me personally, access to hormone replacement therapy is very important. Then also, who decides what I can decide about my body? Who is making those choices that even give me the ability to make those choices about my own body? And also, what's an acceptable body? Transphobia is a big [issue] that keeps me up at night. My community experiences a lot of violence. There are a lot of people working very hard to keep trans people from moving throughout the world, just from accessing public space."

Improving Education

A key topic brought up in relation to education was the gendered roles and approach to education. We heard from participants in Hobbs and Silver City that the oil and mining industries govern their local economies and often shape choices around education—meaning, for many young people, there is a sense "They don't need an education because they're going to go to the mines." Further, the gendered frame around these industries was described as such: men go to work, and women marry the men. These communities expressed a need to provide career opportunities besides the oil and mining industries and have young women pursue educational opportunities beyond extractive industries. Parallel to this, communities across the state brought up the need for more STEM and trade-based education and career opportunities for young women in nontraditional fields.

Participants described both the transformative power of education and learning, as well as the very real obstacles educators face in the school system and in relation to curricula. A participant from an Albuquerque-based organization engaging Latino immigrant families in educational opportunities that build skills for economic and social justice commented:

> "One of the privileges we have in terms of doing education is creating that group environment over a long period of time where you can shift the classroom into a space of dialogue . . . where people who are very accustomed to being invisible in so many different ways suddenly have this experience of self-discovery and finding voice."

However, in relation to more formal public school settings, participants in Silver City described how principals and teachers in their school district are constantly moved from school to school after each academic year, creating an insecure and inconsistent climate for both students and teachers. Similarly, participants discussed the challenges of continual standardized testing, creating a context in which "Teachers don't even have power over what they're teaching in the classrooms." Instead, they described an approach to education that restricted offering alternative viewpoints or teaching children how to think critically. Indeed, "It's impacting not only the way people teach, but the way students actually see education. A lot of them are not seeing it as an opportunity to grow and think about things, but get me from Point A to Point B as fast as possible, which is problematic to creating consciousness." Participants emphasized education as the starting point for how one frames and interacts with the world, and a lack of critical thinking and other key skills does not bode well for educational outcomes later.

In relation to how one's broader community impacts education, an educator in Española described how one of her students was given a trespassing citation because she is homeless and living in her car, which was parked illegally. Another example given was that, in spite of the fact that student bodies in many rural colleges and community colleges are comprised of mostly women, many of them single parents, campuses are often unfriendly to children and ill equipped to support women and the needs of their families. The reality of educating means interfacing and assisting with the lived experiences of one's community and the students in it:

> "I've taught with a baby on my hip . . . A white man at Yale teaches with a baby on his hip. It's like, 'Oh, my God, he's a miracle,' but that's just teaching. Right? If you teach adults and women, that really is about creating a community that is multigenerational, even in our daily work." – Española participant

Members of the Brave Girls Program

ROLE OF FUNDERS IN SUPPORTING COMMUNITIES

A major goal of this research and report was to identify the most impactful role philanthropic partners can play to best support the work of nonprofit organizations across the state. During the dialogues, participants were asked for input on the potential roles of funding partners and for their insights into the funding world. The following question was posed: "How can NewMexicoWomen.Org and other funders and philanthropic foundations better support your work?" This section outlines the responses to that question and is meant to serve as a general guide for foundations, funders, donors, and other stakeholders working to support efforts towards social change in New Mexico.

CRITIQUING CAPITALISM: THE ROOTS OF PHILANTHROPY

Section Summary: *Participants pointed out that the economic mechanisms allowing for the accumulation of excess wealth that can lead to the creation of philanthropic foundations are also usually the very same mechanisms contributing to the impoverishment and marginalization of communities. Participants discussed how perpetuating this economic model is really a form of using band-aids instead of addressing the root causes of inequality.*

An important subject discussed was a critique of capitalism in relation to the roots of philanthropy—namely, much of the money forming the budgets and endowments of large philanthropic foundations was made using mechanisms that also have caused many of the problems their giving is intended to fix. As such, the economic mechanisms allowing for the accumulation of excess wealth that can lead to the creation of philanthropic foundations are also usually the very same mechanisms contributing to the impoverishment and marginalization of communities. For example, some companies and their philanthropic foundations that have made money through technology may also have benefited from cheap, unregulated labor and production markets in other countries. Similarly, companies and their philanthropic foundations that made their fortunes in energy or infrastructure in the United States in the 19th and early 20th centuries very likely benefited from old, lax labor laws and environmental laws that allowed for excessive accumulation of wealth, often to the detriment of certain communities.[37] The effects of this uneven development and wealth accumulation are still seen today. Participants across the state were deeply aware of these dynamics of capitalist development and called them to the fore. Indeed, one participant described how, "It forces you to think where the monies for philanthropic work like this come from. Capitalism, right? That's always part of the animal chasing its own tail. All we're really doing is putting band-aids that keep the system going."

STAKEHOLDERS

Section Summary: *Foundations should be led, advised, and staffed by individuals from impacted communities and support communities most impacted by historical and structural inequities, including women and girls of color and those in low income and rural communities.*

Invest in Community Leadership

The first point communities made in relation to funders and foundations is they should be led, advised, and staffed by individuals from impacted communities. In relation to funders in New Mexico, this means consciously investing in leadership from low income and rural communities, as well as communities of color, especially women of color. Similarly, the staff, leadership, and boards of organizations funded should reflect the communities served. Indeed, participants across the state echoed the idea that, "If you want to really change the system and what's going on, make sure that those who are leading the entities that you fund reflect the population mixture."

Support Communities Most Impacted

Further, similar to the above sections on impacted communities, participants stated the need to fund those most impacted by historical and present day inequalities. This included low income communities, communities of color from around the state, rural communities, immigrants and single mothers. Finally, communities highlighted the need for intergenerational approaches to include young women, elders, and women of various ages in between. Supporting these communities and groups is critical as there are historical and present day structural underinvestments to remedy. Indeed, a Gallup a participant in the dialogue described the systemic lack of investment as follows:

> "I just read recently that 3/10ths of one percent of all philanthropic giving goes to Native Americans. Then combine that with six percent to rural communities and seven percent to women and girls. I mean, it's interesting: 'Here's a dime.' Then you start splitting that up again too. 'Take this dime. Don't spend it all in one place.' Not much there."

Similar to the above point, participants from communities across the state encouraged funders to support community organizing and civic engagement. As mentioned earlier in the report, community organizing fundamentally believes communities should build their own power and make their own decisions about how best to solve problems impacting their own communities.

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37 Retrieved 9 October 2016 from https://www.opendemocracy.net/transformation/jennifer-buffett-and-peter-buffett/can-philanthropy-support-transformation-of-society and https://www.opendemocracy.net/transformation/fatima-van-hattum-arianne-shaffer/transforming-philanthropy-it%E2%80%99s-time-to-get-serious.

COMMUNITY-INFORMED GRANT MAKING PRACTICES

Section Summary: *Best practices described by communities for philanthropic foundations included: Funding general operations and funding with a gender lens, making multi-year investments, simplifying the application process, recognizing community members as experts, and acknowledging culturally appropriate evaluation tools.*

Fund Operations and Fund with a Gender Lens

In relation to grant making, there was extensive feedback stating the need for longer-term, general operations funding. Participants described how, "All program direct [funding] . . . just destroys you. Operational funding is critical. We're asking people to do really, really quality work, hard work, necessary work, for nothing or almost nothing." Participants described being "underwater" and needing operational funding to support development of their infrastructure and overall administrative capacity.

Another critical point in regard to funding general operations was related to childcare and parental leave. There is a crucial need to support women and their families, both in terms of grant making and operational funding. Namely, truly working towards social and gender justice includes addressing and supporting the cost of childcare and parental leave in the workplace. To acknowledge women's and men's multiple identifies and roles as parents is a crucial component of supporting those working in this field.

Make Multi-Year Investments

Similarly, the need for long-term funding for organizations was brought up repeatedly around the state. Communities described the depth and breadth of their work, communities' needs, and the long-term commitment needed for social change, all of these in the face of annual grant cycles. A lack of consistent, long-term funding was described as deeply challenging in organizations' attempts to implement effective, long-term programs. This was also mentioned in relation to facilitating deeper healing from trauma and the time needed for such healing. Longer-term funding would "go a long way towards addressing healing because if you don't even have a year's worth of funding, you're like, 'Oh, my God. I've got to get all this stuff done really quickly.'"

Additionally, participants explained the time needed to build relationships and trust before you ever see impact. There was also feedback that, while funders would like organizations to better collaborate, they are rarely willing to fund the time and space to help build relationships and trust between organizations. Instead, the reality is multiple organizations vie for pieces of the small and often dwindling funding "pie." Finally, some participants even described how short-term funding can leave communities even worse off than before, as they have to let employees go and may lose trust from their community in terms of their reliability and consistency. Indeed, a Silver City participant stated the following:

> *"If we're going to have streams of money from philanthropy, make [the streams] consistent so the programs don't go away, leav[ing] people even worse off. I think that that's the problem. You get a little bit of help, and you think, okay, good. I can just move a little bit here or whatever. Don't take the money away. Make it a ten-year thing we're investing in this community."*

Additionally, communities described how longer-term funding could not only help communities create change and funders better achieve their missions, but it could also help measure and track social change. For example, participants suggested funding for periods of 10 years in order for programs to be highly effective.

Simplify the Application Processes

Another topic referred to was the language surrounding foundations and grant cycles. Not only are Request for Proposals often filled with specialized vocabulary, making them difficult to read and understand, but communities and nonprofits are also expected to write grants using vocabulary often out of synch with their daily experiences. For example, a participant in Albuquerque working statewide with pueblo and tribal communities described the following:

"We did a trauma-informed care training, which is a fancy word for what our communities have been doing for hundreds of years. We had to say that, because the grant said we had to put the 'trauma-informed' in there. You talk about our elders having all of this knowledge . . . and we come in and we're like, 'Okay, that's trauma-informed care.' [The jargon] shuts them down."

Recognize Community Members as Experts

In relation to the challenges of application processes for funding, participants communicated the need for flexibility in how they describe and frame their work, as communities may be using different vocabulary to describe the same work. However, beyond that, communities across the state explained they are the experts on the issues impacting their communities and most knowledgeable regarding the best solutions. Namely, funders should not predetermine what work is important, nor the solutions for that matter. Instead, funders should acknowledge and be advised by leaders from the community who have expertise.

Acknowledge Culturally Appropriate Evaluation Tools

Regarding evaluation, participants asked that funders not "obsess" about the number of individuals served or number of "successes" as evaluative measures. Instead, they suggested funders ask groups how they determine their own success and also recognize cultural knowledge as a valuable evaluative element and tool. Particularly in smaller rural communities, the reliance on numbers or people served as evaluative measures are deeply reductive and limiting, as these communities will never serve large numbers of individuals, simply due to their size and location. Additionally, participants described how a funder's focus on increasing the number of individuals served and amount of work done is often antithetical to the

Healers from Kalpulli Izkalli

mission and quality of their work. A participant from Santa Fe illustrated the challenge:

"There are certain grants that we've gotten every year for years, and they expect us to increase the amount of work we're doing every year. Yet there's no increase in staff. There's no more time, and it's antithetical to the work that we're doing. This whole question of having to prove yourself constantly in terms of numbers really dilutes the efficiency of the work we're doing. It becomes this really huge stress on us as an organization."

A final observation related to evaluation concerned data: the fact that many communities do not have the resources necessary to collect and analyze data that helps demonstrate the impact of their work and potentially increase their access to more funding sources. Participants described the need for increased capacity in this area. They also suggested the potential role of funders and foundations as stewards or partners in collecting data and doing research.

INVEST IN THE HEALTH AND WELLNESS OF ORGANIZERS AND SERVICE PROVIDERS

Section Summary: Participants described the need to invest in convening spaces for various groups and organizations to gather. They also emphasized the need to support the health and wellness of organizers, service providers and individuals working in nonprofits—via supporting retreats, providing for self-care, and offering fellowships and sabbaticals.

Movement Building Convenings

Participants often stated the need for spaces to share stories and ideas, as well as to reflect and build relationships. Participants described the benefits of gathering and connecting with partners

Weavers from Tres Manos Weaving of New Mexico

doing similar work in other parts of the state, or even in their own community. They explained organizations are often unsure of what others are doing or why; further, they explained it is deeply helpful and informative to gather and learn from one another. Additionally, as a participant in Santa Fe described; in order to achieve deeper, structural transformation; there is a need to gather and build community power "across geographies, cultures, and issue areas." Similarly, a participant in Albuquerque expressed:

> *"Some of the longest lasting relationships I've had with groups around the state . . . were because of the New Mexico Community Foundation's previous women's initiative. It's been the only real opportunity I've had to meet other groups that were doing work with women. That ability to bring groups together across the state . . . what about doing it collectively so that we can build that state power or relationships?"*

Retreats

Also in relation to convenings, communities expressed a need for retreat and rejuvenation, as well as reflection space outside of the day-to-day pressures of the office environment. Many groups voiced the desire for funders to invest in the well-being of those working on the "frontlines" of a community's struggles, by providing funds for convenings and gatherings. The need specifically for women and women of color retreats was proposed throughout the state. Participants explained this approach was not something traditional philanthropy funded. "I don't feel like there's enough investment from funders or others in the ability to create reflective spaces for us to be able to [engage in reflection.] It's like they always want you to go on and be more innovative, innovative." Other suggestions related to retreat spaces included the need for leadership development designed for women and women of color and fostering leadership practices that value feminine ways of leading and being.

Self-Care

In a similar vein, communities across the state voiced a need for self-care practices and rejuvenation for individuals and organizations working for social change. Participants described the often exhausting and grueling nature of their work, particularly as these individuals working to create social change are often also from the communities most impacted. There is a need to foster and build momentum for long-term self-care. Participants emphasized, "We need the resources to nourish ourselves from within, instead of the nonprofit world just being like a contest of who can go hardest before you fall flat."

This form of professional support and development is also critical to creating longer-term change and sustainable organizations. For example, a participant in Española explained, "I feel torn, as we know that people are living with this critical need, and we're talking about bolstering the helpers. But if our helpers are burning out every three years, at a max sometimes, then we're not building a system that actually can help people." Beyond burnout, participants recounted a general state of fatigue and asked, "How do we take care of ourselves? How do we make sure that we have, not just the work, but also the life that we want?"

Fellowships and Sabbaticals

In addition, communities across the state mentioned the need for women's fellowships and sabbaticals to create space for more inspired, creative, and reflective thinking and activities. This was advocated as a way to support women's leadership and creative ideas in their communities beyond the confines of their nonprofit activities. A participant stated, "It's very rare that individuals get that kind of leadership investment that's not bound to grant proposals specifically."
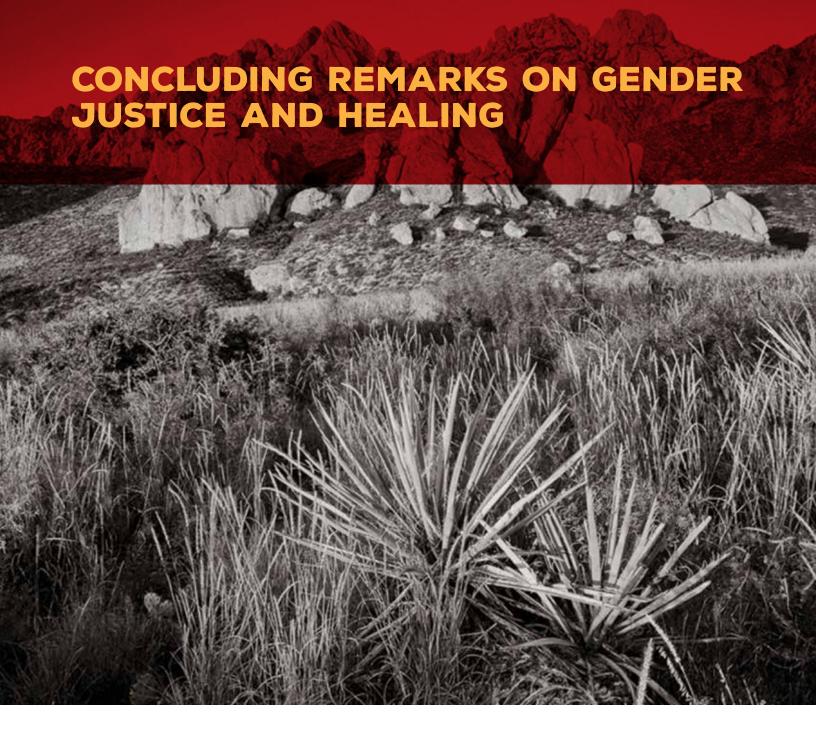
DONOR AND FUNDER PEER EDUCATION

Section Summary: *Philanthropic foundations should bring a gender and social justice lens to funding and policymaking. Communities described the need to educate funders and policymakers on the social determinants of health and economic equity, as they are not always aware of the intersectional, layered, and nuanced histories and realities shaping community experiences and efforts.*

Bring a Social Justice Lens to the Funding Community

Participants in many communities stated the need for funders with a social justice and anti-oppression lens to leverage their access to other foundations, funders, and donors in order to influence the conversation around social justice issues and encourage investment in social and gender justice work. Communities described the need to educate funders on the social and structural determinants of health and economic equity, as funders and donors are not always aware of the intersectional, layered, and nuanced histories and realities shaping community experiences and efforts. This included suggestions that funders, foundations, and their boards engage in anti-oppression and implicit bias training.

Educate Peers Around Best Practices

Further, communities requested funders educate each other and donors in order to fund organizations' general operations, as well as adopt the funding best practices mentioned above. Across the state, there is a deep need of funding for overhead and administrative needs. Similarly, communities implored funders to stop asking for innovation at every turn. Organizations need funds and time to build quality programming based upon community needs, with slow, nuanced adjustments, rather than innovations every year and in every funding cycle.

CONCLUDING REMARKS ON GENDER JUSTICE AND HEALING

As mentioned previously, this report is intended to serve as a compilation of community voices and perspectives from across New Mexico and highlight the lived experiences of communities. It seeks to begin to address a lack of research on gender, health, and economic equity in the state. It is hoped these findings will serve as an educational and informative tool for community partners, policymakers, donors, funders, and beyond. Ultimately, the report's objective is to provide a corpus of community expertise and experience that can be used to advance meaningful change in the lives of women and girls across New Mexico.

NEWMEXICOWOMEN.ORG PRIORITIES

Through the course of engaging communities across the state in this research, the critical role of social and structural determinants on women's health and economic equity was emphasized again and again. These underlying determinants, such as historical trauma and colonization, patriarchy, and structural racism, have an enormous effect upon women's and communities' well-being in general. To achieve gender equity, it is critical to address these root causes and both disrupt and rebuild gendered societal narratives and structures. Based upon these findings, NewMexicoWomen.Org has chosen to prioritize our work and focus on Gender Justice and Healing for the near future.

Gender Justice

NewMexicoWomen.Org defines gender justice as a commitment and movement to end patriarchy and create a world free from misogyny.[38] Our gender justice approach is rooted in intersectional feminism, recognizing that oppression is tied to classism, racism, ableism, and other "isms." Real gender justice can only be achieved when all forms of oppression cease to exist. NMW.O chooses to focus on gender justice because it encompasses the many elements of social, economic, and environmental justice mentioned above, while using a gender lens. Further, the focus on gender justice acknowledges men and gender-nonconforming individuals also suffer or are constrained by patriarchal gender roles and norms. This gender justice approach aligns with the findings of this report revealing the myriad of intersections influencing women's lived experiences. It acknowledges that for some communities, gender justice may be closely tied to environmental justice and health issues linked to pollution or contamination. For other communities, it may refer specifically to lack of access to abortion care. Still for others, it may refer to historical and intergenerational traumas as causal factors of gender-based violence. Ultimately, this intersectional gender justice approach allows communities themselves to define and determine what gender justice means in their specific contexts, while retaining the underlying commitment to a gender focus.

Healing

NewMexicoWomen.Org defines healing as the process of restoring health from an unbalanced or unhealthy state. NMW.O chooses to focus on healing, as it represents both a powerful restorative process and outcome unto itself. Healing is a word and process used by communities across the state to describe that in which they were engaged and of which they were in need. The concept of healing is also important in relation to our efforts to name and act from the feminine in our work, building explicitly nonpatriarchal practices and structures. Finally, both gender justice and healing are also generative and refer to what NMW.O wants to build, rather than what we oppose.

This decision to focus upon Gender Justice and Healing is rooted in the experiences and stories we heard from communities across the state. Over the coming three years, Gender Justice and Healing will be the priorities in NewMexicoWomen.Org's grant making, capacity building, and advocacy and education programming.

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38 Building upon the definition used by the Third Wave Fund. Retrieved 15 October 2016 from http://thirdwavefund.org/what-is-gender-justice.html.

APPENDIX 1 *List of Participating Organizations*

ALBUQUERQUE DIALOGUE

- New Mexico Asian Family Center
- Coalition to Stop Violence Against Native Women
- Encuentro
- Families United for Education
- Kalpulli Izkalli
- New Mexico Heath Equity Partnership
- OLÉ Education Fund
- SouthWest Organizing Project
- Southwest Women's Law Center
- Young Women United

ESPAÑOLA DIALOGUE

- Breath of My Heart Birthing Center
- IMPACT Personal Safety
- LANL First Born Home Visiting Program
- Northern New Mexico College Office of Equity and Diversity
- Santa Fe Mountain Center
- Solace Crisis Treatment Center
- Tewa Women United

LAS CRUCES DIALOGUE

- Colonias Development Council
- Cultivando Comunidades
- Doña Ana Place Matters
- La Piñon Sexual Assault Recovery Services
- La Semilla Food Center
- NM Comunidades en Accion y de Fe
- NMSU and the SUN Project
- Ngage
- Tres Manos Weaving New Mexico

SILVER CITY DIALOGUE

- Grant County Community Foundation
- Healthy Kids Healthy Communities
- SPIRIT of Hidalgo
- The Volunteer Center of Grant County
- WNMU Center for Gender Equity

GALLUP DIALOGUE

- McKinley County DWI Program
- National Indian Youth Leadership Project
- Navajo Nation Breastfeeding Coalition
- NM Equity and Social Justice Institute
- Zuni Pueblo Schools

IMMIGRATION FOCUSED DIALOGUE

- Mujeres de Adelante
- Santa Fe Dreamers Project
- Somos un Pueblo Unido

GIRLS FOCUSED DIALOGUE

- Brave Girls at the Leadership Institute at Santa Fe Indian School
- Girls Inc. of Santa Fe
- MyPower, Inc. of Hobbs

APPENDIX 2 *Glossary of Terms*

Health equity: NMW.O understands health equity to mean a context wherein every person is able to realize her health-iest self. Health equity is premised around the idea that determinants such as race, income, gender, geographic location, housing conditions, social networks, sexual orientation and other factors shape health. The various inequalities associated with each determinant result in corollary health outcomes. A commitment to health equity necessitates addressing broader social determinants and conditions impacting health, rather than simply health outcomes alone.

Historical trauma and intergenerational trauma: "Sotero (2006) provided a conceptual framework of histor-ical trauma that includes three successive phases. The first phase entails the dominant culture perpetrating mass traumas on a population, resulting in cultural, familial, societal and economic devastation for the population. The second phase occurs when the original generation of the population responds to the trauma showing biological, societal and psychological symptoms. The final phase is when the initial responses to trauma are conveyed to successive generations through environ-mental and psychological factors, and prejudice and discrimination. Based on the theory, Native Americans were subjected to traumas that are defined in specific historical losses of population, land, family and culture. These traumas resulted in historical loss symptoms related to social-environmental and psychological functioning that continue today (Whitbeck, Adams, Hoyt, & Chen, 2004)."[39]

Intersectionality: "A way of understanding and analyzing the complexity in the world, in people, and in human expe-riences. The events and conditions of social and political life and the self can seldom be understood as shaped by one factor. They are generally shaped by many factors in diverse and mutually influencing ways. When it comes to social inequality, people's lives and the organization of power in a given society are better understood as being shaped not by a single axis of social division, be it race or gender or class, but by many axes that work together and influence each other. Intersectionality as an analytic tool gives people better access to complexity of the world and of themselves."[40]

Bowleg defines intersectionality as follows: "Intersectionality is a theoretical framework that posits that multiple social categories (e.g., race, ethnicity, gender, sexual orientation, socioeconomic status) intersect at the micro level of individual experience to reflect multiple interlocking systems of privilege and oppression at the macro, socialstructural level (e.g., racism, sexism, heterosexism)."[41]

Patriarchy: "Patriarchy is the term used to describe the society in which we live today, characterised by current and his-toric unequal power relations between women and men whereby women are systematically disadvantaged and oppressed. This takes place across almost every sphere of life but is particularly noticeable in women's under-representation in key state institutions, in decision-making positions and in employment and industry. Male violence against women is also a key feature of patriarchy. Women in minority groups face multiple oppressions in this society, as race, class and sexuality intersect with sexism for example."[42]

39 Brown-Rice, K. Examining the Theory of Historical Trauma Among Native Americans. *The Professional Counselor.* 2013, Volume 3, Issue 3, Page 120. Retrieved 10 November 2016 from http://tpcjournal.nbcc.org/wp-content/uploads/2014/10/Pages-117-130.pdf.
40 Hill Collins, P. & Blige, S. Intersectionality. Polity Press, 2016, Page 2.
41 Bowleg, L. American Journal of Public Health. 2012 July; 102(7): Page 1267.
42 Retrieved 10 October 2016 from http://londonfeministnetwork.org.uk/home/patriarchy.

APPENDIX 3 *Format of Community Dialogues*

Meeting Introduction and Logistics

- Welcome and thank you. Brief background on NMW.O and our programmatic focus on gender, health equity and economic security. Key objectives of this focus group are to inform our priorities, roles and focus areas as we deepen our work. We will continue to do grant making, research and capacity building, and this will help inform how we do those.

- Note of recognition on power/privilege of "philanthropic organizations/fund raisers" and intent of NMW.O to shift that dynamic by listening and moving community input to action.

- Group introductions — name, preferred gender pronoun and organization.

- Review and walk through consent forms — allow time for folks to read and ask questions. Gather signed forms. Participants in the dialogue have the option to skip answering questions or leave the room if uncomfortable. Collect signed forms — make sure they each also have a copy. Administer demographic forms; allow participants to fill out and ask questions. Collect forms.

- Shared agreements or ground rules for the group — safe space, inclusive, take space/make space.

Exercise One

- Feel our feet on the ground, bodies on the chair and breathe from our belly.

- Read the poem to create a space of intersectionality.

- Introductory exercise around intersectionality and lived experiences.

  - When we talk about the intersection of health and economic equity, we understand that many things inform and shape our own health and economic security in the world as well as that of our family and community. This is one image of the potential intersections (present visual in Figure 1). We know there are also many positive strengths that shape our lived experience — add them to the visual.

  - Refer to own experience and own drawing example.

  - In what ways do you describe the many intersections of your life and experience? What influences your health and economic opportunities and reality? What influences you personally, your family, your community, at work, school, on the street, in the political climate? On the blank diagram, describe your own experience in the world for the next 5 – 8 minutes. You can use the markers and color pencils. You can talk about both the challenges and strengths — oppressions and resistances. You can start from a personal perspective on who are you and how do you describe yourself and move outwards to what surrounds/influences you in the world.

  - TURN ON RECORDER. Does anyone want to share a couple of things about their diagram?

General Interview Questions

Now that our juices are flowing and we're thinking about these ideas around our intersectional gender experiences, we're going to move onto our discussion. We'll start with some questions and whoever feels moved to answer them, feel free to do so. These questions are really in relation to your work and the folks who you serve through your work. However, feel free to bring in your lived experiences coming from this community.

Wrap Up and Thank You

- Assigned storyteller collectively reflects on the stories they have heard.

- NMW.O collects visual drawings, demographic and consent forms if not completed.

- NMW.O shares next steps with participants.

- Group photo

- NMW.O thanks everyone for their time and gives out gift cards.

APPENDIX 4 *List of Dialogue Questions*

Impact

1. Do these larger issues such as patriarchy, racism and historical trauma affect you and your community's daily health and economic situation? In what ways?

   a. If there was one thing you could invest more in for the health and economic security of your community, what would that be?

Landscape, Issues and Intersections

1. On the back of your paper, describe, draw, or let's discuss three key things that make your community healthy and economically secure (or could make your community healthier and more economically secure).

   a. How do women survive or sustain economically in your community?

   b. Where do women and girls get their physical, emotional, oral and mental health needs met?

   c. What are the examples of what is working? What are the best solutions?

   d. Where are the gaps in addressing these larger issues?

   e. How does healing play into your work?

Our Role and Role of Funders

1. How can we and other funders and philanthropic foundations better support your work (in the context of our possible roles of grant making, convening, capacity building and conducting research)?

Final Questions

1. Do you have any questions for us?

2. Is there something we missed specific to your community?

3. If you think of something you would like to share later, please call or email us.

APPENDIX 5 *Notes on Language & Terminology*

Throughout the dialogues, participants were invited to comment on the language used in the Layers of Intersectionality Diagram (Figure 1) and whether and how they used such language in their respective communities and work. Some participants explained they do not use this language in their work, as many members of their community have not had access to this language. Without full knowledge of the terms, such language can be intimidating and even exclusive. Additionally, in educational and academic contexts, these terms can become oppressive tools to use against others as intellectual ammunition. As a participant in the Albuquerque dialogue stated:

"When we organize with people that are most impacted by some of the issues, sometimes that also means that people haven't had access to this language before. When people come to us, it's issue-based: this is what I'm living every day. We don't try to interpret that for them. We just try to bring people together to identify the issue. Then together we build a strategy. Later, there might be a conversation that we have specifically about racism as it relates to the issue area. That's how we are able to talk about some of these broader systems."

Others described a more liberation-based relationship and experience with these terms, as the language helped name and contextualize how structural inequalities were related to individual experiences and could be used to explicitly interrupt dominant and implicit discourses of gender or race. One participant described learning about some of these terms and thinking, "There's a word for that?" A participant in the Albuquerque dialogue stated how acknowledging structural factors is critical for individuals experiencing the ongoing effects:

"I think it's important for us to be able to go from the individual to the outer, even if we don't have the language, because the reality is there. As Native communities or our youthful communities, we may not have the language, but the structuralisms are already there. The structural oppression already exists, and it's existed before we were even born. For us to be able to describe it—when we're experiencing the trauma directly, we just feel the individual, and the system tells us it's an individual issue (as opposed to really seeing that it's not just my family is here because my family made poor choices.) My family's here because a whole system was developed to put my family here. Us being able to, in our presentations, in our trainings for others, to affirm those definitions and words and to show, or for people to have the lightbulbs go off, like, 'Wow, this is more than just I don't feel like getting out of bed today, I feel like hurting myself, or I feel these different things.' It's about bigger systems, systems at play and that have hurt and harmed our families, but there's also really beautiful strength there, too."

It is important also to acknowledge the emotional impact of language. Seemingly benign terminology is actually powerful and often elicits emotional responses related to our personal stories and experiences in family and community. For example, one participant in Santa Fe commented how, "I didn't know these words growing up, but I knew how it played out seeing my dad, who was a migrant worker. He didn't really talk about his experience in a sense of these words. But there is also the kind of shame and guilt that comes with acknowledging experiences of discrimination and mistreatment."

As mentioned, NMW.O uses the framework and language of social determinants, as we understand the term "social determinants" as the root causes of the health and economic equity issues we are seeking to address. This is particularly important as we seek to move beyond a deficit approach and locate and understand the root causes of issues like gender-based violence and substance abuse beyond strictly a framework of individual choice. However, we acknowledge that communities may or may not use these terms and have different experiences with them. Ultimately, this engagement process was intended to give communities the space to name issues for themselves and describe such issues with the terms they best preferred.

NEW MEXICO WOMEN.ORG

Advancing Opportunities for Women and Girls.

A program of New Mexico Community Foundation

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