# Chaves County Community Health Profile

## Introduction

This profile describes the current health status of the county. With this information, the community can complete an assessment and begin to address specific issues and set goals for health improvement.

The data in this report is drawn from standard sources most of which are available from the NM Indicator Based Information System (IBIS) for Public Health operated by the New Mexico Department of Health. Data from the US Census, state birth and death files, Youth Risk and Resiliency Survey, as well as official population estimates are available on this site.

This report provides selected indicators for each county and comparison to the state as a whole. Here we provide only basic indicators. When a county chooses to address an issue or problem, residents and health councils can work with the regional DOH epidemiologists and health promotion team to gather additional data. For example, if a county decides to take on deaths due to motor vehicle crashes, they will want to find out more about the location of crashes, types of vehicles, and involvement of alcohol.

**Trends:** For many of the indicators, trends are presented. The DOH has been using the Results Based Accountability and Turning the Curve methods for planning and priority setting which are based on trends.

**Small Numbers**: The population density of many New Mexico counties is quite low. This means that in a single year the number of deaths is small and often quite variable from year to year. The trends in this report (except for counties with large populations) are shown as averages of three years: 2001-2003, 2004-2006, 2007-2009, 2010-2012. Even then, sparsely populated counties will not have enough births or deaths to report or see a trend. For example, Hidalgo county reported only one infant death from 2006-12. Even when events are more common, there may not be enough to break rates down by age, sex, or race/ethnicity.

**Rates:** Most data included here are shown as rates and/or counts. A count is simply how many events occurred in a given time. A rate is the number of events in the time period divided by the population at risk for the event multiplied by a number like 100, 1000, or 100,000. Rates can be when the multiplier is 100, we have a percentage. For example, a measure of poverty might be the number of households in a county whose income is below the federal poverty line divided by then total number of households multiplied by 100 (392 households in poverty/1824 households = 392/1824 \* 100 = 21.5%).

Rare events, such as deaths for a particular (rare) cause, require multiplying by a larger number to get a whole number. If there were 9 cases of cancer in a population of 4834, 9/4834=.0018622. But when we multiply that by 100,000 we get 186.2 per 100,000 people, an easier number to imagine. Death rates are conventionally reported per 100,000 people in the population, but you will see that Female Breast Cancer is reported per 100,000 women. Births are more common, so they are reported per 1000 people; a fertility rate is even more specific the number of live births per 1000 women of child bearing ages.

Finally, when we compare county death rates, there is an additional issue. The population of a county with a younger population will have a different set of causes of death than an older population. We expect there to be more heart attacks and falls in a county with a large proportion of the population over 60 and more bicycle crashes where the population is under 20. In order to make the counties comparable, we calculate the rates as if they occurred in a standard population. You do not have to know how this is done, just that when you see "Age Adjusted Rates" it means that the rate has been calculated to allow valid comparison across different populations. One more detail: if we compare specific age groups in different counties, no adjustment is required because we are looking at the same age-defined segment of the population in each county.

#### Purpose of this Profile

This profile is provided to assist county councils and other organizations as well as citizens and policy makers to assess the health of their county population. This information is presented as simply as possible so that people who are not health professionals can see a difference between their community and the state as a whole and begin the process of planning for better health.

## Organization of this report

Basic demographic and economic information is provided in *Quick Facts*. Population by age and sex is shown as a table and population pyramid graphic. The NM Dept. of Health commissioned an analysis of the undercount of Hispanics and minorities by UNM Bureau of Business and Economic Research (BBER). The result was a new set of population estimates that have been integrated with the IBIS data bases

Health is related in complex ways to education, so we report on graduation rates in *Education* by gender, race/ethnicity and economic disadvantage. Where a county is served by more than one district, graduation rates are given for each district. Graduation data are from the NM Public Education Department web site.

*Risk and Resiliency* are measures that either predispose a population to poor health or protect them and promote good health. These measures come from two surveys: the Behavioral Risk Factor Surveillance Survey (BRFSS) managed by the Department of Health and the Youth Risk and Resiliency carried out in schools and managed by the UNM Prevention Research Center. *Chronic Disease* The leading causes of death from chronic diseases are shown as trends and where population is sufficient by race/ethnicity. Trends for chronic disease are three year averages beginning in 2001 and ending in 2012. In counties with the lowest population, even combining three years, often does not produce stable rates.

*Injury* Deaths due to leading types of injuries, motor vehicle, suicide, falls and all injuries are shown Deaths due to poisoning are shown. The main component of poisoning is drug overdose deaths.

*Births* Total births, births by mother's age and ethnicity are included here. Infant mortality is also shown in this section.

A final section summarizes health resources available in the county.

## Population

The population of Chaves County in 2012 was estimated at 65,784. The population has not changed 2010 census.

The 7.8% of the population is less than 5 years old, 14.3% is over 65 years old.

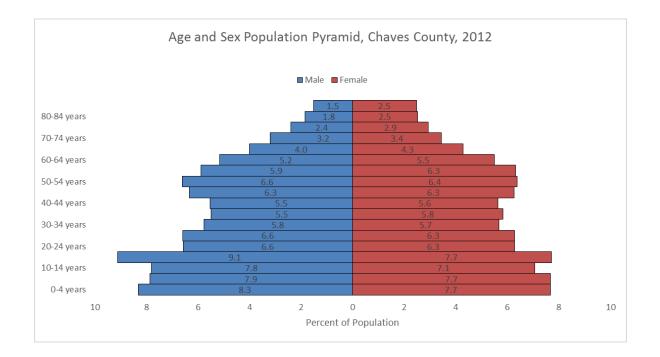
53% percent of the population is of Hispanic origin.

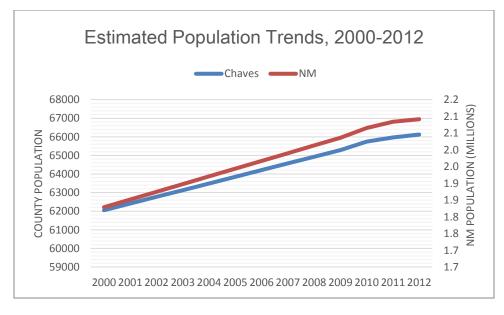
13.5% of the population is foreign-born.

These data are from the Census Quick Facts, http://quickfacts.census.gov/qfd/states/35/35005.html

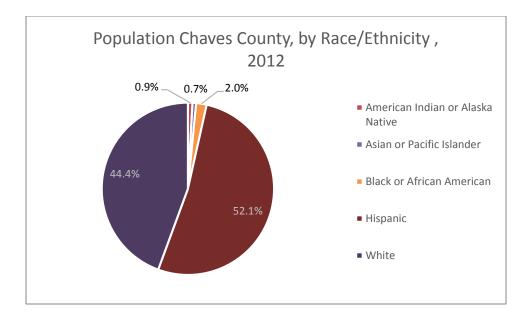
	Male		Female	
Age	Count	Percent	Count	Percent
Total	32691		33429	
0-4 years	2720	8.3	2563	7
5-9 years	2570	7.9	2567	7
10-14 years	2554	7.8	2362	7
15-19 years	2979	9.1	2576	7
20-24 years	2148	6.6	2102	6
25-29 years	2153	6.6	2103	6
30-34 years	1887	5.8	1899	5
35-39 years	1794	5.5	1949	5
40-44 years	1809	5.5	1882	5
45-49 years	2071	6.3	2097	6
50-54 years	2158	6.6	2137	6
55-59 years	1926	5.9	2111	6
60-64 years	1686	5.2	1839	5
65-69 years	1309	4.0	1436	4
70-74 years	1046	3.2	1153	
75-79 years	783	2.4	981	2
80-84 years	604	1.8	846	2
85+ years	492	1.5	828	2

Source https://ibis.health.state.nm.us/query/result/pop/PopMain/Count.html





Source: <a href="https://ibis.health.state.nm.us/query/result/pop/PopMain/Count.html">https://ibis.health.state.nm.us/query/result/pop/PopMain/Count.html</a>



#### Population by Race/Ethnicity, 2012

Race/Ethnicity	Chaves	Percent	NM	Percent
Total Population	66,120	100%	2,091,432	100%
American Indian or Alaska Native	568	0.9%	183,169	8.8%
Asian or Pacific Islander	451	0.7%	31,101	1.5%
Black or African American	1,301	2.0%	4,2825	2.0%
Hispanic	34,447	52.1%	969,417	46.4%
White	29,352	44.4%	864,919	41.4%

Approximately 2,309 people live in group quarters. These include jails, prisons, nursing homes, and dormitories.

#### Single Parent Households

Total Households	23,563	
Single Male Householder	715	3%
Single Female Householder	2150	9%
Grandparents responsible for		
children	1071	

#### Housing

In 2012, there were 26,676 housing units in Chaves County; 11.2% were multi-unit structures; 67% of housing units were owner-occupied. The median value of an owner-occupied home in 2008-12 was \$92,500. There are (an average) of 2.68 persons per household.

#### Households paying excessive (>30% income) in rent/house payments)

Families that pay more than about one third of their income for housing may be limiting expenditures on other budget items such as food or medicine. Those paying excessive rent may also be at risk for losing their home. A high percentage of people paying excessive rent may also indicate lack of affordable housing. Two measures from the Census address this: Selected Monthly Owner Costs as Percentage of Household Income (SMOCAPI) and Gross Rent as a Percentage of Household Income (GRAPI).

In Chaves County, 8.2% of owners with a mortgage paid 30% or more of their income for housing while 47.6% of renters had excessive housing costs.

Source American Community Survey, 2008-12. Table ACS\_12\_5Yr\_DP04

#### Homelessness

According to the 2013 NM Point in Time Survey, In Chaves County there were 53 people experiencing homelessness; and 30 of these were in transitional housing.

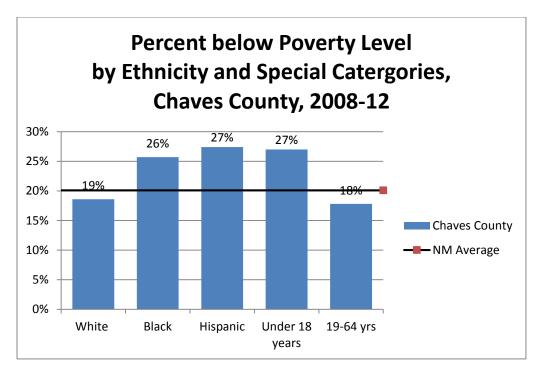
Source NM Coalition to End Homelessness. 2013. Point In Time Count Results. <u>http://nmceh.org/pages/homelessnessReports.html</u>

## Income and Poverty

Average per capita money income (2008-12) was\$19,433 and median household income was \$38,155. According to the Census Bureau in 2012, a fifth, 20.6%, of the population lived below the poverty line. The unemployment rate (2012) was 6.6%. This is the proportion of the work force that is unemployed and looking for work. The Federal Poverty Level varies by family size; for a family of four the rate was \$23,050 in 2012.

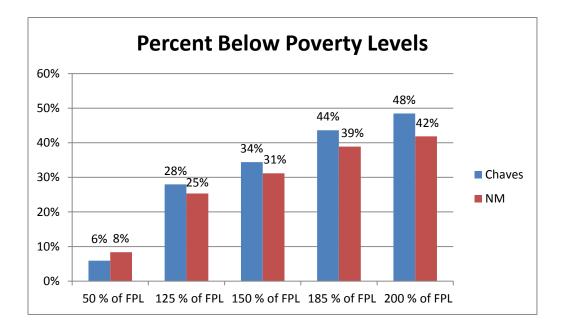
Sources: Income – these data are from the Census Quick

Facts, <u>http://quickfacts.census.gov/qfd/states/35/35005.html</u> Unemployment: <u>http://www.bls</u>.gov/lau/data.htm



Source: 2008-12 American Community Survey, 5 year Estimates table \$1701

See the following site for information on federal poverty level: <a href="http://aspe.hhs.gov/poverty/12poverty.shtml">http://aspe.hhs.gov/poverty/12poverty.shtml</a>



## Education and Language

Education and Language	Chaves	NM
Language other than English spoken at home	37.9%	36.0
High School Graduate or Higher	77.9%	83.4
Bachelor's degree or higher	17.3%	25.6

These data are from the Census Quick Facts,

http://quickfacts.census.gov/qfd/states/35/35005.html

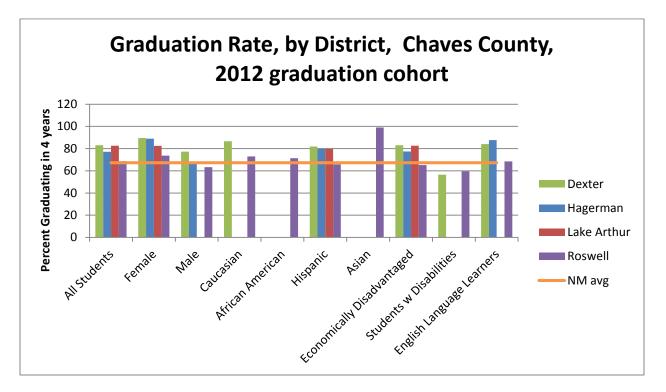
#### Chaves County School Enrollment

SCHOOL ENROLLMENT	Estimate	percent
Population 3 years and over enrolled in		
school	18163	
Nursery school, preschool	1031	5.7%
Kindergarten	973	5.4
Elementary school (grades 1-8)	7832	43.1
High school (grades 9-12)	4016	22.1
College or graduate school	4311	23.7

Source: American Community Survey, 2008-12, Selected Social Indicators, DP02, 5 year estimate

#### Chaves County Educational Attainment

EDUCATIONAL ATTAINMENT		
Population 25 years and over	40,392	100%
Less than 9th grade	4,648	11.5%
9th to 12th grade, no diploma	4,279	10.6%
High school graduate (includes equivalency)	10,933	27.1%
Some college, no degree	10,492	26.0%
Associate's degree	3,054	7.6%
Bachelor's degree	4,516	11.2%
Graduate or professional degree	2,470	6.1%



Four Year Graduation Rate, by District, Chaves County 2013

	Dexter	Hagerman	Lake Arthur	Roswell
All Students	83	77.1	82.6	68.6
Female	89.5	89	82.4	73.6
Male	77.3	66.9		63.3
Caucasian	86.7			72.9
African American				71.3
Hispanic	81.9	79.8	79.8	65.8
Asian				99
Economically Disadvantaged	83	77.4	82.6	65.2
Students w Disabilities	56.5			59.6
English Language Learners	84.1	87.6		68.5

NM Public Education Department http://ped.state.nm.us/Graduation/index.html

## Child Abuse

#### Child Abuse Investigations, July 2012-June 2013

		0 1		
				Child Victim
			Number of	Rate per
	Accepted	%	substantiated child	1000
County	Reports	substantiated	victims	children
Chaves	739	28.6%	315	15.2
NM	18197	25%	7788	13.4

Source: 360 Yearly State Fiscal Year 2013, NM Children Youth and Families Department.

## http://cyfd.org/docs/360ANNUAL FY13 1210.pdf

## **Risk and Resiliency**

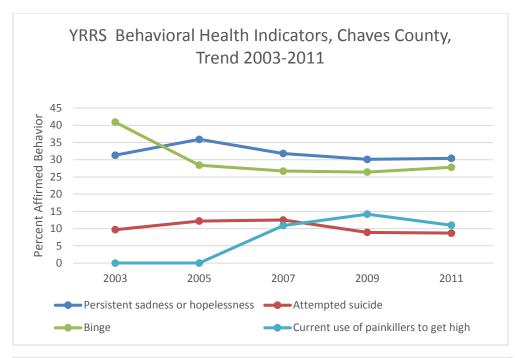
Risk and Resiliency is measured by a two surveys, the Behavior Risk Factor Surveillance Survey conducted by the NM Department of Health and the Youth Risk and Resiliency Survey conducted by school districts. The YRRS measures are self-reported by the student.

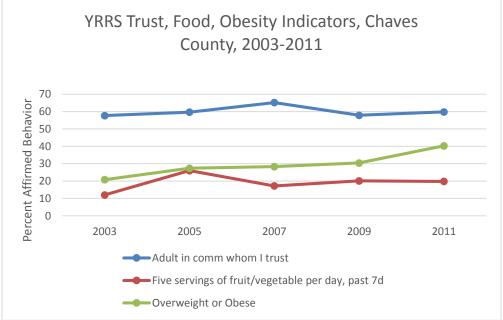
#### **Adolescent Indicators**

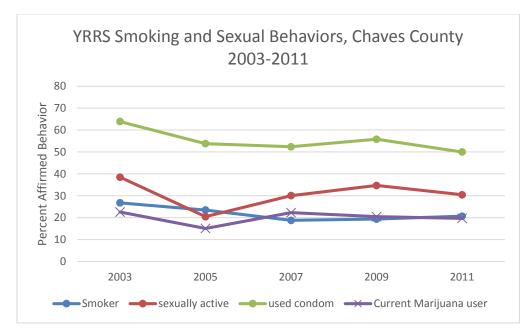
Measure	Chaves	NM
Adolescent Risk and Resiliency Measures		
Ate Five or More Servings of Fruit or Vegetables per Day 2009,2010,2011	19.0%	23.8%
Adolescent Obesity, self-reported BMI above 95th percentile for age and sex	16.8%	16.8%
Youth Smoking Prevalence, percentage of students who smoked cigarettes on or more days in the past month	19.6%	22.7%
Youth with Feeling of Sadness or Hopelessness	30.8%	30.8%
Trusted adult in the community	61%	55.%
Binge Drinking	27%	24.9%

Youth Risk and Resiliency Survey (YRRS) 2007, 2009, 2011 surveys grades 9-12

https://ibis.health.state.nm.us/query/selection/yrrs/YRRSSelection.html







						Avg.
Chaves	2003	2005	2007	2009	2011	2007-11
Persistent sadness or hopelessness	31.3	35.9	31.8	30.1	30.4	30.8
Attempted suicide	9.7	12.2	12.5	8.9	8.7	10.0
Binge Drinking	40.9	28.4	26.7	26.4	27.8	27.0
Current Marijuana user	22.6	15.1	22.3	20.5	19.7	20.8
Current use of painkillers to get high			10.9	14.2	11	12.0
Ever used illegal injection drugs	2.6	4.7	1.8	3.3	4.5	3.2
Smoker	26.8	23.5	18.8	19.4	20.7	19.6
Sexually active	38.5	20.5	30.1	34.7	30.5	31.8
Used condom	63.9	53.8	52.4	55.8	50	52.7
Adult in common whom I trust	57.7	59.7	65.2	57.9	59.8	61.0
Five servings of fruit/vegetable per day, past week	12	26	17.2	20.1	19.8	19.0
Overweight or Obese	20.8	27.4	28.3	30.4	40.3	33.0
Obese	8.8	8	11.7	15.1	23.6	16.8

#### Adult Risk Indicators

Obesity and Smoking constitute risk factors for many chronic diseases and early death.

Physical Activity and a diet with many fruits and vegetables are protective. These data are self-reported via the Behavioral Risk Factor Surveillance System (BRFSS).

Measure	Chaves Co	NM
General Self-Reported Health Status, percentage of adults reporting fair or poor		
health	23.6%	17.5%
Adult Physical Activity, 2005,2007, 2009	45.7%	52.5%
Adults Consuming 5 or more servings of fruits and vegetable per day, 2007, 2009	20.5%	22.4%
Obesity Among Adults bmi >25, 2011, 2012	71.8%	62.7%
Adult Smoking Prevalence current smoker,	24.40/	21.00/
2011, 2012	24.1%	21.0%

Smoking varies by race, ethnicity and other demographic factors. Smoking prevalence tends to be higher among the poor, mentally ill, and LGBT populations. For example in NM, among households with income less than \$15,000, 34% smoke; with income of \$50,000 or more, the rate is 12%, almost a threefold difference. In 2011, 48% of adults who characterized themselves as bisexual smoked.

Adult Smoking Prevalence by Race and Ethnicity (2011), Age Adjusted	Chaves	NM
White	26.5%	22.8%
Hispanic	15.8%	22.5%
Black		31.1%
Native American		20.5%
Asian		9.0%

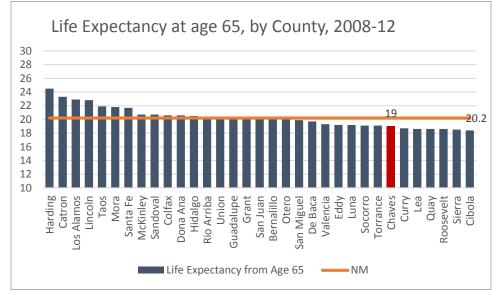
## Mortality

## Leading Causes of Death

Age adjusted rates per 100,000 people

Causes	Chaves	NM
Total	716.4	616.3
Circulatory, Heart disease (ICD10: 100-109, 111, 113, 120-151)	174.7	150
Neoplasm, malignant (ICD10: C00-C97)	166.5	147.9
Respiratory, Chronic lower respiratory diseases (ICD10: J40-J47)	69.8	45.9
Injury, Unintentional injuries (ICD10: V01-X59, Y85-Y86)	65.2	62.4
Circulatory, Cerebrovascular diseases (ICD10: I60-I69)	40	34.2
Diabetes mellitus (ICD10: E10-E14)	32.2	27.8
Alzheimer's disease (ICD10: G30)	27.1	18.1
Injury, Intentional self-harm (suicide) (ICD10: X60-X84, Y87.0, *U03	19.3	19.9
Chronic liver disease and cirrhosis (ICD10: K70, K73-K74)	17.5	18.1
Respiratory, Influenza and pneumonia (ICD10: J09-J18)	15.4	15.2

Green Indicates the county rate is better, lower, than the New Mexico rate



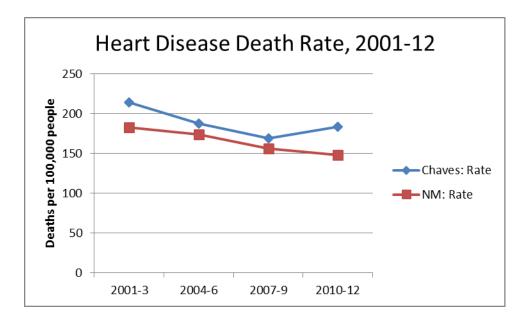
#### Life Expectancy

The number of years a person is expected to live after age 65 varies from 24.5 to 18.4

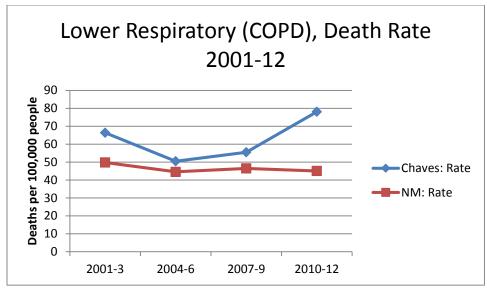
#### **Chronic Diseases**

Chronic diseases are conditions that develop slowly, often inconspicuously, and even with treatment affect a person throughout his or her lifetime. Chronic diseases are often the result of lifestyle choices (such as smoking), exposure to environmental pollution or toxins, and genetics (some cancers). Increasingly, overeating and resulting obesity have been cited as causes of many chronic diseases, including diabetes, heart disease, stroke, and some cancers. Chronic diseases do not have a single cause. The effects of multiple factors are often cumulative, that is, they combine over time to increase a person's risk.

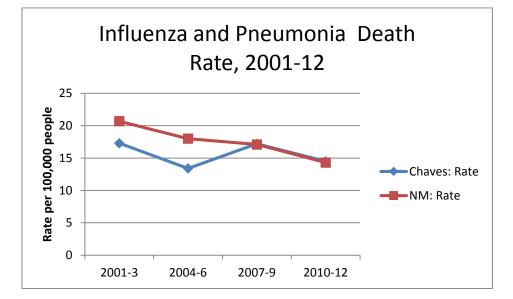
The death rates shown below are adjusted to make the county and state populations comparable (in terms of ages). The rates are the number of deaths per 100,000 thousand people susceptible to the disease.



	2001-3	2004-6	2007-9	2010-12
Chaves: Rate	214.4	187.2	168.7	183.8
Chaves: Deaths	465	410	381	427
NM: Rate	182.7	173.6	156.5	148.2

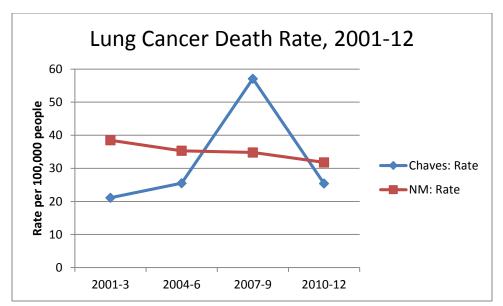


	2001-3	2004-6	2007-9	2010-12
Chaves: Rate	66.4	50.5	55.5	78.1
Chaves: Deaths	144	111	124	180
NM: Rate	49.8	44.6	46.5	45.1



#### Pneumonia-Influenza Death Rate

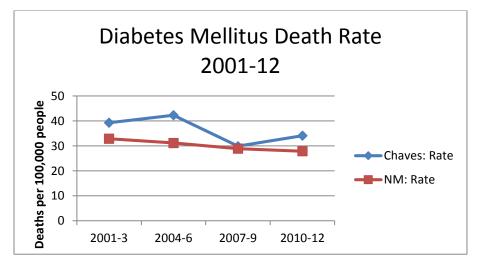
	2001-3	2004-6	2007-9	2010-12
Chaves: Rate	17.3	13.4	17.2	14.5
Chaves: Deaths	38	30	39	33
NM: Rate	20.7	18	17.1	14.3



Lung Cancer Death Rate

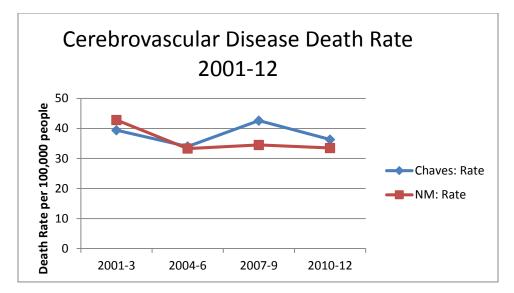
	2001-3	2004-6	2007-9	2010-12
Chaves: Rate	21.1	25.5	57.1	25.4
Chaves: Deaths	465	410	381	427
NM: Rate	38.5	35.3	34.8	31.8

Although diabetes is a disease and a cause of death in its own right, it worsens or in increases the risk for many other diseases. Obesity is one of the main risk factors for diabetes.



#### **Diabetes Mellitus Death Rate**

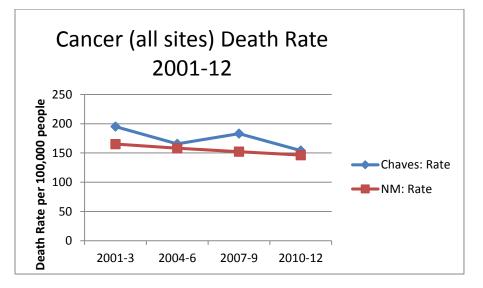
	2001-3	2004-6	2007-9	2010-12
Chaves: Rate	39.3	42.3	29.9	34.1
Chaves: Deaths	82	88	65	79
NM: Rate	32.9	31.2	28.9	27.9



Cerebrovascular Diseases

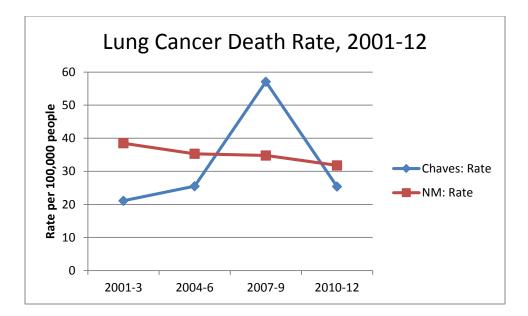
	2001-3	2004-6	2007-9	2010-12
Chaves: Rate	39.4	34	42.6	36.3
Chaves: Deaths	86	76	98	84
NM: Rate	42.8	33.3	34.5	33.5

Cerebrovascular disease is commonly called "stroke". This is one of many diseases whose risk rises with smoking.



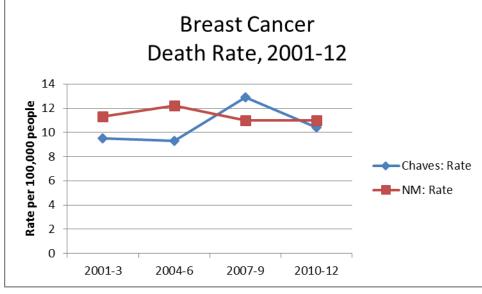
Cancer, all Sites

	2001-3	2004-6	2007-9	2010-12
Chaves: Rate	195.2	165.7	183.2	154.1
Chaves: Deaths	411	357	401	347
NM: Rate	165.3	158.1	152.2	146.3



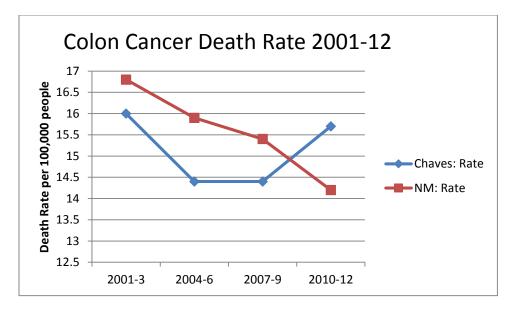
#### Lung Cancer Death Rate

	2001-3	2004-6	2007-9	2010-12
Chaves: Rate	21.1	25.5	57.1	25.4
Chaves: Deaths	465	410	381	427
NM: Rate	38.5	35.3	34.8	31.8



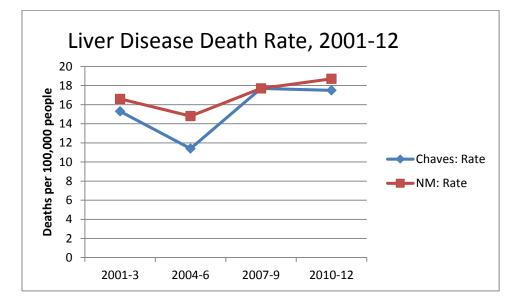
#### Breast Cancer Death Rate

	2001-3	2004-6	2007-9	2010-12
Chaves: Rate	9.5	9.3	12.9	10.4
Chaves: Deaths	20	20	28	22
NM: Rate	11.3	12.2	11	11



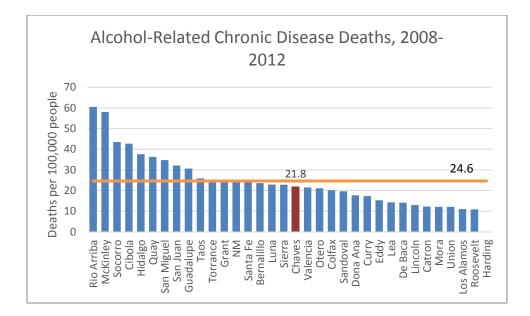
#### **Colon Cancer Death Rates**

	2001-3	2004-6	2007-9	2010-12
Chaves: Rate	16	14.4	14.4	15.7
Chaves: Deaths	33	32	32	36
NM: Rate	16.8	15.9	15.4	14.2



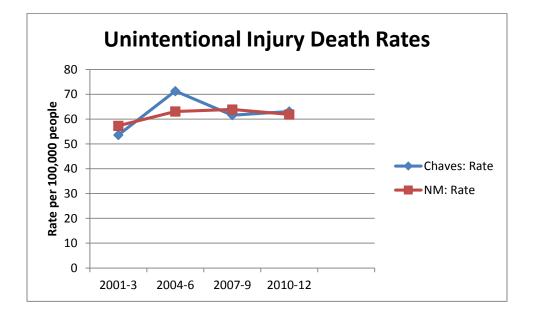
#### Liver Disease Death Rate

	2001-3	2004-6	2007-9	2010-12
Chaves: Rate	15.3	11.4	17.7	17.5
Chaves: Deaths	29	23	36	38
NM: Rate	16.6	14.8	17.7	18.7



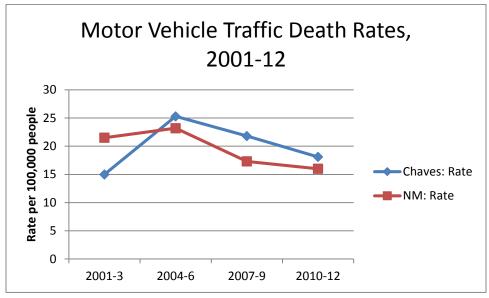
This chart includes chronic conditions directly and 100% attributable to consumption of alcohol. Included in this definition from the CDC's Alcohol-Related Disease Impact (ARDI) program (<u>http://apps.nccd.cdc.gov/DACH\_ARDI/Info/ICDCodes.aspx</u>): (alcohol) psychosis, abuse, dependence syndrome, myopathy, cardiomyopathy; alcoholic gastritis and liver disease; fetal alcohol syndrome, fetus and newborn affected by maternal use of alcohol, and alcoholic induced chronic pancreatitis. Conditions in which alcohol contributes, either directly or indirectly, to mortality are not included in this measure.

## **Unintentional Injuries**

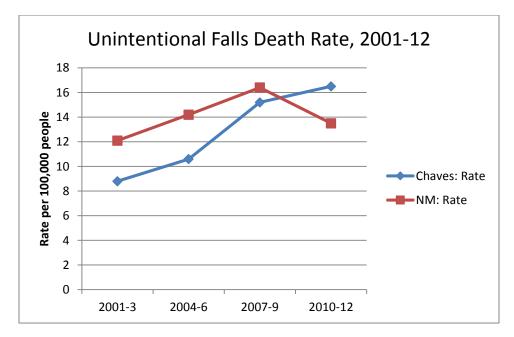


Unintentional Injury Death Rates

enniterneternat ingat	<i>y</i> Death nates					
	2001-3	2004-6	2007-9	2010-12		
Chaves: Rate	53.6	71.3	61.6	63.1		
Chaves: Deaths	101	131	123	131		
NM: Rate	57.3	63.1	63.9	61.9		



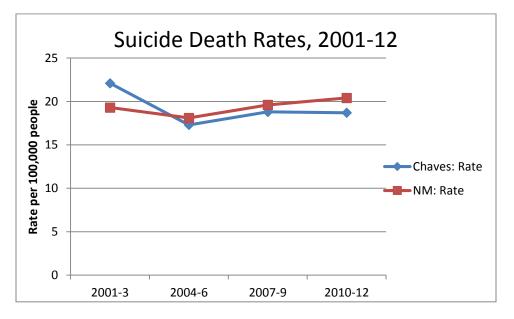
	2001-3	2004-6	2007-9	2010-12
Chaves: Rate	15	25.3	21.8	18.1
Chaves: Deaths	28	46	42	36
NM: Rate	21.5	23.2	17.3	16



Unintentional Fall Death Rates

	2001-3	2004-6	2007-9	2010-12			
Chaves: Rate	8.8	10.6	15.2	16.5			
Chaves: Deaths	19	23	35	39			
NM: Rate	12.1	14.2	16.4	13.5			

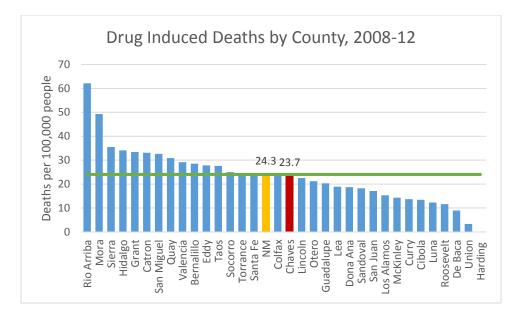
Deaths from falls include primarily elderly people. The average age at death from falls is about 72 years.



Suicide Death Rates							
	2001-3	2004-6	2007-9	2010-12			
Chaves: Rate	22.1	17.3	18.8	18.7			
Chaves: Deaths	40	34	35	36			
NM: Rate	19.3	18.1	19.6	20.4			

## Deaths Due to Drug Overdose

In 2007-11 there were 2,401 deaths due to drug overdose in NM, 72 in Chaves County.

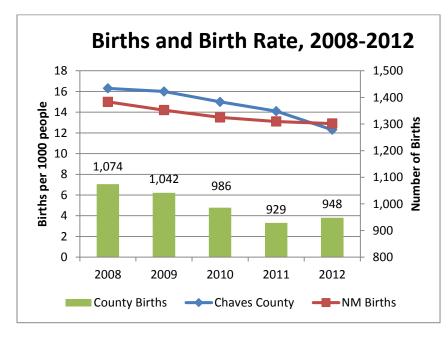


Chaves County drug-induced death rate is just below the state average. See <u>https://ibis.health.state.nm.us/indicator/complete\_profile/DrugIndDth.html</u>

The main codes for drug overdose are X40-X44, X60-64, X85.

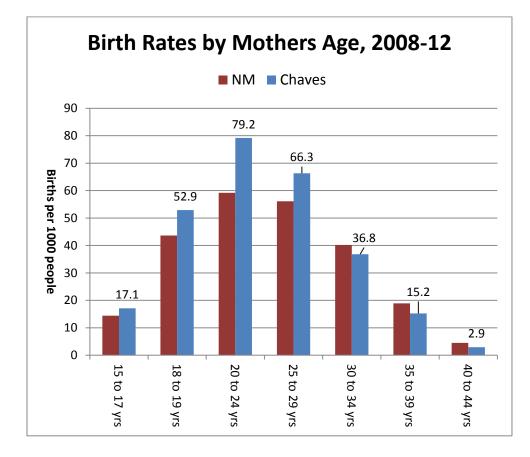
## **Births**

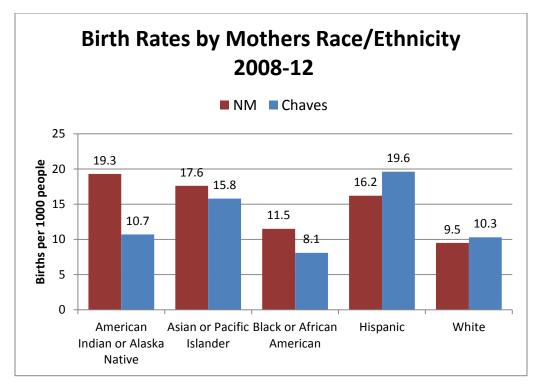
Number of Births 2008-12



2008-2012		Chaves			NM		
	Births	Population	Rate	Births	Population	Rate	
10 to 14	8	24,436	0.3	255	711,772	0.4	
15 to 17	284	16632	17.1	6,468	449,182	14.4	
18 to 19	587	11,088	52.9	13,055	299,422	43.6	
20 to 24	1678	21,184	79.2	41,787	705,404	59.2	
25 to 29	1393	21,005	66.3	38,894	693,507	56.1	
30 to 34	688	18,702	36.8	25,707	639,176	40.2	
35 to 39	281	18,460	15.2	11,816	624,147	18.9	
40 to 44	54	18,632	2.9	2,845	629,765	4.5	
45 to 49	5	21,086	0.2	188	715,236	0.3	
50+				22	3384155	0	
Births to teens	4,978			141,037			
Percent to 15-19 yr olds	17.5%	Rate	31.42	13.8%	Rate	26.08	

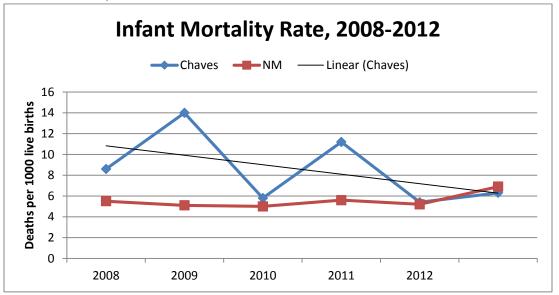
Number and Percentage of Births by Mother's Age





2008-12	Chaves			NM		
	Births	Population	Birth Rate	Births	Population	Birth Rate
Total	4,979	328,051	15.2	141,060	10,289,540	13.7
American Indian or Alaska Native	30	2,812	10.7	17,517	906,013	19.3
Asian or Pacific Islander	35	2,215	15.8	2656	151,115	17.6
Black or African American	51	6,268	8.1	2405	209,489	11.5
Hispanic	3,320	169,573	19.6	77,018	4,755,227	16.2
White	1,515	147,182	10.3	40,634	4,267,697	9.5

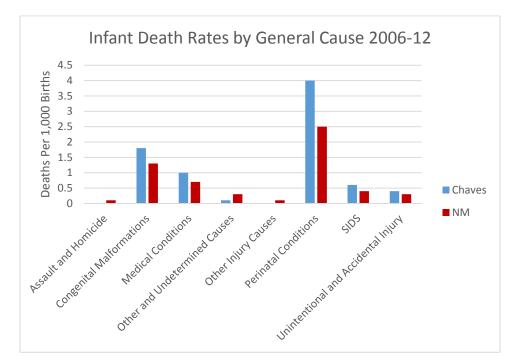
#### Infant Mortality Rate



Infant Mortality Trend 2008-12						
Chaves	Total	2008	2009	2010	2011	2012
Infant Deaths	43	15	6	11	5	6
Live Births	4,979	1,074	1,042	986	929	948
Rate	8.6	14	5.8	11.2	5.4	6.3
NM		2008	2009	2010	2011	2012
Infant Deaths	782	153	145	155	143	186
Live Births	141060	30154	28872	27793	27251	26990
Rate	5.5	5.1	5	5.6	5.2	6.9

In Chaves County, 2008-2012, there were 43 infant deaths for 4979 births, a rate of 8.6 per 1000 live births. This is the higher than the NM rate. Infant mortality, often cited as a general indicator of well-being of a population, has increased in NM since 2010 after improving from 2008-2009. The trend seems to be more favorable for Chaves County.

#### Leading causes of Infant Deaths



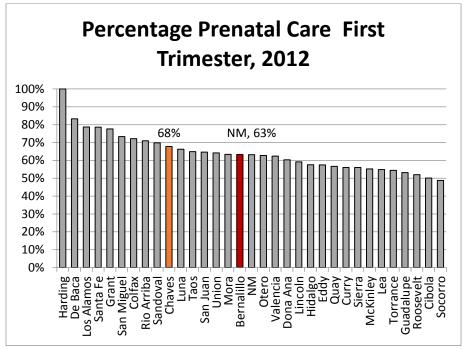
	Chaves			NM		
General Causes of Infant Death	Number of Deaths	Number of Live Births	Deaths Per 1,000 Births	Number of Deaths	Number of Live Births	Deaths Per 1,000 Births
Assault and Homicide				23		0.1
Congenital Malformations	13		1.8	269		1.3
Medical Conditions	7		1	141		0.7
Other and Undetermined Causes	1		0.1	58		0.3
Other Injury Causes				19		0.1
Perinatal Conditions	28		4	500		2.5
SIDS	4		0.6	74		0.4
Unintentional and Accidental Injury	3		0.4	53		0.3
Total	56	7088	7.9	1137	201578	5.6

Medical conditions refer to diseases and conditions of the infant

Perinatal Condition refer to short gestation and problems during pregnancy and immediately after delivery

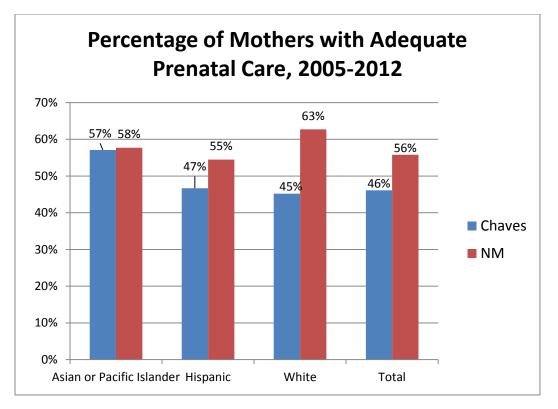
SIDS--Sudden infant death syndrome.

## **Prenatal Care**



Prenatal care in the first three months helps catch problems early and affords opportunity for education of mothers. It also indicates access to health care services Prenatal care is available through Medicaid.

Harding and De Baca Counties had 5 and 12 births respectively, so their percentages may not be stable.



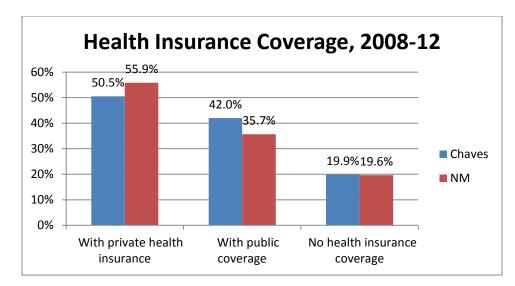
In this chart, higher is better. Whites and Asians begin prenatal care earlier than others.

Doctors recommend that mothers-to-be see their health care provider before the 13th week of pregnancy and to go back for at least 13 visits before birth.

The Kotelchuck Index combines when prenatal care began and the number of visits. Adequate indicates the mother received at least 80% of the indicated number of visits for when her prenatal care began.

1		id froundfri	in our arroo		
	Households Re	eceiving SN	AP/Food S	tamp	
		Benefit			
	Chaves	Chaves		NM	
	Number	Percent	Number	Percent	
	3,819	16.2%	97 <i>,</i> 304	13%	

#### Access to SNAP and Health Insurance



Source: U.S. Census Bureau, Small Area Health Insurance Estimates, <u>http://www.census.gov/did/www/sahie/data/</u>.

## Health Resources

## Health Resources, 2011

Health Resources, 2011	Chaves Co.	NM
Population 2011	65,890	
	03,890	
Primary Caro Physicians	49	1535
Primary Care Physicians		
PCP per 100.000 people	74	73.7
Pediatricians	12	291
Pediatricians per 100,000	58	50.3
people under age 20		
Obstet/Gynecologists	6	181
OB/GYM per 100,000 women	18	17.2
Psychiatrists	3	197
Psychatrists per 100,000 people	5	9.5
Dentists	21	974
Dentists per 100,000 people	61.1	47.3
Short Term General Hospitals	3	41
STGH Beds	229	4,130
Federally Qualified Health Centers	2	100
Community Health Centers	3	152
School Based Health Centers	3	74
Medicare Beneficiaries	11,114	326,559
Percent of Population	16.9	15.7
Medicaid Beneficiaries	21,574	561,762
Percent of population	21.2	27

Area Health Resource File, HRSA. http://arf.hrsa.gov/arfdashboard/HRCT.aspx

	2013	New M NM KIDS COUNT P Chaves County	exico Ranks 50th ir rofile	n Child Well-Bein
	Children in Poverty 2010	Families in which Parents Lack Secure Employment 2010	Families with a High Housing Cost Burden 2010 Rent: 40%	Teens (16-19) Not in School and Not Working 2010
ECONOMIC Well-Being	27%	39%	Own: 19%	10%
WELL-BEING	NM Rate: 27%	NM Rate: 39%	NM Rate: Rent: 43% Own: 25%	NM Rate: 10%
	Children Attending Preschool 2010	Fourth Graders Proficient in Reading 2013	Eighth Graders Proficient in Math 2013	High School Students Graduating on Time 2013
EDUCATION	39%	Dexter: 34% Hagerman: 40% Lake Arthur: 60% Roswell: 43%	Dexter: 32% Hagerman: 27% Lake Arthur: 50% Roswell: 58%	Dexter: 86% Hagerman: 82% Lake Arthur: 71% Roswell: 64%
	NM Rate: 40%	NM Rate: 46%	NM Rate: 42%	NM Rate: 70%
- §-	Low Birth Weight Babies 2012	Children without Health Insurance 2011	Child and Teen Deaths per 100,000 2012	Teens who Binge Drink 2011
	5.1%	11%	Child (1-14): 14 Teen (15-19): 18	28%
HEALTH	NM Rate: 7.6%	NM Rate: 10%	NM Rate: Child: 19 Teen: 69	NM Rate: 24%
ř	Children in Single Parent Families 2011	Families where Household Head Lacks a High School Diploma 2011	Children Living in High Poverty Areas 2011	Teen Births per 1,000 2012
FAMILY AND COMMUNITY	39%	24%	10%	58
	NM Rate: 36%	NM Rate: 16%	NM Rate: 21%	NM Rate: 45

#### Sources:

Children in Poverty: American Community Survey, 2006-2010, Table B17006. Children whose Parents Lack Secure Employment: American Community Survey, 2006-2010, Table B17016. Families with a High Housing (Rent) Cost Burden: American Community Survey, 2006-2010, Table B25070. Families with a High Housing (Ownership) Cost Burden: American Community Survey, 2006-2010, Table B25091. Teens Not in School and Not Working: American Community Survey, 2007-2011, Table 14005. Children ages 3 to 4 Attending Preschool: American Community Survey, 2006-2010, Table B14003. Fourth Graders Proficient in Reading and 8th Graders Proficient in Math: NM Public Education Department. Retrieved from: http://www.ped.state.nm.us/Assessment/Accountability/AcademicGrowth/NMSBA.html. High School Students Graduating on Time: NM Public Education Department, 2013 4-Year Cohort Graduation Rates at: http://ped.state.nm.us/Graduation/index.html Low Birth-Weight Babies: NM Department of Health, IBIS Database, Query Results for Percentage of Low Birth Weight Infants at: https://ibis.health.state.nm.us/query/result/birth/BirthWtCnty/BirthWtLow.html Children without Health Insurance: U.S. Census, Small Area Health Insurance Estimates (SAHIE), 2011. Child Death Rate per 100,000: NM Department of Health, IBIS Database, Query Results for Crude Rates, Ages 1-14, deaths per 100.000 Measure at: https://ibis.health.state.nm.us/guery/result/mort/MortCntyICD10/CrudeRate.html Teen Death Rate per 100,000: NM Department of Health, IBIS Database, Query Results for Crude Rates, Ages 15-19, deaths per 100,000 Measure at: https://ibis.health.state.nm.us/guery/result/mort/MortCntyICD10/CrudeRate.html Teens Who Binge Drink: NM Youth Risk and Resiliency Survey, 2011, NM Department of Health and NM Public Education Department at: https://ibis.health.state.nm.us/indicator/view\_numbers/BingeDrinkYouth.Cntv.html. Children in Single Parent Families: American Community Survey, 2006-2010, Table B09002. Families where Household Head Lacks a High School Diploma: American Community Survey, 2007-2011, Table B17018. Children Living in High Poverty Areas: 2011 data from the American Community Survey prepared by Population Reference Bureau for NM KIDS COUNT. Teen (ages 15-19) Births per 1,000: NM Department of Health, IBIS Database, Query Criteria for the Adolescent Births, Girls Age 15-19 Measure (per 1,000) at: https://ibis.health.state.nm.us/guery/result/birth/AdolBirthCnty/AdolBirth15 19.html