

Rio Arriba 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 Rio Arriba County in 2013 was estimated at 40,072. The population has decreased .4% percent since the 2010 census.

The 6.8% of the population is less than 5 years old, 15.4% is over 64 years old

71.3% percent of the population is of Hispanic origin.

6.3% of the population is foreign-born.

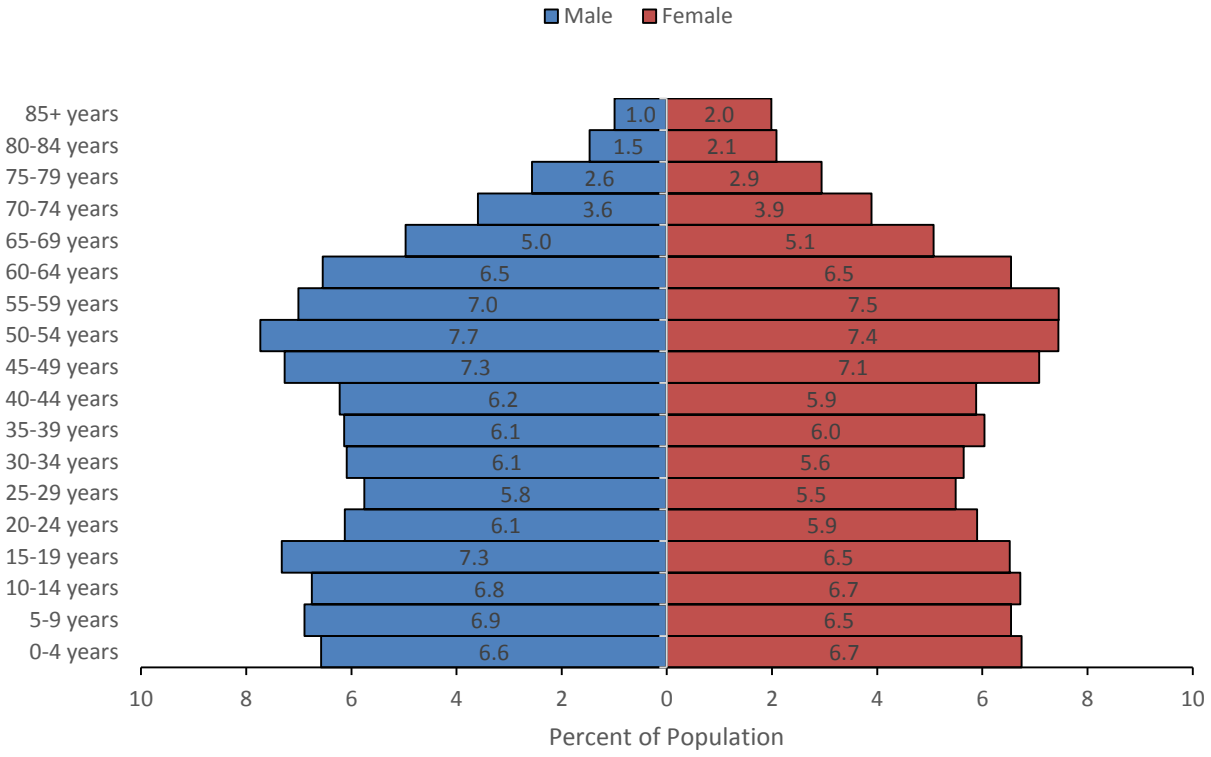
These data are from the Census Quick Facts,
<http://quickfacts.census.gov/qfd/states/35/35039.html>

Rio Arriba Population by Age and Sex, 2012

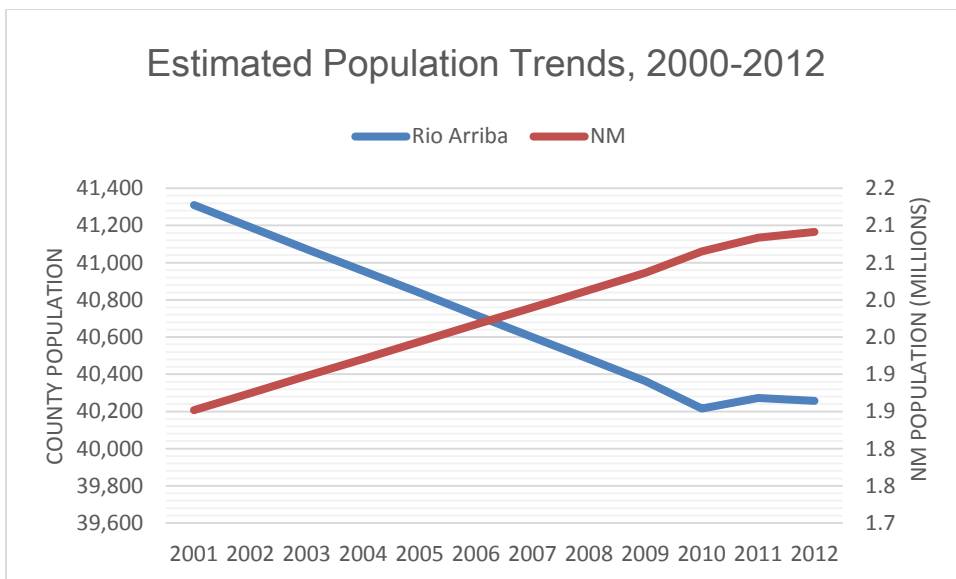
	Male		Female	
Age	Count	Percent	Count	Percent
Total	19886		20371	
0-4 years	1308	6.6	1374	6.7
5-9 years	1370	6.9	1333	6.5
10-14 years	1343	6.8	1369	6.7
15-19 years	1456	7.3	1329	6.5
20-24 years	1218	6.1	1202	5.9
25-29 years	1144	5.8	1119	5.5
30-34 years	1211	6.1	1150	5.6
35-39 years	1220	6.1	1231	6.0
40-44 years	1237	6.2	1198	5.9
45-49 years	1446	7.3	1443	7.1
50-54 years	1538	7.7	1517	7.4
55-59 years	1393	7.0	1518	7.5
60-64 years	1301	6.5	1334	6.5
65-69 years	988	5.0	1033	5.1
70-74 years	714	3.6	793	3.9
75-79 years	510	2.6	599	2.9
80-84 years	292	1.5	425	2.1
85+ years	198	1.0	405	2.0

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

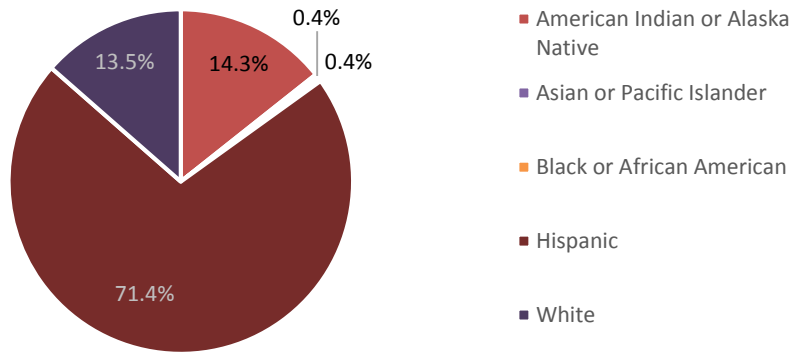
Age and Sex Population Pyramid, Rio Arriba County, 2012



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



Rio Arriba County Population, by Race/Ethnicity , 2012



Race/Ethnicity	Rio Arriba	Percent	NM	Percent
Total	40257	100.0%	2091432	100.0%
American Indian or Alaska Native	5768	14.3%	183169	8.8%
Asian or Pacific Islander	148	0.4%	31101	1.5%
Black or African American	150	0.4%	42825	2.0%
Hispanic	28742	71.4%	969417	46.4%
White	5449	13.5%	864919	41.4%

Approximately 624 people live in group quarters. These include jails, prisons, nursing homes, and dormitories.

Single Parent Households

Single Parent Households, Rio Arriba County 2008-12

Total Households	14,959	
Single Male Householder	1,135	7.6%
Single Female Householder	2,539	17.0%
Number of grandparents responsible for children under 18 years old	789	

Housing

In 2012, there were 19,616 housing units in Rio Arriba County; 3.3% were multi-unit structures; 79% of housing units were owner-occupied. The median value of an owner-occupied home in 2008-12 was \$125,800. There are (an average) of 2.65 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 Rio Arriba County, 12% of owners with a mortgage paid 30% or more of their income for housing while 40% 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 Rio Arriba County no people were encountered experiencing homelessness.

Source NM Coalition to End Homelessness. 2013. Point in Time Count Results.

<http://nmceh.org/pages/homelessnessReports.html>

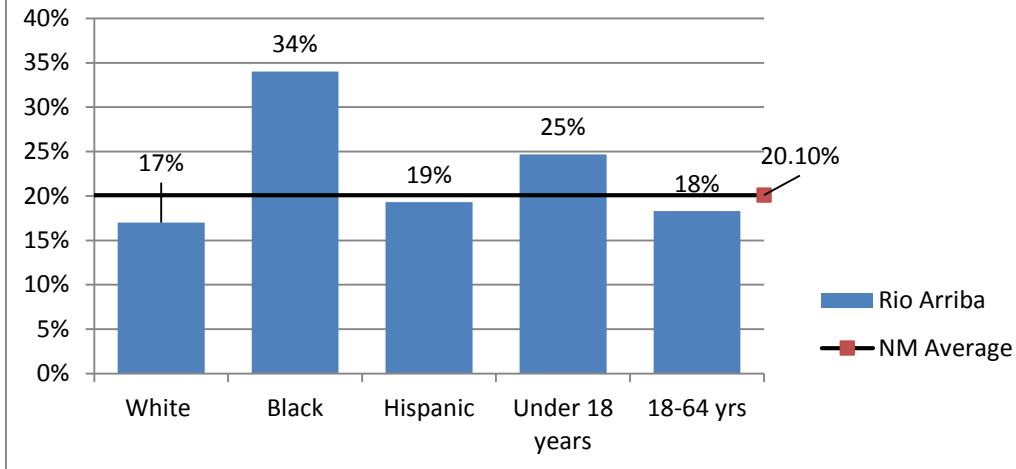
Income and Poverty

Average per capita money income (2008-12) was \$20,253 and median household income was \$40,791. According to the Census Bureau in 2012, about a fifth of the population lived below the poverty line. The unemployment rate (2012) was 8.0%. 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, <http://quickfacts.census.gov/qfd/states/35/35039.html> Unemployment: <http://www.bls.gov/lau/data.htm>

Percent below Poverty Level by Ethnicity and Special Categories, Rio Arriba County

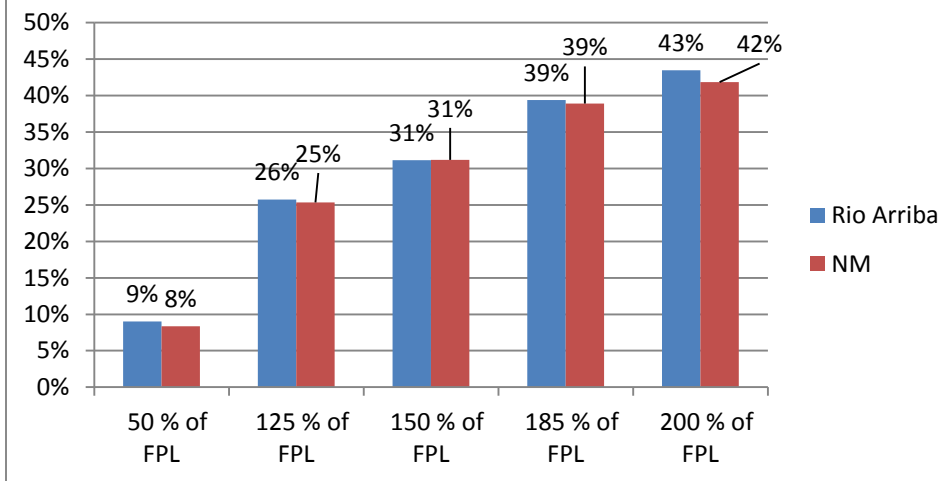


Source: 2008-12 American Community Survey, 5 year Estimates table S1701

See the following site for information on federal poverty level:

<http://aspe.hhs.gov/poverty/12poverty.shtml>

Percent Below Poverty Levels



Education and Language

Education and Language	Rio Arriba	New Mexico
Language other than English spoken at home	62.0%	36%
High School Graduate or Higher	78.3%	83.4%
Bachelor's degree or higher	15.9%	25.6%

These data are from the Census Quick Facts,

<http://quickfacts.census.gov/qfd/states/35/35045.html>

Rio Arriba County School Enrollment

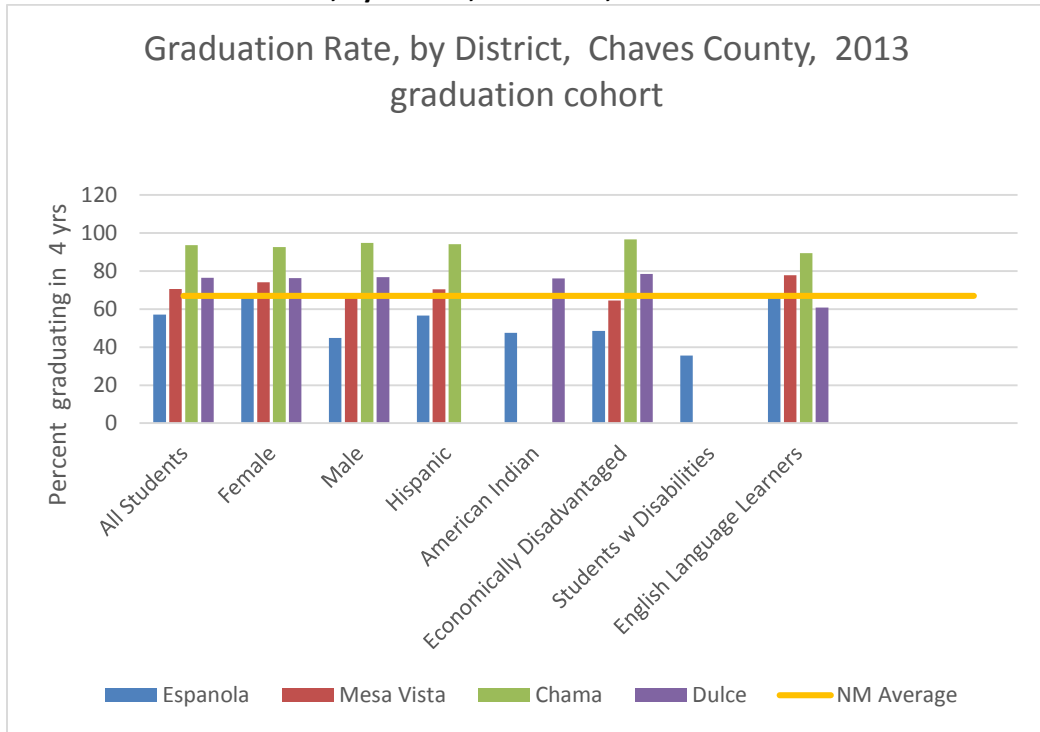
SCHOOL ENROLLMENT	Estimate	Percent
Population 3 years and over enrolled in school	9,067	
Nursery school, preschool	552	6.1%
Kindergarten	554	6.1%
Elementary school (grades 1-8)	4,213	46.5%
High school (grades 9-12)	2,100	23.2%
College or graduate school	1,648	18.2%

Rio Arriba County Educational Attainment

EDUCATIONAL ATTAINMENT	Number	Percent
Population 25 years and over	9,854	
Less than 9th grade	427	4.3%
9th to 12th grade, no diploma	912	9.3%
High school graduate (includes equivalency)	3,373	34.2%
Some college, no degree	2,519	25.6%
Associate's degree	603	6.1%
Bachelor's degree	1,290	13.1%
Graduate or professional degree	730	7.4%

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

Four Year Graduation Rate, by District, Rio Arriba, 2013



	Espanola	Mesa Vista	Chama	Dulce
All Students	57.1	70.5	93.6	76.5
Female	67.5	74.1	92.6	76.2
Male	44.8	67.3	94.7	76.8
Hispanic	56.6	70.3	94.1	
American Indian	47.5			76.1
Economically Disadvantaged	48.5	64.5	96.6	78.4
Students w Disabilities	35.6			
English Language Learners	67.7	77.8	89.4	60.7

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

Child Abuse

Child Abuse Investigations, July 2012-June 2013

County	Accepted Reports	% substantiated	Number of substantiated child victims	Child Victim Rate per 1000 children
Rio Arriba	337	30.5%	197	17.9
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.

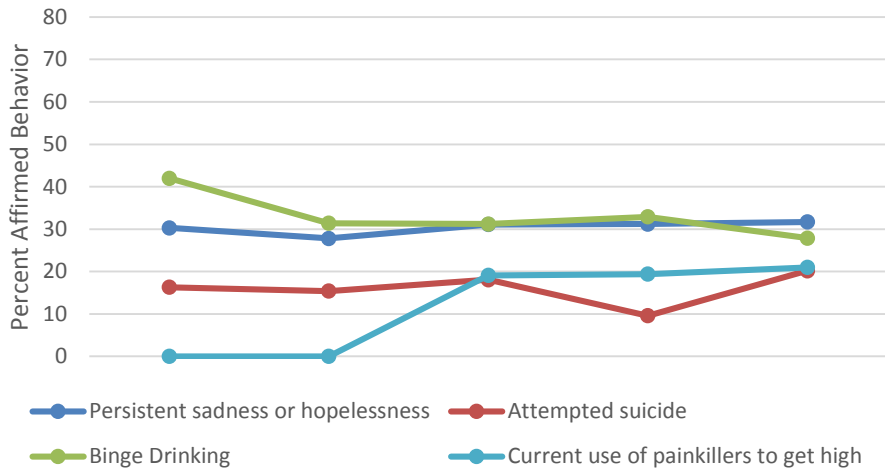
Adolescent Indicators

Measure	Rio Arriba	NM
Adolescent Risk and Resiliency Measures		
Ate Five or More Servings of Fruit or Vegetables per Day	26.3%	23.8%
Adolescent Obesity, self reported BMI above 95th percentile for age and sex	17.2%	12.4%
Youth Smoking Prevalence, percentage of students who smoked cigarettes on or more days in the past month	27.4%	19.9%
Youth with Feeling of Sadness or Hopelessness	31.3%	30.8%
Trusted adult in the community	47.1%	55.2%

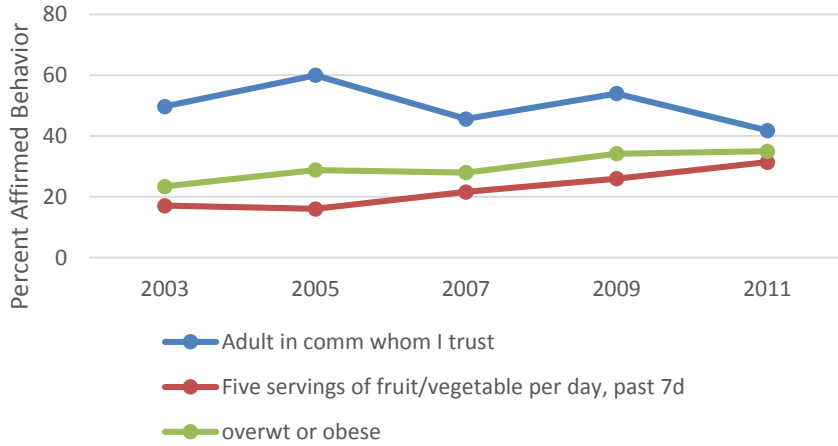
Youth Risk and Resiliency Survey (YRRS) 2007, 2009, 2011 surveys grades 9-12

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

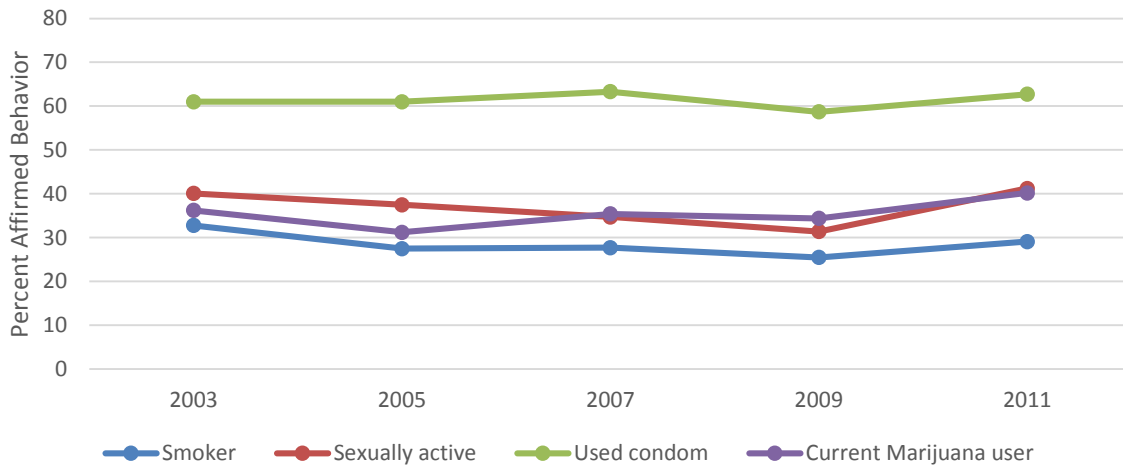
YRRS Behavioral Health Indicators, Ro Arriba,
Trend 2003-2011



YRRS Trust, Food, Obesity Indicators, Rio Arriba, 2003-2011



YRRS Smoking and Sexual Behaviors, Ro Arriba County 2003-2011



Rio Arriba	2003	2005	2007	2009	2011	Avg 2007-11
Persistent sadness or hopelessness	30.3	27.8	31.1	31.2	31.7	31.3
Attempted suicide	16.3	15.4	18.1	9.6	20.2	16.0
Binge Drinking	42	31.4	31.2	32.9	27.9	30.7
Current Marijuana user	36.2	31.2	35.4	34.4	40.2	36.7
Current use of painkillers to get high			19.1	19.4	21	19.8
Ever used illegal injection drugs	4.1	3.3	9.8	7	10.7	9.2
Smoker	32.8	27.5	27.7	25.5	29.1	27.4
Sexually active	40.1	37.5	34.7	31.4	41.2	35.8
Used condom	61	61	63.3	58.7	62.7	61.6
Trusted adult in community	49.7	60	45.6	54	41.8	47.1
Five servings of fruit/vegetable per day, past week	17.1	16	21.6	26	31.4	26.3
Overweight or obese	23.4	28.8	28	34.2	35	32.4
Obese	10.6	12.1	13.2	19.3	19	17.2

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	Rio Arriba	NM
General Self-Reported Health Status, percentage of adults reporting fair or poor health	24.0%	17.9%
Adult Physical Activity, 2005,2007	48.0%	53.0%
Adults Consuming 5 or more servings of fruits and vegetable per day, 2007, 2009	27.0%	23.0%
Obesity Among Adults	62.7%	62.7%
Adult Smoking Prevalence	20.0%	25.0%

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	Rio Arriba	NM
White	19.0%	22.8%
Hispanic	26.3%	22.5%
Black		31.1%
Native American	35.8	20.5%
Asian		9.0%

Source BRFSS, IBIS Query

Mortality

Leading Causes of Death

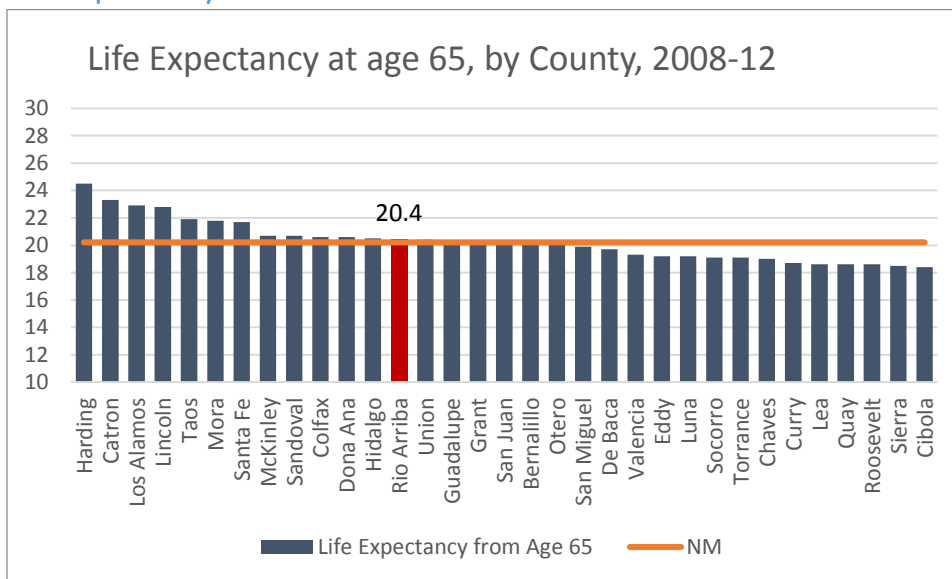
Age adjusted rates per 100,000 people

Causes	Rio Arriba	NM
Total	734.7	616.3
Neoplasm, malignant (ICD10: C00-C97)	153.1	147.9
Circulatory, Heart disease (ICD10: I00-I09, I11, I13, I20-I51)	147.2	150
Injury, Unintentional injuries (ICD10: V01-X59, Y85-Y86)	133.6	62.4
Chronic liver disease and cirrhosis (ICD10: K70, K73-K74)	48.1	18.1
Diabetes mellitus (ICD10: E10-E14)	43.1	27.8
Circulatory, Cerebrovascular diseases (ICD10: I60-I69)	36	34.2
Respiratory, Chronic lower respiratory diseases (ICD10: J40-J47)	26.5	45.9
Injury, Intentional self-harm (suicide) (ICD10: X60-X84, Y87.0, *U03)	25.3	19.9
Respiratory, Influenza and pneumonia (ICD10: J09-J18)	16.6	15.2
Nephritis, nephrotic syndrome and nephrosis (ICD10: N00-N07, N17-N19, N25-N27)	16	12.8

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

Leading causes of death for Rio Arriba county are shown here compared to New Mexico. The color indicates that the county's rate was better than the state's.

Life Expectancy

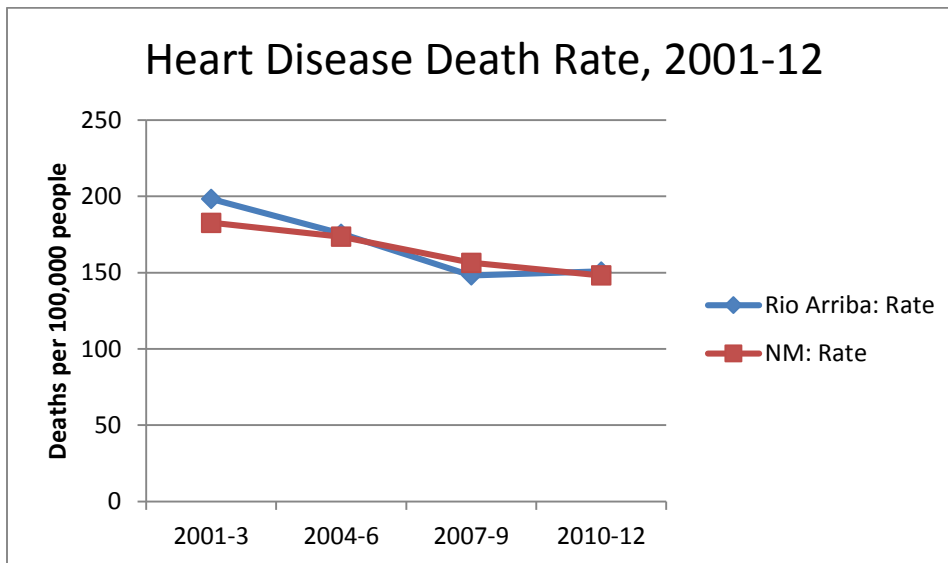


The number of years a person is expected to live after age 65 varies from 24.5 to 18.4

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.

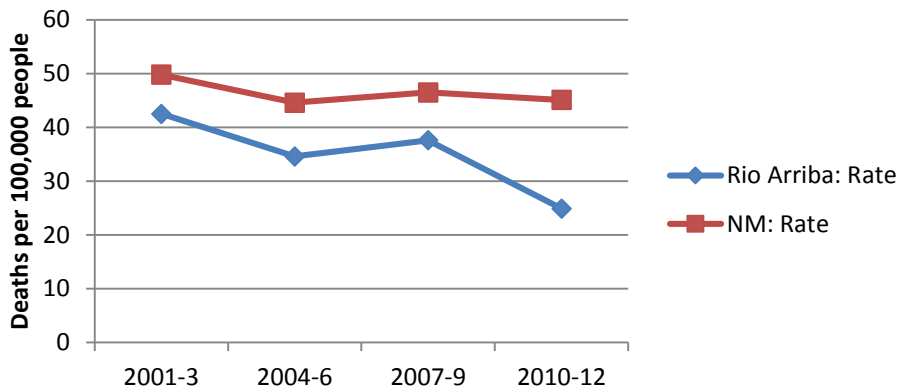
The death rates shown below are adjusted to make the county and state populations comparable (in terms of ages). The rates are the number of deaths per 100,000 thousand people susceptible to the disease.



Heart Disease

	2001-3	2004-6	2007-9	2010-12
Rio Arriba: Rate	198.3	175.6	148.2	150.8
Rio Arriba: Deaths	215	202	181	193
NM: Rate	182.7	173.6	156.5	148.2

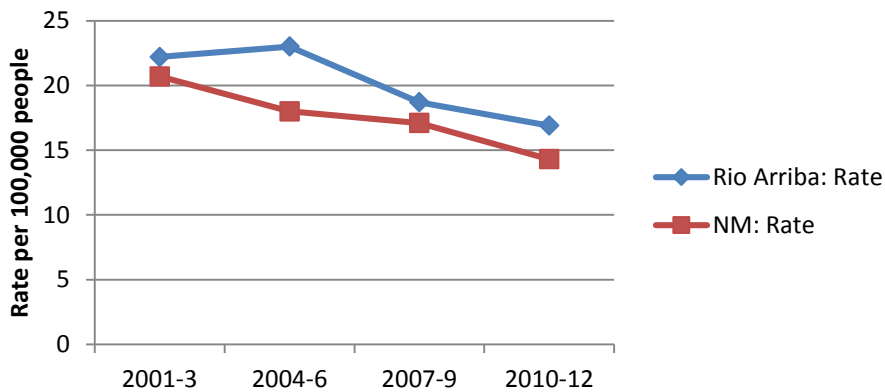
Lower Respiratory (COPD), Death Rate 2001-12



Lower Respiratory (COPD)

	2001-3	2004-6	2007-9	2010-12
Rio Arriba: Rate	42.5	34.6	37.6	24.9
Rio Arriba: Deaths	45	40	45	32
NM: Rate	49.8	44.6	46.5	45.1

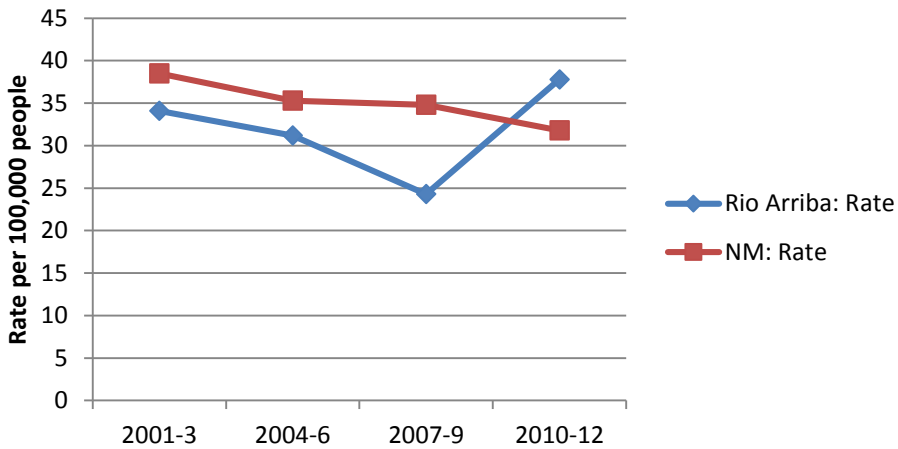
Influenza and Pneumonia Death Rate, 2001-12



Influenza-Pneumonia

	2001-3	2004-6	2007-9	2010-12
Rio Arriba: Rate	22.2	23	18.7	16.9
Rio Arriba: Deaths	23	26	22	20
NM: Rate	20.7	18	17.1	14.3

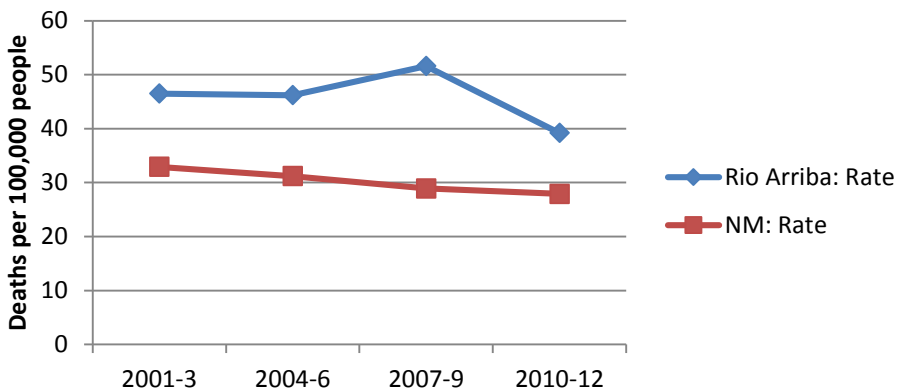
Lung Cancer Death Rate, 2001-12



Lung Cancer

	2001-3	2004-6	2007-9	2010-12
Rio Arriba: Rate	34.1	31.2	24.3	37.8
Rio Arriba: Deaths	38	37	32	51
NM: Rate	38.5	35.3	34.8	31.8

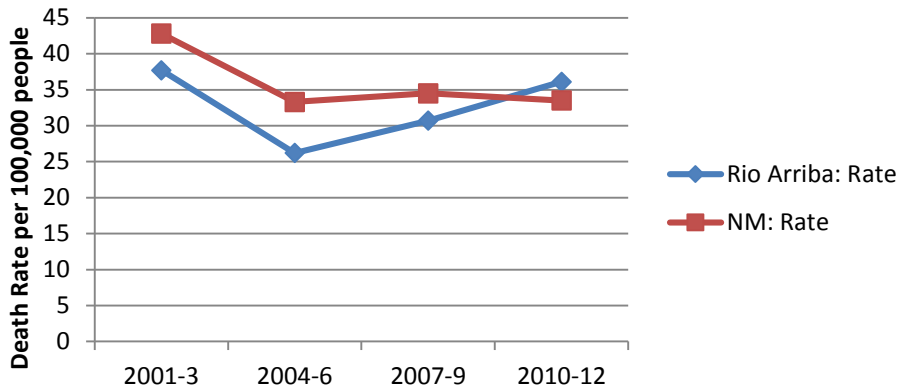
Diabetes Mellitus Death Rate, 2001-12



Diabetes Mellitus

	2001-3	2004-6	2007-9	2010-12
Rio Arriba: Rate	46.5	46.2	51.6	39.2
Rio Arriba: Deaths	52	56	67	55
NM: Rate	32.9	31.2	28.9	27.9

Cerebrovascular Disease Death Rate 2001-12

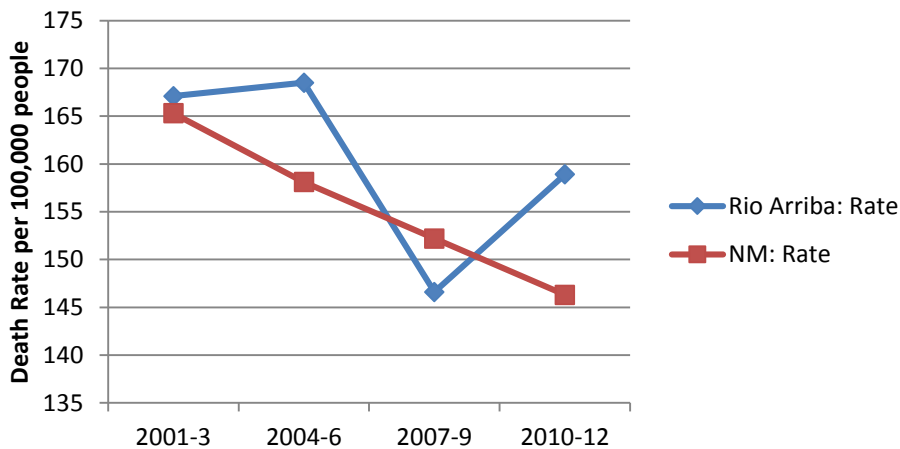


Cerebrovascular Diseases

	2001-3	2004-6	2007-9	2010-12
Rio Arriba: Rate	37.7	26.2	30.7	36.1
Rio Arriba: Deaths	40	30	36	47
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.

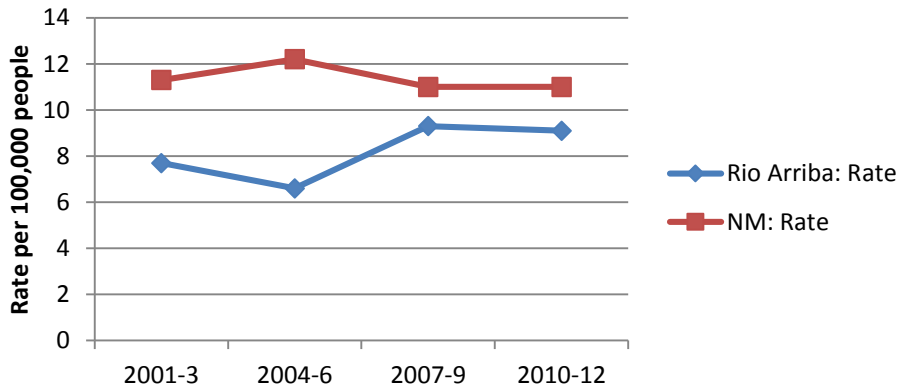
Cancer (all sites) Death Rate 2001-12



Cancer All Sites

	2001-3	2004-6	2007-9	2010-12
Rio Arriba: Rate	167.1	168.5	146.6	158.9
Rio Arriba: Deaths	190	203	191	214
NM: Rate	165.3	158.1	152.2	146.3

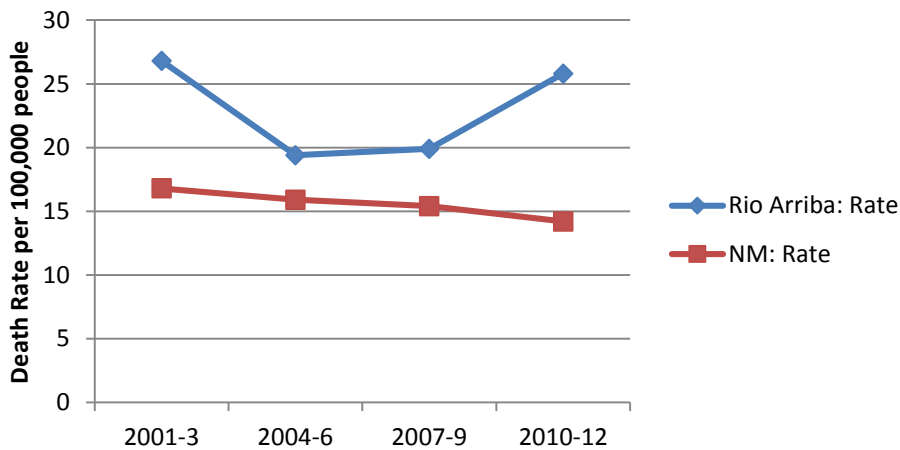
Breast Cancer Death Rate, 2001-12



Breast Cancer

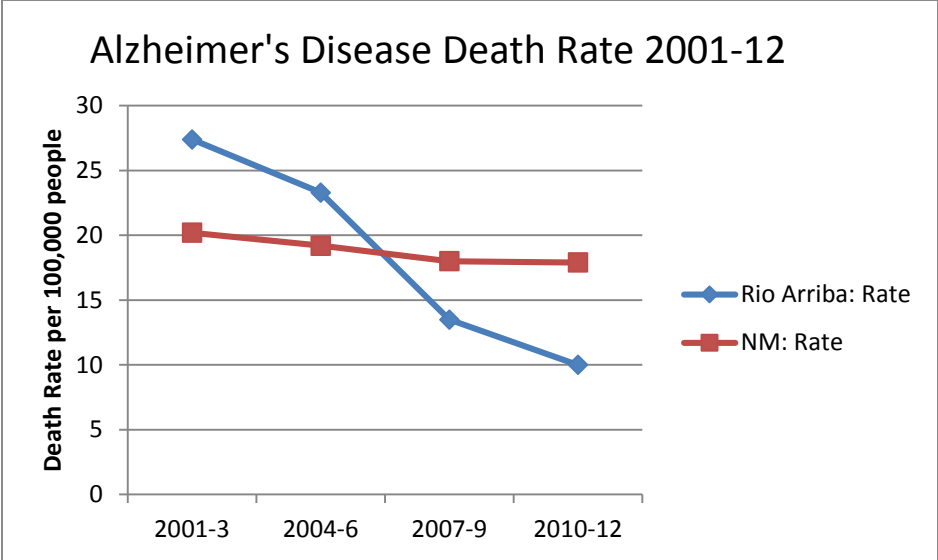
	2001-3	2004-6	2007-9	2010-12
Rio Arriba: Rate	7.7	6.6	9.3	9.1
Rio Arriba: Deaths	9	8	13	12
NM: Rate	11.3	12.2	11	11

Colon Cancer Death Rate 2001-12



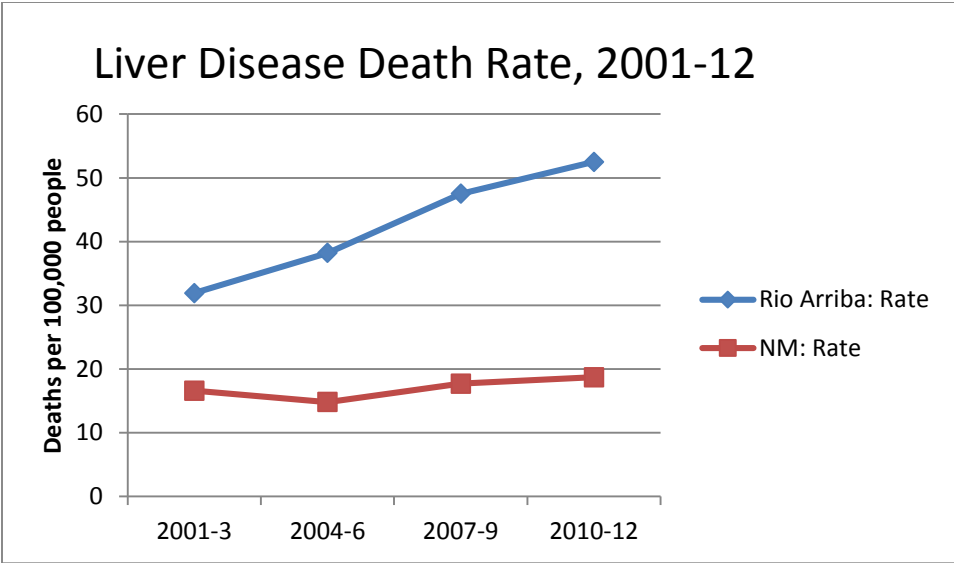
Neoplasm Colon

	2001-3	2004-6	2007-9	2010-12
Rio Arriba: Rate	26.8	19.4	19.9	25.8
Rio Arriba: Deaths	32	24	27	33
NM: Rate	16.8	15.9	15.4	14.2



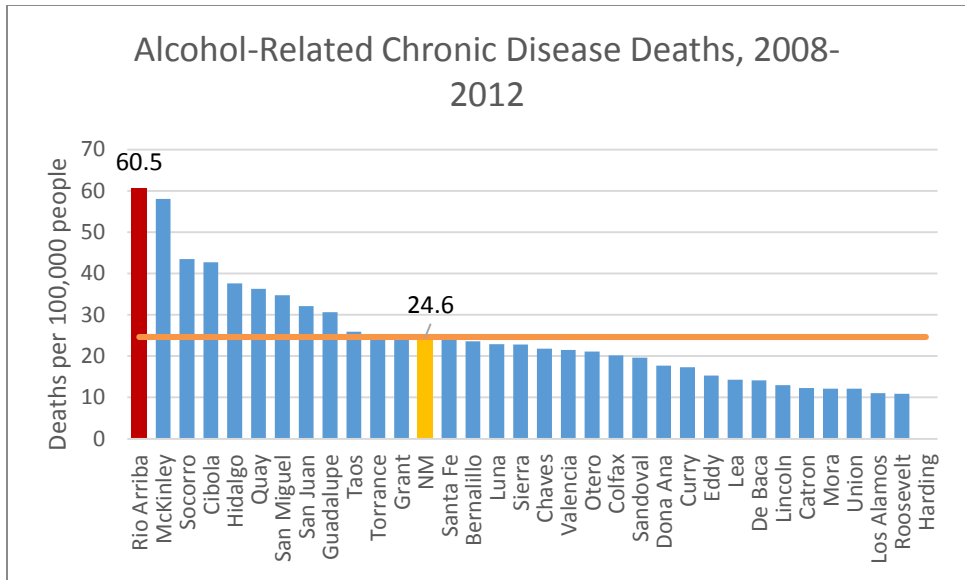
Alzheimer's Disease

	2001-3	2004-6	2007-9	2010-12
Rio Arriba: Rate	27.4	23.3	13.5	10
Rio Arriba: Deaths	27	25	15	12
NM: Rate	20.2	19.2	18	17.9



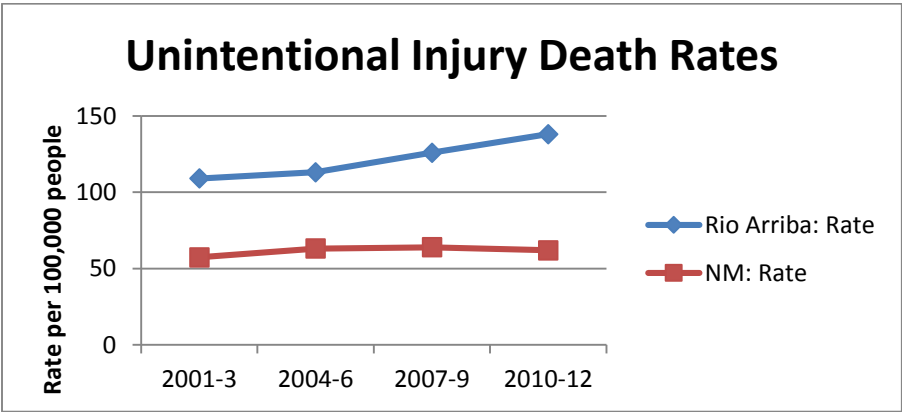
Liver Disease

	2001-3	2004-6	2007-9	2010-12
Rio Arriba: Rate	31.9	38.2	47.5	52.5
Rio Arriba: Deaths	39	46	59	69
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 (http://apps.nccd.cdc.gov/DACH_ARDI/Info/ICDCodes.aspx): (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.

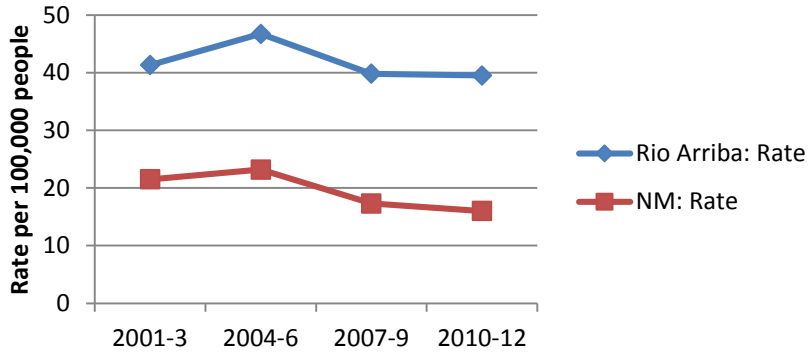
Unintentional Injuries



Unintentional Injury

	2001-3	2004-6	2007-9	2010-12
Rio Arriba: Rate	109	113.1	125.9	138
Rio Arriba: Deaths	129	131	148	157
NM: Rate	57.3	63.1	63.9	61.9

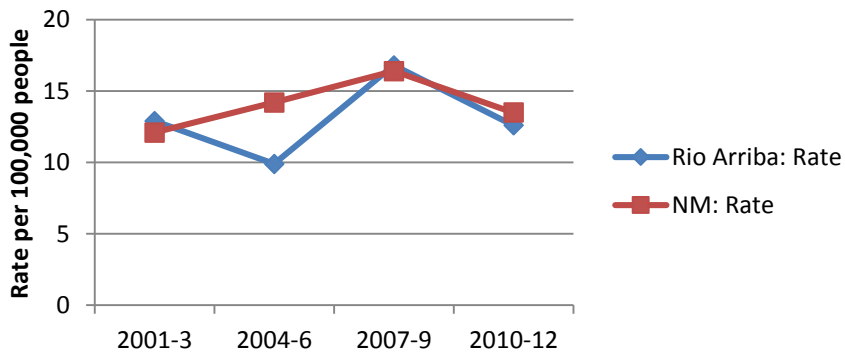
Motor Vehicle Traffic Death Rates, 2001-12



Motor Vehicle Traffic Death Rates

	2001-3	2004-6	2007-9	2010-12
Rio Arriba: Rate	41.3	46.7	39.8	39.5
Rio Arriba: Deaths	50	55	46	45
NM: Rate	21.5	23.2	17.3	16

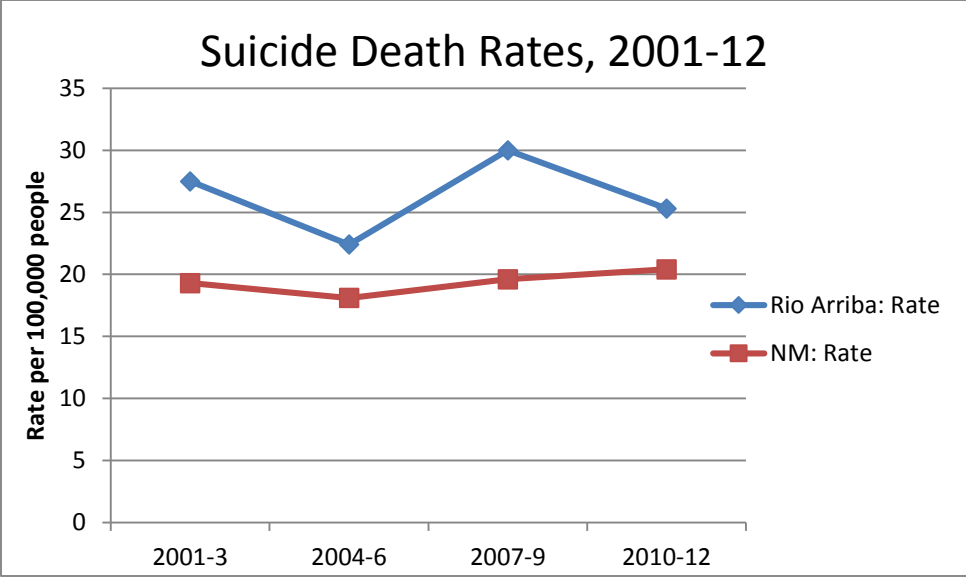
Unintentional Falls Death Rate, 2001-12



Unintentional Falls

	2001-3	2004-6	2007-9	2010-12
Rio Arriba: Rate	12.9	9.9	16.8	12.6
Rio Arriba: Deaths	13	11	20	16
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.

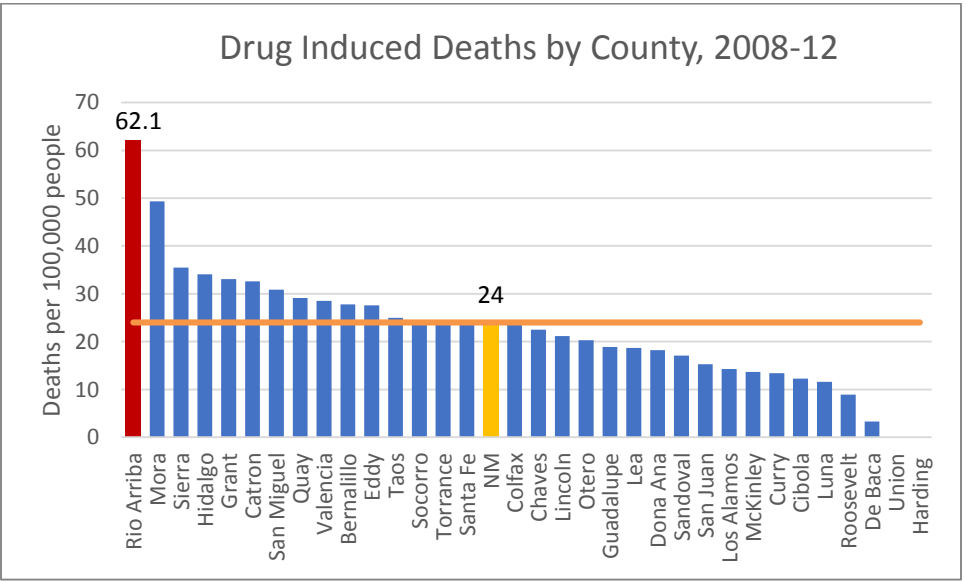


Suicide

	2001-3	2004-6	2007-9	2010-12
Rio Arriba: Rate	27.5	22.4	30	25.3
Rio Arriba: Deaths	33	27	35	29
NM: Rate	19.3	18.1	19.6	20.4

Deaths Due to Drug Overdose

In 2008-12 there were 2,401 deaths due to drug overdose in NM, 119 in Rio Arriba County

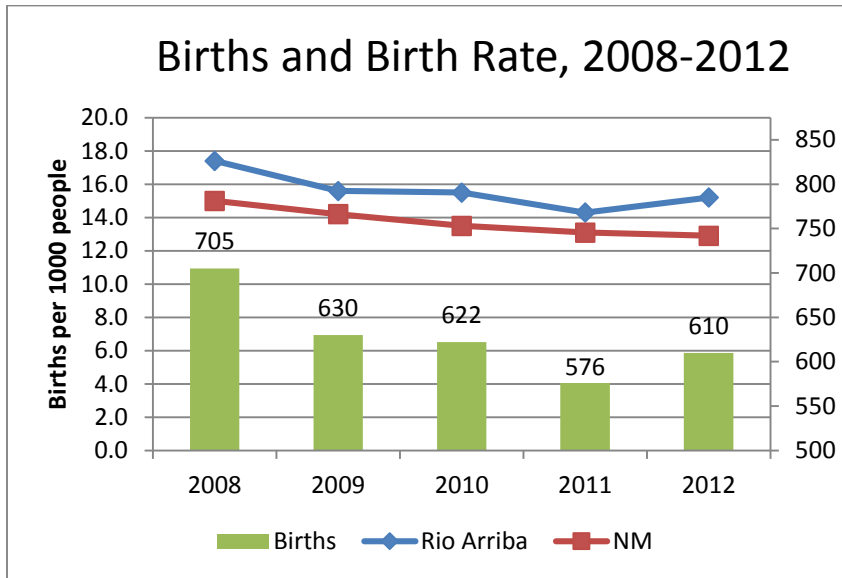


The Rio Arriba County drug-induced death rate is more than double the state average. See https://ibis.health.state.nm.us/indicator/complete_profile/DrugIndDth.html

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

Births

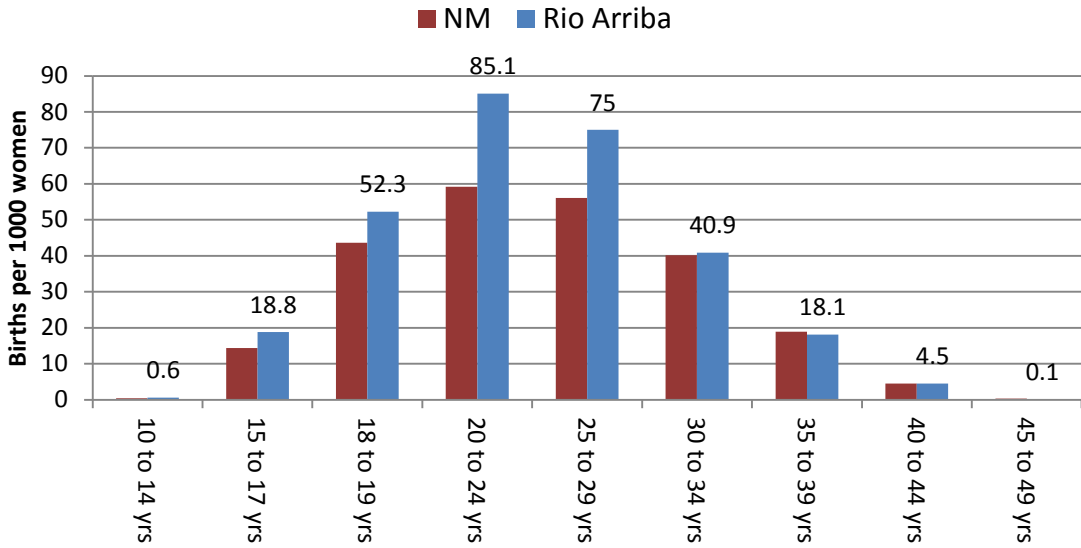
Number of Births 2008-12



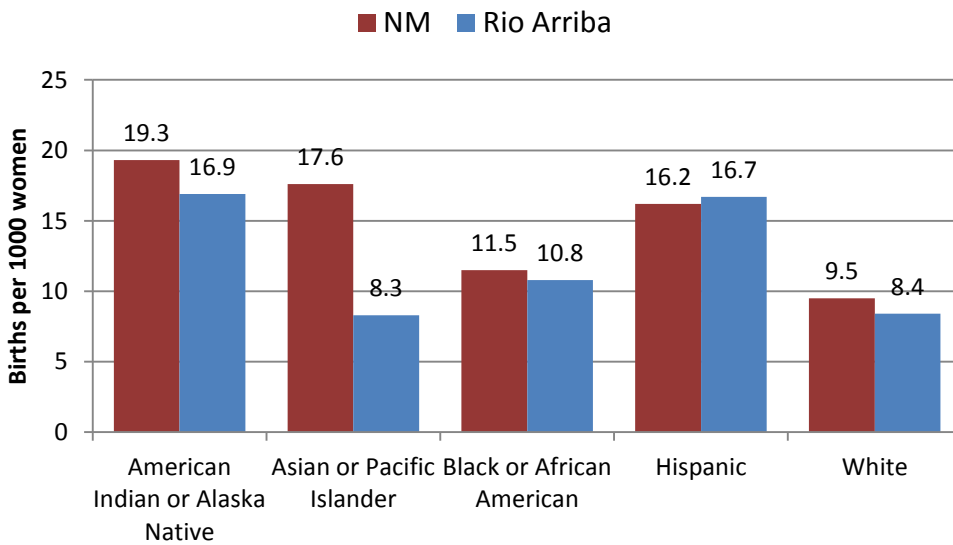
Number and Percentage of Births by Mother's Age

2008-2012	Rio Arriba			NM		
	Births	Population	Rate	Births	Population	Rate
10 to 14	8	13888	0.6	255	711,772	0.4
15 to 17	160	8489	18.8	6,468	449,182	14.4
18 to 19	296	5660	52.3	13,055	299,422	43.6
20 to 24	1043	12260	85.1	41,787	705,404	59.2
25 to 29	864	11520	75	38,894	693,507	56.1
30 to 34	487	11896	40.9	25,707	639,176	40.2
35 to 39	228	12596	18.1	11,816	624,147	18.9
40 to 44	56	12495	4.5	2,845	629,765	4.5
45 to 49	1	14643	0.1	188	715,236	0.3
50+				22	3384155	0
Total Births	3,143			141,037		
Percent to 15-19 yr olds	14.5%	Rate	32.23	13.8%	Rate	26.08

Birth Rates by Mothers Age, 2008-12

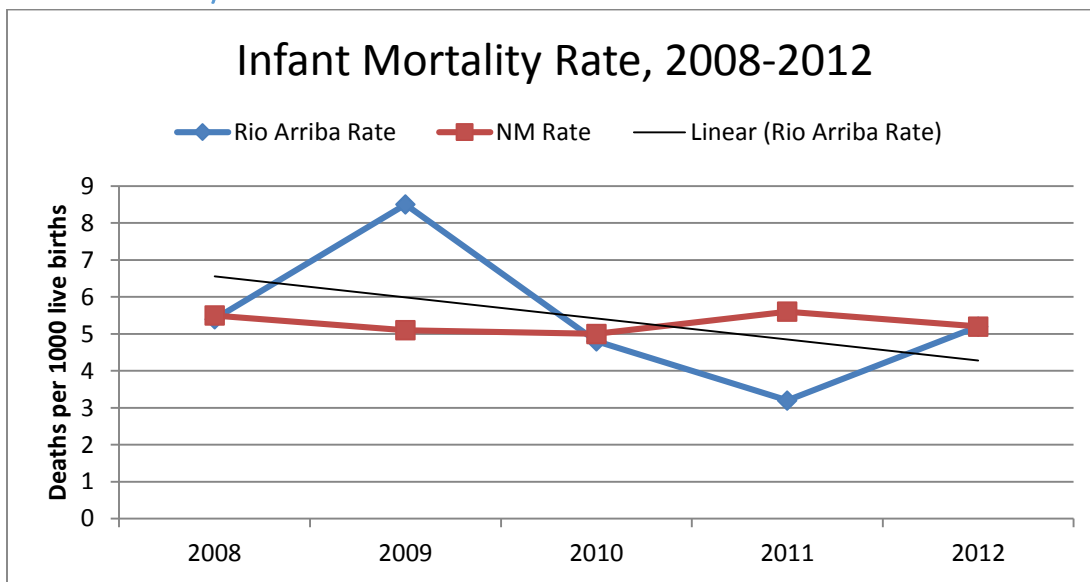


Birth Rates by Mothers Race/Ethnicity 2008-12



2008-12	Rio Arriba				NM		
	Births	Population	Birth Rate	Pop. Avg	Births	Population	Birth Rate
American Indian or Alaska Native	486	28713	16.9	5742.6	17517	906013	19.3
Asian or Pacific Islander	6	723	8.3	144.6	2656	151115	17.6
Black or African American	8	743	10.8	148.6	2405	209489	11.5
Hispanic	2402	144218	16.7	28843.6	77018	4755227	16.2
White	229	27195	8.4	5439	40634	4267697	9.5
Total	3143	201592	15.6	40318.4	141060	10289540	13.7

Infant Mortality Rate

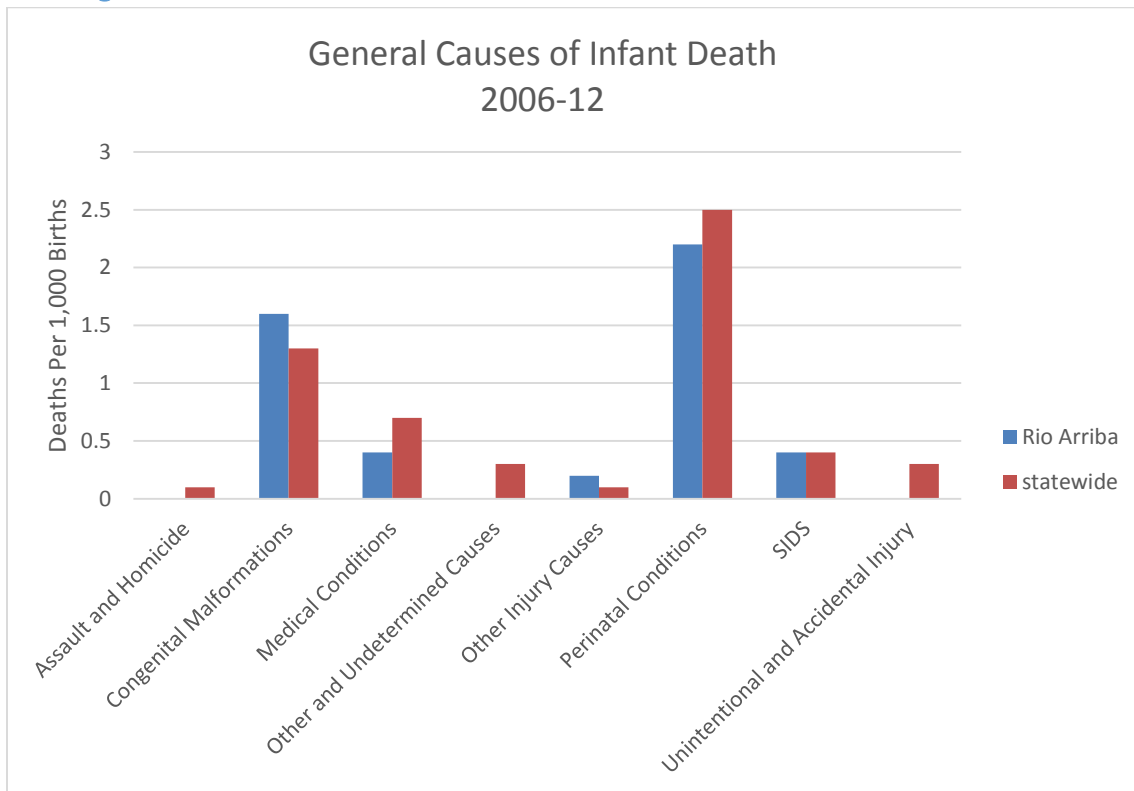


Infant Mortality Trend 2008-12

	Total	2008	2009	2010	2011	2012
Rio Arriba Infant Deaths	17	6	3	2	3	3
Rio Arriba Live Births	3,143	705	630	622	576	610
Rio Arriba Rate	5.4	8.5	4.8	3.2	5.2	4.9
	Total	2008	2009	2010	2011	2012
NM Infant Deaths	782	153	145	155	143	186
NM Live Births	141060	30154	28872	27793	27251	26990
NM Rate	5.5	5.1	5	5.6	5.2	6.9

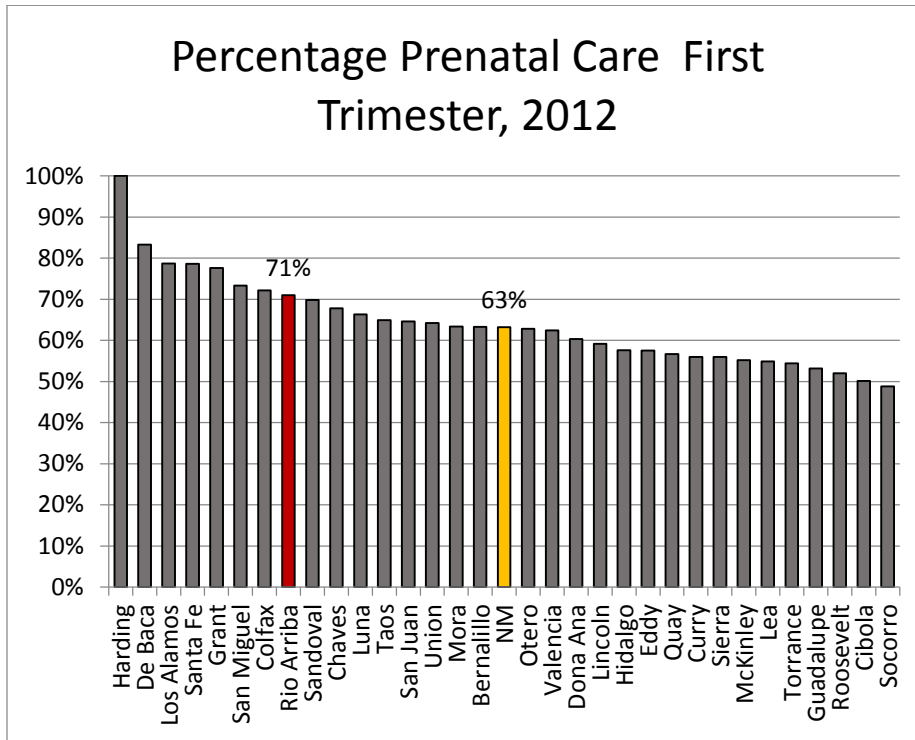
In Rio Arriba County, 2008-2012, there were 17 infant deaths for 3,143 births, a rate of 5.4 per 1000 live births. This is about the same as the NM rate. Infant mortality, often cited as a general indicator of well-being of a population, has increased in NM since 2010 after decreasing slightly from 2008-2009.

Leading causes of Infant Deaths



General Causes of Infant Death	NM			Rio Arriba		
	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	269		1.3	7		1.6
Medical Conditions	141		0.7	2		0.4
Other and Undetermined Causes	58		0.3			
Other Injury Causes	19		0.1	1		0.2
Perinatal Conditions	500		2.5	10		2.2
SIDS	74		0.4	2		0.4
Unintentional and Accidental Injury	53		0.3			
Total	1137	201578	5.6	22	4436	5

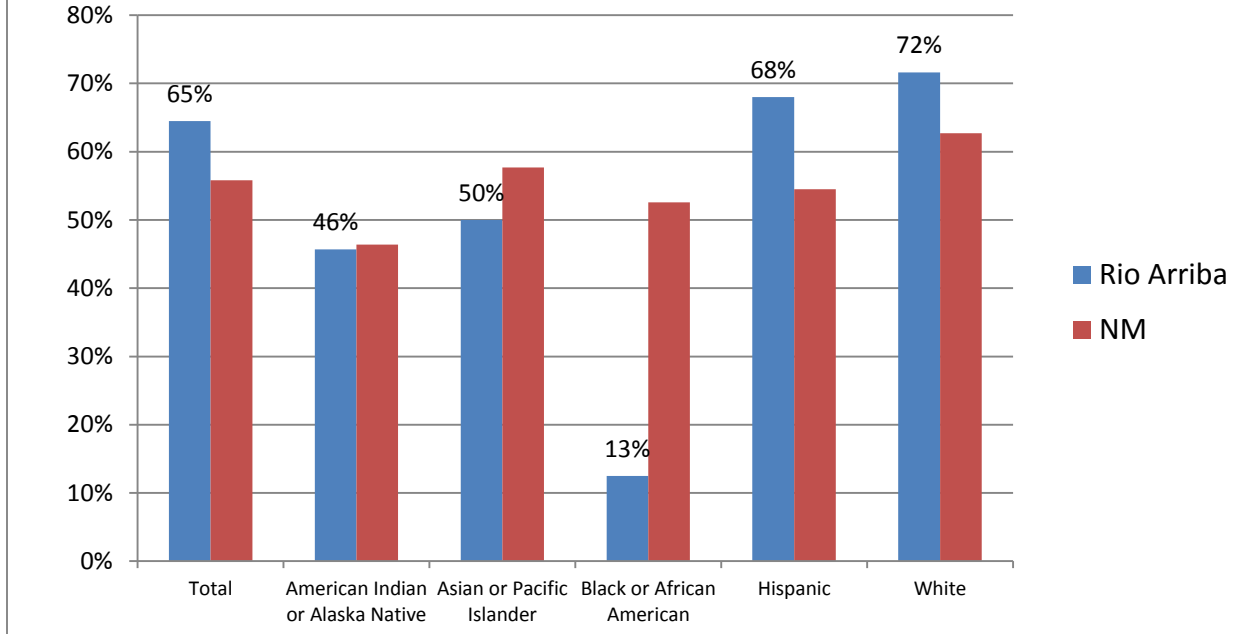
Prenatal Care



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 since prenatal care is available through Medicaid.

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

Percentage of Mothers with Adequate Prenatal Care, 2008-2012



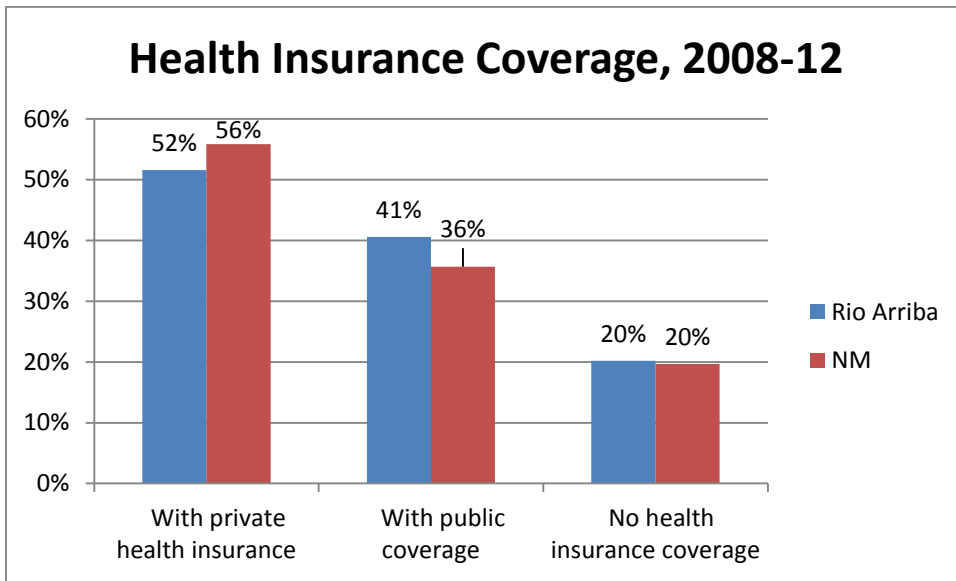
In this chart, higher is better. Whites and Hispanics begin prenatal care earlier than others.

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.

Access to SNAP and Health Insurance

Households Receiving SNAP/Food Stamp Benefit			
Rio Arriba County		NM	
Number	Percent	Number	Percent
2,091	14.0%	97,304	12.7%



Source: American Community Survey, 2008-12, Table DP03

Health Resources





Health Resources, 2011

	Rio Arriba County	NM
Population 2011	40,466	
Primary Care Physicians	16	1535
PCP per 100,000 people	39.6	73.7
Pediatricians	2	291
Pediatricians per 100,000 people under age 20	18.2	50.3
Obstetrician/Gynecologists	2	181
OB/GYM per 100,000 women	18.2	17.2
Psychiatrists	1	197
Psychiatrists per 100,000 people	2.5	9.5
Dentists	9	974
Dentists per 100,000 people	30.6	47.3
Short Term General Hospitals	1	41
STGH Beds	80	4,130
Federally Qualified Health Centers	12	100
Community Health Centers	13	152
School Based Health Centers	6	74
Medicare Beneficiaries	7,601	326,559
Percent of Population	18.8	15.7
Medicaid Beneficiaries	14,827	561,762
Percent of population	25.4	27

Area Health Resource File, HRSA.

<http://arf.hrsa.gov/arfdashboard/HRCT.aspx>

New Mexico Ranks 50th in Child Well-Being
2013 NM KIDS COUNT Profile
Rio Arriba County

 <p style="text-align: center;">ECONOMIC WELL-BEING</p>	<p>Children in Poverty 2010</p> <p style="text-align: center;">23%</p> <p>NM Rate: 27%</p>	<p>Families in which Parents Lack Secure Employment 2010</p> <p style="text-align: center;">44%</p> <p>NM Rate: 39%</p>	<p>Families with a High Housing Cost Burden 2010</p> <p style="text-align: center;">Rent: 30% Own: 21%</p> <p>NM Rate: Rent: 43% Own: 25%</p>	<p>Teens (16-19) Not in School and Not Working 2010</p> <p style="text-align: center;">16%</p> <p>NM Rate: 10%</p>
 <p style="text-align: center;">EDUCATION</p>	<p>Children Attending Preschool 2010</p> <p style="text-align: center;">31%</p> <p>NM Rate: 40%</p>	<p>Fourth Graders Proficient in Reading 2013</p> <p style="text-align: center;"><i>Chama Valley: 45%</i> <i>Dulce: 25%</i> <i>Española: 40%</i> <i>Jemez Mountain: 36%</i></p> <p>NM Rate: 46%</p>	<p>Eighth Graders Proficient in Math 2013</p> <p style="text-align: center;"><i>Chama Valley: 50%</i> <i>Dulce: 12%</i> <i>Española: 22%</i> <i>Jemez Mountain: 27%</i></p> <p>NM Rate: 42%</p>	<p>High School Students Graduating on Time 2013</p> <p style="text-align: center;"><i>Chama Valley: 76%</i> <i>Dulce: 72%</i> <i>Española: 63%</i> <i>Jemez Mountain: 67%</i></p> <p>NM Rate: 70%</p>
 <p style="text-align: center;">HEALTH</p>	<p>Low Birth Weight Babies 2012</p> <p style="text-align: center;">9.7%</p> <p>NM Rate: 7.6%</p>	<p>Children without Health Insurance 2011</p> <p style="text-align: center;">11%</p> <p>NM Rate: 10%</p>	<p>Child and Teen Deaths per 100,000 2012</p> <p style="text-align: center;">Child (1-14): 40 Teen (15-19): 216</p> <p>NM Rate: Child: 19 Teen: 69</p>	<p>Teens who Binge Drink 2011</p> <p style="text-align: center;">28%</p> <p>NM Rate: 24%</p>
 <p style="text-align: center;">FAMILY AND COMMUNITY</p>	<p>Children in Single Parent Families 2011</p> <p style="text-align: center;">43%</p> <p>NM Rate: 36%</p>	<p>Families where Household Head Lacks a High School Diploma 2011</p> <p style="text-align: center;">21%</p> <p>NM Rate: 16%</p>	<p>Children Living in High Poverty Areas 2011</p> <p style="text-align: center;">0%</p> <p>NM Rate: 21%</p>	<p>Teen Births per 1,000 2012</p> <p style="text-align: center;">58</p> <p>NM Rate: 45</p>

Note: NA means data "not available"

Data provided by NM KIDS COUNT/NM Voices for Children for the NM Department of Health, 2014



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/query/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/query/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.Cnty.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/query/result/birth/AdolBirthCnty/AdolBirth15_19.html