Taos 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 Taos County in 2013 was estimated at 33,035. The population has decreased .4 percent since the 2010 census.

The 5.2% of the population is less than 5 years old, 19.6% is over 64 years old

56.2% percent of the population is of Hispanic origin.

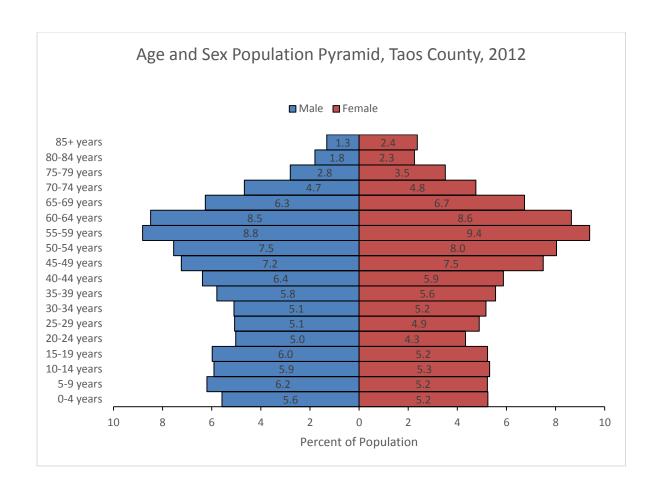
4.1% of the population is foreign-born.

These data are from the Census Quick Facts, http://quickfacts.census.gov/qfd/states/35/35055.html

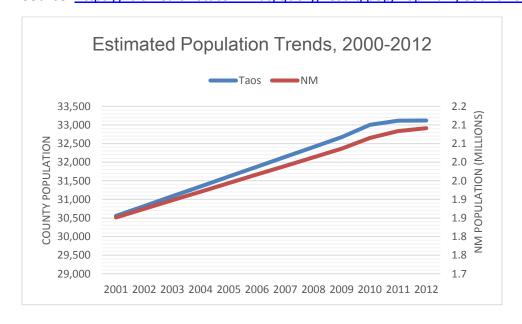
Taos Population by Age and Sex, 2012

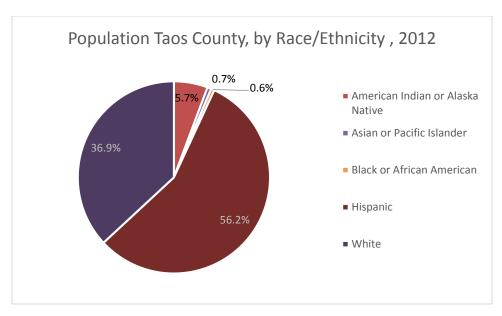
	Male		Female	
Age	Count	Percent	Count	Percent
Total	16305		16817	
0-4 years	911	5.6	882	5.2
5-9 years	1011	6.2	878	5.2
10-14 years	964	5.9	894	5.3
15-19 years	976	6.0	879	5.2
20-24 years	819	5.0	728	4.3
25-29 years	827	5.1	823	4.9
30-34 years	831	5.1	868	5.2
35-39 years	945	5.8	934	5.6
40-44 years	1040	6.4	988	5.9
45-49 years	1181	7.2	1261	7.5
50-54 years	1231	7.5	1352	8.0
55-59 years	1438	8.8	1578	9.4
60-64 years	1384	8.5	1453	8.6
65-69 years	1021	6.3	1133	6.7
70-74 years	762	4.7	800	4.8
75-79 years	457	2.8	590	3.5
80-84 years	294	1.8	379	2.3
85+ years	215	1.3	398	2.4

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



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





Race/Ethnicity	Taos	Percent	NM	Percent
Total	33122	100.0%	2091432	100.0%
American Indian or Alaska Native	1885	5.7%	183169	8.8%
Asian or Pacific Islander	216	0.7%	31101	1.5%
Black or African American	186	0.6%	42825	2.0%
Hispanic	18611	56.2%	969417	46.4%
White	12224	36.9%	864919	41.4%

Approximately 456 people live in group quarters. These include jails, prisons, nursing homes, and dormitories.

Single Parent Households

Single Parent Households, Taos County 2008-12

Total Households	13,373	
Single Male Householder	630	4.7%
Single Female Householder	1,918	14.3%
Number of grandparents responsible for children under 18 years old	229	

Housing

In 2012, there were 20,284 housing units in Taos County; 13% were multi-unit structures; 73% of housing units were owner-occupied. The median value of an owner-occupied home in 2008-12 was \$203,800. There are (an average) of 2.4 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 Taos County, 12.5% of owners with a mortgage paid 30% or more of their income for housing while 59.6% of renters had excessive housing costs.

Source American Community Survey, 2008-12. Table ACS 12 5Yr DP04

Homelessness

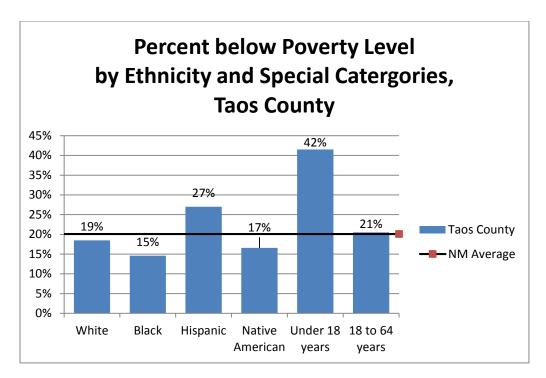
According to the 2013 NM Point in Time Survey, In Taos County there were 43 people were found experiencing homelessness.

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

Income and Poverty

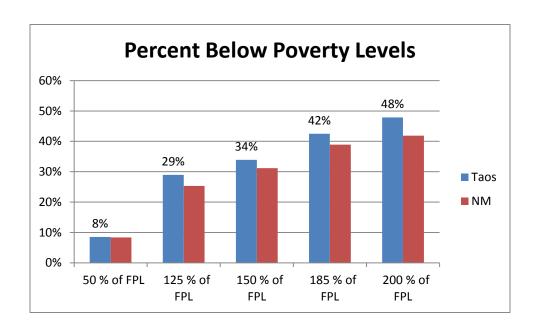
Average per capita money income (2008-12) was \$21,684 and median household income was \$33,835. According to the Census Bureau in 2012, about 24% of the population lived below the poverty line. The unemployment rate (2012) was 9.1%. This is the proportion of the work force that is unemployed and looking 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/35/35055.html Unemployment: http://www.bls.gov/lau/data.htm



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



Education and Language

Education and Language	Taos	New Mexico
Language other than English spoken at home	43.0%	36%
High School Graduate or Higher	88.0%	83.4%
Bachelor's degree or higher	28.8%	25.6%

These data are from the Census Quick Facts, http://quickfacts.census.gov/qfd/states/35/35055.html

Taos County School Enrollment

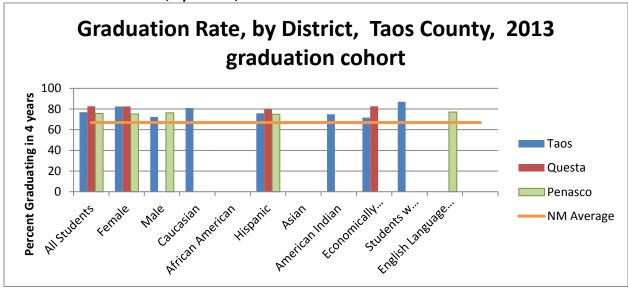
SCHOOL ENROLLMENT	Estimate	Percent
Population 3 years and over enrolled in school	7,013	
Nursery school, preschool	452	6.4%
Kindergarten	347	4.9%
Elementary school (grades 1-8)	2,920	41.6%
High school (grades 9-12)	1,492	21.3%
College or graduate school	1,802	25.7%

Taos County Educational Attainment

EDUCATIONAL ATTAINMENT		
Population 25 years and over	23,879	23,879
Less than 9th grade	1,164	4.9%
9th to 12th grade, no diploma	1,704	7.1%
High school graduate (includes equivalency)	6,290	26.3%
Some college, no degree	5,504	23.0%
Associate's degree	2,335	9.8%
Bachelor's degree	4,369	18.3%
Graduate or professional degree	2,513	10.5%

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

Four Year Graduation Rate, by District, Taos 2013



Category	Taos	Questa	Penasco
All Students	76.9	82.6	75.6
Female	82.4	82.4	75.2
Male	72.2		76.3
Caucasian	81		
African American			
Hispanic	75.8	79.8	74.9
Asian			
American Indian	74.9		
Economically Disadvantaged	71.7	82.6	
Students w Disabilities	86.9		
English Language Learners	68.4		77.0

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

Child Abuse

Child Abuse Investigations, July 2012-June 2013

				Child Victim
			Number of	Rate per
	Accepted	%	substantiated child	1000
County	Reports	substantiated	victims	children
Taos	315	24%	152	20.4
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

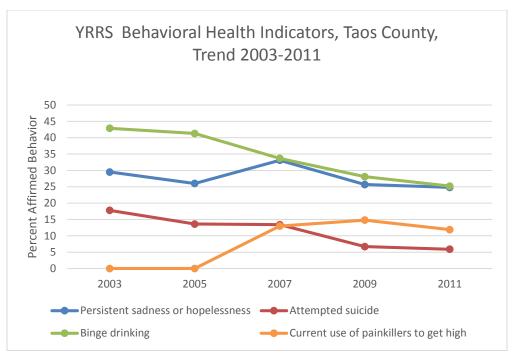
Risk and Resiliency is measured by a two surveys, the Behavior Risk Factor Surveillance Survey conducted by the NM Department of Health and the Youth Risk and Resiliency Survey conducted by school districts. The YRRS measures are self-reported by the student.

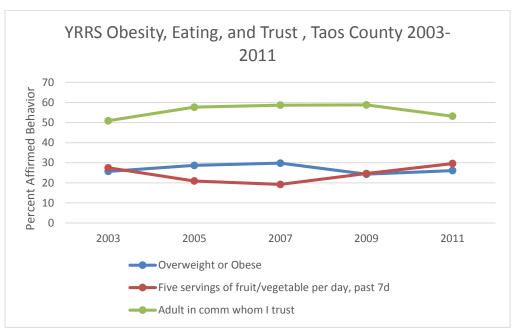
Adolescent Indicators

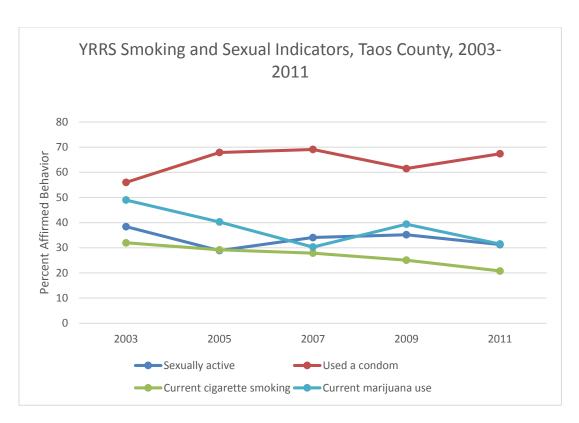
Measure	Taos	NM
Adolescent Risk and Resiliency Measures		
Ate Five or More Servings of Fruit or Vegetables per Day 2009,2010,2011	24.5%	23.8%
Adolescent Obesity, self-reported BMI above 95th percentile for age and sex	11%	12.4%
Youth Smoking Prevalence, percentage of students who smoked cigarettes on or more days in the past month	24.6%	22.7%
Youth with Feeling of Sadness or Hopelessness	27.9%	30.8%
Youth with Trusted Adult in Community	56.9 %	48.0%
Binge Drinking	20.0%	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







Use of condom is percentage of sexually active who used condom at last sexual intercourse.

						Avg.
Taos	2003	2005	2007	2009	2011	2007-11
Persistent sadness or hopelessness	29.5	26	33.1	25.7	24.8	27.9
Attempted suicide	17.8	13.6	13.4	6.7	5.9	8.7
Current cigarette smoking	32	29.2	27.9	25.1	20.8	24.6
Current spit tobacco use	10.6	8.5	4.6	4.6	10.1	6.4
Current alcohol use	61	58.9	54.8	43.5	40.2	46.2
Binge drinking	42.9	41.3	33.7	28.1	25.2	29.0
Current marijuana use	49	40.3	30.3	39.4	31.5	33.7
Current use of painkillers to get high			13	14.8	11.9	13.2
Ever used illegal injection drugs	7.3	2.7	3.5	3.5	2.2	3.1
Sexually active	38.4	28.9	34.1	35.2	31.3	33.5
Used a condom	56	67.9	69.1	61.5	67.4	66.0
Overweight or Obese	25.7	28.7	29.8	24.3	26.1	26.7
Five servings of fruit/vegetable per day, past week	27.5	20.9	19.2	24.6	29.6	24.5
Trusted Adult in Community	50.9	57.7	58.7	58.8	53.2	56.9
Obese	10.2	12.7	11.2	10.6	11.6	11.1

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	Taos Co	NM
General Self-Reported Health Status, percentage of adults reporting fair or poor		
health	16.3%	17.5%
Adult Physical Activity, 2005,2007, 2009	57.1%	52.5%
Adults Consuming 5 or more servings of fruits and vegetable per day, 2007, 2009	26.9%	22.4%
Obesity Among Adults bmi >25, 2011, 2012	60.4%	62.7%
Adult Smoking Prevalence current smoker,		
2011, 2012	17.7%	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	Taos	NM
White		22.8%
Hispanic	20%	22.5%
Black	20%	31.1%
Native American		20.5%
Asian		9.0%

Mortality

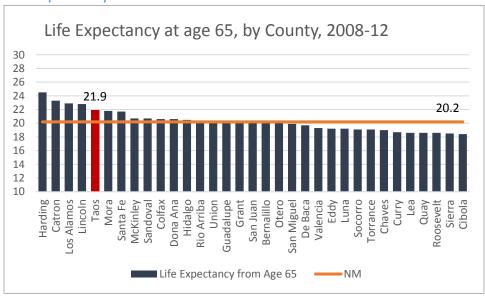
Leading Causes of Death

Age adjusted rates per 100,000 people

Causes	Taos	NM
Total	568.5	616.3
Neoplasm, malignant (ICD10: C00-C97)	135.7	147.9
Circulatory, Heart disease (ICD10: I00-I09, I11, I13, I20-I51)	105	150
Injury, Unintentional injuries (ICD10: V01-X59, Y85-Y86)	80	62.4
Respiratory, Chronic lower respiratory diseases (ICD10: J40-J47)	42.8	45.9
Circulatory, Cerebrovascular diseases (ICD10: I60-I69)	28.2	34.2
Diabetes mellitus (ICD10: E10-E14)	27.2	27.8
Injury, Intentional self-harm (suicide) (ICD10: X60-X84, Y87.0, *U03)	22.2	19.9
Chronic liver disease and cirrhosis (ICD10: K70, K73-K74)	20.7	18.1
Respiratory, Influenza and pneumonia (ICD10: J09-J18)	16.8	15.2
Alzheimer's disease (ICD10: G30)	13.3	18.1

Green Indicates the county rate is better, lower, than the New Mexico rate. Leading causes of death for Taos county are shown here compared to New Mexico.

Life Expectancy

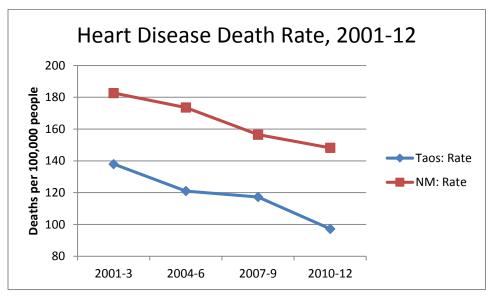


The number of years a person is expected to live after age 65 varies from 24.5 to 18.4

Chronic Diseases

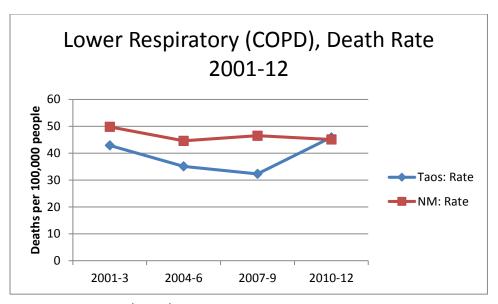
Chronic diseases are conditions that develop slowly, often inconspicuously, and even with treatment affect a person throughout his or her lifetime. Chronic diseases are often the result of lifestyle choices (such as smoking), exposure to environmental pollution or toxins, and genetics (some cancers). 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.



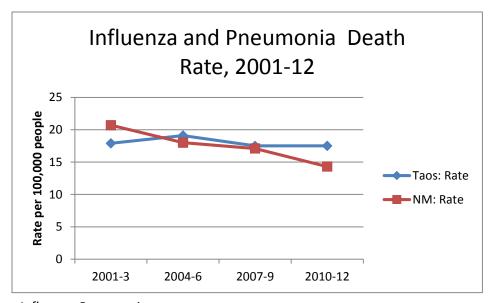
Heart Disease

	2001-3	2004-6	2007-9	2010-12
Taos: Rate	138	121	117.3	97.2
Taos: Deaths	132	130	140	118
NM: Rate	182.7	173.6	156.5	148.2



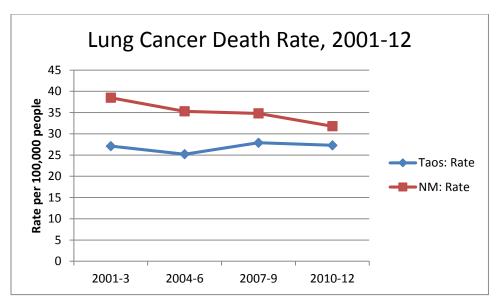
Lower Respiratory (COPD)

	2001-3	2004-6	2007-9	2010-12
Taos: Rate	42.9	35.1	32.3	45.9
Taos: Deaths	40	36	37	56
NM: Rate	49.8	44.6	46.5	45.1



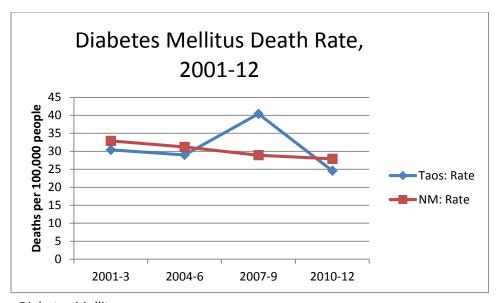
Influenza-Pneumonia

	2001-3	2004-6	2007-9	2010-12
Taos: Rate	17.9	19.1	17.5	17.5
Taos: Deaths	17	19	20	22
NM: Rate	20.7	18	17.1	14.3



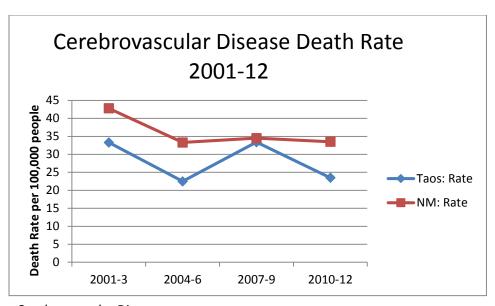
Lung Cancer

8				
	2001-3	2004-6	2007-9	2010-12
Taos: Rate	27.1	25.2	27.9	27.3
Taos: Deaths	28	29	38	37
NM: Rate	38.5	35.3	34.8	31.8



Diabetes Mellitus

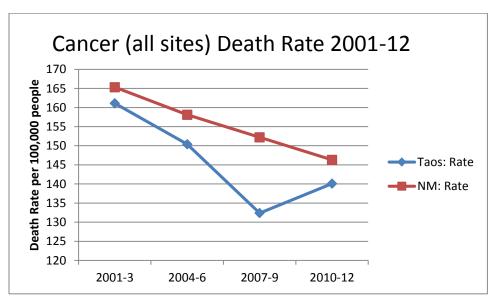
	2001-3	2004-6	2007-9	2010-12
Taos: Rate	30.4	29	40.4	24.6
Taos: Deaths	31	31	44	31
NM: Rate	32.9	31.2	28.9	27.9



Cerebrovascular Diseases

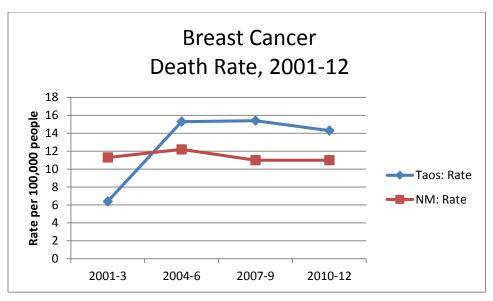
	2001-3	2004-6	2007-9	2010-12
Taos: Rate	33.3	22.5	33.4	23.5
Taos: Deaths	31	23	37	29
NM: Rate	42.8	33.3	34.5	33.5

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



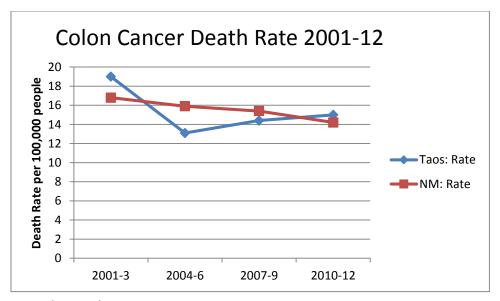
Cancer All Sites

	2001-3	2004-6	2007-9	2010-12
Taos: Rate	161.1	150.4	132.4	140.1
Taos: Deaths	162	164	167	188
NM: Rate	165.3	158.1	152.2	146.3



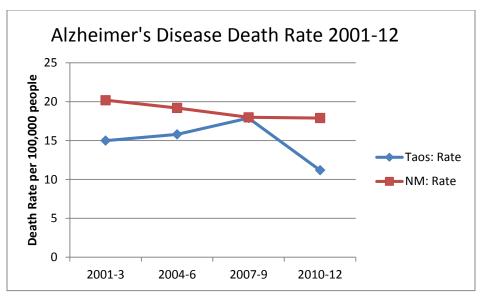
Breast Cancer

	2001-3	2004-6	2007-9	2010-12
Taos: Rate	6.4	15.3	15.4	14.3
Taos: Deaths	7	17	20	19
NM: Rate	11.3	12.2	11	11



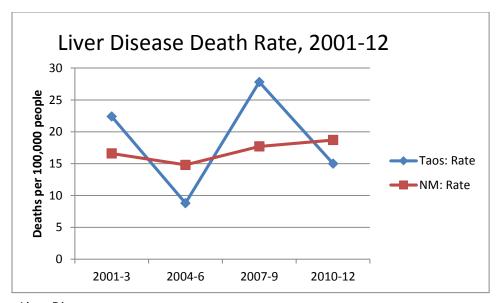
Neoplasm Colon

	2001-3	2004-6	2007-9	2010-12
Taos: Rate	19	13.1	14.4	15
Taos: Deaths	19	14	19	21
NM: Rate	16.8	15.9	15.4	14.2



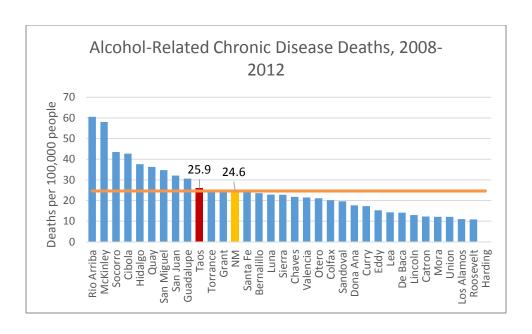
Alzheimer's Disease

	2001-3	2004-6	2007-9	2010-12
Taos: Rate	15	15.8	17.9	11.2
Taos: Deaths	14	16	20	13
NM: Rate	20.2	19.2	18	17.9



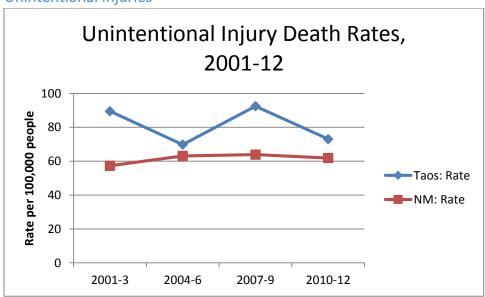
Liver Disease

	2001-3	2004-6	2007-9	2010-12
Taos: Rate	22.4	8.8	27.8	15
Taos: Deaths	24	10	32	22
NM: Rate	16.6	14.8	17.7	18.7



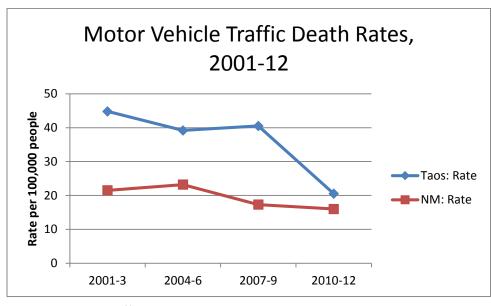
This chart includes chronic conditions directly and 100% attributable to consumption of alcohol. Included in this definition from the CDC's Alcohol-Related Disease Impact (ARDI) program (http://apps.nccd.cdc.gov/DACH_ARDI/Info/ICDCodes.aspx): (alcohol) psychosis, abuse, dependence syndrome, myopathy, 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



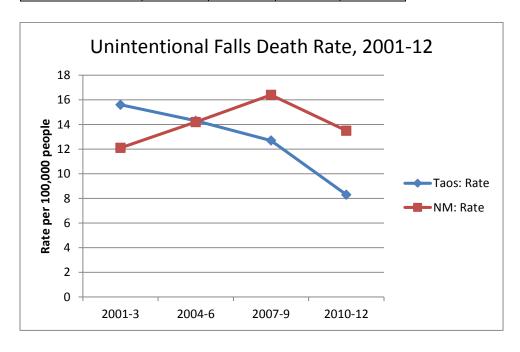
Unintentional Injury

	2001-3	2004-6	2007-9	2010-12
Taos: Rate	89.5	69.8	92.5	73.1
Taos: Deaths	82	65	86	76
NM: Rate	57.3	63.1	63.9	61.9



Motor Vehicle Traffic Death Rates

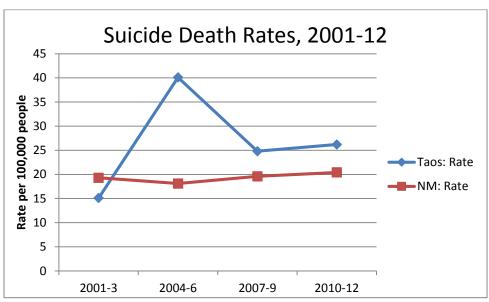
	2001-3	2004-6	2007-9	2010-12			
Taos: Rate	44.8	39.2	40.5	20.5			
Taos: Deaths	39	34	35	21			
NM: Rate	21.5	23.2	17.3	16			



Unintentional Falls

	2001-3	2004-6	2007-9	2010-12
Taos: Rate	15.6	14.3	12.7	8.3
Taos: Deaths	15	14	14	10
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.

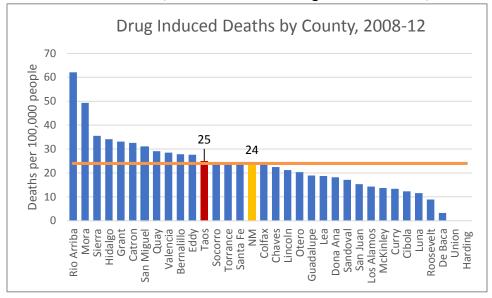


Suicide

	2001-3	2004-6	2007-9	2010-12
Taos: Rate	15.1	40.1	24.8	26.2
Taos: Deaths	15	38	24	25
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, 44 in Taos County

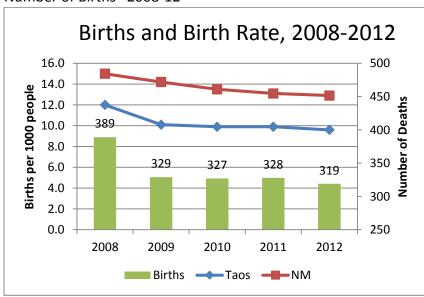


The Taos County drug-induced death rate is above the state average. See https://ibis.health.state.nm.us/indicator/complete_profile/DrugIndDth.html

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

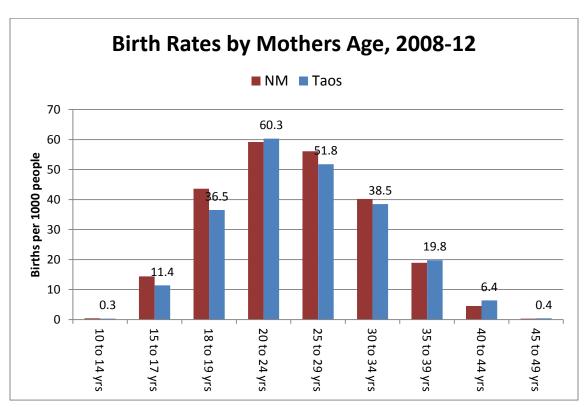
Births

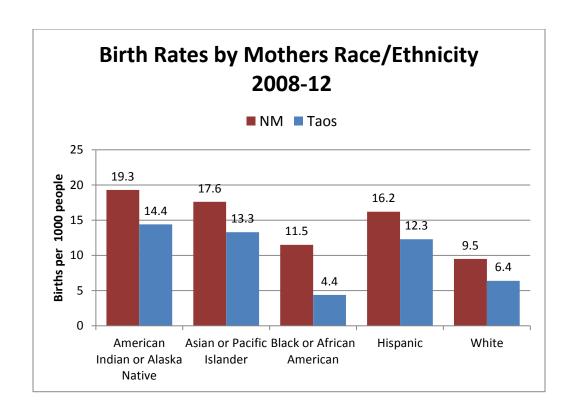
Number of Births 2008-12



Number and Percentage of Births by Mother's Age

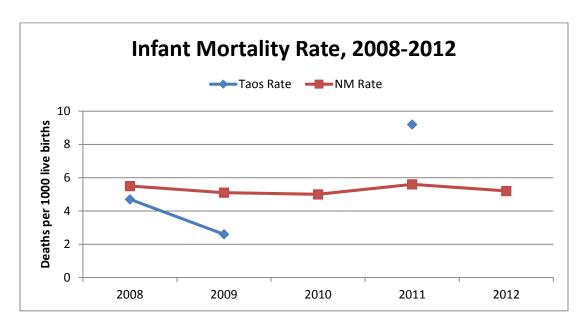
2008-2012		Taos			NM	
	Births	Population	Rate	Births	Population	Rate
10 to 14	3	9431	0.3	255	711,772	0.4
15 to 17	64	5630	11.4	6,468	449,182	14.4
18 to 19	137	3753	36.5	13,055	299,422	43.6
20 to 24	469	7781	60.3	41,787	705,404	59.2
25 to 29	431	8313	51.8	38,894	693,507	56.1
30 to 34	328	8525	38.5	25,707	639,176	40.2
35 to 39	189	9564	19.8	11,816	624,147	18.9
40 to 44	66	10335	6.4	2,845	629,765	4.5
45 to 49	5	12459	0.4	188	715,236	0.3
50+				22	3384155	0
Total Births	1,692			141,037		
Percent to 15-19 yr olds	11.9%	Rate	21.42	13.8%	Rate	26.08





2008-12	Taos				NM		
	Births	Population	Birth Rate	Pop. Avg	Births	Population	Birth Rate
American							
Indian or							
Alaska							
Native	136	9430	14.4	1886	17517	906013	19.3
Asian or							
Pacific							
Islander	14	1055	13.3	211	2656	151115	17.6
Black or							
African							
American	4	913	4.4	182.6	2405	209489	11.5
Hispanic	1137	92764	12.3	18552.8	77018	4755227	16.2
White	387	60156	6.4	12031.2	40634	4267697	9.5
Total	1692	164319	10.3	32863.8	141060	10289540	13.7

Infant Mortality Rate



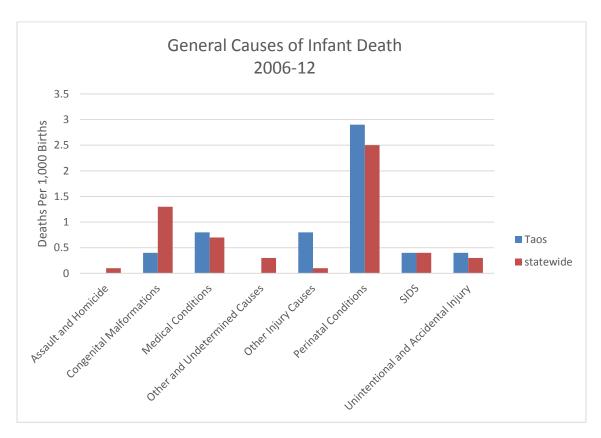
Infant Mortality Trend 2008-12

	Total	2008	2009	2010	2011	2012
Taos Infant Deaths	8	1		3		4
Taos Live Deaths	1,692	389		327		319
Taos Rate	4.7	2.6		9.2		12.5
	Total	2008	2009	2010	2011	2012
NM Infant Deaths	782	153	145	155	143	186
NM Live Deaths	141060	30154	28872	27793	27251	26990
NM Rate	5.5	5.1	5	5.6	5.2	6.9

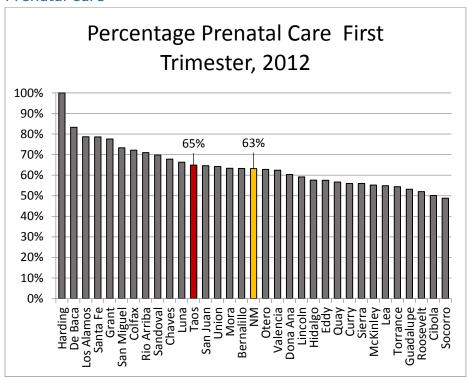
In Taos County, 2008-2012, there were 8 infant deaths for 1,692 births, a rate of 4.7 per 1000 live births. This is the lower than the NM rate. Infant mortality, often cited as a general indicator of well-being of a population, has increased in NM since 2010 after decreasing slightly from 2008-2009.

Leading causes of Infant Deaths

	NM			Taos		
	Number of	Number of	Deaths Per	Number of	Number of	Deaths Per
General Causes of Infant Death	Deaths		1,000 Births		Live Births	1,000 Births
Assault and Homicide	23		0.1			_,::: 3
Congenital Malformations	269		1.3	1		0.4
Medical Conditions	141		0.7	2		0.8
Other and Undetermined Causes	58		0.3			
Other Injury Causes	19		0.1	2		0.8
Perinatal Conditions	500		2.5	7		2.9
SIDS	74		0.4	1		0.4
Unintentional and Accidental Injury	53		0.3	1		0.4
Total	1137	201578	5.6	14	2437	5.7

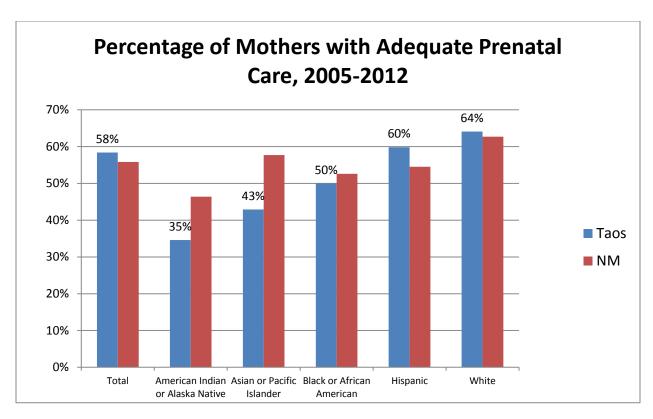


Prenatal Care



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.



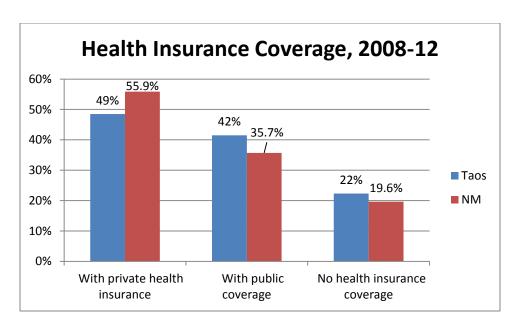
In this chart higher is better.

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				
Taos County		NM		
Number	Percent	Number	Percent	
2,101	15.7%	97,304	12.7%	



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

Health Resources

Health Resources, 2011

Health Resources, 2011		
	Taos County	NM
Population 2011	32,917	
Primary Care Physicians	34	1535
PCP per 100.000 people	103.3	73.7
Pediatricians	6	291
Pediatricians per 100,000	80.9	50.3
people under age 20		
Obstetrician/Gynecologists	10	181
OB/GYM per 100,000 women	17.9	17.2
Psychiatrists	3	197
Psychiatrists per 100,000 people	9.1	9.5
Dentists	19	974
Dentists per 100,000 people	61.5	47.3
Short Term General Hospitals	1	41
STGH Beds	45	4,130
Federally Qualified Health Centers	2	100
Community Health Centers	7	152
School Based Health Centers	2	74
Medicare Beneficiaries	6,904	326,559
Percent of Population	12.6	21.0
Medicaid Beneficiaries	8,371	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 Taos County

5	Children in Poverty 2010	Families in which Parents Lack Secure Employment 2010	Families with a High Housing Cost Burden 2010	Teens (16-19) Not in School and Not Working 2010
ECONOMIC	36%	47%	Own: 24%	22%
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	34%	Mesa Vista:27% Peñasco: 50% Questa: 33% Taos: 45%	Mesa Vista: 9% Peñasco: 38% Questa: 44% Taos: 39%	Mesa Vista: 93% Peñasco: 87% Questa: 65% Taos: 74%
	NM Rate: 40%	NM Rate: 46%	NM Rate: 42%	NM Rate: 70%
-3-	Low Birth Weight Babies 2012	Children without Health Insurance 2011	Child and Teen Deaths per 100,000 2012	Teens who Binge Drink 2011
HEALTH	9.4%	10%	Child (1-14): 19 Teen (15-19): 54	25%
HEALIT	NM Rate: 7.6%	NM Rate: 10%	NM Rate: Child: 19 Teen: 69	NM Rate: 24%
Ė	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	48%	12%	2796	28
COMMONT	NM Rate: 36%	NM Rate: 16%	NM Rate: 21%	NM Rate: 45

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/MortCntviCD10/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/querv/result/mort/MortCntvICD10/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/query/result/birth/AdolBirthCnty/AdolBirth15 19.html