Union 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 Union County in 2013 was estimated at 4,370. The population has decreased 3.9 percent since the 2010 census.

The 4.9% of the population is less than 5 years old, 19.4% is over 65 years old.

41% percent of the population is of Hispanic origin.

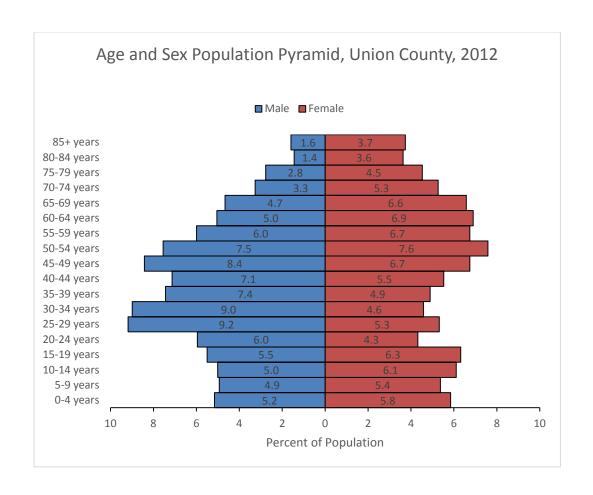
3.9% of the population is foreign-born.

These data are from the Census Quick Facts, http://quickfacts.census.gov/qfd/states/35/35059.html

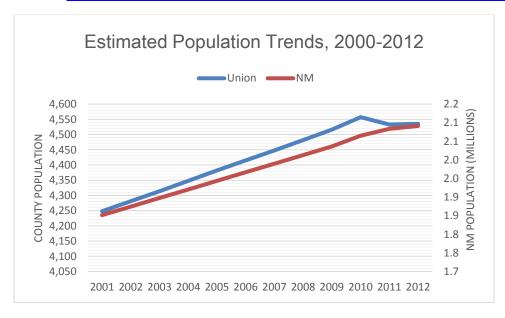
Union Population by Age and Sex, 2012

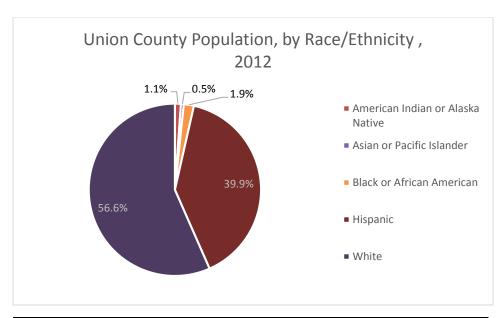
	Male		Female	
Age	Count	Percent	Count	Percent
Total	2636		1899	
0-4 years	136	5.2	111	5.8
5-9 years	130	4.9	102	5.4
10-14 years	132	5.0	116	6.1
15-19 years	145	5.5	120	6.3
20-24 years	157	6.0	82	4.3
25-29 years	242	9.2	101	5.3
30-34 years	237	9.0	87	4.6
35-39 years	196	7.4	93	4.9
40-44 years	188	7.1	105	5.5
45-49 years	222	8.4	128	6.7
50-54 years	199	7.5	144	7.6
55-59 years	158	6.0	128	6.7
60-64 years	133	5.0	131	6.9
65-69 years	123	4.7	125	6.6
70-74 years	86	3.3	100	5.3
75-79 years	73	2.8	86	4.5
80-84 years	38	1.4	69	3.6
85+ years	42	1.6	71	3.7

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	Union	Percent	NM	Percent
Total	4535	100.0%	2091432	100.0%
American Indian or Alaska Native	51	1.1%	183169	8.8%
Asian or Pacific Islander	24	0.5%	31101	1.5%
Black or African American	86	1.9%	42825	2.0%
Hispanic	1808	39.9%	969417	46.4%
White	2567	56.6%	864919	41.4%

Approximately 347 people live in group quarters. These include jails, prisons, nursing homes, and dormitories. The lop-sided population pyramid is partially due to the relatively high percentage of men in the Northeastern New Mexico Detention Facility in Clayton. The facility has a capacity of 600.

Single Parent Households

Single Parent Households, Union County 2008-12

Total Households	1,672	
Single Male Householder	101	6.0%
Single Female Householder	225	13.5%
Number of grandparents responsible for children under 18 years old	35	

Housing

In 2012, there were 2,303 housing units in Union County; 3% were multi-unit structures; 67.2% of housing units were owner-occupied. The median value of an owner-occupied home in 2008-12 was \$88,300. There are an average of 2.46 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 Union County, 13% of owners with a mortgage paid 30% or more of their income for housing while 38.8% 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 Union County there were 0 people found experiencing homelessness.

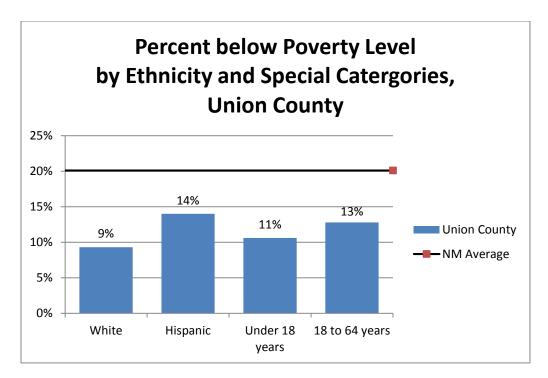
Source NM Coalition to End Homelessness. 2013. Point in Time Count Results. http://nmceh.org/pages/homelessnessReports.html

Income and Poverty

Average per capita money income (2008-12) was \$20,488 and median household income was \$40,507. According to the Census Bureau in 2012, about 11% of the population lived below the poverty line. The unemployment rate (2012) was 4.6%. 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.

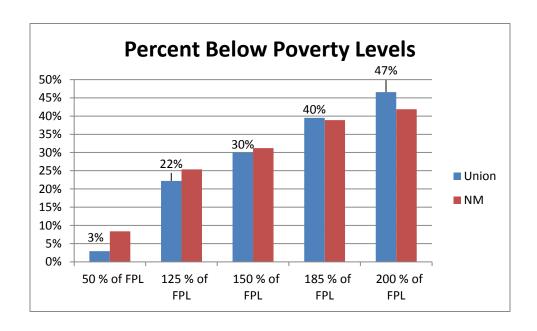
Sources: Income — these data are from the Census Quick Facts, http://quickfacts.census.gov/qfd/states/35/35059.html

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	Union	New Mexico
Language other than English spoken at home	27.0%	36%
High School Graduate or Higher	77.8%	83.4%
Bachelor's degree or higher	14.8%	25.6%

These data are from the Census Quick Facts, http://quickfacts.census.gov/qfd/states/35/35059.html

Union County School Enrollment

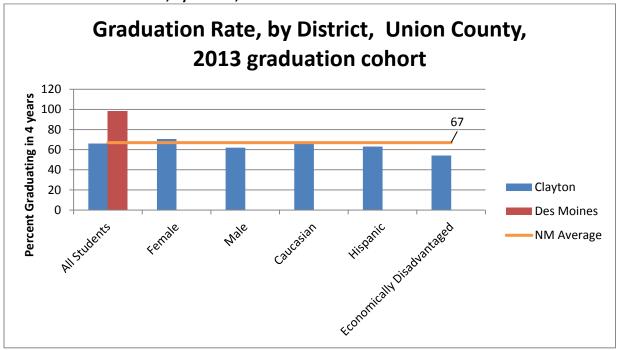
SCHOOL ENROLLMENT	Estimate	Percent
Population 3 years and over enrolled in school	806	
Nursery school, preschool	19	2.4%
Kindergarten	103	12.8%
Elementary school (grades 1-8)	426	52.9%
High school (grades 9-12)	156	19.4%
College or graduate school	102	12.7%

Union County Educational Attainment

EDUCATIONAL ATTAINMENT	Number	Percent
Population 25 years and over	3,178	100.0%
Less than 9th grade	130	4.1%
9th to 12th grade, no diploma	576	18.1%
High school graduate (includes equivalency)	1,176	37.0%
Some college, no degree	671	21.1%
Associate's degree	156	4.9%
Bachelor's degree	257	8.1%
Graduate or professional degree	212	6.7%

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

Four Year Graduation Rate, by District, Union 2013



		Des
Category	Clayton	Moines
All Students	66.1	98
Female	70.5	
Male	62	
Caucasian	67.3	
Hispanic	63.1	
Economically Disadvantaged	54.2	

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

Child Abuse

Child Abuse Investigations, July 2012-June 2013

	Cilia Abase inves	tigations, July 2012	- June 2013	
	Accepted	%	Number of substantiated child	Child Victim Rate per 1000
	Accepted	/0	Substantiated Ciliu	1000
County	Reports	substantiated	victims	children
Union	43	61.1%	27	26.2
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

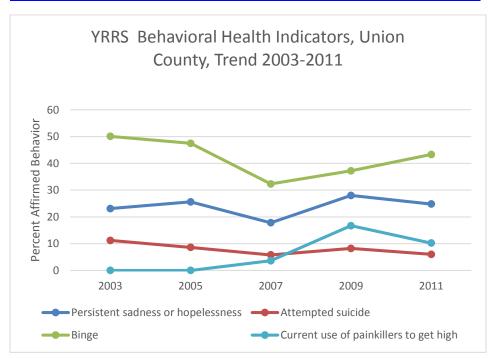
Risk and Resiliency is measured by a two surveys, the Behavior Risk Factor Surveillance Survey conducted by the NM Department of Health and the Youth Risk and Resiliency Survey conducted by school districts. The YRRS measures are self-reported by the student.

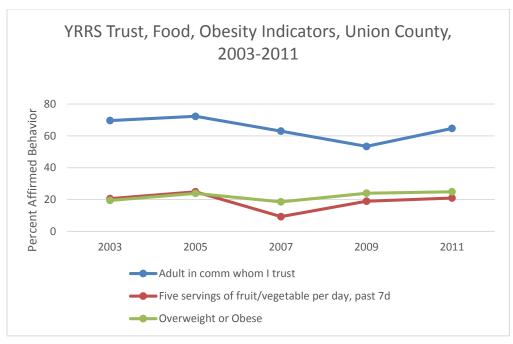
Adolescent Indicators

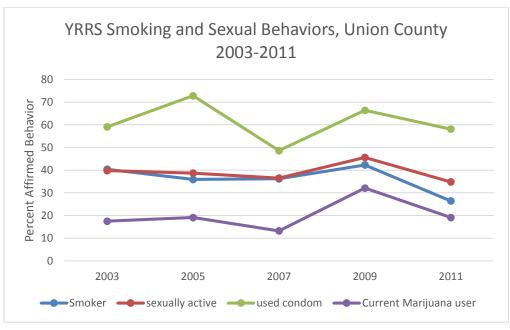
Measure	Union	NM
Adolescent Risk and Resiliency Measures		
Ate Five or More Servings of Fruit or Vegetables per Day 2009,2010,2011	16.4%	23.8%
Adolescent Obesity, self-reported BMI above 95th percentile for age and sex	14.7%	12.4%
Youth Smoking Prevalence, percentage of students who smoked cigarettes on or more days in the past month	35%	22.7%
Youth with Feeling of Sadness or Hopelessness	23.5%	30.8%
Youth with Trusted Adult in Community	60.4%	48.0%
Binge Drinking	37.6%	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







						Average
	2003	2005	2007	2009	2011	2007-11
Persistent sadness or hopelessness	23.1	25.6	17.8	28	24.8	23.5
Attempted suicide	11.2	8.6	5.8	8.2	6	6.7
Binge Drinking	50.1	47.5	32.3	37.2	43.3	37.6
Current Marijuana user	17.5	19.1	13.2	32.1	19.1	21.5
Current use of painkillers to get high			3.6	16.7	10.2	10.2
Ever used illegal injection drugs	2.7	1.2	0.8	4	5	3.3
Smoker	40.4	35.9	36.2	42.3	26.4	35.0
Sexually active	39.8	38.7	36.5	45.6	34.8	39.0
Used condom	59.1	72.8	48.6	66.4	58.1	57.7
Adult in common whom I trust	69.6	72.3	63	53.4	64.7	60.4
Five servings of fruit/vegetable per day, past week	20.6	24.9	9.3	19	21	16.4
Overweight or Obese	19.5	23.9	18.6	24	24.9	22.5
Obese	9.3	17.6	9.6	17.8	16.8	14.7

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	Union Co	NM
General Self-Reported Health Status, percentage of adults reporting fair or poor		
health	16.1%	17.5%
Adult Physical Activity, 2005,2007, 2009	47.9%	52.5%
Adults Consuming 5 or more servings of fruits	20.00/	22.42/
and vegetable per day, 2007, 2009	20.3%	22.4%
Obesity Among Adults bmi >25, 2011, 2012	66.8%	62.7%
Adult Smoking Prevalence current smoker,		
2011, 2012	10.7%*	21.0%

^{*}This rate is unstable because of small numbers

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	Union County	NM
White	3.9%	22.8%
Hispanic	12.1%	22.5%
Black		31.1%
Native American		20.5%
Asian		9.0%

These rates are unstable because of small numbers.

Mortality

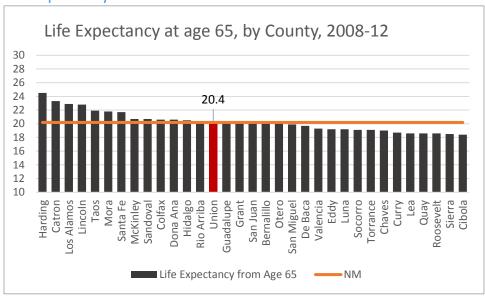
Leading Causes of Death

Age adjusted rates per 100,000 people

Causes	Union	NM
Total	561.1	616.3
Circulatory, Heart disease (ICD10: I00-I09, I11, I13, I20-I51)	148.9	150
Neoplasm, malignant (ICD10: C00-C97)	131.6	147.9
Respiratory, Chronic lower respiratory diseases (ICD10: J40-J47)	64.1	45.9
Injury, Unintentional injuries (ICD10: V01-X59, Y85-Y86)	46	62.4
Injury, Intentional self-harm (suicide) (ICD10: X60-X84, Y87.0, *U03)	28.9	19.9
Diabetes mellitus (ICD10: E10-E14)	25.5	27.8
Alzheimer's disease (ICD10: G30)	23.6	18.1
Circulatory, Cerebrovascular diseases (ICD10: I60-I69)	21.4	34.2
Nephritis, nephrotic syndrome and nephrosis (ICD10: N00-N07, N17-N19, N25-		
N27)	11.8	12.8
Respiratory, Influenza and pneumonia (ICD10: J09-J18)	9.2	15.2

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

Life Expectancy



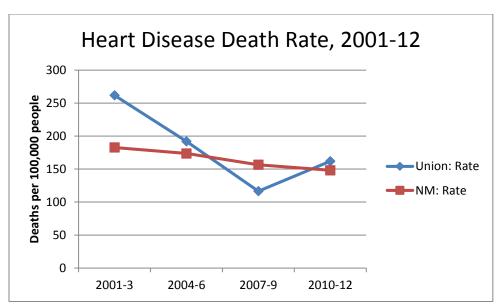
The number of years a person is expected to live after age 65 varies from 24.5 to 18.4

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.

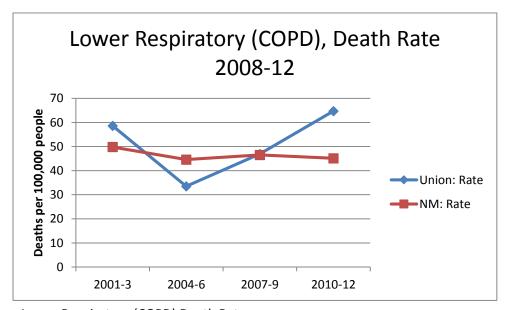
The death rates shown below are adjusted to make the county and state populations comparable (in terms of ages). The rates are the number of deaths per 100,000 thousand people susceptible to the disease.

The rates shown here are very unstable because of low population and small numbers of events.



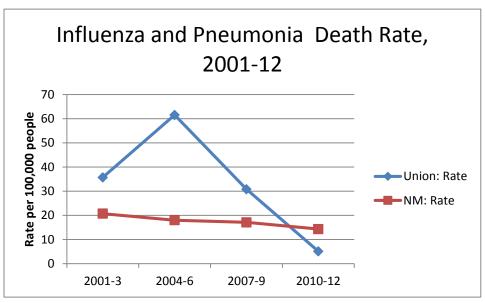
Heart Disease Death Rate

	2001-3	2004-6	2007-9	2010-12
Union: Rate	261.8	191.9	116.5	161.9
Union: Deaths	44	34	20	32
NM: Rate	182.7	173.6	156.5	148.2



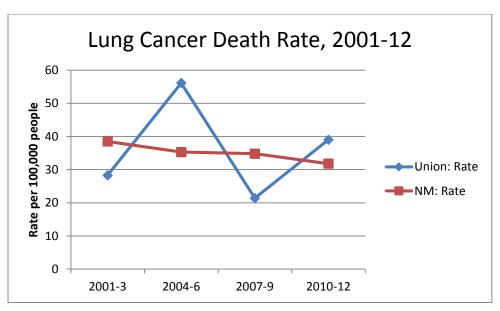
Lower Respiratory (COPD) Death Rate

	2001-3	2004-6	2007-9	2010-12
Union: Rate	58.6	33.5	46.9	64.7
Union: Deaths	10	6	9	13
NM: Rate	49.8	44.6	46.5	45.1



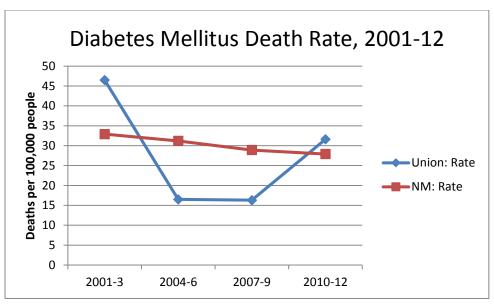
Influenza-Pneumonia Death Rate

	2001-3	2004-6	2007-9	2010-12
Union: Rate	35.7	61.5	30.8	5.1
Union: Deaths	6	11	6	1
NM: Rate	20.7	18	17.1	14.3



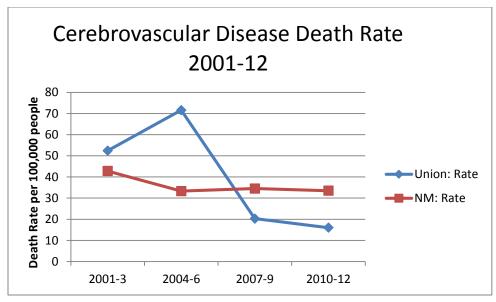
Lung Cancer Death Rate

	2001-3	2004-6	2007-9	2010-12
Union: Rate	28.3	56.1	21.4	39
Union: Deaths	5	10	4	7
NM: Rate	38.5	35.3	34.8	31.8



Diabetes Mellitus Death Rate

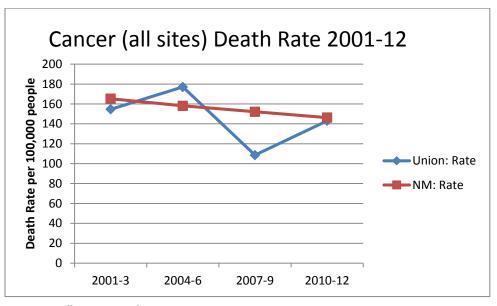
	2001-3	2004-6	2007-9	2010-12
Union: Rate	46.5	16.5	16.3	31.6
Union: Deaths	8	3	3	6
NM: Rate	32.9	31.2	28.9	27.9



Cerebrovascular Diseases Death Rate

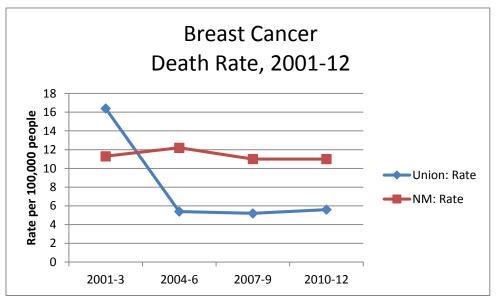
	2001-3	2004-6	2007-9	2010-12
Union: Rate	52.4	71.6	20.3	16
Union: Deaths	9	13	4	3
NM: Rate	42.8	33.3	34.5	33.5

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



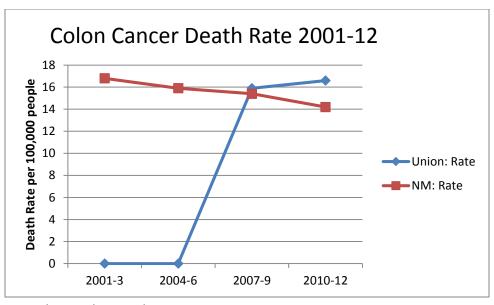
Cancer All Sites Death Rate

	2001-3	2004-6	2007-9	2010-12
Union: Rate	154.7	177.1	108.6	143.1
Union: Deaths	26	32	20	26
NM: Rate	165.3	158.1	152.2	146.3



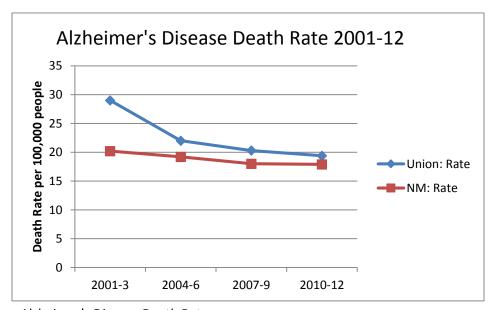
Breast Cancer Death Rate

	2001-3	2004-6	2007-9	2010-12
Union: Rate	16.4	5.4	5.2	5.6
Union: Deaths	3	1	1	1
NM: Rate	11.3	12.2	11	11



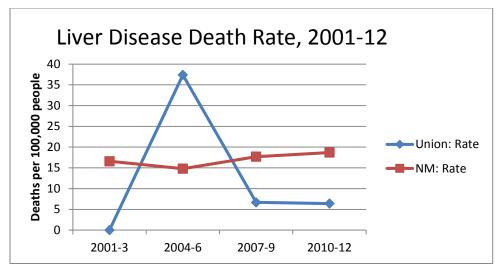
Neoplasm Colon Death Rate

	2001-3	2004-6	2007-9	2010-12
Union: Rate	0	0	15.9	16.6
Union: Deaths	0	0	3	3
NM: Rate	16.8	15.9	15.4	14.2



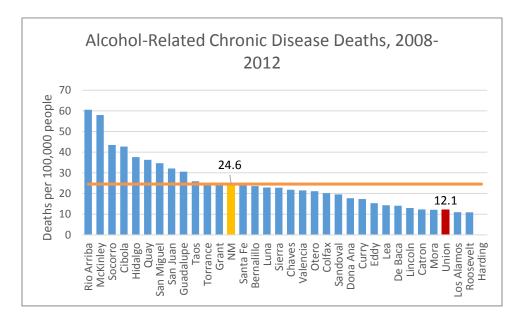
Alzheimer's Disease Death Rate

	2001-3	2004-6	2007-9	2010-12
Union: Rate	29	22	20.3	19.4
Union: Deaths	5	4	4	4
NM: Rate	20.2	19.2	18	17.9



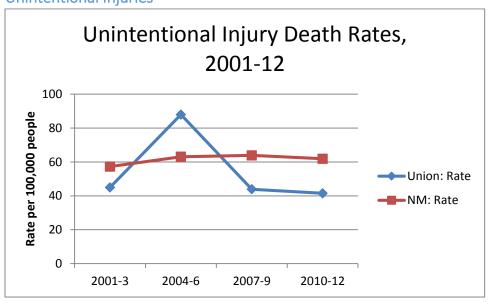
Liver Disease Death Rate

	2001-3	2004-6	2007-9	2010-12
Union: Rate	0	37.4	6.7	6.4
Union: Deaths	0	6	1	1
NM: Rate	16.6	14.8	17.7	18.7



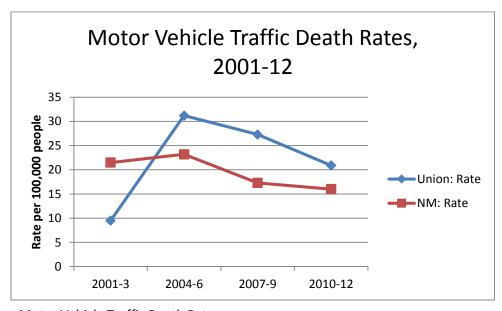
This chart includes chronic conditions directly and 100% attributable to consumption of alcohol. Included in this definition from the CDC's Alcohol-Related Disease Impact (ARDI) program (http://apps.nccd.cdc.gov/DACH_ARDI/Info/ICDCodes.aspx): (alcohol) psychosis, abuse, dependence syndrome, myopathy,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



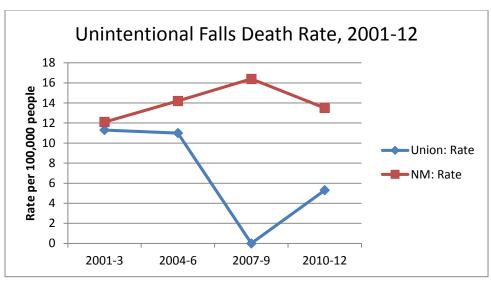
Unintentional Injury Death Rates

	2001-3	2004-6	2007-9	2010-12
Union: Rate	45	88	43.9	41.5
Union: Deaths	6	12	6	7
NM: Rate	57.3	63.1	63.9	61.9



Motor Vehicle Traffic Death Rates

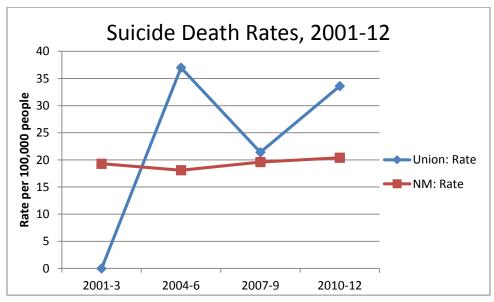
	2001-3	2004-6	2007-9	2010-12
Union: Rate	9.5	31.2	27.3	20.9
Union: Deaths	1	4	3	3
NM: Rate	21.5	23.2	17.3	16



Unintentional Falls Death Rates

	2001-3	2004-6	2007-9	2010-12
Union: Rate	11.3	11	0	5.3
Union: Deaths	2	2	0	1
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.

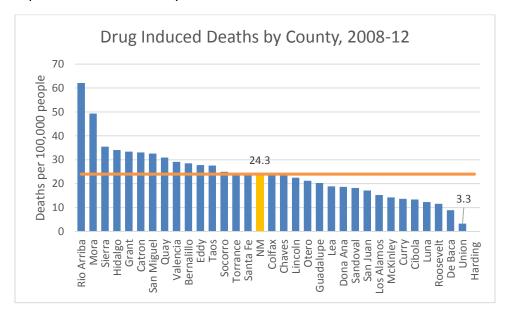


Suicide Death Rates

	2001-3	2004-6	2007-9	2010-12
Union: Rate	0	37	21.4	33.6
Union: Deaths	0	5	3	5
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, 1 drug induced death was reported in Union County

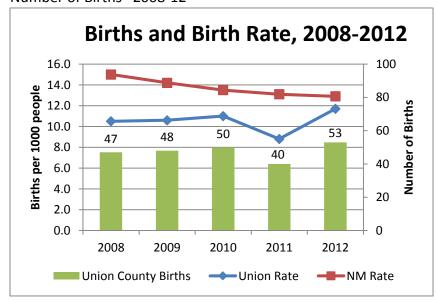


The Union County drug-induced death rate is below the state average. See https://ibis.health.state.nm.us/indicator/complete_profile/DrugIndDth.html

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

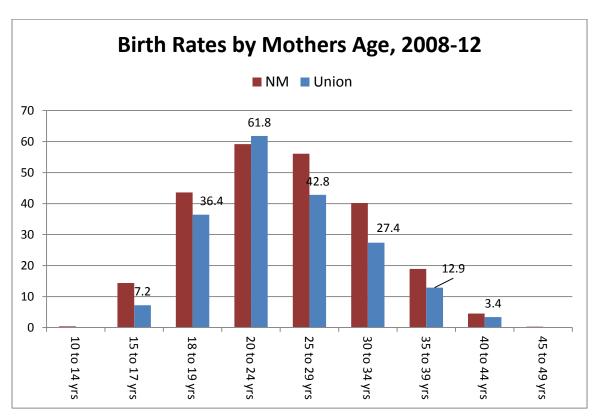
Births

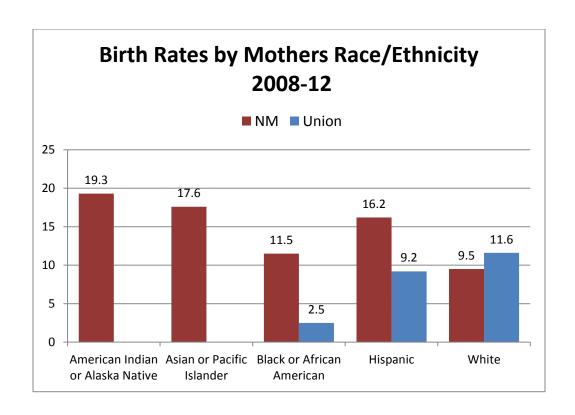
Number of Births 2008-12



Number and Percentage of Births by Mother's Age

2008-2012		Union			NM	
	Births	Population	Rate	Births	Population	Rate
10 to 14				255	711,772	0.4
15 to 17	6	836	7.2	6,468	449,182	14.4
18 to 19	20	550	36.4	13,055	299,422	43.6
20 to 24	74	1197	61.8	41,787	705,404	59.2
25 to 29	73	1706	42.8	38,894	693,507	56.1
30 to 34	42	1530	27.4	25,707	639,176	40.2
35 to 39	18	1390	12.9	11,816	624,147	18.9
40 to 44	5	1454	3.4	2,845	629,765	4.5
45 to 49				188	715,236	0.3
50+				22	3384155	0
Total Births	238			141,037		
Percent to 15-19 yr olds	10.9%	Rate	18.76	13.8%	Rate	26.08



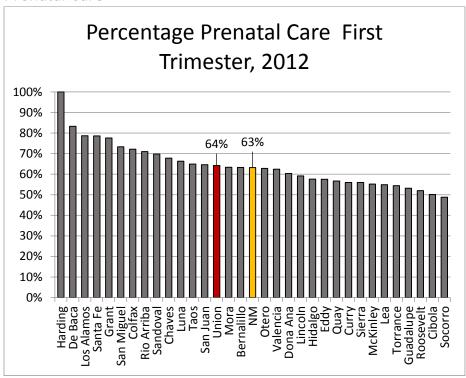


2008-12	Union				NM		
	Births	Population	Birth Rate	Pop. Avg	Births	Population	Birth Rate
American							
Indian or							
Alaska							
Native					17517	906013	19.3
Asian or							
Pacific							
Islander					2656	151115	17.6
Black or							
African							
American	1	396	2.5	79.2	2405	209489	11.5
Hispanic	82	8953	9.2	1790.6	77018	4755227	16.2
White	150	12916	11.6	2583.2	40634	4267697	9.5
Total	238	22623	10.5	4524.6	141060	10289540	13.7

Infant Mortality Rate

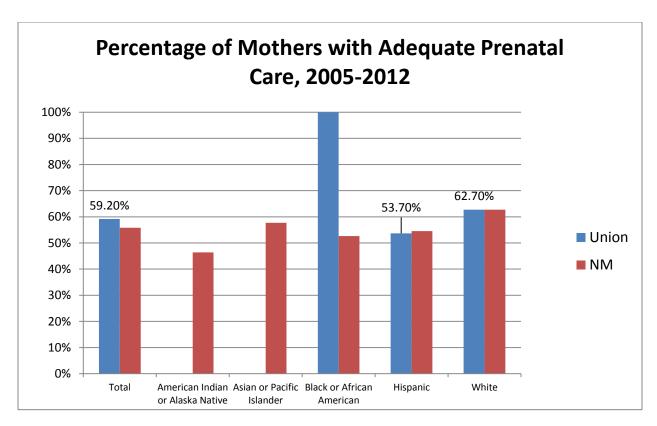
There are not enough births and deaths to analyze infant mortality for Union County. Only 2 infant deaths were recorded between 2006 and 2012. There were 318 births for this period, a rate of 3.1 per 1000 live births.

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.

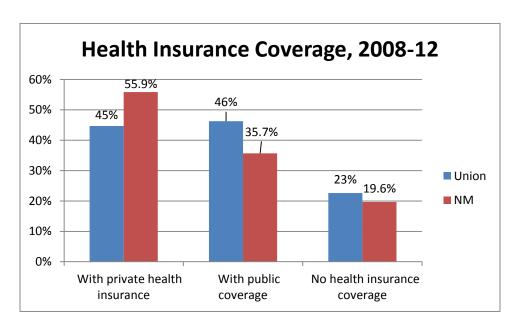


In this chart, higher is better. Whites and Asians begin prenatal care earlier than others. Doctors recommend that mothers-to-be see their health care provider before the 13th week of pregnancy and to go back for at least 13 visits before birth.

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.

Access to SNAP and Health Insurance

Households Receiving SNAP/Food Stamp Benefit						
Union (County	NM				
Number	Percent	Number	Percent			
127	7.6%	127 7.6% 97,304 12.7%				



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

Health Resources

Health Resources, 2011

Health Resources, 2011	1	T
	Union	
	County	NM
Population 2011	4,566	
Primary Care Physicians	3	1535
PCP per 100.000 people	67.7	73.7
Pediatricians	0	291
Pediatricians per 100,000		50.3
people under age 20		
Obstetrician/Gynecologists	0	181
OB/GYM per 100,000 women		17.2
Psychiatrists	0	197
Psychiatrists per 100,000 people		9.5
Dentists	0	974
Dentists per 100,000 people		47.3
Short Term General Hospitals	2	41
STGH Beds	260	4,130
Federally Qualified Health Centers	0	100
Community Health Centers	0	152
School Based Health Centers	1	74
Medicare Beneficiaries	918	326,559
Percent of Population	20.7	15.7
Medicaid Beneficiaries	973	561,762
Percent of population	21.9	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 Union County

5.	Children in Poverty 2010	Families in which Parents Lack Secure Employment 2010	Families with a High Housing Cost Burden 2010 Rent: 21%	Teens (16-19) Not in School and Not Working 2010
ECONOMIC WELL-BEING	9% NM Rate: 27%	36% NM Rate: 39%	Own: 24% NM Rate: Rent: 43%	12% NM Rate: 10%
	Children Attending Preschool	Fourth Graders Proficient in Reading	Own: 25% Eighth Graders Proficient in Math	High School Students Graduating on Time
EDUCATION	7%	Clayton: 48% Des Moines: NA	Clayton: 53% Des Moines: NA	Clayton: 68% Des Moines: 97%
EDUCATION	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
HEALTH	5.7%	12%	Child (1-14): 148 Teen (15-19): 0	43%
a program for the program of	NM Rate: 7.6%	NM Rate: 10%	NM Rate: Child: 19 Teen: 69	NM Rate: 24%
İ	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	41%	17%	0%	17
	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/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/MortCntylCD10/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