CHAVES COUNTY HEALTH PROFILE

2003 NEW MEXICO COUNTY HEALTH PROFILES NEW MEXICO DEPARTMENT OF HEALTH PUBLIC HEALTH DIVISION OFFICE OF NEW MEXICO VITAL RECORDS AND HEALTH STATISTICS

Welcome to the fifth update of the New Mexico County Health Profiles. This publication is dedicated to users of county-level data as well as to those who contributed data, suggestions, interpretations, and comments. Thanks to so many of you, there are many improvements in this year's version. Some of you work in the Department of Health, but a great many of you work in other agencies and it is gratifying to be able to have collaborated with you.

As in prior versions, the latest data available from each source is used. Questions about the data, their collection, limitations, or interpretation should be directed to the appropriate data source. To aid in this, a source is listed at the bottom of each table throughout the profile.

The compilation of the Profiles is possible because of assistance and contributions from many agencies and data providers: NM Department of Health, District Health Offices, Diabetes Prevention and Control Program, Family Food and Nutrition Services, Family Health Bureau, Infectious Disease Bureau, Injury Prevention and EMS Bureau, Long Term Services Division, Family Infant Toddler Program, Behavioral Health, and Office of Epidemiology; NM Children, Youth and Families Department, Child Protective Services; NM Commission on Higher Education; NM Department of Education; NM Department of Labor; NM Health Policy Commission; NM Department of Transportation, Traffic Safety Bureau; NM Human Services Department, Income Support Division, Medical Assistance Division; University of New Mexico's Bureau of Business and Economic Research (BBER) and New Mexico Tumor Registry; Center for Disease Control's National Center for Health Statistics; US Department of Commerce, Bureau of the Census and Bureau of Economic Analysis; and US Bureau of Labor Statistics.

Without outstanding assistance from the entire staff at the Office of New Mexico Vital Records and Health Statistics, these profiles would not have been produced and we especially wish to thank: Mary M. Gonzales, John Hedrick, Brad Whorton, Brian Woods, Radha S. Biswas, Tony Ortiz, Renee Valencia, Michael Patterson, Veronica Tapia, Pete Varela, Rebecca Rodriguez, and Melinda Roybal.

Your comments are welcome. You may call 827-0167 to provide comments or suggestions for future reports.

Celine Sanchez
State Registrar and Acting Chief
Office of New Mexico Vital Records and Health Statistics

Kimberley Peters

Director, Designated State Center for Health Statistics

Mary Houdek
Manager, Information Systems and GIS

Mary Anne Escudero

Manager, Fraud Program & Deputy State Registrar

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Office of New Mexico Vital Records & Health Statistics County Health Profile Team

Mary M. Gonzales Management Analyst & Co-editor

Jonathan Hedrick Statistician & Co-editor

Radha S. Biswas Epidemiologist
Tony Ortiz Epidemiologist
Michael Patterson Statistician
Rebecca Rodriguez Statistician
Melinda Roybal Statistician
Veronica Tapia Clerk Specialist

Renee Valencia
Pete Varela
Brad Whorton
Brian Woods
Statistician
Epidemiologist
Epidemiologist

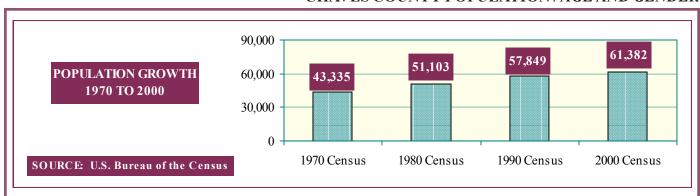
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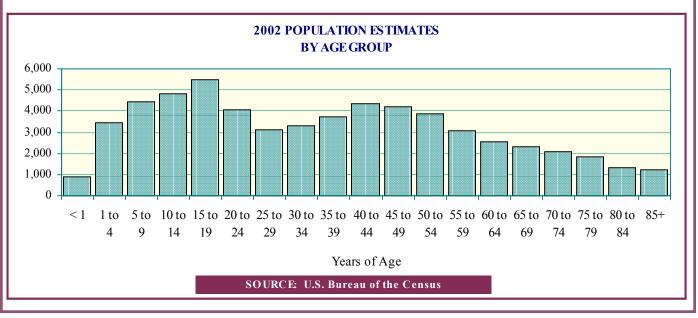
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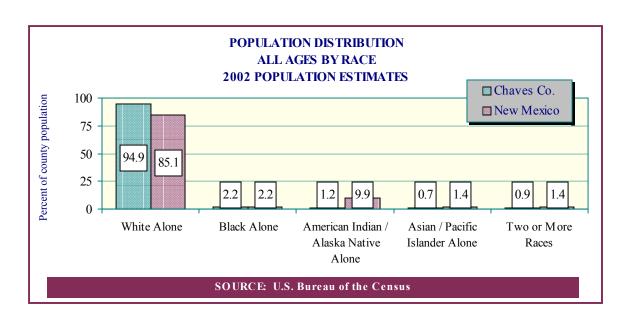
2002 ESTIMATES POPULATION BY AGE AND GENDER												
Age Groups	Cl	haves Coun	ty	1	New Mexico							
Age Groups	Male	Female	Both	Male	Female	Both						
Less than 1 yr	444	445	889	13,746	13,361	27,107						
1 to 4 years	1,788	1,638	3,426	53,236	51,780	105,016						
5 to 9 years	2,294	2,163	4,457	67,768	65,647	133,415						
10 to 14 years	2,460	2,370	4,830	74,247	71,746	145,993						
15 to 19 years	2,936	2,567	5,503	76,356	72,288	148,644						
20 to 24 years	2,078	1,996	4,074	67,182	64,847	132,029						
25 to 29 years	1,502	1,594	3,096	56,796	56,273	113,069						
30 to 34 years	1,580	1,717	3,297	59,596	59,961	119,557						
35 to 39 years	1,813	1,929	3,742	64,222	65,623	129,845						
40 to 44 years	2,120	2,210	4,330	70,951	73,496	144,447						
45 to 49 years	2,099	2,109	4,208	66,325	70,011	136,336						
50 to 54 years	1,866	1,985	3,851	60,317	63,383	123,700						
55 to 59 years	1,464	1,619	3,083	47,075	50,411	97,486						
60 to 64 years	1,229	1,303	2,532	36,530	40,431	76,961						
65 to 69 years	1,080	1,247	2,327	30,979	34,231	65,210						
70 to 74 years	934	1,162	2,096	26,175	29,427	55,602						
75 to 79 years	787	1,066	1,853	19,298	25,786	45,084						
80 to 84 years	543	802	1,345	12,434	17,304	29,738						
85 and over	431	807	1,238	8,926	16,894	25,820						
All Ages	29,448	30,729	60,177	912,159	942,900	1,855,059						
	Sour	ce: U.S. Bu	reau of the	Census								



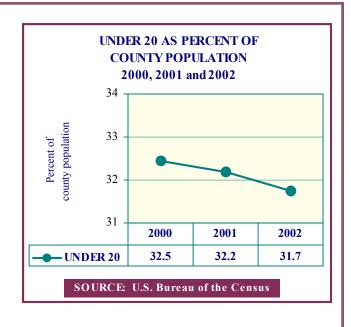
	2002 POPULATION ESTIMATES BY AGE AND RACE/ETHNICITY												
Age Groups	White	ONE I	RACE American Indian / Alas ka Native	Asian / Pacific Islander	Two or More Races	Total Population	His panic or Latino Ethnicity Any Race ^{/1}						
Under 5 years	4,108	81	44	15	67	4,315	2,782						
5 to 9 years	4,147	134	64	36	76	4,457	2,636						
10 to 14 years	4,530	138	63	34	65	4,830	2,731						
15 to 19 years	5,127	160	84	60	72	5,503	3,036						
20 to 24 years	3,819	121	66	32	36	4,074	2,352						
25 to 29 years	2,913	81	43	36	23	3,096	1,846						
30 to 34 years	3,154	63	43	20	17	3,297	1,804						
35 to 39 years	3,559	74	47	36	26	3,742	1,908						
40 to 44 years	4,107	99	60	36	28	4,330	1,895						
45 to 49 years	4,000	91	60	31	26	4,208	1,707						
50 to 54 years	3,690	72	42	26	21	3,851	1,339						
55 to 59 years	2,972	42	31	19	19	3,083	1,045						
60 to 64 years	2,434	37	32	14	15	2,532	728						
65 to 69 years	2,231	50	20	14	12	2,327	599						
70 to 74 years	2,022	37	17	12	8	2,096	455						
75 to 79 years	1,786	39	13	6	9	1,853	334						
80 to 84 years	1,311	15	9	4	6	1,345	203						
85 and over	1,212	14	6	2	4	1,238	176						
All Ages	57,122	1,348	744	433	530	60,177	27,576						

/¹ Hispanic or Latino origin may be of any race. Adding the Hispanic or Latino population to the racial categories will result in double counting.

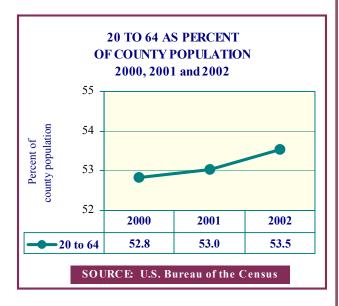
SOURCE: U.S. Bureau of the Census



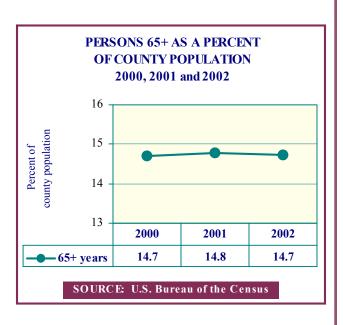
UNDER 20 POPULATION 2000, 2001 and 2002											
Age Groups 2000 2001 2002											
Under 5 years	4,407	4,316	4,315								
5 to 9 years 4,895 4,644											
10 to 14 years	5,114	4,925	4,830								
15 to 19 years	5,504	5,589	5,503								
Under 20 years 19,920 19,474 19,10											
County Population 61,382 60,516 60,177											
Source: U	J.S. Bureau o	of the Censu	S								

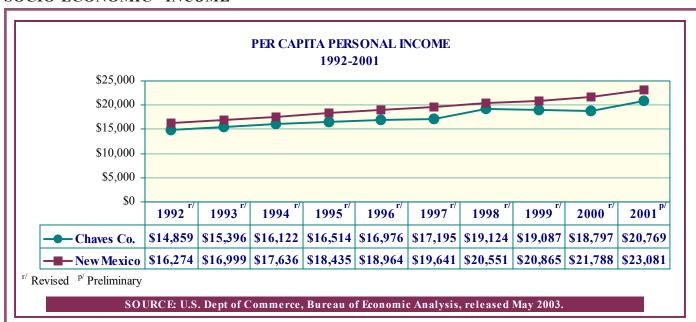


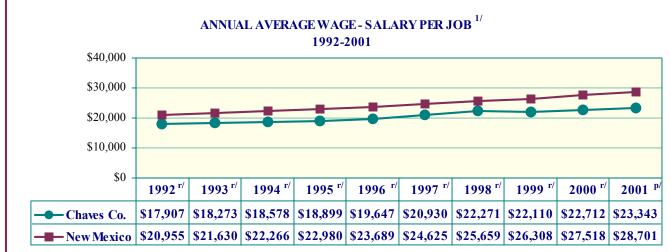
20 TO 64 POPULATION 2000, 2001 and 2002										
Age Groups	2000	2001	2002							
20 to 24 years	3,729	3,799	4,074							
25 to 29 years	3,378	3,153	3,096							
30 to 34 years	3,489	3,341	3,297							
35 to 39 years	4,291	3,969	3,742							
40 to 44 years	4,361	4,370	4,330							
45 to 49 years	4,258	4,232	4,208							
50 to 54 years	3,561	3,774	3,851							
55 to 59 years	2,793	2,904	3,083							
60 to 64 years	2,577	2,552	2,532							
20 to 64 years	32,437	32,094	32,213							
County Population	61,382	60,516	60,177							
Source: U.	S. Bureau o	of the Censu	S							



65 AND OLDER POPULATION 2000, 2001 and 2002											
Age Groups 2000 2001 2002											
65 to 69 years	2,372	2,331	2,327								
70 to 74 years	2,276	2,184	2,096								
75 to 79 years	1,908	1,872	1,853								
80 to 84 years	1,336	1,368	1,345								
85 and over	1,133	1,193	1,238								
65 years and older	9,025	8,948	8,859								
County Population 61,382 60,516 60,177											
Source: U	.S. Bureau o	of the Censu	S								







r/ Revised p/ Preliminary

SOURCE: U.S. Dept of Commerce, Bureau of Economic Analysis, released December 2002.



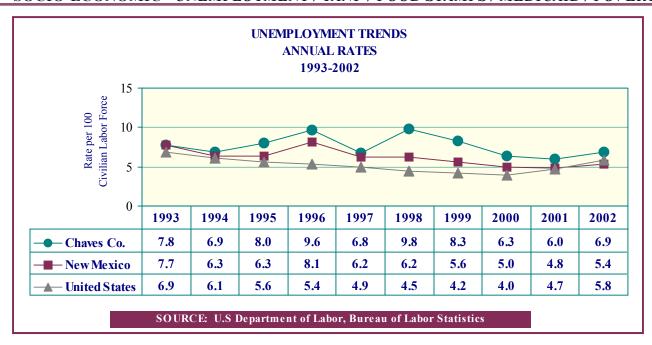
r/ Revised p/ Preliminary

See glossary for definition of Total Personal Income

SOURCE: U.S. Dept of Commerce, Bureau of Economic Analysis, released May 2003.

^{1/} The employment estimates used to compute the average wage are a job, not person, count.

SOCIO-ECONOMIC - UNEMPLOYMENT / TANF / FOOD STAMPS / MEDICAID / POVERTY



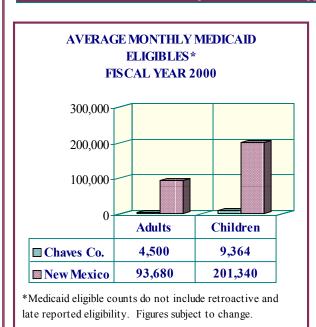
AVERAGE MONTHYLY TANF AND FOOD STAMPS CASES FISCAL YEAR 2003 (7/02 - 6/03)

Sumlament	Chave	es Co.	New Mexico			
Supplement	Number	Percent*	Number	Percent*		
TANF	731	1.2	16,382	0.9		
Food Stamps	3,267	5.4	72,411	3.9		

^{*}Percent of county's estimated 2002 population.

NOTE: Starting July 1, 1999, changes were made in the methodology for counting TANF (Temporary Assistance for Needy Families) caseloads. Caution should be used when comparing data to previous fiscal years.

SOURCE: NM Human Services Department, Income Support Division.



SOURCE: NM Human Sevices Department Income Support Division

AVERAGE MONTHLY PERCENT TANF AND FOOD STAMP CASES FISCAL YEAR 2003 Chaves Co. New Mexico New Mexico TANF TANF Food Stamps TANF = Temporary Assistance for Needy Families. SOURCE: NM Human Services Department Income Support Division.

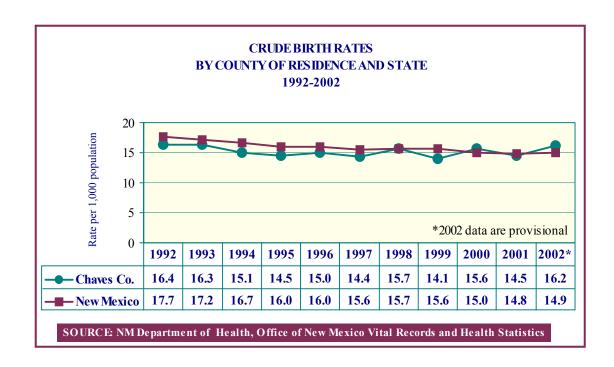
ESTIMATED NUMBER AND PERCENT OF PEOPLE IN POVERTY 1999

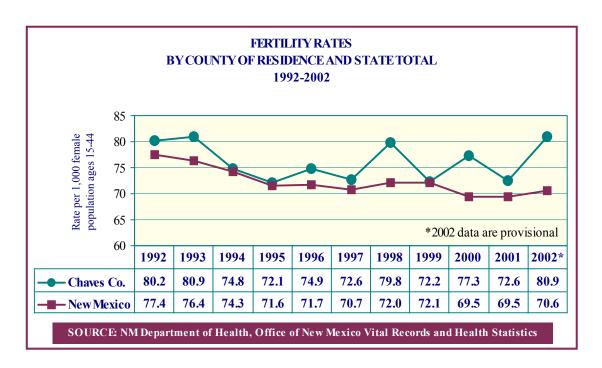
100	Chave	es Co.	New N	Texico									
Age	Number	Percent*	Number	Percent*									
All Ages in Poverty	12,936	21.4	326,223	18.2									
Children age < 18 years	5,413	30.6	133,194	26.4									
Related children ages													
5-17 years	3,800	29.1	92,333	25.0									

See glossary for definition of poverty. *Percent of Specified Age Group.

SOURCE: U.S. Census Bureau, "Estimates Model 1999."

	RESIDENT LIVE BIRTHS BY COUNTY OF RESIDENCE AND STATE 1992-2002													
	1992 1993 1994 1995 1996 1997 1998 1999 2000 2001 2002													
Chaves Co.	961	974	915	892	935	901	983	878	958	879	972			
New Mexico	27,910	27,831	27,585	26,914	27,216	26,844	27,294	27,133	27,206	27,101	27,708			
*2002 data are	*2002 data are provisional													
SOUF	RCE: NM I	De partme	nt of Hea	ılth, Offi	ce of Nev	v Me xico	Vital Re	cords and	Health S	statistics				





CHAVES COUNTY RESIDENT LIVE BIRTHS **BY AGE OF MOTHER** 1992-2002 1996 1997 2002* **AGE** 15-19 20-24 25-29 30-34 35-39 40-44 *2002 data are provisional

SOURCE: NM Department of Health, Office of New Mexico Vital Records and Health Statistics

	CHAVES COUNTY RESIDENT BIRTH RATES** BY AGE OF MOTHER 1992-2002												
AGE	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002*		
15-19	95.5	94.8	101.2	85.4	90.4	82.0	94.6	74.8	87.6	73.8	85.7		
20-24	182.0	183.1	168.5	154.4	167.2	158.4	163.1	158.9	172.4	162.1	171.8		
25-29	119.9	133.8	114.0	123.9	126.5	127.8	142.1	126.2	118.8	130.0	138.0		
30-34	70.1	65.2	55.3	63.8	58.0	61.8	70.9	68.6	67.7	63.6	65.8		
35-39	25.2	24.0	23.4	22.1	26.5	26.8	25.4	22.3	28.3	22.0	25.9		
40-44	40-44 5.7 7.0 3.4 4.2 5.5 3.6 7.2 7.7 5.5 3.2 7.												
*2002 data	a are provis	sional	**Rate pe	r 1,000 wor	nen in spe	cified group	p						

SOURCE: NM Department of Health, Office of New Mexico Vital Records and Health Statistics

NEW MEXICO RESIDENT BIRTH RATES** BY AGE OF MOTHER 1992-2002												
AGE	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002*	
15-19	79.8	80.7	77.2	74.3	70.8	68.0	69.1	67.2	65.5	63.1	62.3	
20-24	153.9	150.4	142.2	134.0	135.0	133.6	135.8	137.6	136.1	134.2	132.1	
25-29	129.0	131.7	129.7	125.5	131.8	129.8	132.1	128.0	117.0	119.3	123.3	
30-34	75.8	74.7	76.5	77.2	76.6	79.1	79.6	82.7	77.2	77.2	79.1	
35-39	31.3	30.8	31.3	31.3	32.5	31.5	33.8	34.1	33.3	33.5	35.0	
40-44												
*2002 data	a are provis	sional	**Rate pe	r 1,000 wor	nen in spec	cified group)	·		·		

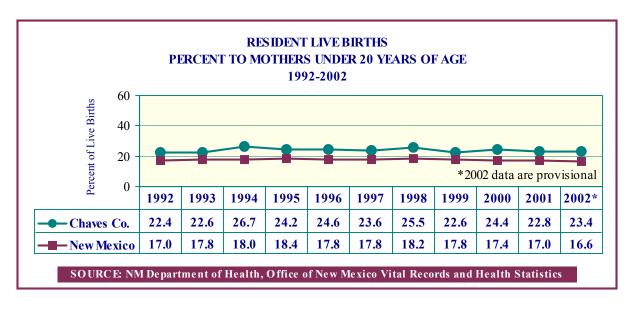
SOURCE: NM Department of Health, Office of New Mexico Vital Records and Health Statistics

	UNITED STATES BIRTH RATES* BY AGE OF MOTHER 1992-2002											
AGE	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	
15-19	60.7	59.6	58.9	56.8	54.4	52.3	51.1	49.6	47.7	45.3	43.0	
20-24	114.6	112.6	111.1	109.8	110.4	110.4	111.2	111.0	109.7	106.2	103.6	
25-29	117.4	115.5	113.9	112.2	113.1	113.8	115.9	117.8	113.5	113.4	113.6	
30-34	80.2	80.8	81.5	82.5	83.9	85.3	87.4	89.6	91.2	91.9	91.5	
35-39	32.5	32.9	33.7	34.3	35.3	36.1	37.4	38.3	39.7	40.6	41.4	
40-44	5.9	6.1	6.4	6.6	6.8	7.1	7.3	7.4	8.0	8.1	8.3	
* Rate per	* Rate per 1.000 women in specified group.											

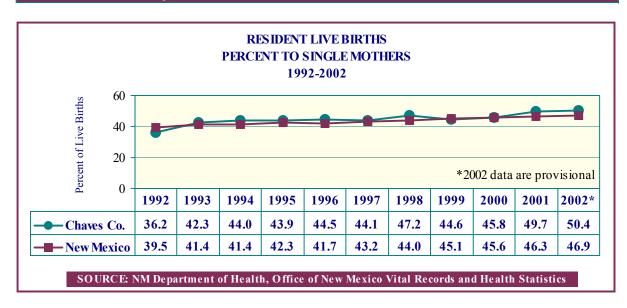
* Rate per 1,000 women in specified group

 $SOURCE:\ CDC's, National\ Center\ for\ Health\ Statistics:\ NVSR\ Volume\ 52, Number\ 10.$

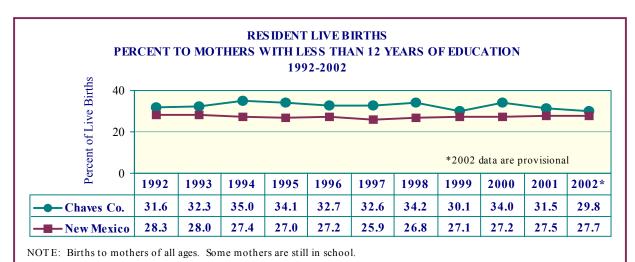
	RESIDENT LIVE BIRTHS TO MOTHERS UNDER 20 YEARS OF AGE 1992-2002											
	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002*	
Chaves Co.	215	220	244	216	230	213	251	198	234	200	227	
New Mexico	New Mexico 4,749 4,965 4,964 4,950 4,850 4,789 4,964 4,841 4,728 4,603 4,592											
*2002 data are provisional												
SOI	SOURCE: NM Department of Health, Office of New Mexico Vital Records and Health Statistics											



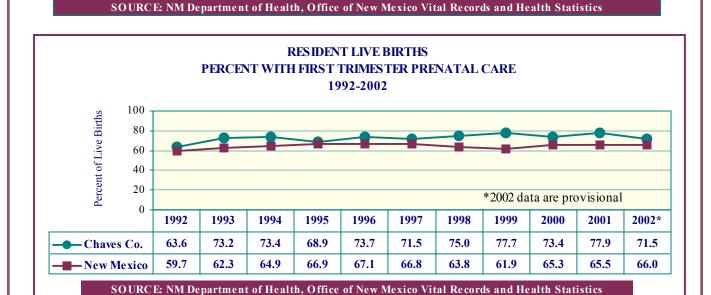
	RESIDENT LIVE BIRTHS TO SINGLE MOTHERS 1992-2002											
	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002*	
Chaves Co.	348	412	403	392	416	397	464	392	439	437	490	
New Mexico	New Mexico 11,021 11,522 11,408 11,388 11,347 11,590 12,021 12,236 12,400 12,549 12,984											
*2002 data are	*2002 data are provisional											
SO	SOURCE: NM Department of Health, Office of New Mexico Vital Records and Health Statistics											



	RESIDENT LIVE BIRTHS TO MOTHERS WITH LESS THAN 12 YEARS OF EDUCATION 1992-2002											
	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002*	
Chaves Co.	304	315	320	304	306	294	336	264	326	277	290	
New Mexico	7,898	7,806	7,545	7,269	7,415	6,961	7,309	7,342	7,408	7,459	7,679	
*2002 data are provisional NOTE: Births to mothers of all ages. Some mothers are still in school.												
SOURCE: NM Department of Health, Office of New Mexico Vital Records and Health Statistics												



RESIDENT LIVE BIRTHS WITH FIRST TRIMESTER PRENATAL CARE 1992-2002 1992 1993 1994 1995 1996 1997 1998 1999 2000 2001 2002* Chaves Co. 611 713 672 615 689 644 737 682 703 685 695 17,344 17,893 18,011 18,264 17,932 16,790 17,757 18,293 16,656 17,411 17,741 New Mexico *2002 data are provisional



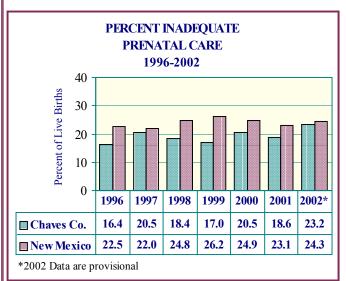
KESSNER INDEX VERSUS **KOTELCHUCK INDEX**

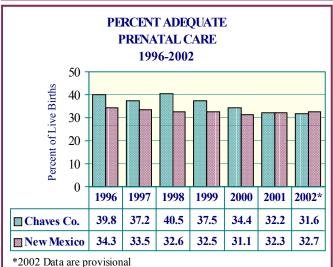
Both the Kessner Index and the Kotelchuck Index utilize the month of pregnancy in which prenatal care began and the number of prenatal visits. The Kessner Index relies very heavily on the timing of the initiation of prenatal care. For example, inadequate prenatal care is defined as no prenatal care or care beginning in the third trimester. The Kessner Index has been modified by most states to allow for insufficient visits even when care was initiated early. The exact combination varies from state to state so that there is no standard modified Kessner.

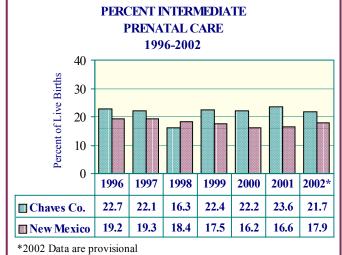
The Kotelchuck Index is more sophisticated and uses two dimensions, the timing of the initiation of care and the adequacy of services received (ratio of observed visits to expected visits), which are combined into a single summary index.

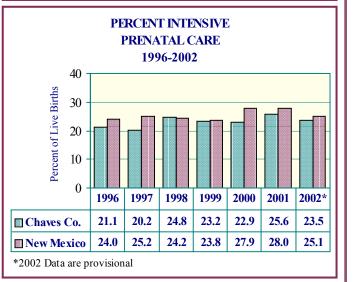
RESIDENT LIVE BIRTHS ADEQUACY OF PRENATAL CARE UTILIZATION (Kotelchuck Index) 1996-2002 1996 1997 1998 1999 2000 2001 2002* **Inadequate Care** 146 145 Chaves Co. 179 175 191 161 219 New Mexico 5,811 5,541 6.284 6.499 6,333 5.854 6.321 Intermediate Care Chaves Co. 205 202 193 155 204 191 207 New Mexico 4.943 4,845 4,660 4,331 4,122 4.187 4,663 Adequate Care Chaves Co. 353 325 384 320 320 278 299 New Mexico 8.826 8.417 8.239 8.052 7.915 8.165 8.498 **Intensive Care** 187 176 235 198 222 Chaves Co. 213 221 6,182 6,341 6,109 7,097 New Mexico 5,885 7,090 6,526 *2002 Data are provisional

SOURCE: NM Department of Health, ONMVRHS

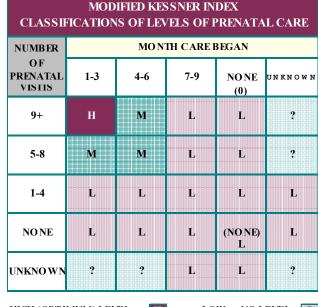


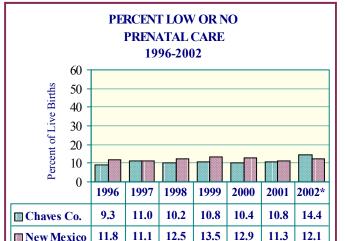






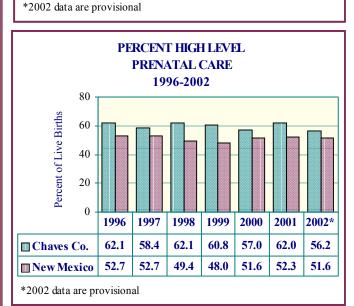
RESIDENT LIVE BIRTHS LEVEL OF PRENATAL CARE (Modified Kessner Index) 1996-2002										
	1996	1997	1998	1999	2000	2001	2002*			
		Low or No Prenatal Care								
Chaves Co.	87	99	100	95	100	95	140			
New Mexico	3,203	2,973	3,413	3,665	3,523	3,065	3,356			
		M	lid-Leve	l Pren	atal Ca	re				
Chaves Co.	226	248	246	227	291	225	266			
New Mexico	8,337	8,166	8,551	8,258	8,045	8,190	8,485			
			High I	Prenata	l Care					
Chaves Co.	581	526	610	534	546	545	546			
New Mexico	14,331	14,139	13,476	13,025	14,035	14,164	14,284			
		Unknown Prenatal Care								
Chaves Co.	41	28	27	22	21	14	20			
New Mexico	1,345	1,566	1,854	2,185	1,603	1,682	1,581			
* 2002 Data a	re provi	sional								
			tmento	f Healt	h, ONM	IVRHS				

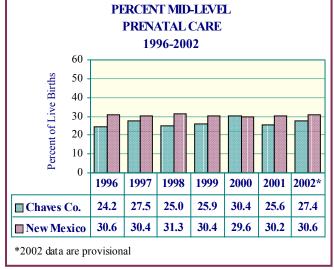


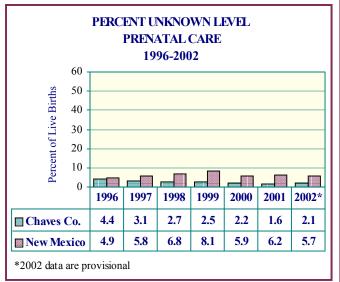


■ New Mexico









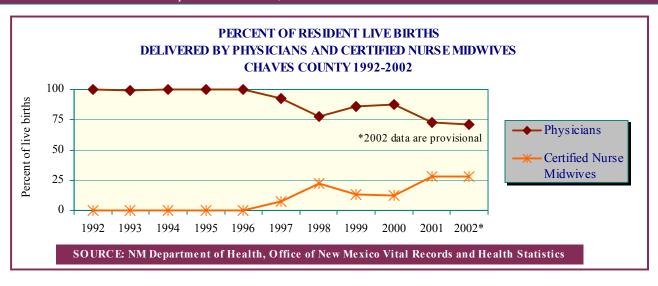
	RESIDENT LIVE BIRTHS BY TYPE OF ATTENDANT 1992-2002												
Physician													
	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002*		
Chaves Co.	959	968	911	889	933	832	761	756	840	632	694		
New Mexico	23,454	22,492	22,309	21,965	22,101	21,387	20,932	19,696	19,407	19,063	19,231		
Certified Nurse Midwife													
Chaves Co.	1	3	1	0	0	68	220	119	117	247	275		
New Mexico	3,977	4,756	4,738	4,474	4,622	5,040	5,912	7,011	7,338	7,619	7,937		
	·	·			L	ay Midwife	;		·	·			
Chaves Co.	0	1	1	2	0	0	0	1	0	0	0		
New Mexico	286	293	292	272	254	240	248	269	290	268	336		
Other													
Chaves Co.	1	2	2	1	2	1	2	2	1	0	3		
New Mexico	193	290	246	203	239	177	202	157	171	151	204		
*2002 Data are provisional													

SOURCE: NM Department of Health, Office of New Mexico Vital Records and Health Statistics

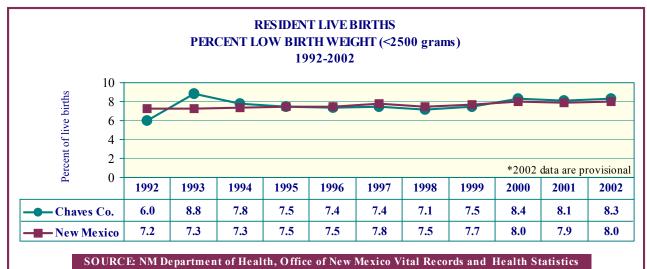
PERCENT OF RESIDENT LIVE BIRTHS BY TYPE OF ATTENDANT 1992-2002

		Physician										
	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002*	
Chaves Co.	99.8	99.4	99.6	99.7	99.8	92.3	77.4	86.1	87.7	72.9	71.4	
New Mexico	84.0	80.8	80.9	81.6	81.2	79.7	76.7	72.6	71.3	70.3	69.4	
Certified Nurse Midwife												
Chaves Co.	0.1	0.3	0.1	0.0	0.0	7.5	22.4	13.6	12.2	28.1	28.3	
New Mexico	14.2	17.1	17.2	16.6	17.0	18.8	21.7	25.8	27.0	28.1	28.6	
		·			I	ay Midwife	e		·			
Chaves Co.	0.0	0.1	0.1	0.2	0.0	0.0	0.0	0.1	0.0	0.1	0.0	
New Mexico	1.0	1.1	1.1	1.0	0.9	0.9	0.9	1.0	1.1	1.0	1.2	
Other												
Chaves Co.	0.1	0.2	0.2	0.1	0.2	0.1	0.2	0.2	0.1	0.0	0.3	
New Mexico	0.7	1.0	0.9	0.8	0.9	0.7	0.7	0.6	0.6	0.6	0.7	
*2002 D-4		_1										

*2002 Data are provisional



	RESIDENT LIVE BIRTHS LOW BIRTH WEIGHT BIRTHS (< 2500 grams) 1992-2002												
	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002		
Chaves Co.	58	86	71	67	69	67	70	66	80	71	81		
New Mexico	2,014	2,032	2,023	2,017	2,041	2,086	2,042	2,078	2,180	2,147	2,224		
*2002 data are p	*2002 data are provisional												
sou	SOURCE: NM Department of Health, Office of New Mexico Vital Records and Health Statistics												



Low Birth Weight

Low birth weight (LBW) is defined as an infant weight of less than 2,500 grams (5 1/2 lbs) at the time of delivery. Birth weight is one of the most important factors in determining the survival and health of an infant. Low birth weight is a public health problem since infants born LBW have increased infant mortality, morbidity, incidence of learning disabilities, and medical costs. Nationally, the risk factors for LBW include maternal age of less than seventeen and greater than 34 years, Black race/ethnicity, low socioeconomic status, single marital status, lower levels of maternal education, smoking, inadequate weight gain, low pre-pregnancy weight, and a variety of medical risk factors (Source: Data to Action).

Smoking, which retards fetal growth, is the single largest modifiable risk factor for LBW and infant mortality. It is estimated to account for 20 to 30% of all LBW births.

RESIDENT LIVE BIRTHS HIGH BIRTH WEIGHT BIRTHS (4090+ grams, 9 pounds) 1994-2002

	1994-	1996	1997-	1999	2000-2002*		
	Number	Percent	Number	Percent	Number	Percent	
Chaves Co.	146	5.3	127	4.6	136	4.8	
New Mexico	4,010	5.2	3,810	4.9	3,674	4.7	

*2002 Data are provisional

SOURCE: NM Department of Health, ONMVRHS

RESIDENT LIVE BIRTHS VERY LOW BIRTH WEIGHT BIRTHS (< 1500 grams) 1994-2002

	1994-	1996	1997-	-1999	2000-2002*		
	Number	Percent	Number	Percent	Number	Percent	
Chaves Co.	23	0.8	26	0.9	30	1.1	
New Mexico	894	1.1	880	1.1	1,005	1.2	

*2002 data are provisional

SOURCE: NM Department of Health, ONMVRHS

High Birth Weight

A woman with a history of gestational diabetes or delivery of a baby weighing >9 pounds is at risk of developing type 2 diabetes. In addition, if the baby has macrosomia (generally defined as a weight of 4000 g or more), he or she is at risk for obesity and also for developing type 2 diabetes later on in life. It should be noted that there is no widely agreed-upon weight definition. Any evaluation of fetal weight must be considered in the context of gestational age.

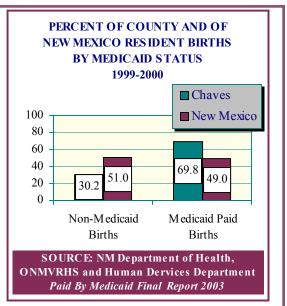
Sources: "Diabetes in the Life Cycle and Research," Vol. 4. 2003. Editor M. Franz. Published by the American Association of Diabetes Educators, Chicago Illinois. Diabetes Care Journal, Supplement 1, January 2003 Vol. (26).

MATERNAL AND INFANT HEALTH - MEDICAID BIRTHS / SUPPLEMENTAL PROGRAMS / FEMALE POPULATION

Medicaid is a Federal-State matching entitlement program that pays for medical assistance. Originating in 1965 as Title XIX of the Social Security Act, it was created as a medical extension of the federally funded cash income assistance program emphasizing care for dependent children and their mothers, the disabled, and the elderly.

Federal and state initiatives intending to expand access to maternity and child health care have resulted in dramatic changes in policy and manner of health care delivery. Federal Omnibus Budget Reconciliation Acts (OBRA) of 1986, 1987, and 1989 required states to grant Medicaid eligibility/coverage for pregnant woman and infants, ultimately, at or below the 133% of federal poverty levels, and allow for eligibility up to 185%. The State of New Mexico followed this progression and complimented the initiatives by extending eligibility up to 225% of federal poverty levels.

Statewide, Medicaid paid for 49% of births.



NEW MEXICO RESIDENT BIRTHS BY MEDICAID STATUS 1999-2000

Residence	Non- Medicaid Births	Medicaid Paid Births	Total Births
Chaves	555	1,281	1,836
New Mexico	27,710	26,600	54,310

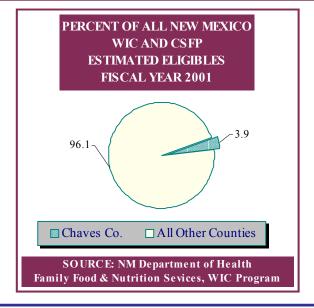
SOURCE: NM Department of Health, ONMVRHS and Human Services Department Paid By Medicaid Final Report 2003

WOMEN, INFANT & CHILDREN (WIC) PROGRAM & COMMODITY SUPPLEMENTAL FOOD PROGRAM (CSFP)
POTENTIAL ELIGIBLES
FISCAL YEAR 2001

Residence	Estimated Potential Eligible	- WIC	CSFP Recipients	Percent Served
Chaves Co.	3,813	2,676	412	81.0
New Mexico	96,571	55,934	4,889	63.0

SOURCE: NM Department of Health Family Food & Nutrition Services, WIC Program Compared to mothers of children whose births were not paid by Medicaid, Medicaid mothers in New Mexico tended to:

- Be younger;
- Be White Hispanic;
- Have fewer years of education;
- Have lower levels of prenatal care;
- Be outside of the major metropolitan areas;
- Be more at risk for preterm and low weight births.



CHAVES FEMALE POPULATION AGES 15-44 2000, 2001 and 2002										
Age Groups	2000	2001	2002	Age Groups	2000	2001	2002			
15 to 19 years	2,626	2,630	2,567	35 to 39 years	2,187	2,043	1,929			
20 to 24 years	1,845	1,875	1,996	40 to 44 years	2,182	2,198	2,210			
25 to 29 years	1,743	1,639	1,594	15 to 44 years	8,032	7,874	7,874			
30 to 34 years	1,818	1,730	1,717							
		Source	Source: U.S. Bureau of the Census							

RESIDENT INFANT DEATHS NEONATAL AND POSTNEONATAL MORTALITY RATES 1993-1997 & 1998-2002 AVERAGE

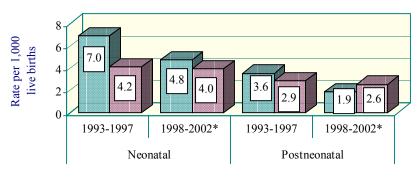
	All Infant Deaths		Neo	natal	Postneonatal	
	1993-1997	1998-2002*	1993-1997	1998-2002*	1993-1997	1998-2002*
Chaves Co.	10.5	6.7	7.0	4.8	3.6	1.9
New Mexico	7.1	6.6	4.2	4.0	2.9	2.6

^{* 2002} data are provisional.

Rate per 1,000 live births in mid year.

SOURCE: NM Department of Health, ONMVRHS



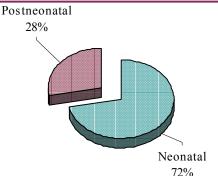


* 2002 data are provisional.

■ Chaves Co. ■ New Mexico

SOURCE: NM Department of Health, office of New Mexico Vital Records and Health Statistics

CHAVES COUNTY PERCENT OF INFANT DEATHS NEONATAL AND POSTNEONATAL 1998-2002*



* 2002 data are provisional.

See glossary for definition of neonatal & postneonatal.

SOURCE: NM Department of Health, Office of New Mexico Vital Records & Health Statistics

INFANT MORTALITY RATES BY COUNTY OF RESIDENCE FOR SELECTED CAUSES 1993-1997 & 1998-2002 AVERAGE

	All Infant Deaths		Birth l	Birth Defects		Short Gestation		SIDS	
	1993-1997	1998-2002*	1993-1997	1998-2002*	1993-1997	1998-2002*	1993-1997	1998-2002*	
Chaves Co.	10.5	6.7	2.6	0.8	2.2	2.8	1.2	0.2	
New Mexico	7.1	6.6	1.7	1.8	1.3	1.4	1.1	0.6	

^{*2002} data are provisional

NOTE: Rate per 1,000 live births. Subcategory rates may not add up to all infant death rate due to rounding.

Due to the implementation of ICD-10 in 1999, comparability ratios have been applied to statistics for years prior to 1999. Rates and numbers may not equal those previously reported due to the application of comparability ratios.

NEW MEXICO RESIDENTS AGES 20 AND YOUNGER SELECTED DIAGNOSES REPORTED TO CHILDRENS CHRONIC CONDITIONS REGISTRY 2000

Cause	Chaves	s Co.	New M	exico
Cause	Number	Rate	Number	Rate
Children in Registry	3,739	1796.0	90,763	1534.5
Congenital Anomalies - All	853	409.7	22,241	376.0
Neural Tube Defects	49	23.5	870	14.7
Cleft Lip/Cleft Palate	139	66.8	2,946	49.8
Down Syndrome	38	18.3	997	16.9
All Other Anomalies	627	301.2	17,428	294.6
Asthma	1,481	711.4	20,904	353.4

* = 1-3 **= 0

Rates per 10,000 population ages 20 years and younger

NOTE: Children in registry totals include all other conditions not listed above.

SOURCE: NM Department of Health Children's Medical Services

CHILD ABUSE CASES NUMBER AND TYPE OF INVESTIGATIONS 2002

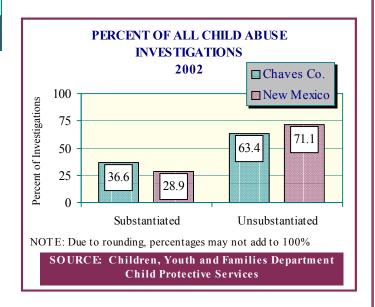
	Substantiated	Unsubstantiated	Total
Chaves Co.	256	444	700
New Mexico	4.089	10.067	14,156

Substantiated means that through the course of the investigation, the social worker determined that the child(ren) who is the subject of the report has been determined to have been the victim of abuse and/or neglect. In other words the allegations are true.

An *unsubstantiated* investigation indicates that the investigator was unable to determine that the allegation(s) was, true.

SOURCE: NM Children, Youth and Families Department, Child Protective Services







Sometimes children have special developmental needs or health concerns that may put them at risk for or cause a developmental delay.

Through the Department of Health's Family Infant Toddler (FIT) Program early intervention services are available to help families who have concerns about the development of their young child (birth to three).

INDIVIDUALIZED FAMILY SERVICE PLAN (IFSP) ELIGIBILITY STATUS FOR FY03

ELIGIBILITY	Chaves	New Mexico
ELIGIDILI I	NUMBER	NUMBER
At Risk, Environmental	7	665
At Risk, Medical/Biological	26	1,150
Developmental Delay	91	2,937
Established Condition	48	470

The eligibility category of children with an active IFSP during FY 2003 is reported. Children are eligible for FIT Program service through one of four eligibility categories: a developmental delay of 25% or more in one of five developmental areas, an established condition (such as Down's Syndrome) that usually leads to a development delay, or a medical / biological risk or an environmental risk for a developmental delay.

SOURCE: DOH Long Term Services Division Family Infant Toddler (FIT) Program

INDIVIDUALIZED FAMILY SERVICE PLAN (IFSP) BY RACE/ETHNICITY FOR FY03

RACE/ETHNICITY	Chaves	New Mexico					
RACE/ ETHINICITY	an Native ^ 0	NUMBER					
American Indian or Alaskan Native	^	779					
Asian or Pacific Islander	0	43					
Black or African American (not Hispanic)	6	130					
Hispanic or Latino	110	2,696					
White (not Hispanic)	55	1,574					

The race / ethnicity of children with active IFSP during FY 2003 is reported ^Statistics not displayed due to less than 5 cases.

> SOURCE: DOH Long Term Services Division Family Infant Toddler (FIT) Program

INDIVIDUALIZED FAMILY SERVICE PLAN (IFSP) BY AGE OF CHILD on 12/1/2002

AGE OF CHILD	Cha	aves	New Mexico		
AGE OF CHILD	NUMBER	PERCENT	NUMBER	PERCENT	
Less Than 1 year	13	14.6	458	17.9	
1 to 2 years	20	22.5	707	27.6	
2 to 3 years	34	38.2	1048	41.0	
3 years and older	22	24.7	345	13.5	
Total	89	100.0	2558	100.0	

The age of child with an IFSP on December 1st as reported

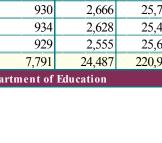
SOURCE: DOH Long Term Services Division Family Infant Toddler (FIT) Program

Fiscal Year 2003 = July 01, 2002 to June 30, 2003

PRIVATE AND PUBLIC SCHOOL ENROLLMENT KINDERGARTEN THROUGH 8TH GRADE 2002-2003

GRADE	Chave	es Co.	New Mexico		
GRADE	PRIVATE	PUBLIC	PRIVATE	PUBLIC	
Kindergarten	72	771	3,525	22,638	
1st Grade	60	819	2,667	23,706	
2nd Grade	36	806	2,738	23,550	
3rd Grade	41	839	2,601	24,012	
4th Grade	46	859	2,553	24,995	
5th Grade	46	904	2,554	25,310	
6th Grade	47	930	2,666	25,702	
7th Grade	43	934	2,628	25,425	
8th Grade	41	929	2,555	25,630	
Total	432	7,791	24,487	220,968	

SOURCE: NM Department of Education



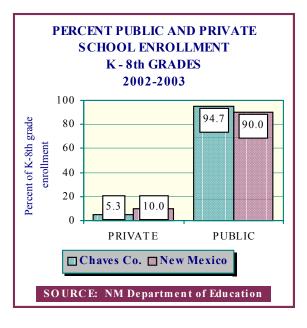
HOMESCHOOL STUDENTS ALL GRADES 1998-1999 & 1999-2000

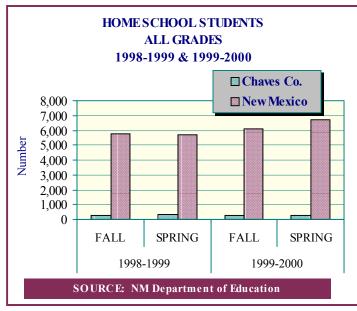
Residence	1998	-1999	1999-2000		
Residence	FALL	SPRING	FALL	SPRING	
Chaves Co.	255	306	261	265	
New Mexico	5,796	5,728	6,080	6,732	

NOTE: These are the number of home school students reporting to the New Mexico Department of Education.

SOURCE: NM Department of Education







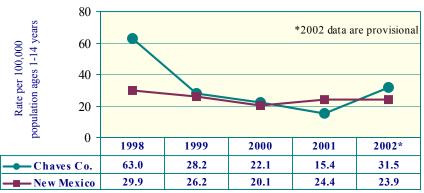
NEW MEXICO RESIDENT DEATHS FOR AGES 1-14 YEARS 1992-2002

Year	Chaves Co.	New Mexico
1992	9	120
1993	8	133
1994	7	125
1995	5	123
1996	4	128
1997	6	106
1998	9	115
1999	4	100
2000	3	79
2001	2	94
2002*	4	92

*2002 data are provisional

SOURCE: NM Department of Health ONMVRHS

NEW MEXICO RESIDENT DEATH RATES FOR AGES 1-14 YEARS 1998-2002



SOURCE: NM Department of Health Office of New Mexico Vital Records and Health Statistics

NEW MEXICO RESIDENT DEATHS LEADING CAUSES OF DEATH - AGES 1-14 YEARS 1998-2002* AVERAGE

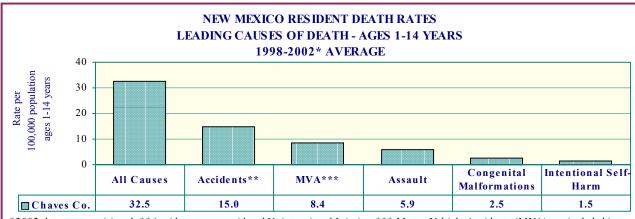
CHAVES COUNTY			NEW MEXICO			
Cause	Number	Rate	Cause	Number	Rate	
All Causes	22	32.5	All Causes	480	24.4	
Accidents (Unintentional Injuries)	10	15.0	Accidents (Unintentional Injuries)	190	9.7	
(Motor Vehicle Accidents)	(6)	(8.4)	(Motor Vehicle Accidents)	(128)	(6.5)	
Assault (Homicide)	4	5.9	Congenital Malformations	45	2.3	
Congenital Malformations	2	2.5	Malignant Neoplasms	39	2.0	
Intentional self-harm (Suicide)	1	1.5	Assault (Homicide)	37	1.9	

^{* 2002} data are provisional

Rate per 100,000 population ages 1-14 years. Rate numerator was deaths for years 1998-2002, divided by 5; denominator was the 2000 population.

Due to the implementation of ICD-10 in 1999, comparability ratios have been applied to statistics for years prior to 1999. Rates and numbers may not equal those previously reported due to the application of comparability ratios.

SOURCE: NM Department of Health, Office of New Mexico Vital Records and Health Statistics



*2002 data are provisional. **Accidents are considered Unintentional Injuries. *** Motor Vehicle Accidents (MVA) are included in Accidents. Rate numerator was deaths for years 1998-2002, divided by 5; denominator was the 2000 population.

Due to the implementation of ICD-10 in 1999, comparability ratios have been applied to statistics for years prior to 1999. Rates and numbers may not be equal to those previously reported due to application of comparability ratios.

PUBLIC HIGH SCHOOL ENROLLMENT **GRADES 9-12 SCHOOL YEARS 2000-2003** SCHOOL YEAR Chaves Co. New Mexico 2000-2001 3.612 95,427 2001-2002 3,454 95,224 2002-2003 3,331 95,767 SOURCE: NM Department of Education

PRIVATE AND PUBLIC HIGH SCHOOL ENROLLMENT **GRADES 9 - 12 SCHOOL YEAR 2000-2001** Chaves Co. New Mexico **GRADE** PRIVATE PUBLIC PRIVATE PUBLIC 9th 183 1,080 2,454 28,944 10th 127 938 2,092 25,476

138

134

582

SOURCE: NM Department of Education

819

775

3,612

1,901

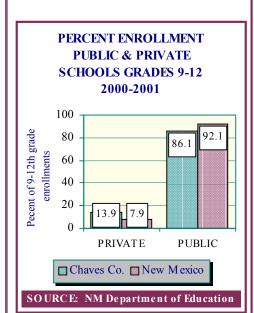
1,690

8,137

21,905

19,102

95,427



HIGH SCHOOL DROPOUT RATE **GRADES 9 - 12 SCHOOL YEARS 1995-2002** 10 Rate per 100 enrollments 8 6 4 2 95-96 96-97 97-98 98-99 99-00 00-01 01-02 8.9 4.9 5.4 6.9 8.6 4.1 4.8 - Chaves Co. 8.5 7.8 5.6 6.0 5.3 3.6 New Mexico 7.1

11th

12th

Total

Rate calculated by dividing the number of dropouts by the number of students enrolled in grades 9-12 on the 40th day of enrollment. A dropout is a student who was enrolled in school the previous year, but did not enroll the following year and did not graduate or meet certain approved exclusions (e.g., transfer, illness).

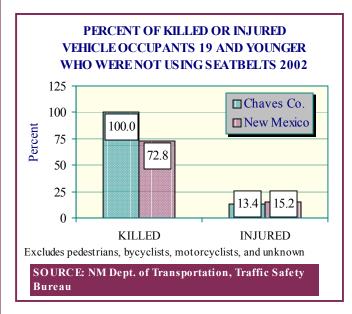
SOURCE: NM Department of Education

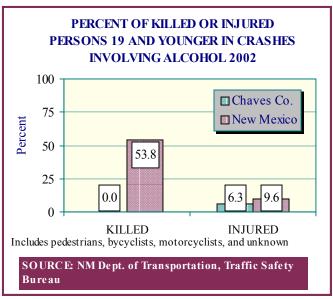
RESIDENT FALL ENROLLMENT TO NEW MEXICO HIGHER EDUCATION INSTITUTIONS 2001-2002				
INSTITUTE	Cha			Texico 2002
UNM	189	197	19,751	20,497
UNM Gallup	109	0	2,125	2,485
	1	0	824	
UNM Los Alamos			_	918
UNM Medical School	6	5	263	268
UNM Taos	0	1	1,190	1,349
UNM Valencia	2	2	1,563	1,717
NMSU	317	328	10,897	11,330
NMSU Alamogordo	1	4	1,300	1,380
NMSU Carlsbad	4	5	1,028	1,108
NMSU Dona Ana	58	55	4,342	4,744
NMSU Grants	0	0	619	640
ENMU	425	384	3,144	3,120
ENMU Roswell	2,097	2,374	3,046	3,536
ENMU Ruidoso	10	4	752	751
NMHU	21	67	2,987	2,841
WNMU	12	9	2,109	2,277
Other NM Institutions*	100	88	38,739	41,773
SOURCE	E: NM Commis	sion on Higher	Education	

NOTE: Not all resident students report their original county of origin. In addition, out of state students are not included. Resident students attending school out of state are also not included. Counts reflect all students at a specific site, including extended services enrollments.

*Includes all other institutions of higher education not listed above, including community and technical colleges.

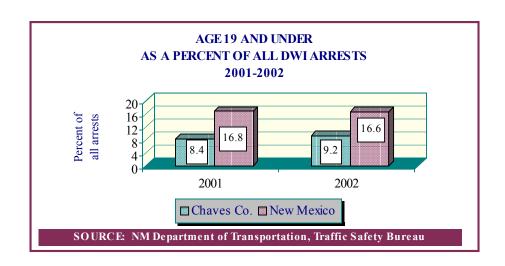
PERSONS 19 AND UNDER KILLED OR INJURED AS VEHICLE OCCUPANTS IN CRASHES BY SEATBELT STATUS 2002							
		KILLED			INJURED		
	TOTAL	NO BELT	BELT	TOTAL	NO BELT	BELT	
Chaves Co.	2	2	0	179	24	155	
New Mexico	81	59	22	6,407	974	5,433	
NOTE: Number excludes pedestrians, bicyclists, motorcyclists, and unknown.							
SOURCE:	New Mexico	Department	t of Transpo	rtation, Tra	ffic Safety Bu	ıreau	





NUMBER OF PERSONS ARRESTED FOR DRIVING WHILE IMPAIRED (DWI) 2001 & 2002					
	19 Years an	19 Years and Younger All Persons			
	2001	2001 2002 2001 2000			
Chaves Co.	30	25	357	273	
New Mexico	3,617 3,593 21,576 21,603				
SOURCE: NM Department of Transportation, Traffic Safety Bureau					





NEW MEXICO RESIDENT LIVE BIRTHS TO MOTHERS AGE 15-17 YEARS 1998-2002* AVERAGE

Residence	Number	Rate
Chaves Co.	432	51.8
New Mexico	8,687	40.0

*2002 data are provisional

Rate is per 1,000 female population ages 15-17 years. Rate numerator was births to mothers age 15-17 years for 1998-2002, divided by 5; denominator was 2000 female population age 15-17.

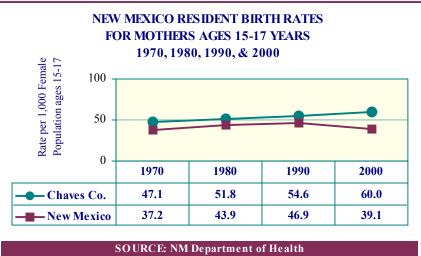
ONMVRHS

1992-2002

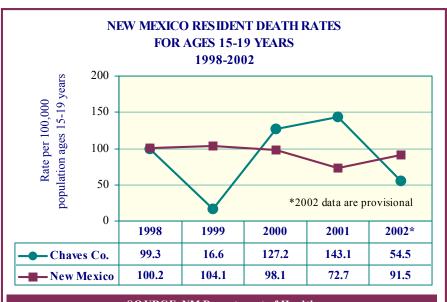
SOURCE: NM Department of Health **NEW MEXICO** RESIDENT DEATHS FOR AGES 15-19 YEARS

Year	Chaves Co.	New Mexico
1992	3	117
1993	5	132
1994	3	128
1995	8	150
1996	7	158
1997	8	118
1998	6	144
1999	1	150
2000	7	143
2001	8	107
2002*	3	136
*2002 data are provisional		

SOURCE: NM Department of Health **ONMVRHS**



Office of New Mexico Vital Records and Health Statistics



SOURCE: NM Department of Health Office of New Mexico Vital Records and Health Statistics

NEW MEXICO RESIDENT DEATHS LEADING CAUSES OF DEATH - AGES 15-19 YEARS 1998-2002* AVERAGE

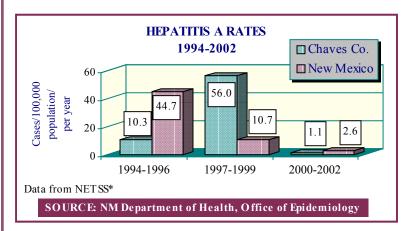
CHAVES COUNTY			NEW MEXICO		680 93.3		
Cause	Number	Rate	Cause	Number	Rate		
All Causes	25	90.8	All Causes	680	93.3		
Accidents (Unintentional Injuries)	11	40.3	Accidents (Unintentional Injuries)	312	42.8		
(Motor Vehicle Accidents)	(8)	(28.0)	(Motor Vehicle Accidents)	(235)	(32.2)		
Assault (Homicide)	7	25.4	Assault (Homicide)	117	16.0		
Intentional Self-Harm (Suicide)	3	10.9	Intentional Self-Harm (Suicide)	117	16.0		
Malignant Neoplasms	1	3.6	Malignant Neoplasms	35	4.8		

^{* 2002} data are provisional

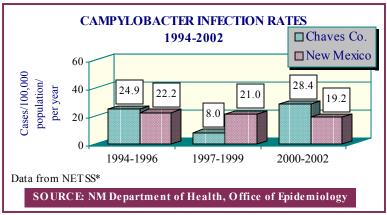
Rate per 100,000 population ages 15-19 years. Rate numerator was deaths for years 1998-2002, divided by 5; denominator was the 2000 population.

Due to the implementation of ICD-10 in 1999, comparability ratios have been applied to statistics for years prior to 1999. Rates and numbers may not equal those previously reported due to the application of comparability ratios.

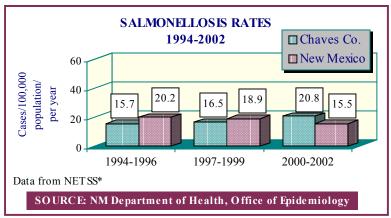
GASTROINTESTINAL DISEASES



HEPATITIS A NUMBER OF CASES			
Year	Chaves Co.	New Mexico	
1994-1996	19	2,254	
1997-1999	105	557	
2000-2002	2	141	
Data from N	Data from NETSS*		
	E: NM Departme ffice of Epidemi		



CAMPYLOBACTER INFECTION NUMBER OF CASES			
Year	Chaves Co.	New Mexico	
1994-1996	46	1,117	
1997-1999	15	1,093	
2000-2002	52	1,059	
Data from NETSS*			
SOURCE: NM Department of Health			
Office of Epidemiology			



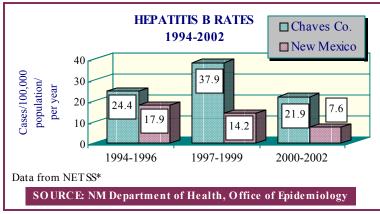
SALMONELLOSIS NUMBER OF CASES			
Year	Chaves Co.	New Mexico	
1994-1996	29	1,016	
1997-1999	31	984	
2000-2002	38	856	
Data from NETSS*			
SOURCE: NM Department of Health			
0	ffice of Epidemi	ology	

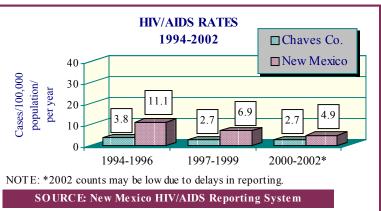
	SHIGELLOSIS RATES 1994-2002	☐ Chaves Co. ☐ New Mexico
s/100 lation year	37.7 6.4 15.1	4.9
	1994-1996 1997-1999	2000-2002
Data from NI	ETSS*	
SOURC	E: NM Department of Health, Office of	Epidemiology

SHIGELLOSIS NUMBER OF CASES			
Chaves Co.	New Mexico		
7	1,900		
12	786		
9	560		
Data from NETSS*			
SOURCE: NM Department of Health			
ffice of Epidemi	ology		
	Chaves Co. 7 12 9 ETSS*		

*National Electronic Telecommunication System for Surveillance (NETSS)

BLOODBORNE DISEASES





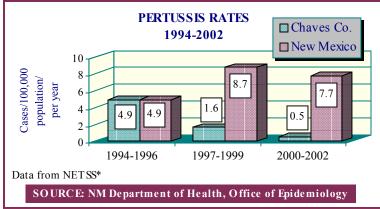
HEPATITIS B NUMBER OF CASES			
Year	Chaves Co.	New Mexico	
1994-1996	45	905	
1997-1999	71	736	
2000-2002	40	419	
Data from NETSS*			
	: NM Departmer fice of Epidemio		

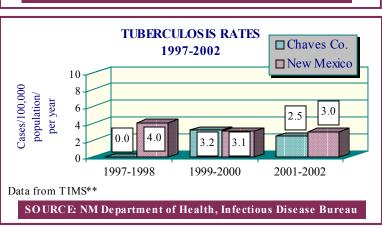
*National Electronic Telecommunication System for Surveillance (NETSS)

AIDS NUMBER OF CASES				
Year	Chaves Co.	New Mexico		
1994-1996	7	559		
1997-1999	5	357		
2000-2002	5*	270*		
Data from HIV & AIDS Reporting System				
* Note counts in 2002 may be low due to				
underreporting.				
SOURCE: NM Department of Health				

Office of Epidemiology

RESPIRATORY DISEASES





PERTUSSIS NUMBER OF CASES				
Year	Chaves Co.	New Mexico		
1994-1996	9	247		
1997-1999	3	453		
2000-2002	1	426		
Data from NETSS*				
SOURCE: NM Department of Health				

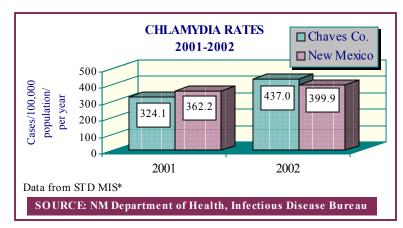
Office of Epidemiology

TUBERCULOSIS NUMBER OF CASES					
Year Chaves Co. New Mexico					
1997-1998	0	139			
1999-2000	4	110			
2001-2002	3	111			
Data from TIMS**					
COUDER NM Department of Health					

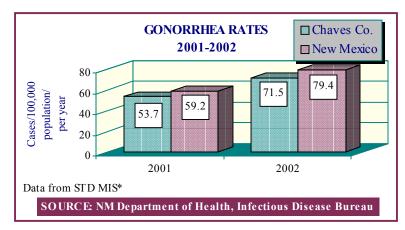
SOURCE: NM Department of Health Infectious Disease Bureau

**Tuberculosis Information Management System (TIMS)

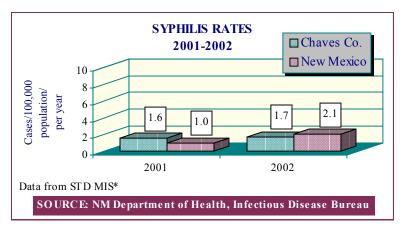
SEXUALLY TRANSMITTED DISEASES



CHLAMYDIA NUMBER OF CASES						
Year Chaves Co. New Mexico						
2001	199	6,669				
2002	263	7,419				
Data from STD MIS*						
SOURCE: NM Department of Health Infectious Disease Bureau						



GONORRHEA NUMBER OF CASES					
Year Chaves Co. New Mexico					
2001	33	1,090			
2002	43	1,472			
Data from STD MIS*					
SOURCE: NM Department of Health					
Infectious Disease Bureau					



SYPHILIS NUMBER OF CASES					
Year	Chaves Co.	New Mexico			
2001	1	19			
2002	1	39			
Data from S	Data from STD MIS*				
SOURCE: NM Department of Health Infectious Disease Bureau					

NOTE: The scales on the above graphs are not comparable.

*Sexually Transmitted Diseases Management Information Systems (STD MIS)

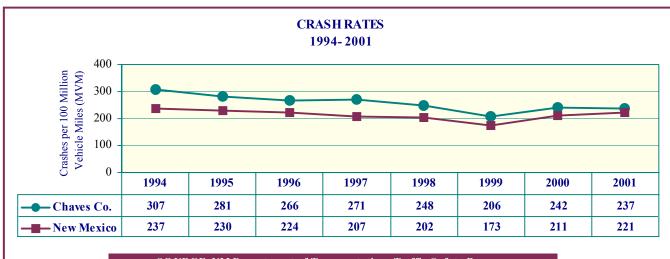


NUMBER OF FATAL AND INJURY CRASHES VEHICLE MILES TRAVELED, LICENSED DRIVERS AND ECONOMIC LOSS 2001

	NUMBER OF CI		ASHES	Licensed	Economic	100 MVM	
	Total	Fatal	Injury	Drivers	Loss *1000	Traveled	
Chaves Co.	1,415	10	484	37,421	\$97,229	6.0	
New Mexico	50,236	415	17,879	1,225,793	\$3,537,921	227.1	

NOTE: MVM = Million Vehicle Miles

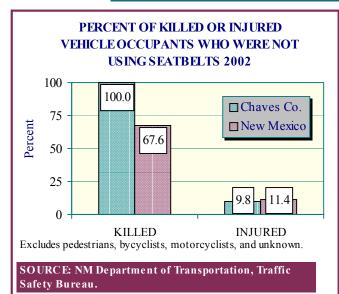
SOURCE: NM Department of Transportation, Traffic Safety Bureau "New Mexico Traffic Crash Information", 2001 Report.

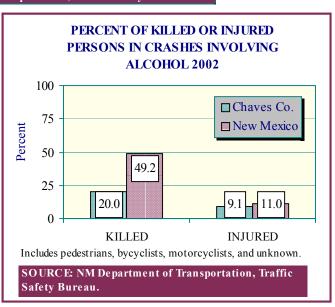


SOURCE: NM Department of Transportation, Traffic Safety Bureau.

ALL PERSONS KILLED OR INJURED AS VEHICLE OCCUPANTS IN CRASHES BY SEATBELT STATUS 2002 KILLED **INJURED** TOTAL NO BELT BELT TOTAL NO BELT BELT Chaves Co. 640 63 577 New Mexico 349 236 113 24,771 2,818 21,953 NOTE: Number excludes pedestrians, bicyclists, motorcyclists, and unknown

SOURCE: New Mexico Department of Transportation, Traffic Safety Bureau.







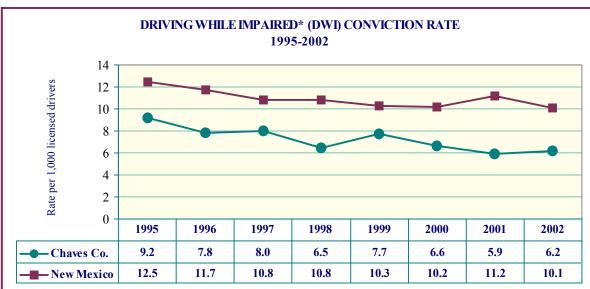
ALCOHOL RELATED CRASHES NEW MEXICO - 2001

- 43 percent of all fatal crashes involved alcohol.
- A person died in an alcohol-involved crash every 44 hours.
- A person was injured in an alcohol-involved crash every 174 minutes.
- An alcohol-involved crash occurred every 147 minutes.

ALCOHOL INVOLVED CRASHES PERSONS INVOLVED AND DWI CONVICTIONS 2002 CRASHES PERSONS INVOLVED DWI **Fatal** Killed Injured Conviction* DWI Rate Injury Chaves Co. 63 258 198 1,774 221 2,921 10.1 New Mexico 12,544

*DWI convictions are those handed down during year listed. The citations which resulted in these convictions could have been issued prior to these years. Convictions are counted by county of driver's residence, not the county in which the citation was issued.

SOURCE: NM Department of Transportation, Traffic Safety Bureau "Driving While Impared", 2002 Report.



*DWI convictions are those handed down during year listed. The citations which resulted in these convictions could have been issued prior to these years. Convictions are counted by county of driver's residence, not the county in which the citation was issued.

SOURCE: NM Department of Transportation, Traffic Safety Bureau "Driving While Impared", various years.

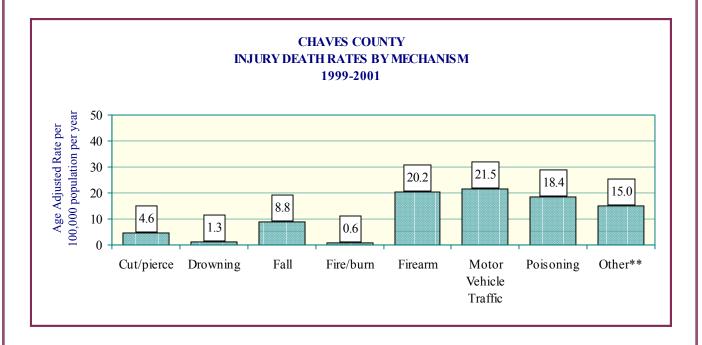
CHAVES COUNTY INJURY DEATHS BY MECHANISM 1999-2001						
Mechanism of Injury Number of Age Adjusted Adjusted Deaths in 3 Rate/100,000* Rate/100,000* Years Per Year Per Year						
Cut/pierce	8	4.6	1.8			
Drowning	2	1.3	1.4			
Fall	19	8.8	10.2			
Fire/burn	1	0.6	1.0			
Firearm	37	20.2	15.7			
Motor Vehicle Traffic	38	21.5	22.1			
Poisoning	31	18.4	17.0			
Other**	27	15.0	14.0			
All Injury	163	90.4	83.2			

NON-FATAL INJURY HOSPITALIZATIONS 1998-2000				
Number/Rate	Chaves County	New Mexico		
Total Number of				
Hospital Discharges in				
3 Years	1,223	30,596		
Age Adjusted Rate per				
100,000* Population per				
Year	629.9	585.2		
100,000* Population per		,		

NOTE: Injury as the principal diagnosis of discharge.

* Rates are adjusted to the 2000 U. S. Standard
Population.

SOURCE: NM Health Policy Commission



Note: Injury categories are from the "Preliminary External Cause of Injury Mortality Matrix for ICD-10," June 12, 2001 by Centers for Disease Control and Prevention, National Center for Injury Prevention and Control.

New Mexico Department of Health, Office of Epidemiology, Injury Epidemiology Unit Source: Office of New Mexico Vital Records and Health Statistics

^{*}Age-adjusted death rate adjusted to the 2000 U.S standard population. Age adjusted death rates weight the age-specific rates for a given population by the age distribution of a standard population, thereby enabling the direct comparison of rates between populations with differing age structures.

^{**} Other includes machinery, cyclist, pedestrian, natural /environmental, struck by/against, suffocation, other specified and unspecified categories.

CANCER INCIDENCE AMONG MALES NUMBER AND INCIDENCE RATE 1994-2000 AGGREGATE							
SITE	Cha		New Mexico				
	NUMBER	RATE	NUMBER	RATE			
All Cancers	1,033	502.6	23,565	468.7			
Stomach	25	12.4	515	10.6			
Colon and Rectum	115	55.5	2,482	50.4			
Liver and Intrahepatic Bile Duct	15	7.7	412	8.2			
Gallbladder	^	^	52	1.1			
Pancreas	22	10.9	570	11.7			
Lung and Bronchus	163	80.3	3,053	62.2			
Melanomas of the Skin	31	15.5	974	18.7			
Breast	^	^	51	1.0			
Prostate	310	148.2	7,320	145.5			
Urinary Bladder	70	34.1	1,324	27.4			
Kidney and Renal Pelvis	28	13.6	741	14.3			
Non-Hodgkins Lymphomas	29	14.6	912	17.8			
Leukemias	35	16.9	727	14.2			
All Other Cancers	185	90.3	4,432	85.3			

Rates are per 100,000 and age-adjusted to the 2000 U.S. (19 age groups) standard.

- ~ Statistic could not be calculated.
- ^ Statistic not displayed due to less than 5 cases.

SOURCE: New Mexico Tumor Registry, University of New Mexico

Colorectal Cancer Screening and Early Detection

Screening tests can reduce deaths from colorectal cancer by identifying polyps, which are tiny growths inside the colon, before they become cancerous. Screening also detects early cancers when treatment is most effective and survival rates are high.

SOURCE: www.cdc.gov

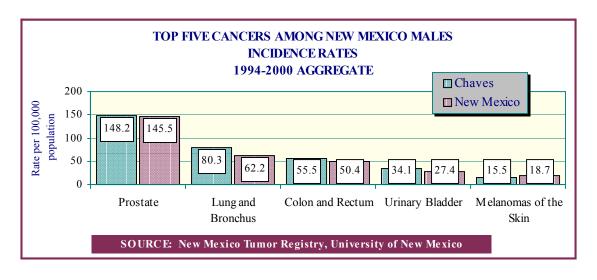
Prostate Cancer Fact

The American Cancer Society estimates that in 2003, 220,900 new cases of prostate cancer will be diagnosed and that 28,900 men will die of the disease in the United States.

Two methods for detecting prostate cancer are commonly used by clinicians:

- 1) Digital rectal examination (DRE)
- 2) Prostate-specific antigen (PSA)

SOURCE: www.cdc.gov



C

SITE	Cha	ves	New Mexico	
SHE	NUMBER	RATE	NUMBER	RATE
All Cancers	907	371.5	21,575	353.8
Stomach	9	3.6	333	5.5
Colon and Rectum	90	35.4	2,173	35.6
Liver and Intrahepatic Bile Duct	^	^	211	3.4
Gallbladder	7	2.7	113	1.8
Pancreas	23	8.4	543	8.9
Lung and Bronchus	130	50.0	2,208	36.0
Melanomas of the Skin	38	16.0	745	12.2
Breast	257	110.6	7,067	116.5
Cervix	28	13.0	566	9.3
Corpus and Uterus, NOS	49	20.7	1,116	18.3
Urinary Bladder	23	8.8	484	7.9
Kidney and Renal Pelvis	21	9.0	472	7.7
Non-Hodgkins Lymphomas	31	11.9	759	12.5
Leukemias	31	12.6	532	8.6
All Other Cancers	169	68.2	4,253	69.5

Rates are per 100,000 and age-adjusted to the 2000 U.S. (19 age groups) standard.

- ~ Statistic could not be calculated.
- ^ Statistic not displayed due to less than 5 cases.

SOURCE: New Mexico Tumor Registry, University of New Mexico

Breast Cancer Screening

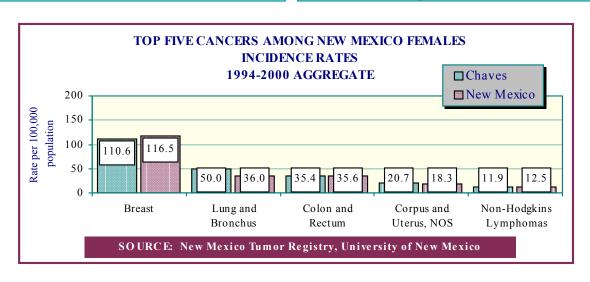
According to the American Cancer Society, an estimated 211,300 new invasive cases of breast cancer are expected to occur among women in the United States during 2003. Mammography is the best way to detect breast cancer in its earliest, most treatable stage, an average of 1.7 years before a woman can feel the lump. Mammography also locates cancers too small to be felt during a clinical breast examination.

SOURCE: www.cdc.gov

Cervical Cancer Screening

Cervical cancer is nearly 100 percent preventable, yet according to the American Cancer Society, in 2003, an estimated 12,200 new cases of invasive cervical cancer will be diagnosed and about 4,100 women will die of the disease. The occurrence of deaths from cervical cancer has declined significantly over the past 40 years. This decline is largely attributed to the effectiveness of Pap test screening in detecting precancerous lesions and early stage cervical cancer.

SOURCE: www.cdc.gov



MODIFIED MAJOR DIAGNOSTIC CATEGORIES (MMDC)

➤ Hospitals use a classification scheme, called Major Diagnostic Categories (MDC), to group the diagnoses of patients upon their discharge from the hospital. Data shown in the following pages are based on a modification of the Major Diagnostic Categories. The Modified Major Diagnostic Categories (MMDCs) separates injuries and neoplasms into their own unique groupings while conventional MDCs distribute these diagnoses across other categories, which obscures their impact.

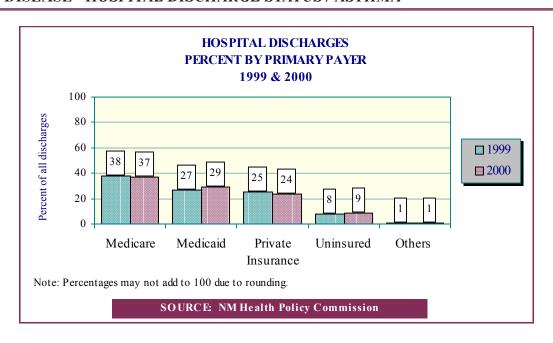
METHODOLOGY NOTES:

- The size of the county's population and the population demographics, such as average age of residents, should be taken into account in interpreting reported data.
- Indian Health Service facilities do not report discharge data to the New Mexico Health Policy Commission, the state agency that maintains the hospital discharge database. As such, counties with large Native American populations may have artificially lower rates.
- Only hospitalization to New Mexico hospitals are included. Counties bordering other states may have a significant number of hospitalization in other states.

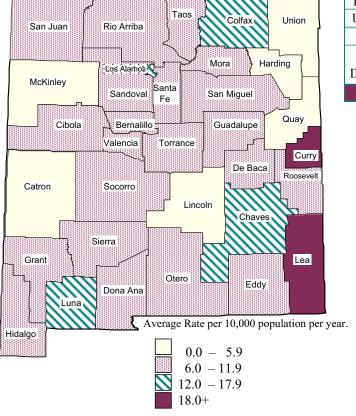
HOSPITAL INPATIENT DISCHARGE DATA - AL	L AGES
MODIFIED MAJOR DIAGNOSTIC CATEGORIES	(MMDCs)
1999-2001	

MMDC	19:	99	200	00	2001		
MINIDC	Chaves Co.	New Mexico	Chaves Co.	New Mexico	Chaves Co.	New Mexico	
01: Nervous System	303	6,319	308	6,416	279	6,799	
02: Eye Diseases	43	639	29	386	14	205	
03: Ear, Nose, Mouth, Throat	74	1,879	71	1,612	62	1,702	
04: Respiratory System	904	17,875	760	15,151	587	15,329	
05: Circulatory System	929	20,349	974	20,923	714	20,629	
06: Digestive System	529	12,425	553	13,099	391	12,921	
07: Hepatobiliary System	181	5,084	190	5,306	165	5,343	
08: Musculoskeletal System	313	7,400	294	7,206	231	7,293	
09: Skin, Subcutaneous, Breast	92	2,272	77	2,392	60	2,583	
10: Endocrine, Metabolic	220	4,658	245	4,726	189	5,103	
11: Kidney & Urinary Tract	242	4,789	256	4,787	213	5,186	
12: Male Reproductive System	19	772	24	662	35	767	
13: Female Reproductive System	152	3,330	181	3,496	157	3,542	
14: Pregnancy, Childbirth	987	26,121	1,052	26,521	779	26,606	
15: Newborns, Neonates	943	23,859	967	24,401	711	24,567	
16: Blood & Blood Forming-Organs	55	1,052	59	1,170	66	1,253	
17: Myeloproliferative Diseases	352	8,616	367	8,345	288	8,118	
18: Infectious Diseases	91	2,128	91	1,795	81	1,915	
19: Mental Diseases	219	8,878	221	9,064	212	9,485	
20: Alcohol / Drug Abuse	131	3,295	141	2,957	112	2,909	
21: Injuries & Poisonings	599	14,682	535	14,193	368	14,113	
22: Burns	9	270	5	233	2	229	
23: Factors Influencing Health	44	4,148	171	4,274	163	4,387	
24: Multiple Trauma	0	0	0	0	0	0	
25: HIV	2	148	0	96	0	86	

SOURCE: NM Health Policy Commission



NEW MEXICO ASTHMA DISCHARGE DATA BY COUNTY 1998-2000



SOURCE: NM Health Policy Commission

HOSPITAL DISCHARGES BY PRIMARY PAYER 1999 & 2000									
Payee	Cha	ives	New N	1exico					
1 ayee	1999	2000	1999	2000					
Medicare	2,853	2,846	47,144	47,959					
Medicaid	2,043	2,220	39,147	39,468					
Private									
Insurance	1,861	1,871	71,401	74,271					
Uninsured	609	658	12,354	13,859					
Others	83	70	5,431	4,738					
Total									
Discharges	7,449	7,665	175,477	180,295					
SOURCE: NM Health Policy Commission									

NEW MEXICO ASTHMA HOSPITAL
DISCHARGES* BY COUNTY
1998-2000

| Number | Rate
|
| Chaves Co. | 286 | 15.3

New Mexico 4,936 9.
*Primary discharges from non-Federal Hospitals Average rates per 10,000 population per year.

SOURCE: NM Health Policy Commission

ESTIMATED DIABETES PREVALENCE AMONG NEW MEXICO ADULTS 2002*

County	2002 Adult Population	Number of Adults with Diabetes	Percentage of Adults with Diabetes
Bernalillo	430,698	38,586	9.00%
Catron	2,844	228	8.00%
Chaves	43,413	3,806	8.80%
Cibola	18,460	1,960	10.60%
Colfax	10,765	951	8.80%
Curry	31,536	2,672	8.50%
De Baca	1,666	142	8.50%
Dona Ana	127,663	12,049	9.40%
Eddy	37,146	3,195	8.60%
Grant	22,677	2,022	8.90%
Guadalupe	3,513	352	10.00%
Harding	616	55	8.90%
Hidalgo	3,801	344	9.10%
Lea	39,662	3,451	8.70%
Lincoln	15,533	1,269	8.20%
Los Alamos	13,763	1,075	7.80%
Luna	18,007	1,639	9.10%
McKinley	47,057	5,630	12.00%
Mora	3,960	398	10.00%
Otero	43,945	3,827	8.70%
Quay	7,524	646	8.60%
Rio Arriba	29,687	3,093	10.40%
Roosevelt	13,160	1,109	8.40%
Sandoval	68,949	6,313	9.20%
San Juan	82,679	8,169	9.90%
San Miguel	22,029	2,197	10.00%
Santa Fe	103,491	9,359	9.00%
Sierra	10,497	859	8.20%
Socorro	13,177	1,246	9.50%
Taos	23,651	2,246	9.50%
Torrance	11,901	1,030	8.70%
Union	2,962	251	8.50%
Valencia	48,121	4,450	9.20%
New Mexico**	1,354,553	120,555	8.90%

*County estimates were derived in the following manner: The Behavioral Risk Factor Surveillance System (BRFSS, 2002), a telephone survey of adults' (age 18 and over) health in New Mexico, was utilized to generate the racial/ethnic-specific diagnosed diabetes prevalence rates for the entire state. County populations were then obtained from the US Census Bureau (2002) by racial/ethnic group. The BRFSS rates were applied to these groups, generating an estimate of the number of American Indians, non-Hispanic Whites, Hispanics and Others (Asian/Pacific Islanders, non-Hispanic Blacks, and other) with diagnosed diabetes. The numbers were then combined to yield a total estimate of adults in each county with diagnosed diabetes. For those with undiagnosed diabetes, estimates by racial/ethnic group from NHANES III (National Health and Nutrition Examination Survey) were obtained from Harris, MI et al. (1998). The estimated numbers of adults with diagnosed and undiagnosed diabetes were combined for the final estimate.

**State estimates were derived in the following manner: The Behavioral Risk Factor Surveillance System (BRFSS, 2002) was utilized to generate an overall estimate of diagnosed diabetes among New Mexican adults. That is, in 2002, an estimated 6.2% of New Mexican adults indicated they had been diagnosed with diabetes. An estimate for undiagnosed diabetes (from NHANES III data) was obtained from Harris, MI et al. (1998). The estimated numbers of adults with diagnosed and undiagnosed diabetes were combined for the final estimate. Note: adding up the county estimates will not result in the state estimate. For the state estimate, there was no initial stratification by race/ethnicity, it was simply a calculation of those with diabetes (all races) divided by those responding to the question.

Source: Department of Health, Diabetes Prevention & Control Program

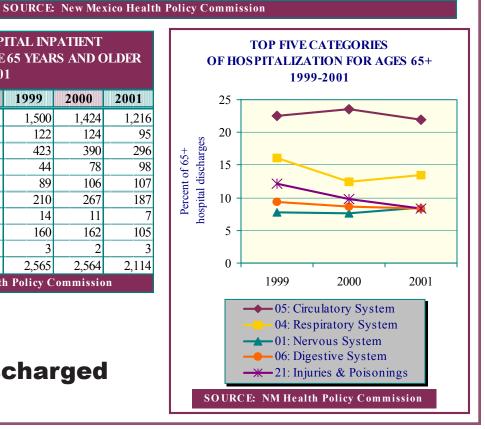
HOSPITAL INPATIENT DISCHARGE DATA MODIFIED MAJOR DIAGNOSTIC CATEGORIES (MMDC) CHAVES COUNTY 1999-2001

		1999			2000			2001	
MMDC		All	% All		All	% All		All	% All
	65+	Ages	Ages	65+	Ages	Ages	65+	Ages	Ages
01: Nervous System	200	303	66.0	195	308	63.3	180	279	64.5
02: Eye Diseases	16	43	37.2	10	29	34.5	3	14	21.4
03: Ear, Nose, Mouth, Throat	15	74	20.3	10	71	14.1	11	62	17.7
04: Respiratory System	413	904	45.7	320	760	42.1	283	587	48.2
05: Circulatory System	577	929	62.1	602	974	61.8	463	714	64.8
06: Digestive System	241	529	45.6	223	553	40.3	177	391	45.3
07: Hepatobiliary System	63	181	34.8	58	190	30.5	57	165	34.5
08: Musculoskeletal System	173	313	55.3	141	294	48.0	119	231	51.5
09: Skin, Subcutaneous, Breast	26	92	28.3	25	77	32.5	34	60	56.7
10: Endocrine, Metabolic	178	220	80.9	92	245	37.6	83	189	43.9
11: Kidney & Urinary Tract	114	242	47.1	135	256	52.7	101	213	47.4
12: Male Reproductive System	13	19	68.4	17	24	70.8	24	35	68.6
13: Female Reproductive System	15	152	9.9	18	181	9.9	18	157	11.5
14: Pregnancy, Childbirth	0	987	0.0	0	1,052	0.0	0	779	0.0
15: Newborns, Neonates	0	943	0.0	0	967	0.0	0	711	0.0
16: Blood & Blood-Forming Organs	24	55	43.6	25	59	42.4	32	66	48.5
17: Myeloproliferative Diseases	171	352	48.6	194	367	52.9	137	288	47.6
18: Infectious Diseases	46	91	50.5	49	91	53.8	44	81	54.3
19: Mental Diseases	22	219	10.0	29	221	13.1	26	212	12.3
20: Alcohol / Drug Abuse	12	131	9.2	12	141	8.5	7	112	6.3
21: Injuries & Poisonings	313	599	52.3	253	535	47.3	176	368	47.8
22: Burns	0	9	0.0	1	5	20.0	0	2	0.0
23: Factors Influencing Health	26	44	59.1	123	171	71.9	129	163	79.1
24: Multiple Trauma	0	0		0	0		0	0	
25: HIV	0	2	0.0	0	0		0	0	

CHAVES COUNTY HOSPITAL INPATIENT DISCHARGE STATUS FOR AGE 65 YEARS AND OLDER 1999-2001

	1999	2000	2001					
Routine Discharge	1,500	1,424	1,216					
Transfer-Hospital	122	124	95					
Transfer-Skilled Nursing Facility	423	390	296					
Transfer-Intermediate Care Facility	44	78	98					
Transfer-Other	89	106	107					
Transfer-Home Care	210	267	187					
Left Against Medical Advice	14	11	7					
Died	160	162	105					
Other	3	2	3					
TOTAL DISCHARGED	2,565	2,564	2,114					
SOURCE: New Mexico Health Policy Commission								





ADULT ABUSE CASES NUMBER AND TYPE OF INVESTIGATION **Annual 2002** Substantiated **Unsubstantiated** Total Residence Investigations Investigations **Investigations** Number Percent Number Percent Number 72 69.2 Chaves Co. 30.8 162 234 New Mexico 1475 29.2 3569 70.8 5,044



Source: NM Children, Youth and Families Department Protective Services Division Fact Book, Fourth Quarter & Annual 2002

NEW MEXICO RESIDENT DEATHS AGES 65 YEARS AND OLDER 1992-2002

Chaves Co.	New Mexico
427	7,600
416	7,971
461	8,368
449	8,628
378	8,663
408	8,772
467	9,100
516	9,515
480	9,441
438	9,864
473	9,840
	427 416 461 449 378 408 467 516 480 438

*2002 data are provisional

SOURCE: NM Department of Health ONMVRHS

NEW MEXICO RESIDENT DEATH RATES FOR AGES 65 YEARS AND OLDER 1998-2002 7000 Rate per 100,000 population 6000 ages 65 years and older 5000 4000 3000 2000 1000 *2002 data are provisional 0 1998 1999 2000 2001 2002* 4894.9 5317.7 5908.6 5318.6 5339.2 -Chaves Co. 4443.4 4618.2 4758.1 4448.6 4535.3 New Mexico SOURCE: NM Department of Health Office of New Mexico Vital Records and Health Statistics

NEW MEXICO RESIDENT DEATHS LEADING CAUSES OF DEATH - AGES 65 YEARS AND OLDER 1998-2002* AVERAGE

CHAVES COUNTY			NEW MEXICO				
Cause	Number	Rate	Cause	Number	Rate		
All Causes	2,374	5260.9	All Causes	47,760	4500.9		
Diseases of Heart	704	1559.7	Diseases of Heart	13,459	1268.4		
Malignant Neoplasms	517	1144.8	Malignant Neoplasms	10,313	971.9		
Chronic Lower Respiratory Diseases	212	470.4	Chronic Lower Respiratory Diseases	3,630	342.1		
Cerebrovascular Diseases	173	383.4	Cerebrovascular Diseases	3,407	321.1		
Diabetes Mellitus	97	215.2	Diabetes Mellitus	1969	185.5		

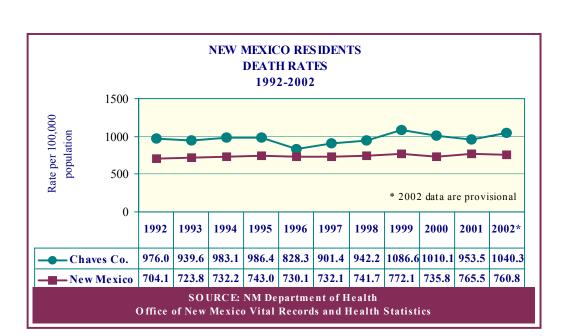
^{* 2002} data are provisional

Rate per 100,000 population ages 65 years and older. Rate numerators were deaths for years 1998-2002, divided by 5; denominator was the 2000 population.

Due to the implementation of ICD-10 in 1999, comparability ratios have been applied to statistics for years prior to 1999. Rates and numbers may not equal those previously reported due to the application of comparability ratios.

NEW MEXICO RESIDENT DEATHS COUNTY AND STATE TOTALS 1992-2002											
	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002*
Chaves Co.	573	560	597	607	516	564	590	678	620	577	626
New Mexico	11,130	11,689	12,106	12,500	12,456	12,613	12,858	13,433	13,384	14,016	14,114
* 2002 data ar	e provisio	nal							•		

SOURCE: NM Department of Health, Office of New Mexico Vital Records and Health Statistics



LEADING CAUSES OF DEATH 1998-2002* AVERAGE CHAVES COUNTY **NEW MEXICO** All Races/All Ages Number Rate All Races/All Ages Number Rate 1007.1 All Causes 745.5 All Causes 3.091 67.805 Diseases of Heart 816 265.7 Diseases of Heart 16,186 178.0 158.8 673 219.2 Malignant Neoplasms 14,440 Malignant Neoplasms Chronic Lower Respiratory Diseases 230 75.1 Accidents (Unintentional Injuries) 4,759 52.3 Cerebrovascular Diseases 199 64.7 --- (Motor Vehicle Accidents) (1,904)(20.9)

49.2 Chronic Lower Respiratory Diseases

Cerebrovascular Diseases

4,125

3.890

45.3

42.8

NEW MEXICO RESIDENT DEATHS

Accidents (Unintentional Injuries)

-- (Motor Vehicle Accidents)

Rate per 100,000 population. Rate numerator was deaths for years 1998-2002, divided by 5; denominator was the 2000 population.

(19.2)

Due to the implementation of ICD-10 in 1999, comparability ratios have been applied to statistics for years prior to 1999. Rates and numbers may not equal those previously reported due to the application of comparability ratios.

151

(59)

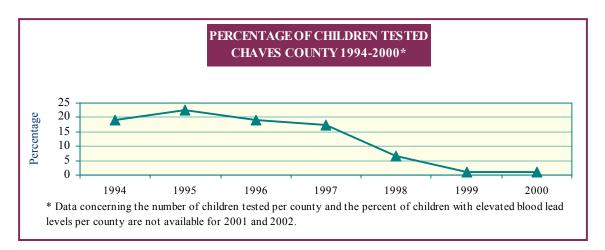
^{* 2002} data are provisional

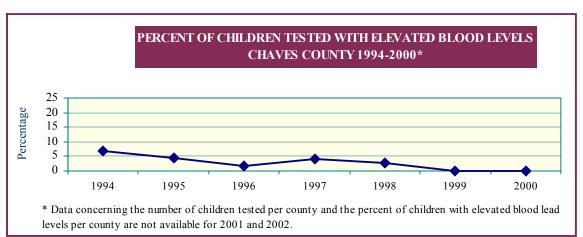
CHILDREN UNDER 6 WITH ELEVATED BLOOD LEAD LEVELS OF THOSE CHILDREN SCREENED, 2001-2002							
	2001	2002					
Chaves Co.							
Number of Children with Elevated Blood Lead Levels	2	2					
New Mexico							
Number of Children Screened	2,691	2,876					
Number of Children with Elevated Blood Lead Levels	37	35					
Percent of Children with Elevated Blood Lead Levels	1.4	1.2					
NOTE: Elevated Blood Lead Levels is defined as ≥ 10 µg/dl of blood.							

In Chaves County, 21.2% of the houses were built prior to 1950. More than 27% pre-1950 housing in an area is considered a greater than average risk for lead poisoning in children.

- · Lead poisoning is the number one preventable environmental health problem for children under 6 years.
- · Risk factors for lead poisoning include older housing, poverty, and adult occupational exposure to lead.
- The only way to determine a child's lead level is with a blood lead test.
- The national estimate (1997) of children with an elevated blood lead level is 4.4%.²

It is estimated that 60% to 80% of children with elevated blood lead levels are in the Medicaid population.² Note: Screening rates have declined significantly in New Mexico (NM) since the mid 1990's.





 $^{^{1} \}ge 10 \,\mu\text{g/dl}$ of blood (greater than or equal to 10 micrograms per deciliter of blood), the Centers for Disease Control and Prevention (CDC) identified level of concern.

SOURCE: NM Department of Health, Office of EpidemiologyProgram

² General Accounting Office (GAO) Report, 1999.



HOSPITALS AND PRIMARY CARE FACILITIES									
HOSPITAL / PRIMARY CARE FACILITY	PHONE	STREET ADDRESS	CITY	STATE	ZIP				
Eastern New Mexico Medical Center	(505)624-8722	405 W. Country Club Road	Roswell	NM	88201				
New Mexico Rehabilitation Center	(505)347-3400	31 Gail Harris Avenue	Roswell	NM	88201				
Pecos Valley Lodge (Nm Rehab)	(505)347-3400	31 Gail Harris Avenue	Roswell	NM	88201				
SOURCE: NM Department of Health, District IV Health Office									

HEALTH CARE CLINICS									
FACILITY	PHONE	STREET ADDRESS	CITY	STATE	ZIP				
Covenant Health Care - (Carlsbad, Roswell)	(505)623-1370	1600 SE Main	Roswell	NM	88201				
Covenant Health Care - (Carlsbad, Roswell)	" " "	1717 W 2nd St, Suite 101	Roswell	NM	88201				
La Casa De Buena Salud	(505)623-3255	1511 Grand St	Roswell	NM	88201				
Valley Health Clinic of Eastern NM Medical Center	(505)627-4114	116 E. 2nd Street	Dexter	NM	8820				
SOURCE: NM Depa	rtment of Healtl	h, District IV Health Office							

LICENSED HEALTH PROFESSIONALS BY COUNTY OF LICENSE 2002				
	Chaves Co.	New Mexico		
Medical Doctor	104	5,809		
Medical Doctor Resident	10	1,144		
Physician Assistant	8	287		
Nurse (RN & LPN)	496	19,575		
Certified Nurse Midwives	5	148		
Licensed Midwives	0	79		
SOURCE: New Mexico Health Policy Commission				

American Medical Response American Red Cross Assurance Home of Roswell Casa Del Nuevo Comienzo "New Beginnings" CASA, Court Appointed Special Advocates Chaves County Community Health Center - Roswell "La Casa" Chaves County DWI Council Chaves County Extension Service Chaves County Juvenile Justice Committee Chaves County Maternal Child Health Council Chaves County Prevention Policy Board Chaves County Youth Services Community Cares Project Community Foundation of Chaves County Counseling Associates, Inc. Esperanza House Family Resource and Referral	PHONE 624-0113 622-4370 624-1780 623-2229 625-0112 623-3225 622-4769 622-3210
American Red Cross Assurance Home of Roswell Casa Del Nuevo Comienzo "New Beginnings" CASA, Court Appointed Special Advocates Chaves County Community Health Center - Roswell "La Casa" Chaves County DWI Council Chaves County Extension Service Chaves County Juvenile Justice Committee Chaves County Maternal Child Health Council Chaves County Prevention Policy Board Chaves County Youth Services Community Cares Project Community Foundation of Chaves County Counseling Associates, Inc. Esperanza House Family Resource and Referral	622-4370 624-1780 623-2229 625-0112 623-3225 622-4769
Assurance Home of Roswell Casa Del Nuevo Comienzo "New Beginnings" CASA, Court Appointed Special Advocates Chaves County Community Health Center - Roswell "La Casa" Chaves County DWI Council Chaves County Extension Service Chaves County Juvenile Justice Committee Chaves County Maternal Child Health Council Chaves County Prevention Policy Board Chaves County Youth Services Community Cares Project Community Foundation of Chaves County Counseling Associates, Inc. Esperanza House Family Resource and Referral	624-1780 623-2229 625-0112 623-3225 622-4769
Casa Del Nuevo Comienzo "New Beginnings" CASA, Court Appointed Special Advocates Chaves County Community Health Center - Roswell "La Casa" Chaves County DWI Council Chaves County Extension Service Chaves County Juvenile Justice Committee Chaves County Maternal Child Health Council Chaves County Prevention Policy Board Chaves County Youth Services Community Cares Project Community Foundation of Chaves County Counseling Associates, Inc. Esperanza House Family Resource and Referral	623-2229 625-0112 623-3225 622-4769
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Chaves County Community Health Center - Roswell "La Casa" Chaves County DWI Council Chaves County Extension Service Chaves County Juvenile Justice Committee Chaves County Maternal Child Health Council Chaves County Prevention Policy Board Chaves County Youth Services Community Cares Project Community Foundation of Chaves County Counseling Associates, Inc. Esperanza House Family Resource and Referral	623-3225 622-4769
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Chaves County Juvenile Justice Committee Chaves County Maternal Child Health Council Chaves County Prevention Policy Board Chaves County Youth Services Community Cares Project Community Foundation of Chaves County Counseling Associates, Inc. Esperanza House Family Resource and Referral	622-3210
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Chaves County Prevention Policy Board Chaves County Youth Services Community Cares Project Community Foundation of Chaves County Counseling Associates, Inc. Esperanza House Family Resource and Referral	
Chaves County Youth Services Community Cares Project Community Foundation of Chaves County Counseling Associates, Inc. Esperanza House Family Resource and Referral	624-6164
Community Cares Project Community Foundation of Chaves County Counseling Associates, Inc. Esperanza House Family Resource and Referral	
Community Foundation of Chaves County Counseling Associates, Inc. Esperanza House Family Resource and Referral	
Counseling Associates, Inc. 6 Esperanza House 6 Family Resource and Referral 6	624-7000
Esperanza House 6 Family Resource and Referral 6	622-8990
Esperanza House 6 Family Resource and Referral 6	623-1480
Family Resource and Referral	625-1095
D VIII IMV/A IDC D C / HAT CAD ("	623-9438
Pecos Valley HIV/AIDS Resource Center "Alianza of NM"	623-1995
Pregnancy Resource Center of Chavez County	623-1217
Presbyterian Minority Outreach Center	622-4926
Reach 2000	623-8637
Retired Senior Volunteer Program	623-3960
	625-1369
Roswell Refuge for Battered Adults	627-8361
	623-6069
UNITY Center 6	623-6069 622-8700

ACTIVE EMERGENCY MEDICAL SERVICES
PERSONNEL BY LEVEL
AS OF AUGUST 20, 2003

Level	Chaves Co.	New Mexico
First Responder	0	760
Dispatcher	11	398
Dispatcher-Instructor	2	16
EMT-Basic	85	3,321
EMT-Intermediate	51	1,190
EMT-Paramedic	20	955
Total	169	6,641

NOTE: There are personnel with current active licenses at more than one level in this snapshot. The actual state personnel total is 6,546.

SOURCE: NM Department of Health



ACTIVE EMERGENCY MEDICAL SERVICES PERSONNEL BY GENDER AS OF AUGUST 20, 2003

Gender	Chaves Co.	New Mexico
Male	133	4,574
Female	35	1,995
Unknown	1	72
Total	169	6,641

NOTE: There are personnel with current active licenses at more than on level in this snapshot. The actual state personnel total is 6,546.

SOURCE: NM Department of Health



AGE-ADJUSTED—Weights the age-specific rates for a given population by the age distribution of a standard population, thereby enabling the direct comparison of rates between populations with differing age structures.

CHILDREN'S CHRONIC CONDITIONS REGISTRY—A registry of data on children with special needs; data are from programs and physicians who provide services to these children. Maintained by the New Mexico Department of Health.

COMPARABILITY RATIOS—With each revision of the *International Classification of Diseases (ICD)*, discontinuities are created in cause-of-death trend data. The classification and rule changes have a substantial impact as deaths that may have been coded to one category in the previous revision are coded to another category in the new revision. To compensate for these shifts, comparability (also called bridge-coding) studies are undertaken to determine the extent of comparability between the two revisions. As a result of these studies, comparability ratios are developed that reflect the degree of comparability between the two revisions.

CRUDE BIRTH RATE—Number of live births per 1,000 population.

CRUDE DEATH RATE—Number of deaths per 1,000 or 100,000 population.

D.W.I.—Driving While Impaired; the current legal limit for blood alcohol concentration is .08 for 21 and older, and .02 for younger than 21.

FERTILITY RATE—Number of live births per 1,000 women 15-44 years of age.

FOOD STAMP PROGRAM (FSP)—The FSP is an entitlement program based on Federal rules and mandates. The purpose of the FSP is to increase food purchasing power and to supplement the nutrition level of eligible households. In addition, the FSP provides a nutrition education program to eligible households. Eligibility for participation in the FSP is based on a gross income test at 130% of the Federal Poverty Guidelines for the size of the household. Eligibility is also based on a resource test; the household's liquid and nonliquid resources cannot exceed \$2000.00. Food stamp benefits are issued on a monthly basis through an electronic benefit transfer (EBT) system. The FSP has a change reporting and work requirement for adults in the household. Failure to report changes or comply with work requirements results in a reduction or closure of Food Stamp benefits. Under contract with another agency, the Department provides a free nutrition education program for Food Stamp applicants and recipients.

HOSPITAL DISCHARGE DATA—Data, such as diagnosis, gender, age, residence, on hospital inpatient discharges; collected by the NM Health Policy Commission from licensed, non-federal general and specialty hospitals.

INCIDENCE—Measure of the frequency at which new events/cases of a disease or condition occur in a specified population over a given time period.

INCIDENCE RATE—Number of new cases of disease/condition over a given time period (often, a year) that occur in a population at risk for that disease/condition (ergo number of new lung cancer cases per 100,000 persons in a year). An estimate of the risk of developing a disease/condition during a specified time period.

INFANT DEATH—Death of an infant under one year of age (neonatal + postneonatal).

INFANT MORTALITY RATE—Number of infant deaths per 1,000 (or 100,000) live births.

LIVE BIRTH—A birth that shows any sign of life after delivery.

LOW BIRTH WEIGHT—A live birth weighing less than 2500 grams (5-1/2 pounds).

MEDICAID—A federally and state-funded program to pay for medical and other services to eligible New Mexico citizens.

NEONATAL DEATH—Death of newborn under 28 days of age.

NEONATAL MORTALITY RATE—Number of neonatal deaths per 1,000 (or 100,000) live births.

NEURAL TUBE DEFECTS—Malformations of the spine and brain that arise in the first 29 days of pregnancy.

OCCURRENCE DATA—Data allocated by place where event occurred, regardless of the person's place of residence.

GLOSSARY CONTINUED

POPULATION ESTIMATE—Estimate of the number of persons for either a past or current time period.

POSTNEONATAL DEATH—Death of an infant of at least 28 days, but less than one year of age.

POSTNEONATAL MORTALITY RATE—Number of postneonatal deaths per 1,000 or (100,000) live births.

POVERTY—Poverty status is based on the 1964 Social Security Administration definition (modified in 1969 and 1980). At the core of this definition was the 1961 Department of Agriculture economy food plan, which arose from findings of a 1955 Department of Agriculture survey of food consumption. The 1955 findings showed that families of three or more spent about 1/3 of their income on food. Poverty status/level is tied to the cost of the economy food plan that is revised annually for cost of living as reflected in the Consumer Price Index.

PRENATAL CARE—1) Level of Prenatal Care – categorization of prenatal care services into no/low, middle and high levels of care based on the number of visits and month care began (modified Kessner index). 2) Adequacy of Prenatal Care Utilization Index – an alternative measure of prenatal care utilization that adjusts for some of the weaknesses of the trimester care began and the Kessner index (Kotelchuck index).

RESIDENCE DATA—Data allocated by place of residence of the decedent (deaths) or by place of residence of the child's mother (births).

SCHOOL ENROLLMENT—The count of high school students on the current roll on the 40th official school day, by school district.

SUBSTANTIATED—Through the course of the investigation, the social worker determined that the child(ren) who is the subject of the report have been determined to have been the victim of abuse and/or neglect. In other words the allegations are true.

TEMPORARY ASSISTANCE FOR NEEDY FAMILIES (TANF)—TANF is the State-administered, county-operated, monthly cash assistance program funded by a Federal block grant under Title IV-A of the Social Security Act. In July 1997, TANF replaced the previous entitlement program known as Aid to Families with Dependent Children (AFDC). The TANF program is not an entitlement program and has a 60-month term limit in New Mexico, which means that adults receiving assistance from the TANF block grant program can receive assistance for a 60 month maximum limit. TANF is available to both single and two-parent families. To receive TANF, there must be at least one dependent child (under age 18) in the home. TANF eligibility is based on a gross income test at 85% of the Federal Poverty Guideline for the size of the family. Eligibility is also based on a resource test; the family's liquid resources must be less than \$1500.00 and non liquid resources must be less than \$2000.00. Cash assistance is issued through an electronic benefit transfer system, similar to an ATM debit card. The TANF program has a mandatory change reporting and work requirement for adults and a mandatory school attendance requirement for dependent children. The adults in the family must cooperate with child support enforcement efforts on behalf of the dependent children. There are cash payment reductions for failure to comply with change reporting, work requirements, child support enforcement and school attendance.

TOTAL PERSONAL INCOME (TPI)—Includes the earnings (wages and salaries, other labor income, proprietors' income), dividends, interest, and rent, and transfer payments received by the residents of county. Data shown in thousands.

UNEMPLOYED—Based on monthly surveys, persons who did not work during a specified week but made specific efforts to find a job in the previous 4 weeks and were available for work. Also, persons who did not work, were available for work but were not actively seeking work because they (a) had been laid off and were waiting to be called back; or (b) were waiting to report to a job within 30 days. Does not include those no longer seeking work other than in situations (a) and (b).

UNEMPLOYMENT RATE—Number of persons unemployed as a percent of the civilian labor force.

UNSUBSTANTIATED—Investigation indicates that the investigator was unable to determine that the allegation(s) were true.

VERY LOW BIRTH WEIGHT—A live birth weighing less than 1500 grams (about 2 lbs. 5 oz.) at birth.

W.I.C.—Women, Infants and Children; a federally-funded, special supplemental nutrition program administered by the New Mexico Department of Health and tribal agencies. Its purpose is to provide high-nutrient density food to promote optimal health outcome during the perinatal period. Services include food assistance, nutrition education and referral to health services.