RIO ARRIBA 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.

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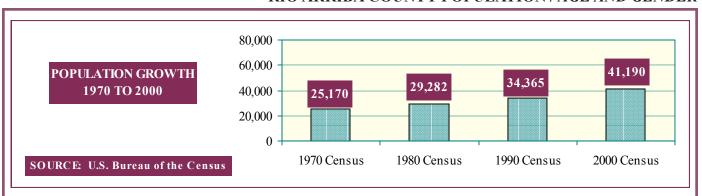
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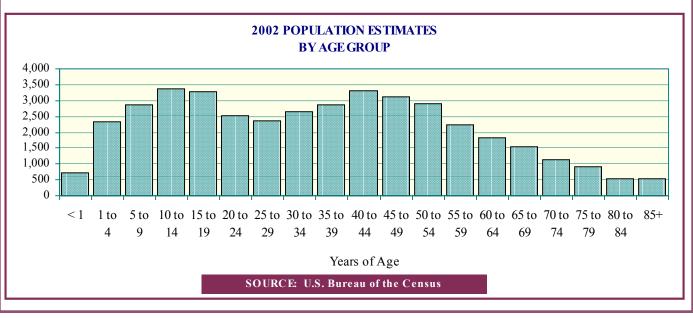
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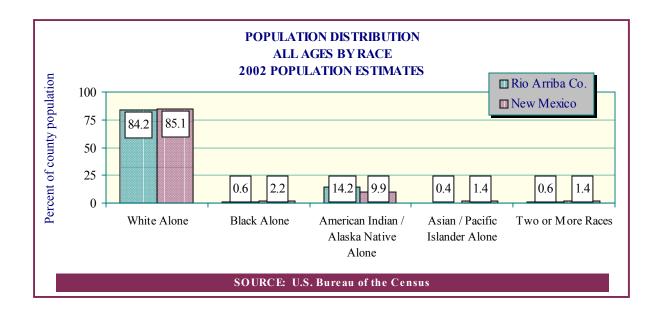
2002 POPULATION ESTIMATES BY AGE AND GENDER													
Age Groups		Arriba Cou			New Mexico								
11gt 010ups	Male	Female	Both	Male	Female	Both							
Less than 1 yr	352	366	718	13,746	13,361	27,107							
1 to 4 years	1,122	1,214	2,336	53,236	51,780	105,016							
5 to 9 years	1,411	1,469	2,880	67,768	65,647	133,415							
10 to 14 years	1,680	1,693	3,373	74,247	71,746	145,993							
15 to 19 years	1,661	1,620	3,281	76,356	72,288	148,644							
20 to 24 years	1,320	1,207	2,527	67,182	64,847	132,029							
25 to 29 years	1,176	1,182	2,358	56,796	56,273	113,069							
30 to 34 years	1,341	1,302	2,643	59,596	59,961	119,557							
35 to 39 years	1,438	1,423	2,861	64,222	65,623	129,845							
40 to 44 years	1,650	1,660	3,310	70,951	73,496	144,447							
45 to 49 years	1,515	1,590	3,105	66,325	70,011	136,336							
50 to 54 years	1,458	1,451	2,909	60,317	63,383	123,700							
55 to 59 years	1,106	1,135	2,241	47,075	50,411	97,486							
60 to 64 years	931	904	1,835	36,530	40,431	76,961							
65 to 69 years	731	822	1,553	30,979	34,231	65,210							
70 to 74 years	551	574	1,125	26,175	29,427	55,602							
75 to 79 years	397	530	927	19,298	25,786	45,084							
80 to 84 years	222	324	546	12,434	17,304	29,738							
85 and over	177	344	521	8,926	16,894	25,820							
All Ages	20,239	20,810	41,049	912,159	942,900	1,855,059							
	Sour	ce: U.S. Bu	reau of the	Census									



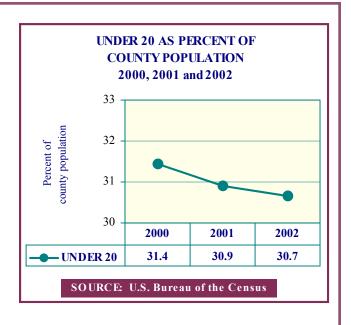
	2002 POPULATION ESTIMATES BY AGE AND RACE/ETHNICITY														
Age Groups	White	ONE I	RACE American Indian / Alas ka Native	Asian / Pacific Islander	Two or More Races	Total Population	Hispanic or Latino Ethnicity Any Race ^{/1}								
Under 5 years	2,448	18	559	4	25	3,054	2,280								
5 to 9 years	2,284	25	538	11	22	2,880	2,211								
10 to 14 years	2,714	19	612	7	21	3,373	2,605								
15 to 19 years	2,677	25	544	14	21	3,281	2,538								
20 to 24 years	2,035	22	438	15	17	2,527	1,933								
25 to 29 years	1,922	24	386	16	10	2,358	1,808								
30 to 34 years	2,189	27	400	9	18	2,643	1,998								
35 to 39 years	2,367	7	447	21	19	2,861	2,104								
40 to 44 years	2,802	16	455	17	20	3,310	2,430								
45 to 49 years	2,678	19	374	14	20	3,105	2,174								
50 to 54 years	2,572	12	294	14	17	2,909	1,938								
55 to 59 years	1,968	6	238	15	14	2,241	1,435								
60 to 64 years	1,648	5	169	7	6	1,835	1,206								
65 to 69 years	1,411	7	133	1	1	1,553	1,088								
70 to 74 years	1,033	1	88	3	0	1,125	819								
75 to 79 years	838	3	86	0	0	927	678								
80 to 84 years	505	1	39	1	0	546	393								
85 and over	475	1	43	0	2	521	410								
All Ages	34,566	238	5,843	169	233	41,049	30,048								

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

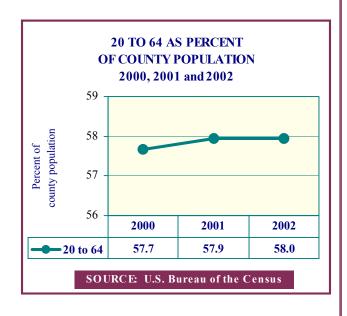
SOURCE: U.S. Bureau of the Census



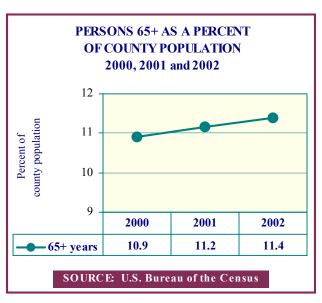
UNDER 20 POPULATION 2000, 2001 and 2002											
Age Groups 2000 2001 2002											
Under 5 years	2,868	2,923	3,054								
5 to 9 years	3,285	3,056	2,880								
10 to 14 years	3,629	3,486	3,373								
15 to 19 years	3,172	3,243	3,281								
Under 20 years	12,954	12,708	12,588								
County Population 41,190 41,118 41,049											
Source: U.S. Bureau of the Census											

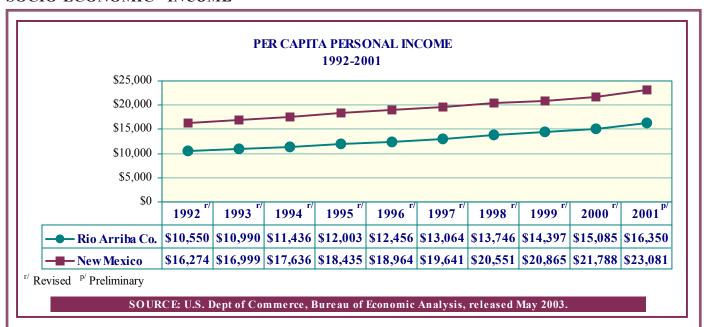


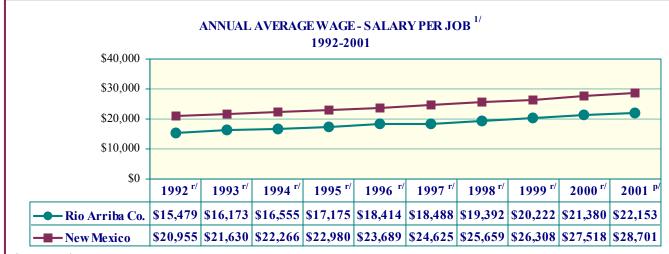
20 TO 64 POPULATION 2000, 2001 and 2002											
2002											
2,527											
2,358											
2,643											
2,861											
3,310											
3,105											
2,909											
2,241											
1,835											
23,789											
41,049											



65 AND OLDER POPULATION 2000, 2001 and 2002												
Age Groups 2000 2001 2002												
65 to 69 years	1,494	1,517	1,553									
70 to 74 years	1,142	1,138	1,125									
75 to 79 years	847	898	927									
80 to 84 years	537	519	546									
85 and over	469	517	521									
65 years and older	4,489	4,589	4,672									
County Population 41,190 41,118 41,04												
Source: U	J.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



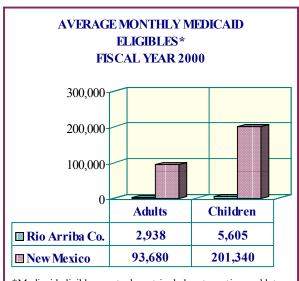
AVERAGE MONTHYLY TANF AND FOOD STAMPS CASES FISCAL YEAR 2003 (7/02 - 6/03)

Cumlomont	Rio Arı	riba Co.	New Mexico				
Supplement	Number	Percent*	Number	Percent*			
TANF	461	1.1	16,382	0.9			
Food Stamps	1,988	4.8	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.

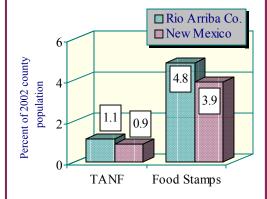
SOURCE: NM Human Services Department, Income Support Division.



^{*}Medicaid eligible counts do not include retroactive and late reported eligibility. Figures subject to change.

SOURCE: NM Human Sevices Department Income Support Division

AVERAGE MONTHLY PERCENT TANF AND FOOD STAMP CASES FISCAL YEAR 2003



TANF = Temporary Assistance for Needy Families.

SOURCE: NM Human Services Department Income Support Division.

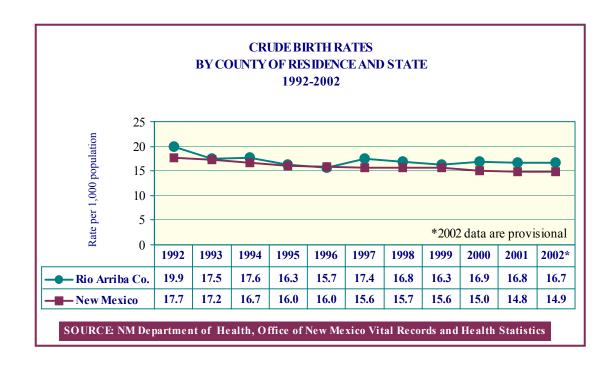
ESTIMATED NUMBER AND PERCENT OF PEOPLE IN POVERTY 1999

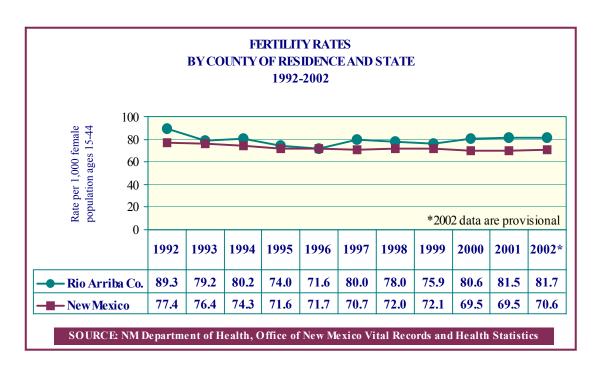
Aga	Rio Ari	riba Co.	New Mexico										
Age	Number	Percent*	Number	Percent*									
All Ages in Poverty	7,862	19.1	326,223	18.2									
Children age < 18 years	3,069	26.1	133,194	26.4									
Related children ages													
5-17 years	2,192	24.9	92,333	25.0									

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*				
Rio Arriba Co.	693	620	636	599	589	653	637	622	695	689	686				
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														
SOUR	CE: NM I)epartme	nt of Hea	ılth, Offi	ce of Nev	Mexico	Vital Rec	ords and	Health S	tatistics					





	RIO ARRIBA COUNTY RESIDENT LIVE BIRTHS BY AGE OF MOTHER 1992-2002														
AGE	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002*				
15-19	119	138	122	130	117	118	143	135	138	125	121				
20-24	213	203	210	186	174	216	187	188	218	224	229				
25-29	184	135	155	149	154	170	159	164	184	176	185				
30-34	118	96	87	88	92	96	93	83	106	100	94				
35-39	47	41	48	34	44	45	47	40	38	52	39				
40-44	10	4	11	8	7	7	4	12	9	8	14				
*2002 data	a are provis	ional													

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

	RIO ARRIBA RESIDENT BIRTH RATES** BY AGE OF MOTHER 1992-2002														
AGE	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002*				
15-19	84.9	95.7	82.7	83.9	72.9	73.0	87.6	82.1	90.0	80.4	74.7				
20-24	189.5	178.7	180.6	154.4	141.2	174.5	149.6	149.4	179.3	185.4	189.7				
25-29	153.8	119.2	142.2	140.4	144.9	163.1	150.0	151.4	135.0	139.0	156.5				
30-34	82.2	67.0	60.8	62.4	67.0	73.6	75.0	69.3	80.9	78.0	72.2				
35-39	34.6	29.1	33.1	22.8	28.7	29.8	31.0	26.5	24.0	34.5	27.4				
40-44	8.0	3.1	8.3	5.8	4.9	4.8	2.7	8.0	5.6	4.9	8.4				
*2002 data	a are provis	ional	**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															
15-19															
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															
40-44	40-44 6.9 5.9 7.0 6.6 7.4 7.0 6.8 7.1 7.6 7.5 7.1														
*2002 data	are provis	ional	**Rate ne	r 1.000 wor	nen in spec	cified group)								

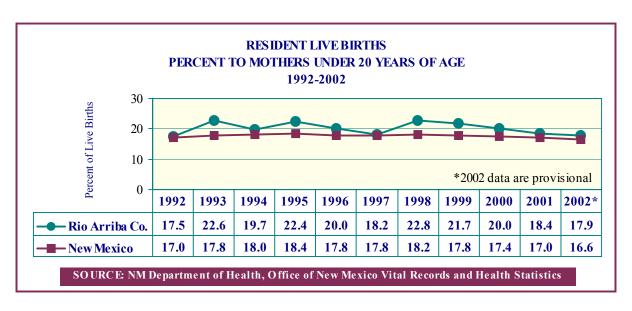
SOURCE: NM Department of Health, Office of New Mexico Vital Records and Health Statistics

	UNITED STATES BIRTH RATES* BY AGE OF MOTHER 1992-2002														
AGE															
15-19	15-19 60.7 59.6 58.9 56.8 54.4 52.3 51.1 49.6 47.7 45.3 43.														
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	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 ner	1 000 wame	n in chac	ified group												

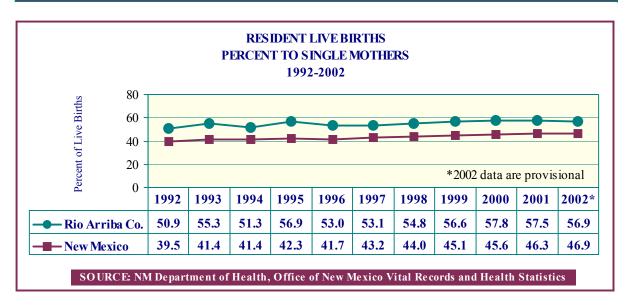
* Rate per 1,000 women in specified group.

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

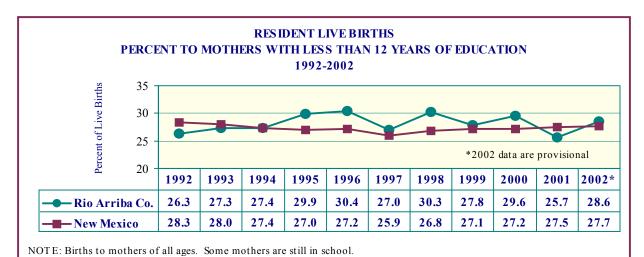
RESIDENT LIVE BIRTHS TO MOTHERS UNDER 20 YEARS OF AGE 1992-2002													
1992 1993 1994 1995 1996 1997 1998 1999 2000 2001 2002 ⁻													
Rio Arriba Co.	121	140	125	134	118	119	145	135	139	127	123		
New Mexico	New Mexico 4,749 4,965 4,964 4,950 4,850 4,789 4,964 4,841 4,728 4,603 4,592												
*2002 data are provisional													
SOURCE: NM Dept. of Health, Office of New Mexico Vital Records and Health Statistics													



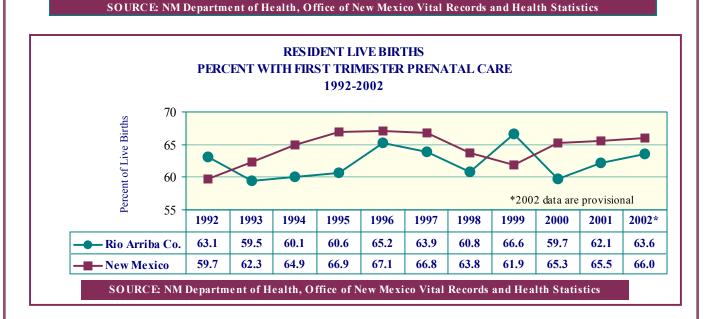
RESIDENT LIVE BIRTHS TO SINGLE MOTHERS 1992-2002													
	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002*		
Rio Arriba Co.	353	343	326	341	312	347	349	352	402	396	390		
New Mexico	New Mexico 11,021 11,522 11,408 11,388 11,347 11,590 12,021 12,236 12,400 12,549 12,984												
*2002 data are provisional													
SOU	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													
Rio Arriba Co.	182	169	174	179	179	176	193	173	206	177	196			
New Mexico	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.														
SC	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												
Rio Arriba Co.	437	369	382	363	384	417	387	414	415	428	436		
New Mexico	New Mexico 16,656 17,344 17,893 18,011 18,264 17,932 17,411 16,790 17,757 17,741 18,293												
*2002 data are p	*2002 data are provisional												

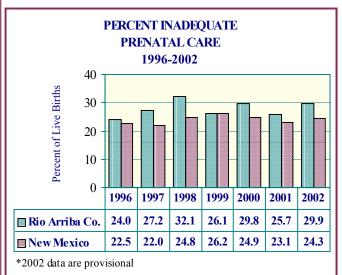


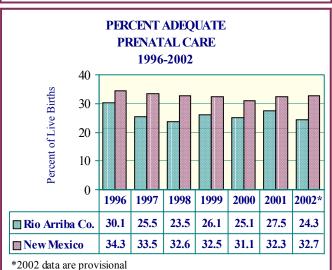
KESSNER INDEX VERSUS KOTELCHUCK INDEX

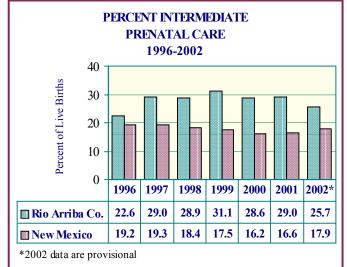
Both the Kessner Index and the Kotelchuck Index utilize the month of pregnancy in which prenatal care began and the number of prenatal visits. The Kessner Index relies very heavily on the timing of the initiation of prenatal care. For example, inadequate prenatal care is defined as no prenatal care or 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.

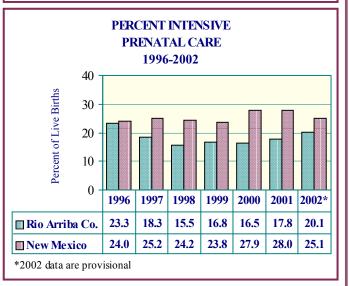
The Kotelchuck Index is more sophisticated and uses two dimensions, the timing of the initiation of care and the adequacy of services received (ratio of observed visits to expected visits), which are combined into a single summary index.

RESIDENT LIVE BIRTHS ADEQUACY OF PRENATAL CARE UTILIZATION (Kotelchuck Index) 1996-2002 1996 1997 1998 1999 2000 2001 2002* **Inadequate Care** 194 155 Rio Arriba Co. 134 166 164 197 New Mexico 5,811 5,541 6.284 6.499 6.333 5.854 6.321 Intermediate Care Rio Arriba Co. 126 169 177 175 185 186 185 New Mexico 4.943 4,845 4,660 4,331 4,122 4.187 4.663 Adequate Care Rio Arriba Co. 168 156 142 155 163 176 160 New Mexico 8.826 8.417 8.239 8.052 7.915 8.165 8.498 **Intensive Care** 130 94 100 132 Rio Arriba Co. 112 107 114 6,182 6,341 6,109 7,090 6,526 New Mexico 5,885 7,097 * 2002 data are provisional SOURCE: NM Department of Health, ONMVRHS



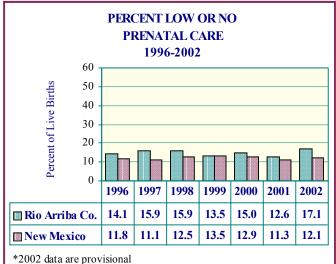


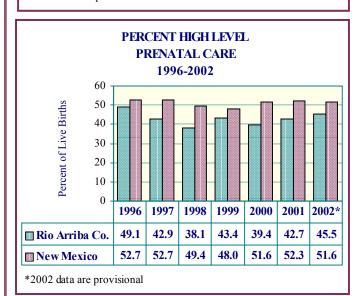


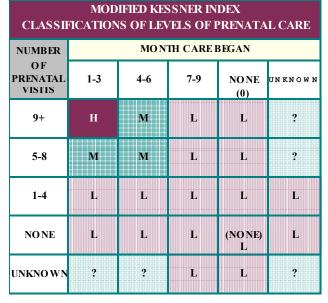


RESIDENT LIVE BIRTHS LEVEL OF PRENATAL CARE (Modified Kessner Index) 1996-2002 1996 1997 1998 1999 2000 2001 2002*														
	1996	1997	1998	1999	2000	2001	2002*							
		L	ow or N	o Prena	atal Ca	re								
Rio Arriba Co. 83 104 101 84 104 87 117														
New Mexico 3,203 2,973 3,413 3,665 3,523 3,065 3,356														
Mid-Level Prenatal Care														
Rio Arriba Co.	188	230	264	242	274	261	230							
New Mexico	8,337	8,166	8,551	8,258	8,045	8,190	8,485							
			High I	renata	l Care									
Rio Arriba Co.	289	280	243	270	274	294	312							
New Mexico	14,331	14,139	13,476	13,025	14,035	14,164	14,284							
		U	nknow	n Prena	ıtal Car	·e								
Rio Arriba Co.	29	39	29	26	43	47	27							
New Mexico 1,345 1,566 1,854 2,185 1,603 1,682 1,581														
* 2002 data are provisional														
	CE: NM		ment of	f Health	. ONM	VRHS								

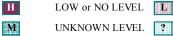


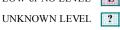


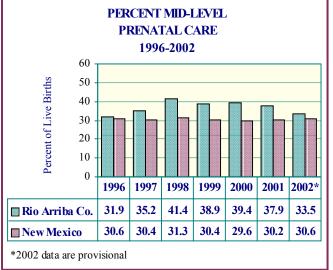


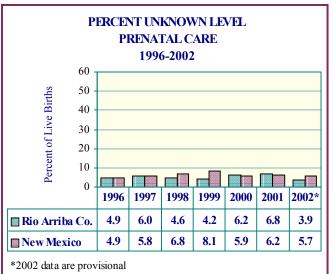










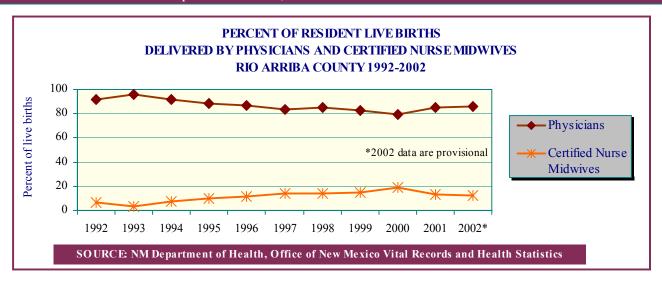


RESIDENT LIVE BIRTHS BY TYPE OF ATTENDANT 1992-2002														
	Physician													
	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002*			
Rio Arriba Co.	634	592	581	531	511	546	541	512	550	585	589			
New Mexico 23,454 22,492 22,309 21,965 22,101 21,387 20,932 19,696 19,407 19,063 19,231														
Certified Nurse Midwife														
Rio Arriba Co. 43 22 47 58 69 94 89 94 131 92 87														
New Mexico														
·				·	I	ay Midwife	2		•					
Rio Arriba Co.	12	1	7	7	5	12	6	9	4	11	5			
New Mexico	286	293	292	272	254	240	248	269	290	268	336			
						Other								
Rio Arriba Co.	4	5	1	3	4	1	1	7	10	1	5			
New Mexico 193 290 246 203 239 177 202 157 171 151 204														
*2002 data are p	*2002 data are provisional													

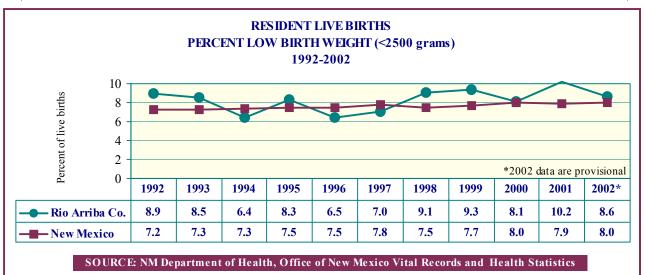
SOURCE: NM Department of Health, Office of New Mexico Vital Records and Health Statistics

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

	Physician												
	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002*		
Rio Arriba Co.	91.5	95.5	91.4	88.6	86.8	83.6	84.9	82.3	79.1	84.9	85.9		
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													
Rio Arriba Co. 6.2 3.5 7.4 9.7 11.7 14.4 14.0 15.1 18.8 13.4 12.7													
New Mexico	14.2	17.1	17.2	16.6	17.0	18.8	21.7	25.8	27.0	28.1	28.6		
	·			·	Ι	ay Midwif	e		•	•			
Rio Arriba Co.	1.7	0.2	1.1	1.2	0.8	1.8	0.9	1.4	0.6	1.6	0.7		
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	•	•					
Rio Arriba Co.	0.6	0.8	0.2	0.5	0.7	0.2	0.2	1.1	1.4	0.1	0.7		
New Mexico	New Mexico 0.7 1.0 0.9 0.8 0.9 0.7 0.7 0.6 0.6 0.6 0.6 0.6												
*2002 data are p	*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													
Rio Arriba Co.	62	53	41	50	38	46	58	58	56	70	59			
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 j	*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	
Rio Arriba Co.	62	3.4	61	3.2	55	2.7	
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)

VERY LOW BIRTH WEIGHT BIRTHS (< 1500 grams)

1994-2002

	1994-	1996	1997-	1999	2000-2002*		
	Number	Percent	Number	Percent	Number	Percent	
Rio Arriba Co.	11	0.6	21	1.1	21	1.0	
New Mexico	894 1.1		880	1.1	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.

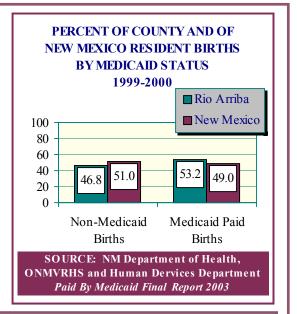
Sources: "Diabetes in the Life Cycle and Research," Vol. 4. 2003. Editor M. Franz. Published by the American Association of Diabetes Educators, Chicago Illinois. Diabetes Care Journal, Supplement 1, January 2003 Vol. (26).

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
Rio Arriba	617	700	1,317
New Mexico	27,710	26,600	54,310

SOURCE: NM Department of Health, ONMVRHS and Human Services Department

Paid By Medicaid Final Report 2003

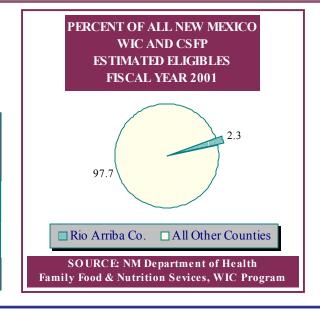
WOMEN, INFANT & CHILDREN (WIC) PROGRAM & COMMODITY SUPPLEMENTAL FOOD PROGRAM (CSFP) POTENTIAL FLIGIBLES FISCAL YEAR 2001

	Estimated Potential Eligible	WIC	CSFP Recipients	Percent Served
Rio Arriba Co.	2,216	1,561	37	72.1
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.



RIO ARRIBA FEMALE POPULATION AGES 15-44 2000, 2001 and 2002							
Age Groups	2000	2001	2002	Age Groups	2000	2001	2002
15 to 19 years	1,533	1,554	1,620	35 to 39 years	1,583	1,506	1,423
20 to 24 years	1,216	1,208	1,207	40 to 44 years	1,619	1,639	1,660
25 to 29 years	1,363	1,266	1,182	15 to 44 years	8,625	8,455	8,394
30 to 34 years	1,311	1,282	1,302				
		Source	U.S. Bur	eau of the Census			

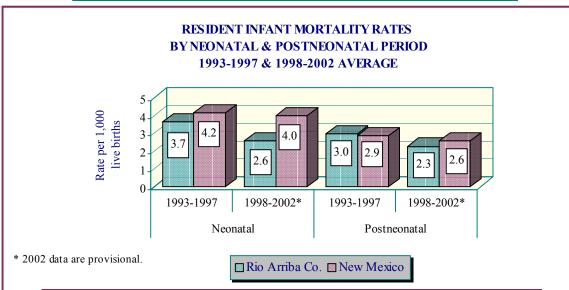
RESIDENT INFANT DEATHS NEONATAL AND POSTNEONATAL MORTALITY RATES 1993-1997 & 1998-2002 AVERAGE

	All Infant Deaths		Neo	natal	Postneonatal	
	1993-1997	1998-2002*	1993-1997	1998-2002*	1993-1997	1998-2002*
Rio Arriba Co.	6.7	4.9	3.7	2.6	3.0	2.3
New Mexico	7.1	6.6	4.2	4.0	2.9	2.6

^{* 2002} data are provisional.

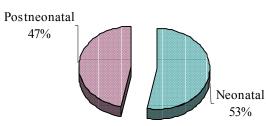
Rate per 1,000 live births in mid year.

SOURCE: NM Department of Health, ONMVRHS



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

RIO ARRIBA 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 Defects		Short Gestation		SIDS	
	1993-1997	1998-2002*	1993-1997	1998-2002*	1993-1997	1998-2002*	1993-1997	1998-2002*
Rio Arriba Co.	6.7	4.9	0.9	0.6	0.7	2.0	1.0	0.9
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

Diagnosas	Rio Arriba Co.		New Mexico	
Diagnoses	Number	Rate	Number	Rate
Children in Registry	3,425	2537.8	90,763	1534.5
Congenital Anomalies - All	727	538.7	22,241	376.0
Neural Tube Defects	23	17.0	870	14.7
Cleft Lip/Cleft Palate	104	77.1	2,946	49.8
Down Syndrome	27	20.0	997	16.9
All Other Anomalies	573	424.6	17,428	294.6
Asthma	1,196	886.2	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
Rio Arriba Co.	88	219	307
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



PERCENT OF ALL CHILD ABUSE INVESTIGATIONS 2002 100 Percent of Investigations Rio Arriba Co. 75 New Mexico 50 25 0 Substantiated Unsubstantiated NOTE: Due to rounding, percentages may not add to 100% SOURCE: 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	Rio Arriba	New Mexico
ELIGIDILI I Y	NUMBER	NUMBER
At Risk, Environmental	8	665
At Risk, Medical/Biological	13	1,150
Developmental Delay	75	2,937
Established Condition	7	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	Rio Arriba	New Mexico
RACE/ ETHINICITY	NUMBER	NUMBER
American Indian or Alaskan Native	8	779
Asian or Pacific Islander	0	43
Black or African American (not Hispanic)	^	130
Hispanic or Latino	88	2,696
White (not Hispanic)	6	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

Rio Arriba New Mexico AGE OF CHILD NUMBER PERCENT NUMBER PERCENT Less Than 1 year 13 458 17.9 15 707 1 to 2 years 27.6 25 2 to 3 years 1048 41.0 3 years and older 345 13.5 Total 100.0 2558 100.0

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

^Statistics not displayed due to less than 5 cases.

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	Rio Ari	riba Co.	New N	l exico
GRADE	PRIVATE	PUBLIC	PRIVATE	PUBLIC
Kindergarten	93	518	3,525	22,638
1st Grade	94	507	2,667	23,706
2nd Grade	109	522	2,738	23,550
3rd Grade	100	521	2,601	24,012
4th Grade	85	541	2,553	24,995
5th Grade	88	591	2,554	25,310
6th Grade	115	549	2,666	25,702
7th Grade	100	495	2,628	25,425
8th Grade	99	539	2,555	25,630
Total	883	4,783	24,487	220,968

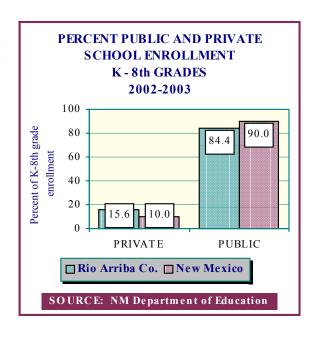
SOURCE: NM Department of Education

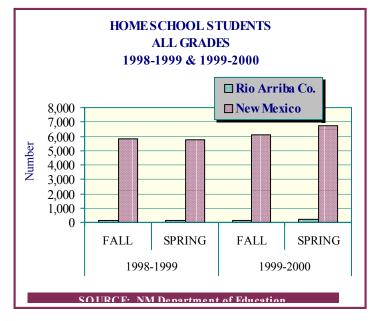
HOMESCHOOL STUDENTS ALL GRADES 1998-1999 & 1999-2000				
	1998	-1999	1999	-2000
	FALL	SPRING	FALL	SPRING
Rio Arriba Co.	135	164	155	184
New Mexico	5,796	5,728	6,080	6,732

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

SOURCE: NM Department of Education





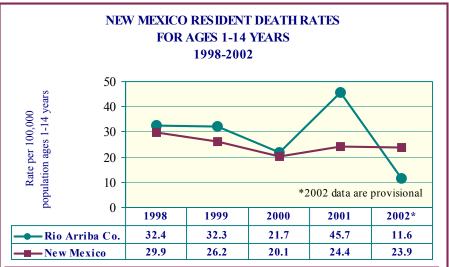


NEW MEXICO RESIDENT DEATHS FOR AGES 1-14 YEARS 1992-2002

Year	Rio Arriba Co.	New Mexico
1992	3	120
1993	8	133
1994	4	125
1995	6	123
1996	3	128
1997	2	106
1998	3	115
1999	3	100
2000	2	79
2001	4	94
2002*	1	92

*2002 data are provisional

SOURCE: NM Department of Health ONMVRHS



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

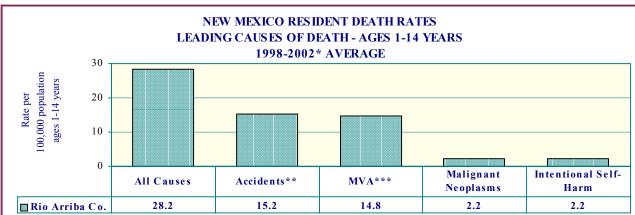
RIO ARRIBA COUNTY			NEW MEXICO		
Causes	Number	Rate	Causes	Number	Rate
All Causes	13	28.2	All Causes	480	24.4
Accidents (Unintentional Injuries)	7	15.2	Accidents (Unintentional Injuries)	190	9.7
(Motor Vehicle Accidents)	(7)	(14.8)	(Motor Vehicle Accidents)	(128)	(6.5)
Malignant Neoplasms	1	2.2	Congenital Malformations	45	2.3
Intentional Self-Harm (Suicide)	1	2.2	Malignant Neoplasms	39	2.0

^{*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

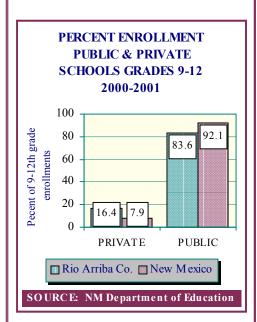


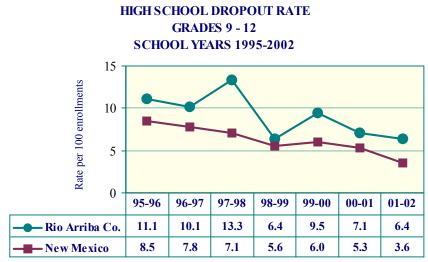
*2002 data are provisional. **Accidents are considered Unintentional Injuries. *** Motor Vehicle Accidents (MVA) are included in Accidents. Rate numerator was deaths for years 1998-2002, divided by 5; denominator was the 2000 population.

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 Rio Arriba Co. New Mexico 2000-2001 1,572 95,427 2001-2002 1,647 95,224 2002-2003 1,602 95,767 **SOURCE: NM Department of Education**

PRIVATE AND PUBLIC HIGH SCHOOL ENROLLMENT **GRADES 9 - 12 SCHOOL YEAR 2000-2001** Rio Arriba Co. New Mexico **GRADE** PRIVATE PUBLIC PRIVATE PUBLIC 9th 85 501 2,454 28,944 90 10th 401 2,092 25,476 21,905 11th 76 341 1,901 12th 58 329 19,102 1,690 95,427 Total 309 1,572 8,137 **SOURCE:** NM Department of Education





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).

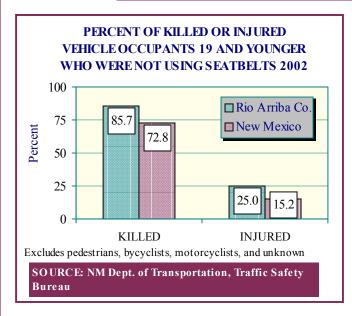
SOURCE: NM Department of Education

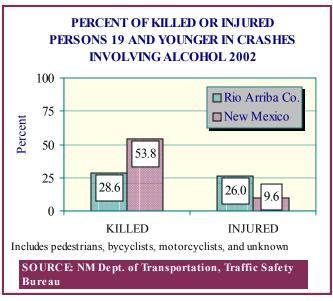
RESIDENT FALL ENROLLMENT TO NEW MEXICO HIGHER EDUCATION INSTITUTIONS 2001-2002					
INSTITUTE	Rio A	rriba	New Mexico		
HUSTITUTE	2001	2002	2001	2002	
UNM	348	347	19,751	20,497	
UNM Gallup	4	0	2,125	2,485	
UNM Los Alamos	173	195	824	918	
UNM Medical School	5	4	263	268	
UNM Taos	12	6	1,190	1,349	
UNM Valencia	0	1	1,563	1,717	
NMSU	156	169	10,897	11,330	
NMSU Alamogordo	0	1	1,300	1,380	
NMSU Carlsbad	0	0	1,028	1,108	
NMSU Dona Ana	28	30	4,342	4,744	
NMSU Grants	0	0	619	640	
ENMU	20	21	3,144	3,120	
ENMU Roswell	4	23	3,046	3,536	
ENMU Ruidoso	0	0	752	751	
NMHU	203	176	2,987	2,841	
WNMU	2	2	2,109	2,277	
Other NM Institutions*	1,731	1,793	38,739	41,773	
SOURCE: NM Commission 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.

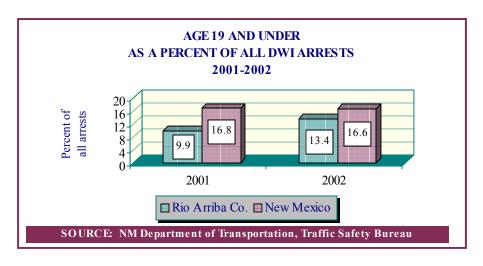
PERSONS 19 AND UNDER KILLED OR INJURED AS VEHICLE OCCUPANTS IN CRASHES BY SEATBELT STATUS 2002						
		KILLED			INJURED	
	TOTAL	NO BELT	BELT	TOTAL	NO BELT	BELT
Rio Arriba Co.	7	6	1	92	23	69
New Mexico 81 59 22 6,407 974 5,433						
NOTE: Number excludes pedestrians, bicyclists, motorcyclists, and unknown.						
SOURCE:	New Mexico	Department	of Transpo	rtation, Tra	ffic Safety Bu	ıreau





NUMBER OF PERSONS ARRESTED FOR DRIVING WHILE IMPAIRED (DWI) 2001 & 2002					
	19 Years and Younger All Persons				
	2001	2002	2001 2002		
Rio Arriba Co.	37	57	374	424	
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

	Number	Rate
Rio Arriba Co.	245	50.5
New Mexico	8,687	40.0

*2002 data are provisional

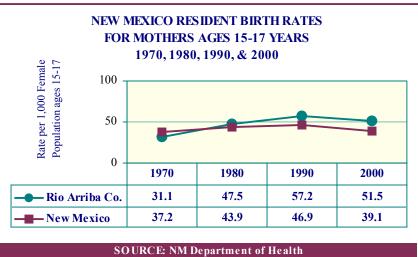
Rate is per 1,000 female population ages 15-17 years. Rate numerator was births to mothers age 15-17 years for 1998-2002, divided by 5; denominator was 2000 female population age 15-17.

SOURCE: NM Department of Health ONMVRHS

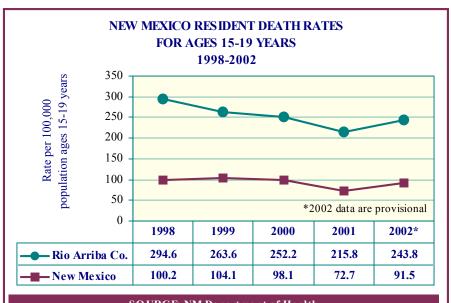
NEW MEXICO RESIDENT DEATHS FOR AGES 15-19 YEARS 1992-2002

Year	Rio Arriba Co.	New Mexico	
1992	7	117	
1993	4	132	
1994	3	128	
1995	6	150	
1996	13	158	
1997	6	118	
1998	10	144	
1999	9	150	
2000	8	143	
2001	7	107	
2002*	8	136	
*2002 data are provisional			

SOURCE: NM Department of Health ONMVRHS



SOURCE: NM Department of Health
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

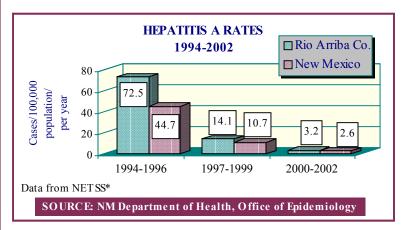
RIO ARRIBA COUNTY			NEW MEXICO		
Causes	Number	Rate	Causes	Number	Rate
All Causes	42	264.8	All Causes	680	93.3
Accidents (Unintentional Injuries)	27	171.4	Accidents (Unintentional Injuries)	312	42.8
(Motor Vehicle Accidents)	(22)	(140.4)	(Motor Vehicle Accidents)	(235)	(32.2)
Intentional Self-Harm (Suicide)	8	50.4	Intentional Self-Harm (Suicide)	117	16.0
Malignant Neoplasms	1	6.3	Assault (Homicide)	117	16.0
Assault (Homicide)	1	6.3	Malignant Neoplasms	35	4.8

^{* 2002} data are provisional

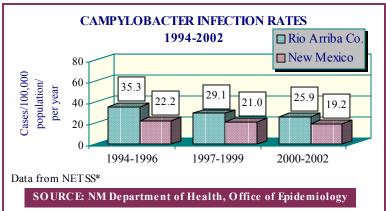
Rate per 100,000 population ages 15-19 years. Rate numerator was deaths for years 1998-2002, divided by 5; denominator was the 2000 population.

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.

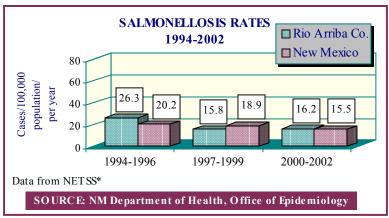
GASTROINTESTINAL DISEASES



HEPATITIS A NUMBER OF CASES					
Year Rio Arriba Co. New Mexico					
1994-1996	80	2,254			
1997-1999	16	557			
2000-2002	4	141			
Data from NETSS*					
SOURCE: NM Department of Health Office of Epidemiology					



CAMPYLOBACTER INFECTION NUMBER OF CASES					
Year	Rio Arriba Co.	New Mexico			
1994-1996	39	1,117			
1997-1999	33	1,093			
2000-2002	32	1,059			
Data from N	Data from NETSS*				
SOURCE: NM Department of Health					
Office of Epidemiology					
Office of Epidemiology					



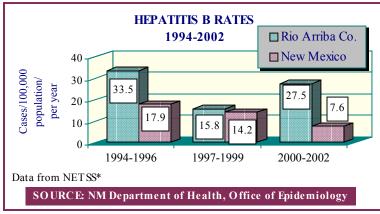
SALMONELLOSIS NUMBER OF CASES				
Year	Rio Arriba Co.	New Mexico		
1994-1996	29	1,016		
1997-1999	18	984		
2000-2002	20	856		
Data from NETSS*				
SOURCE: NM Department of Health				
Office of Epidemiology				

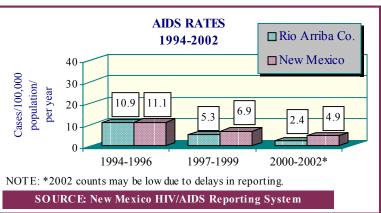
,000 /per	SHIGELLOSIS RATES 1994-2002	☐ Rio Arriba Co. ☐ New Mexico	
Cases/100,000 population/per	20 23.6 37.7 7.0 15.1	5.7 10.2	
Data from 1		2000-2002	
SOURCE: NM Department of Health, Office of Epidemiology			

SHIGELLOSIS NUMBER OF CASES					
Year Rio Arriba Co. New Mexico					
1994-1996	26	1,900			
1997-1999	8	786			
2000-2002	7	560			
Data from N	Data from NETSS*				
SOURCE: NM Department of Health Office of Epidemiology					

*National Electronic Telecommunication System for Surveillance (NETSS)

BLOODBORNE DISEASES



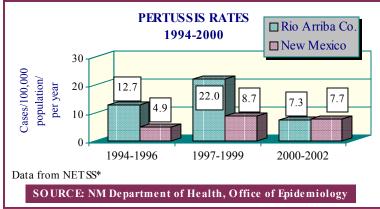


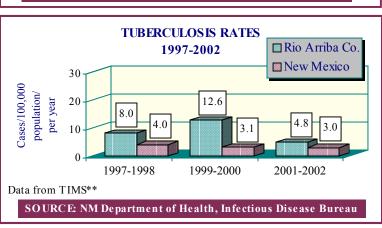
HEPATITIS B NUMBER OF CASES					
Year Rio Arriba Co. New Mexico					
1994-1996	37	905			
1997-1999 18 736					
2000-2002 34 419					
Data from NETSS*					
SOURCE: NM Department of Health Office of Epidemiology					

*National Electronic Telecommunication System for Surveillance (NETSS)

AIDS NUMBER OF CASES						
Year Rio Arriba Co. New Mexico						
1994-1996	12	559				
1997-1999	6	357				
2000-2002* 3 270						
NOTE: *2002 counts may be low due to delays in reporting.						
SOURCE: New Mexico HIV/AIDS Reporting System						

RESPIRATORY DISEASES





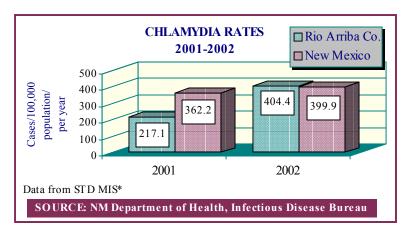
PERTUSSIS NUMBER OF CASES						
Year Rio Arriba Co. New Mexico						
1994-1996 14 24						
1997-1999 25 45						
2000-2002	2000-2002 9 426					
Data from NETSS*						
SOURCE: NM Department of Health Office of Epidemiology						

TUBERCULOSIS NUMBER OF CASES						
Year Rio Arriba Co. New Mexico						
1997-1998	6	139				
1999-2000 10 11						
2001-2002 4 111						
Data from TIMS**						
SOURCE: NM Department of Health						

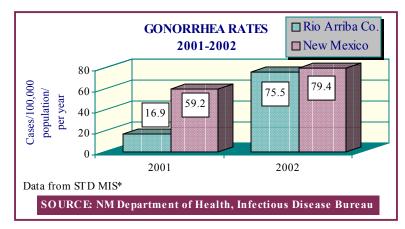
Infectious Disease Bureau

**Tuberculosis Information Management System
(TIMS)

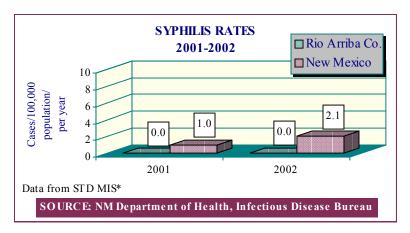
SEXUALLY TRANSMITTED DISEASES



CHLAMYDIA NUMBER OF CASES						
Year Rio Arriba Co. New Mexico						
2001	2001 90 6,669					
2002 166 7,419						
Data from S	Data from STD MIS*					
SOURCE: NM Department of Health Infectious Disease Bureau						



GONORRHEA NUMBER OF CASES						
Year Rio Arriba Co. New Mexico						
2001	7	1,090				
2002	31	1,472				
Data from STD MIS*						
SOURCE: NM Department of Health						
Infectious Disease Bureau						



SYPHILIS NUMBER OF CASES					
Year Rio Arriba Co. New Mexico					
2001	0	19			
2002	0	39			
Data from S	TD 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)

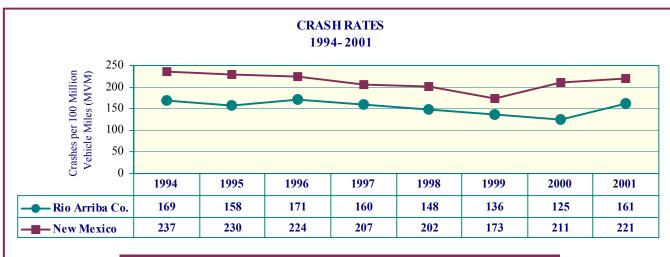
NUMBER OF FATAL AND INJURY CRASHES VEHICLE MILES TRAVELED, LICENSED DRIVERS AND ECONOMIC LOSS 2001



	NUMBER OF CRASHES		Licensed	Economic	100 MVM		
	Total	Fatal	Injury	Drivers	Loss *1000	Traveled	
Rio Arriba Co.	957	15	392	28,205	\$109,772	6.0	
New Mexico	50,236	415	17,879	1,225,793	\$3,537,921	227.1	

NOTE: MVM = Million Vehicle Miles

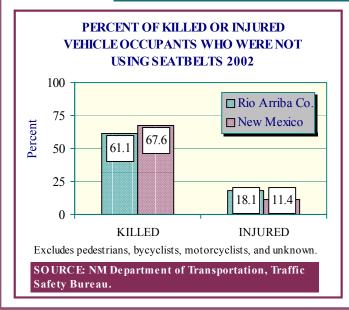
SOURCE: NM Department of Transportation, Traffic Safety Bureau "New Mexico Traffic Crash Information", 2001 Report.

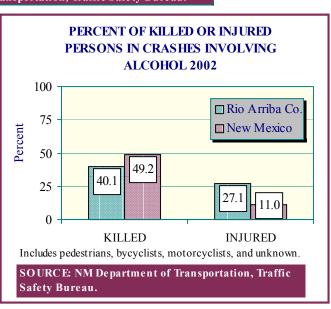


SOURCE: NM Department of Transportation, Traffic Safety Bureau.

ALL PERSONS KILLED OR INJURED AS VEHICLE OCCUPANTS IN CRASHES BY SEATBELT STATUS 2002 KILLED **INJURED** TOTAL NO BELT BELT TOTAL NO BELT BELT Rio Arriba Co. 18 11 397 72 325 349 New Mexico 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.







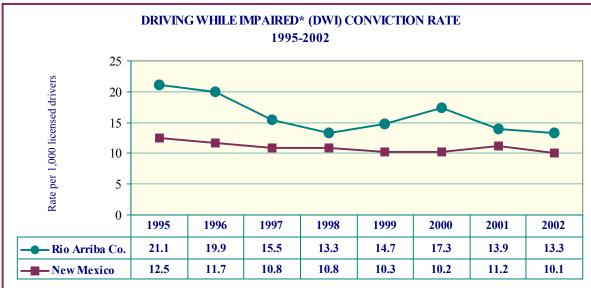
ALCOHOL RELATED CRASHES NEW MEXICO - 2001

- 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 Injured Conviction* DWI Rate **Fatal** Killed Injury Rio Arriba Co. 52 9 114 375 13.3 198 New Mexico 221 2,921

*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.

RIO ARRIBA COUNTY INJURY DEATHS BY MECHANISM 1999-2001					
Mechanism of Injury Number of Deaths in 3 Years New Mexico Adjusted Rate/100,000* Per Year New Mexico Adjusted Rate/100,000* Per Year					
Cut/pierce	5	4.2	1.8		
Drowning	5	4.1	1.4		
Fall	11	10.8	10.2		
Fire/burn	3	2.8	1.0		
Firearm	33	27.4	15.7		
Motor Vehicle Traffic	76	62.2	22.1		
Poisoning	56	46.2	17.0		
Other**	22	17.9	14.0		
All Injury	211	175.6	83.2		

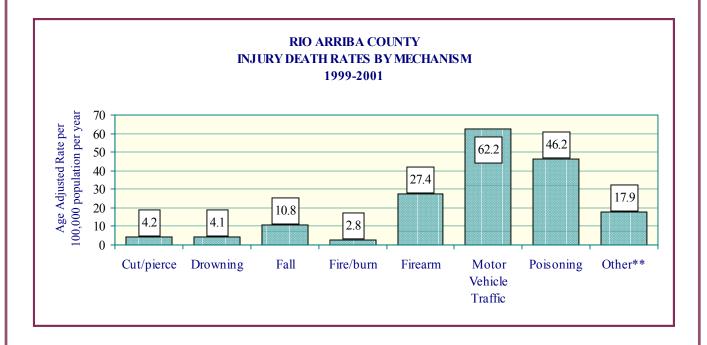
1998-2000				
Number/Rate	Rio Arriba County	New Mexico		
Total Number of				
Hospital Discharges in				
3 Years	1,071	30,596		
Age Adjusted Rate per				
100,000* Population per				
Year	911.7	585.2		

NON-FATAL INTURY HOSPITALIZATIONS

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	Rio A	rriba	New Mexico	
SHE	NUMBER	RATE	NUMBER	RATE
All Cancers	513	471.6	23,565	468.7
Stomach	19	17.9	515	10.6
Colon and Rectum	57	52.5	2,482	50.4
Liver and Intrahepatic Bile Duct	5	4.7	412	8.2
Gallbladder	^	^	52	1.1
Pancreas	14	14.0	570	11.7
Lung and Bronchus	54	52.1	3,053	62.2
Melanomas of the Skin	7	5.9	974	18.7
Breast	^	^	51	1.0
Prostate	179	167.0	7,320	145.5
Urinary Bladder	24	23.0	1,324	27.4
Kidney and Renal Pelvis	26	20.8	741	14.3
Non-Hodgkins Lymphomas	22	20.8	912	17.8
Leukemias	11	8.6	727	14.2
All Other Cancers	91	80.3	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

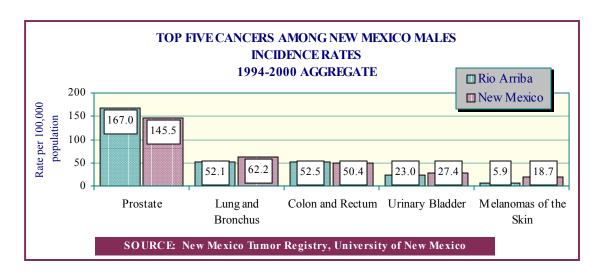
Prostate Cancer Fact

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



CANCER INCIDENCE AMONG FEMALES NUMBER AND INCIDENCE RATE 1994-2000 AGGREGATE								
SITE	Rio Ai	rriba	New N	New Mexico				
SHE	NUMBER	RATE	NUMBER	RATE				
All Cancers	389	304.8	21,575	353.8				
Stomach	9	7.2	333	5.5				
Colon and Rectum	47	37.2	2,173	35.6				
Liver and Intrahepatic Bile Duct	5	4.3	211	3.4				
Gallbladder	6	4.8	113	1.8				
Pancreas	9	7.3	543	8.9				
Lung and Bronchus	30	24.1	2,208	36.0				
Melanomas of the Skin	10	7.5	745	12.2				
Breast	112	87.4	7,067	116.5				
Cervix	12	8.9	566	9.3				
Corpus and Uterus, NOS	20	15.6	1,116	18.3				
Urinary Bladder	10	7.9	484	7.9				
Kidney and Renal Pelvis	10	8.0	472	7.7				
Non-Hodgkins Lymphomas	12	9.3	759	12.5				
Leukemias	13	10.1	532	8.6				

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

SOURCE: New Mexico Tumor Registry, University of New Mexico

84

65.0

Breast Cancer Screening

All Other Cancers

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

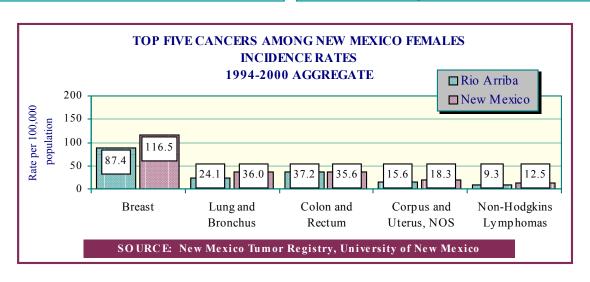
Cervical Cancer Screening

69.5

4,253

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



[~] Statistic could not be calculated.

[^] Statistic not displayed due to less than 5 cases.

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.

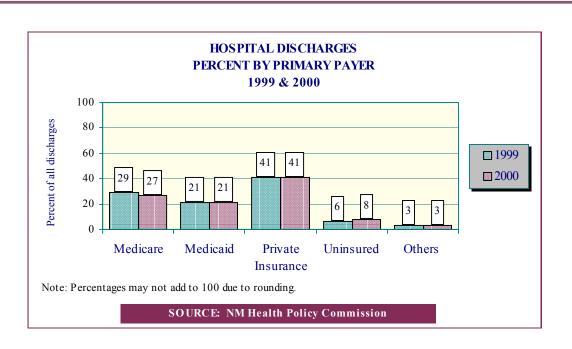
METHODOLOGY NOTES:

- 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.

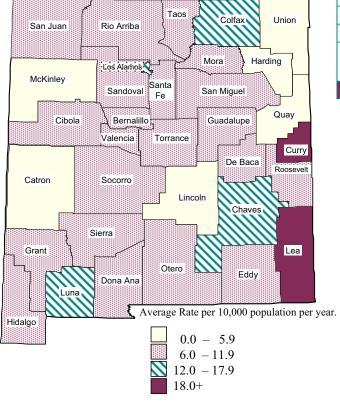
HOSPITAL INPATIENT DISCHARGE DATA - AI	LL AGES
MODIFIED MAJOR DIAGNOSTIC CATEGORIES	(MMDCs)
1999-2001	

MMDC	199	99	200	00	2001		
MIVIDC	Rio Arriba	New Mexico	Rio Arriba	New Mexico	Rio Arriba	New Mexico	
01: Nervous System	195	6,319	166	6,416	172	6,799	
02: Eye Diseases	26	639	15	386	5	205	
03: Ear, Nose, Mouth, Throat	78	1,879	56	1,612	41	1,702	
04: Respiratory System	512	17,875	474	15,151	415	15,329	
05: Circulatory System	591	20,349	674	20,923	648	20,629	
06: Digestive System	411	12,425	439	13,099	436	12,921	
07: Hepatobiliary System	182	5,084	211	5,306	214	5,343	
08: Musculoskeletal System	172	7,400	179	7,206	155	7,293	
09: Skin, Subcutaneous, Breast	58	2,272	68	2,392	67	2,583	
10: Endocrine, Metabolic	112	4,658	121	4,726	153	5,103	
11: Kidney & Urinary Tract	134	4,789	171	4,787	136	5,186	
12: Male Reproductive System	40	772	22	662	18	767	
13: Female Reproductive System	81	3,330	73	3,496	111	3,542	
14: Pregnancy, Childbirth	615	26,121	677	26,521	684	26,606	
15: Newborns, Neonates	493	23,859	609	24,401	621	24,567	
16: Blood & Blood Forming-Organs	27	1,052	31	1,170	35	1,253	
17: Myeloproliferative Diseases	191	8,616	193	8,345	189	8,118	
18: Infectious Diseases	72	2,128	62	1,795	65	1,915	
19: Mental Diseases	168	8,878	152	9,064	142	9,485	
20: Alcohol / Drug Abuse	129	3,295	128	2,957	73	2,909	
21: Injuries & Poisonings	481	14,682	472	14,193	474	14,113	
22: Burns	13	270	14	233	5	229	
23: Factors Influencing Health	306	4,148	96	4,274	89	4,387	
24: Multiple Trauma	0	0	0	0	0	0	
25: HIV	5	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 Rio Arriba New Mexico 1999 2000 1999 2000								
Medicare	1,481	1,370	47,144	47,959				
Medicaid	1,086	1,090	39,147	39,468				
Private								
Insurance	2,105	2,092	71,401	74,271				
Uninsured	334	386	12,354	13,859				
Others	176	179	5,431	4,738				
Total								
Discharges	5,182	5,117	175,477	180,295				
so	URCE: NM H	lealth Policy	y Commissio	n				

NEW MEXICO ASTHMA HOSPITAL DISCHARGES* BY COUNTY 1998-2000						
Number Rate						
Rio Arriba	75	6.4				
New Mexico 4,936 9.4						
*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	9.0%
Catron	2,844	228	8.0%
Chaves	43,413	3,806	8.8%
Cibola	18,460	1,960	10.6%
Colfax	10,765	951	8.8%
Curry	31,536	2,672	8.5%
De Baca	1,666	142	8.5%
Dona Ana	127,663	12,049	9.4%
Eddy	37,146	3,195	8.6%
Grant	22,677	2,022	8.9%
Guadalupe	3,513	352	10.0%
Harding	616	55	8.9%
Hidalgo	3,801	344	9.1%
Lea	39,662	3,451	8.7%
Lincoln	15,533	1,269	8.2%
Los Alamos	13,763	1,075	7.8%
Luna	18,007	1,639	9.1%
McKinley	47,057	5,630	12.0%
Mora	3,960	398	10.0%
Otero	43,945	3,827	8.7%
Quay	7,524	646	8.6%
Rio Arriba	29,687	3,093	10.4%
Roosevelt	13,160	1,109	8.4%
Sandoval	68,949	6,313	9.2%
San Juan	82,679	8,169	9.9%
San Miguel	22,029	2,197	10.0%
Santa Fe	103,491	9,359	9.0%
Sierra	10,497	859	8.2%
Socorro	13,177	1,246	9.5%
Taos	23,651	2,246	9.5%
Torrance	11,901	1,030	8.7%
Union	2,962	251	8.5%
Valencia	48,121	4,450	9.2%
New Mexico**	1,354,553	120,555	8.9%

^{*}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.

Source: Department of Health, Diabetes Prevention & Control Program

^{**}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.

HOSPITAL INPATIENT DISCHARGE DATA MODIFIED MAJOR DIAGNOSTIC CATEGORIES (MMDC) RIO ARRIBA 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	90	195	46.2	71	166	42.8	98	172	57.0
02: Eye Diseases	12	26	46.2	4	15	26.7	1	5	20.0
03: Ear, Nose, Mouth, Throat	23	78	29.5	13	56	23.2	14	41	34.1
04: Respiratory System	266	512	52.0	208	474	43.9	198	415	47.7
05: Circulatory System	321	591	54.3	352	674	52.2	332	648	51.2
06: Digestive System	124	411	30.2	137	439	31.2	130	436	29.8
07: Hepatobiliary System	59	182	32.4	55	211	26.1	44	214	20.6
08: Musculoskeletal System	69	172	40.1	83	179	46.4	69	155	44.5
09: Skin, Subcutaneous, Breast	11	58	19.0	16	68	23.5	25	67	37.3
10: Endocrine, Metabolic	39	112	34.8	37	121	30.6	50	153	32.7
11: Kidney & Urinary Tract	57	134	42.5	71	171	41.5	59	136	43.4
12: Male Reproductive System	31	40	77.5	11	22	50.0	10	18	55.6
13: Female Reproductive System	7	81	8.6	12	73	16.4	12	111	10.8
14: Pregnancy, Childbirth	0	615	0.0	1	677	0.1	0	684	0.0
15: Newborns, Neonates	0	493	0.0	23	609	3.8	0	621	0.0
16: Blood & Blood-Forming Organs	6	27	22.2	11	31	35.5	8	35	22.9
17: Myeloproliferative Diseases	85	191	44.5	79	193	40.9	84	189	44.4
18: Infectious Diseases	32	72	44.4	26	62	41.9	31	65	47.7
19: Mental Diseases	11	168	6.5	0	152	0.0	15	142	10.6
20: Alcohol / Drug Abuse	4	129	3.1	5	128	3.9	3	73	4.1
21: Injuries & Poisonings	107	481	22.2	115	472	24.4	139	474	29.3
22: Burns	3	13	23.1	1	14	7.1	0	5	0.0
23: Factors Influencing Health	102	306	33.3	47	96	49.0	47	89	52.8
24: Multiple Trauma	0	0		0	0		0	0	
25: HIV	0	5	0.0	0	0		0	0	
	OURCE:	New Mex	ico Healtl	ı Policy C	ommissio	n			

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

	1999	2000	2001
Routine Discharge	942	963	843
Transfer-Hospital	58	45	82
Transfer-Skilled Nursing Facility	57	56	110
Transfer-Intermediate Care Facility	70	39	32
Transfer-Other	111	94	65
Transfer-Home Care	179	122	171
Left Against Medical Advice	2	1	4
Died	65	70	62
Other	5	3	1
TOTAL DISCHARGED	1,489	1,393	1,370

SOURCE: New Mexico Health Policy Commission



TOP FIVE CATEGORIES OF HOSPITALIZATION FOR AGES 65+ 1999-2001 30 25 hospital discharges Percent of 65+ 20 15 5 0 -1999 2000 2001 → 05: Circulatory System 04: Respiratory System -21: Injuries & Poisonings → 06: Digestive System **★** 01: Nervous System SOURCE: NM Health Policy Commission

ADULT ABUSE CASES NUMBER AND TYPE OF INVESTIGATION Annual 2002

Residence	Substantiated Investigations			antiated gations	Total Investigations	
	Number	Percent	Number	Percent	Number	
Rio Arriba Co.	47	40.5	69	59.5	116	
New Mexico	1475	29.2	3569	70.8	5,044	

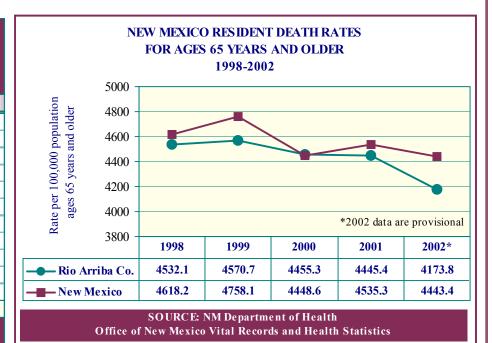
Source: NM Children, Youth and Families Department Protective Services Division Fact Book, Fourth Quarter & Annual 2002



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

Year	Rio Arriba Co.	New Mexico
1992	143	7,600
1993	145	7,971
1994	149	8,368
1995	155	8,628
1996	180	8,663
1997	184	8,772
1998	170	9,100
1999	173	9,515
2000	200	9,441
2001	204	9,864
2002*	195	9,840
*2002	data are provision	al

SOURCE: NM Department of Health ONMVRHS



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

RIO ARRIBA COUNTY			NEW MEXICO			
Causes	Number	Rate	Causes	Number	Rate	
All Causes	942	4196.9	All Causes	47,760	4500.9	
Diseases of Heart	259	1155.9	Diseases of Heart	13,459	1268.4	
Malignant Neoplasms	202	901.2	Malignant Neoplasms	10,313	971.9	
Cerebrovas cular Diseases	66	292.7	Chronic Lower Respiratory Diseases	3,630	342.1	
Chronic Lower Respiratory Diseases	61	270.1	Cerebrovascular Diseases	3,407	321.1	
Diabetes Mellitus	58	258.6	Diabetes Mellitus	1,969	185.5	

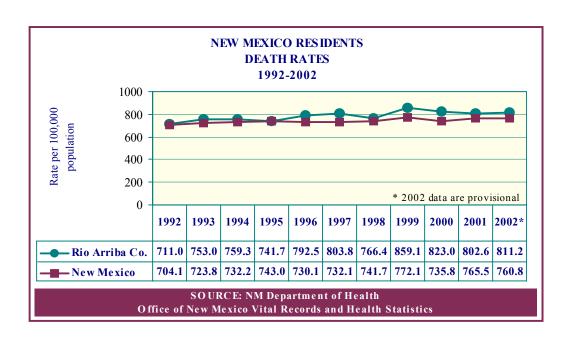
^{* 2002} data are provisional

Rate per 100,000 population ages 65 years and older. 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.

NEW MEXICO RESIDENT DEATHS COUNTY AND STATE TOTALS 1992-2002											
	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002*
Rio Arriba Co.	247	267	274	273	297	302	290	328	339	330	333
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 are provisional											

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



NEW MEXICO RESIDENT DEATHS LEADING CAUSES OF DEATH 1998-2002* AVERAGE

RIO ARRIBA COUN	NEW MEXICO				
All Races/All Ages	Number	Rate	All Races/All Ages	Number	Rate
All Causes	1,620	786.6	All Causes	67,805	745.5
Diseases of Heart	325	158.0	Diseases of Heart	16,186	178.0
Malignant Neoplasms	295	143.4	Malignant Neoplasms	14,440	158.8
Accidents (Unintentional Injuries)	250	121.5	Accidents (Unintentional Injuries)	4,759	52.3
(Motor Vehicle Accidents)	(108)	(52.3)	(Motor Vehicle Accidents)	(1,904)	(20.9)
Diabetes Mellitus	81	39.4	Chronic Lower Respiratory Diseases	4,125	45.3
Cerebrovascular Diseases	80	38.8	Cerebrovascular Diseases	3,890	42.8

^{* 2002} data are provisional

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

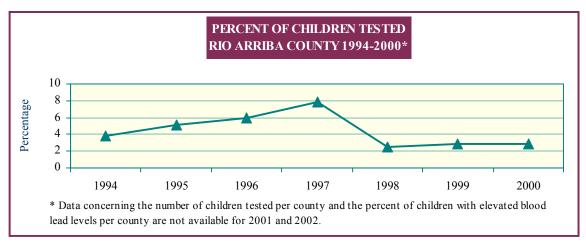
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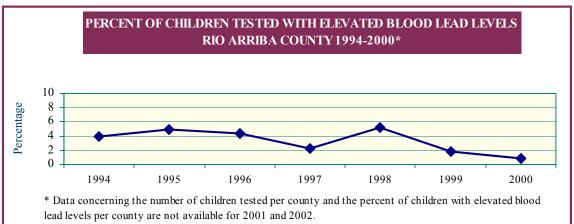
CHILDREN UNDER 6 WITH ELEVATED BLOOD LEAD LEVELS OF THOSE CHILDREN SCREENED, 2001-2002				
	2001	2002		
Rio Arriba Co.				
Number of Children with Elevated Blood Lead Levels	1	0		
New Mexico				
Number of Children Screened	2,691	2,876		
Number of Children with Elevated Blood Lead Levels	37	35		
Percent 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 Rio Arriba County, 21.9% 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 Epidemiology

² General Accounting Office (GAO) Report, 1999.



HOSPITALS AND PRIMARY CARE FACILITIES						
HOSPITAL / PRIMARY CARE FACILITY	PHONE	STREET ADDRESS	CITY	STATE	ZIP	
Espanola Hospital	(505)753-7111	1010 Spruce Street	Espanola	NM	87532	
SOURCES: NM Department of Health, District II Heath Office						

HEALTH CARE CLINICS						
FACILITY	PHONE	STREET ADDRESS	CITY	STATE	ZIP	
Ayudantes, Inc.	(505)747-0102	1206 N. Riverside	Espanola	NM	87532	
Health Centers of NNM	(505)756-2143	211 North Pines	Chama	NM	87520	
Health Centers of NNM	(505)638-5487	State Rd 96, House 3396	Coyote	NM	87012	
Health Centers of NNM	(505)579-4255	State Road 68	Embudo	NM	87531	
Health Centers of NNM	(505)753-7395	620 Coronado St, Suite C	Espanola	NM	87532	
Health Centers of NNM	(505)753-9503	711 Bond St	Espanola	NM	87532	
Health Centers of NNM	(505)689-2461	State Rd 76, Co Rd 75, House 60	Truchas	NM	87578	
La Clinica Del Pueblo De Rio Arriba	(505)588-7252	Hwy 84, County Rd 0324	Tierra Amarilla	NM	87575	
Las Clinicas del Norte	(505)685-4479	Hwy 84 #185	Abiquiu	NM	87510	
Las Clinicas del Norte	(505)581-4728	215 Placitas Rd. #182	El Rito	NM	87530	
Las Cumbres Learning Services, Inc.	(505)753-4123	404 Hunter St.	Espanola	NM	87532	
SOURCE: NM Department of Health, District II Health Office						

LICENSED HEALTH PROFESSIONALS BY COUNTY OF LICENSE 2002				
	Rio Arriba Co.	New Mexico		
Medical Doctor	39	5,809		
Medical Doctor Resident	1	1,144		
Physician Assistant	8	287		
Nurse (RN & LPN)	255	19,575		
Certified Nurse Midwives	2	148		
Licensed Midwives 1 79				
SOURCE: New Mexico Health Policy Commission				

RIO ARRIBA COUNTY SELECTED COMMUNITY PARTNERS FOR PUBLIC HEALTH				
COMMUNITY PARTNER	PHONE#			
AARP	852-2376			
Chimayo Crime Prevention Coalition	827-3922			
Chimayo Youth Conservation Corps	351-1456			
Espanola School Health Advisory Council	753-4510			
Espanola Valley Concerned about Secondhand Smoke	747-1889			
Homeless Shelter Community Partners	747-7106			
Interfaith L.E.A.P.	852-2376			
La Clinica del Pueblo Community Outreach	588-9506			
La Jicarilla Cultural Center	759-1343			
La Visión del Valle	747-1889			
Ministerial Alliance	689-2404			
Northern New Mexico Coalition on Domestic Violence (Northern Rio Arriba)	759-3162			
Northern Rio Arriba Health Coalition	588-7215			
Peace Keepers Domestic Violence Prevention	753-4790			
Rio Arriba County DWI Planning Council	747-1418			
Rio Arriba Family Care Network	753-3143			
Rio Arriba Maternal Child Health Council	753-3143			
Rio Arriba Suicide Prevention Coalition	753-3143			
Salud de Familia	753-6257			
Sikh Dharma Community Outreach 753-63				
SOURCES: NM Department of Health, Distirct II Health Office				

ACTIVE EMERGENCY MEDICAL SERVICES PERSONNEL BY LEVEL AS OF AUGUST 20, 2003				
Level Rio Arriba Co. New Mexico				
First Responder	47	760		
Dispatcher	40	398		
Dispatcher-Instructor	1	16		
EMT-Basic	84	3,321		
EMT-Intermediate	34	1,190		
EMT-Paramedic	12	955		
Total 218 6,641				
NOTE: There are personnel with current active licenses at more than one level in this snapshot. The actual state				

SOURCE: NM Department of Health

personnel total is 6,546.



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

Gender	Rio Arriba Co.	New Mexico
Male	147	4,574
Female	67	1,995
Unknown	4	72
Total	218	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.