

2019 VALENCIA COUNTY HEALTH PROFILE REPORT

County Commission March 20th, 2019

Diana Good, Community Wellness Council Vice President



Community Wellness Council History and Role in Valencia County

- The Community Wellness Council originated in 1993 as the Valencia County Coalition for Families, Children and Community . The Valencia Maternal Child Health (MCH) Council served in an advisory capacity to the County.
- In 2010 the council reorganized to become the Community Wellness Council with the mission to promote community collaboration through a framework of coordination, assessment and solutions. Through its many transitions and iterations the Council has retained its 501©3 status and an active and dedicated leadership team passionate about community wellness, health and safety. In addition, the Community Wellness Council continues to maintain a mutually beneficial relationship with the Department of Health and the New Mexico Alliance of Health Councils which includes Tribal partners.
- In December 2017, the Valencia County Commission approved a Resolution to allow for the Community Wellness Council to present community data and profile for the purposes of informed policy making.

- **Our Vision**

"A community working in cooperation to ensure the health and well being of all its residents."

- **Our Mission**

"To promote community collaboration through framework of coordination, assessment and solutions."



The Concept of Health

Let's assume...

- that health is understood to mean both well-being and the absence of illness and other health problems
- that health is influenced by many different factors, including social, personal, environmental, and economic
- that health is inter-related with a wide range of human service issues and needs
- that many different individuals and entities can and should play a role in maintaining and improving health in the community

Community Health Assessment Measures:

- The assets and needs in the continuum of care:
 - Early Identification
 - Health Promotion
 - Access To Care
 - Intervention
 - Follow-up
- As affected by :
 - Funding, Access and Utilization
- Available to population sub-groups:
 - Prenatal
 - Child
 - Adolescent
 - Adult
 - Senior Adult

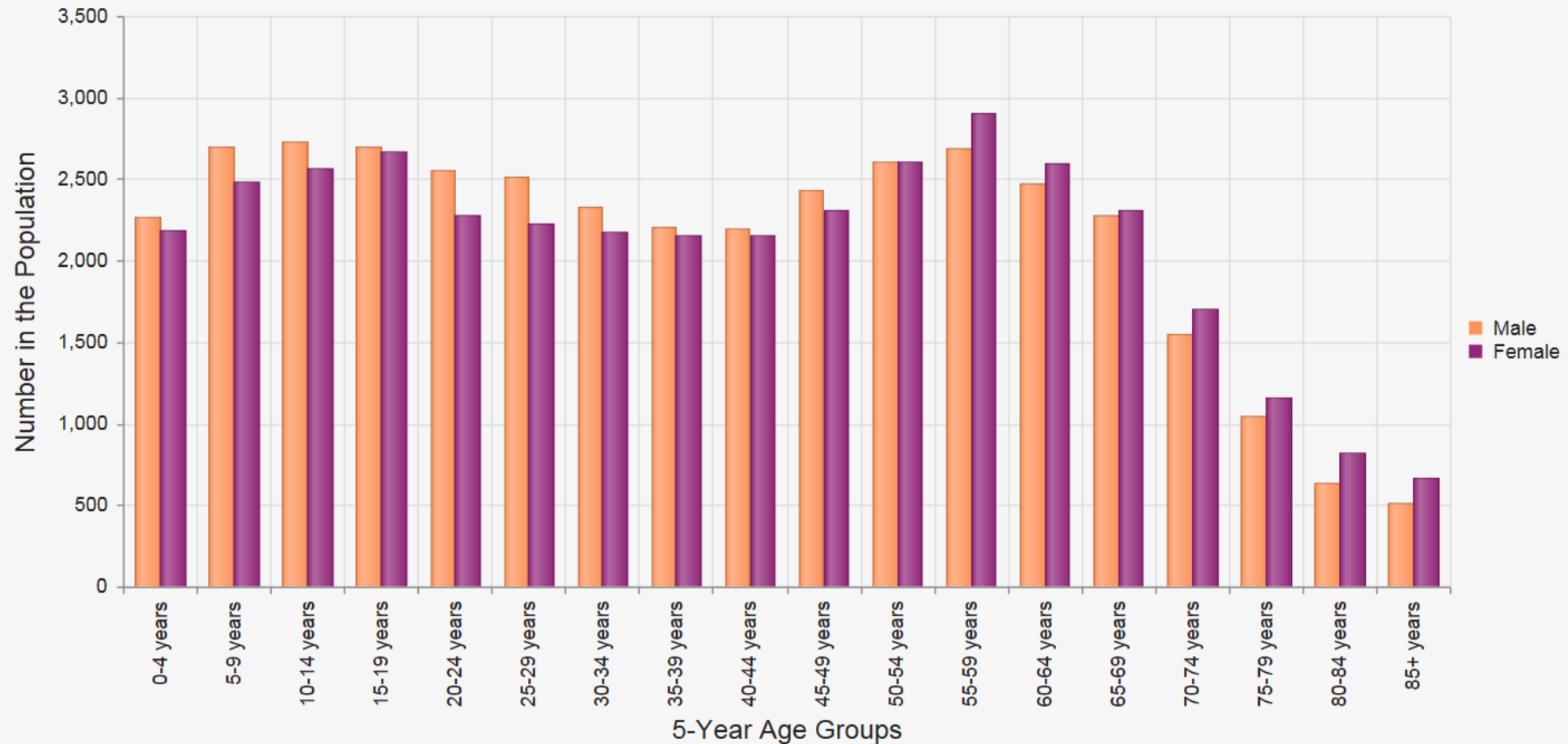
- Taking into account the Social Determinants of Health
 - Key social factors that are the most powerful determinant of population health.
 - Examples: education level, racism, and economic factors, including poverty and income inequality.

Community Health Improvement Plan (CHIP) Cycles



Population by Age and Sex - 2016

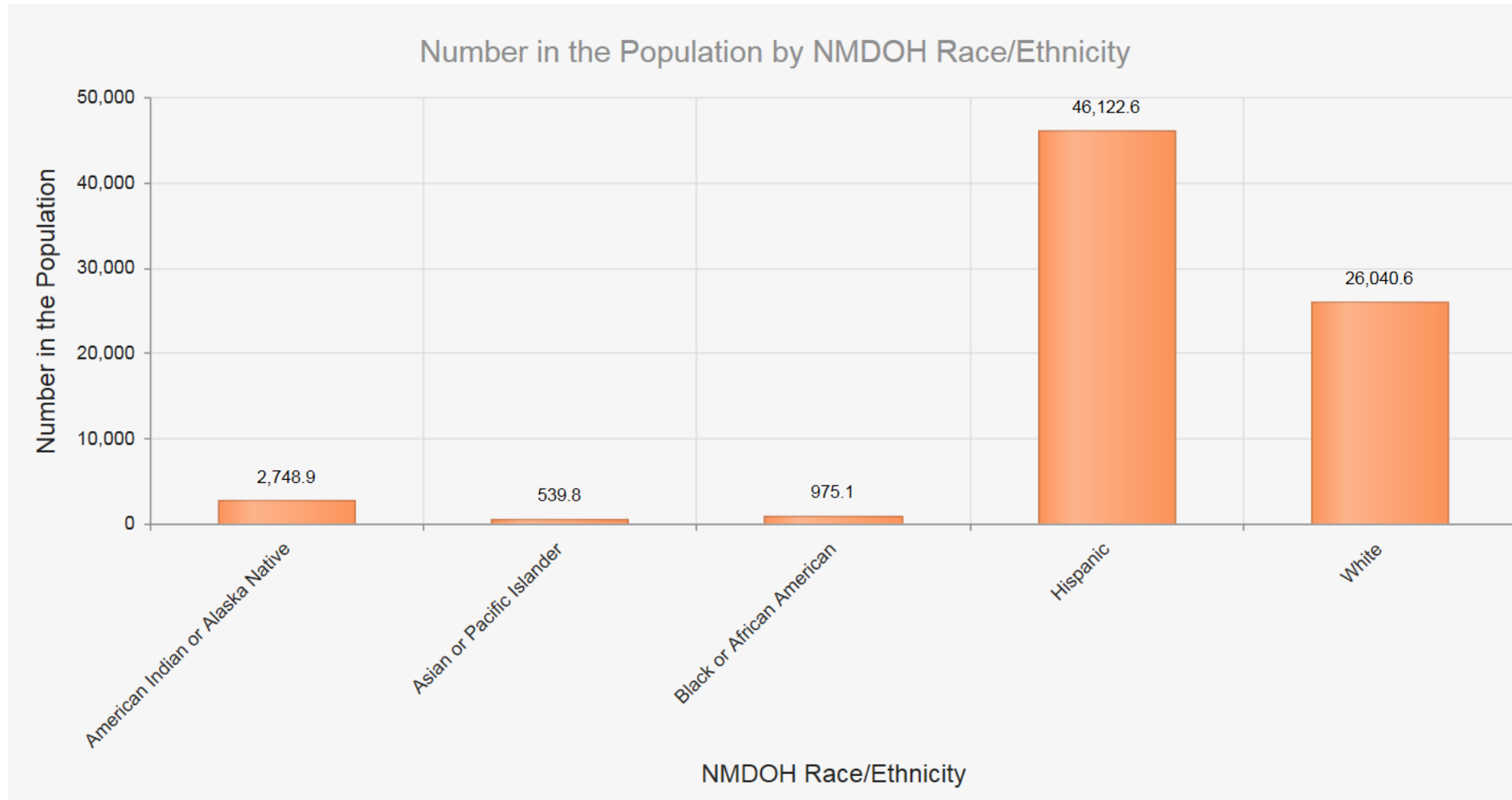
Number in the Population by 5-Year Age Groups and Sex



Population Highlights

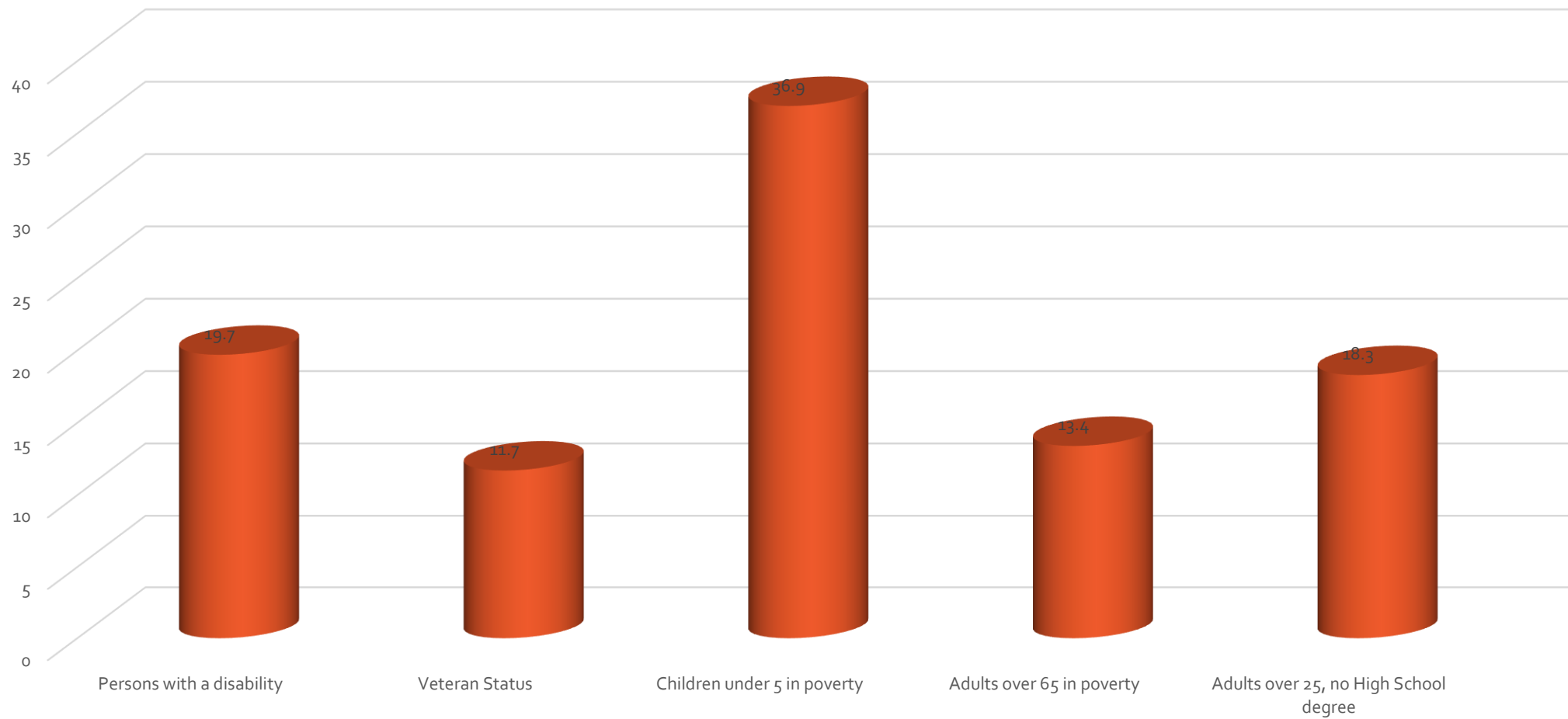
- Estimated Population in 2016: 76,427
- Change since 2012 estimate up slightly by 1.87%
- Population Density = 71.7 person per square mile
- Under age 5yrs. = 4461
- School aged children 5-19 = 15,852
- Adults 20-64 = 43,435
- 65 yrs. and over = 12,679
- The Age Dependency Ratio is the ratio of the combined dependent population (aged 0-14 and aged 65 and older) to the working population (aged 15-64), expressed as the number of dependents per 100 people of working age. Higher values indicate a greater level of age-related dependency in the population. Valencia =56.6

Population by Ethnicity (2016)



Special Populations -

Percentage in Valencia County



Income and Poverty Indicators



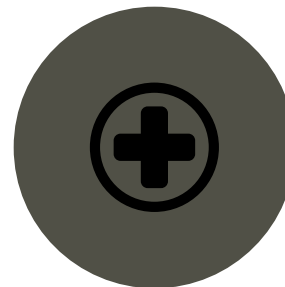
Median Household
Income: **\$41,788**
(ACS 2012-16)



Persons Living in
Poverty **23.2 %** (ACS
2012-16)



Percentage of Renter
Occupied
Households with
GRAPI (Gross Rent as
a Percentage of
Income) 35% or More
: **47.9%** (ACS 2012-
16)



Percent Persons
without Health
Insurance **12.2%**
(ACS 2012-16)

Household Characteristics and Family Structure

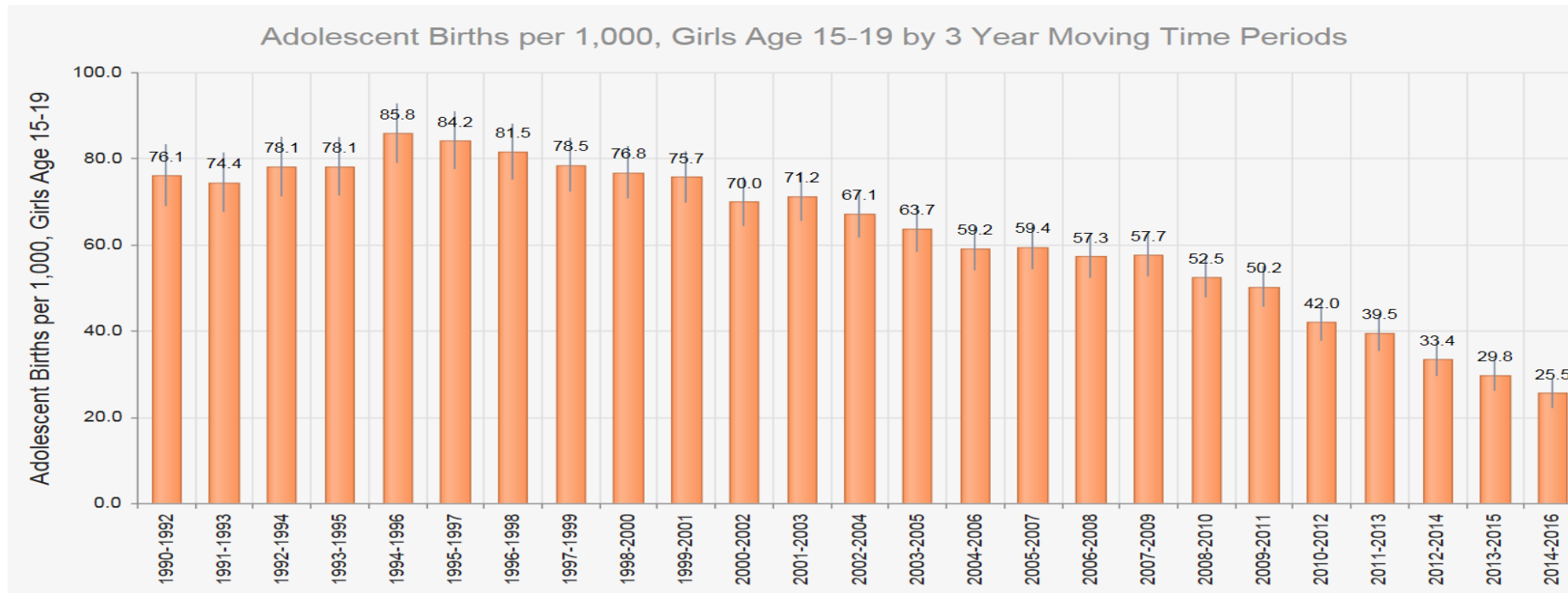
12.6% Households With Grandparents Responsible for Own Grandchildren as a Percentage of All Households with Children Under Age 18 Years

14.3% Family Households with a Single Female Head of Household as a Percentage of Total Households

23.2% of Children Age 6 to 17 With All Parents in the Labor Force

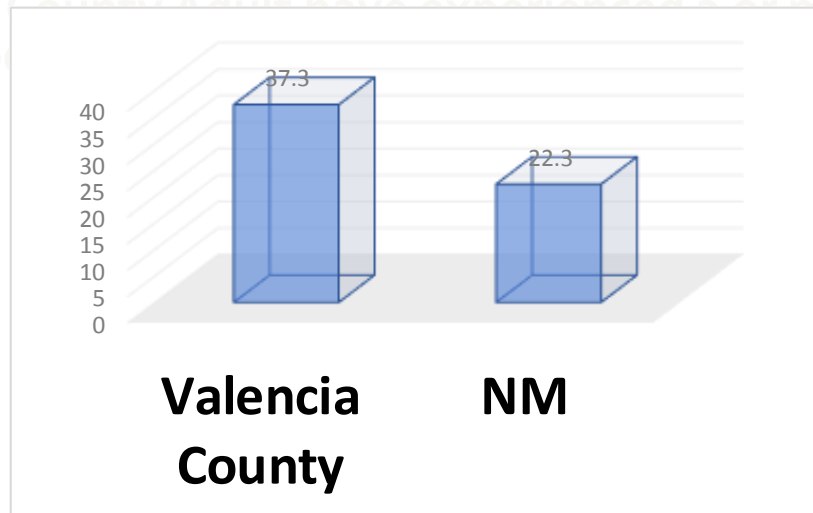
Valencia County Birth Data

- 782 live births 2016
- 7% with no or late pre-natal care (2016)
- Infant Mortality Rate 2016 is 7.7 per 1000 live births in same yr.
- Births to Teen mothers 15-19yrs old. We are continuing to make progress.



Adverse Childhood Experiences

- Across NM, about 10% of children have at least 1 incarcerated parent. Due to our county having a prison, that rate might be higher for Valencia.
- 37.3 is Valencia County's Ratio of Average Annual Total Substantiated Child Abuse Allegations per 1,000 Children in the Population Fiscal Years 2014-2016 (NM ratio is 22.3)



THE TRUTH ABOUT ACEs

WHAT ARE THEY?

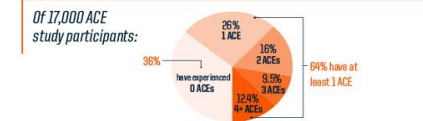
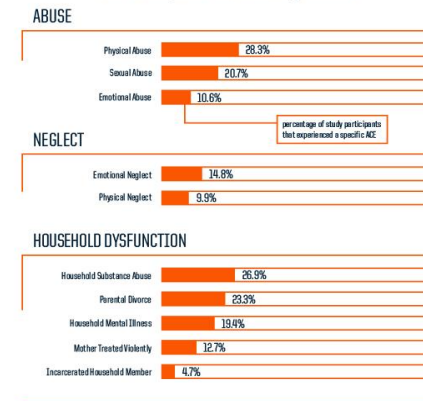
ACEs are
ADVERSE
CHILDHOOD
EXPERIENCES

The three types of ACEs include

ABUSE	NEGLECT	HOUSEHOLD DYSFUNCTION	
Physical	Physical	Mental Illness	Incarcerated Relative
Emotional	Emotional	Mother treated violently	Substance Abuse
Sexual		Divorce	

HOW PREVALENT ARE ACEs?

The ACE study* revealed the following estimates:



WHAT IMPACT DO ACEs HAVE?

As the number of ACEs increases, so does the risk for negative health outcomes

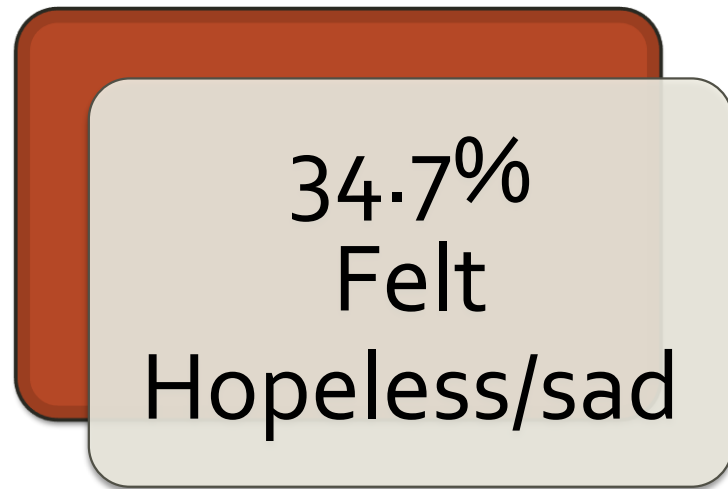


Possible Risk Outcomes:

BEHAVIOR				
Lack of physical activity	Smoking	Alcoholism	Drug use	Mixed work
PHYSICAL & MENTAL HEALTH				
Severe obesity	Diabetes	Depression	Suicide attempts	STDs
Heart disease	Cancer	Stroke	COPD	Broken bones

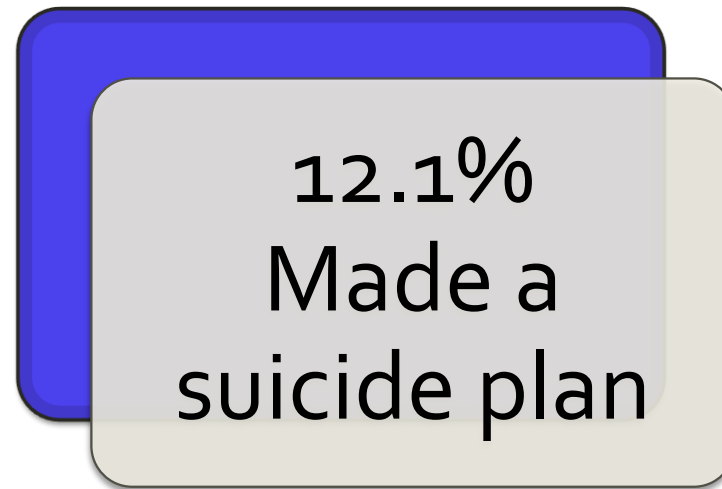
*Source: <http://www.cdc.gov/ace/rwjenvalencia.htm>

Youth Risk and Resiliency – 2017 Preliminary Data Behavioral Health Indicators for Valencia County High School students



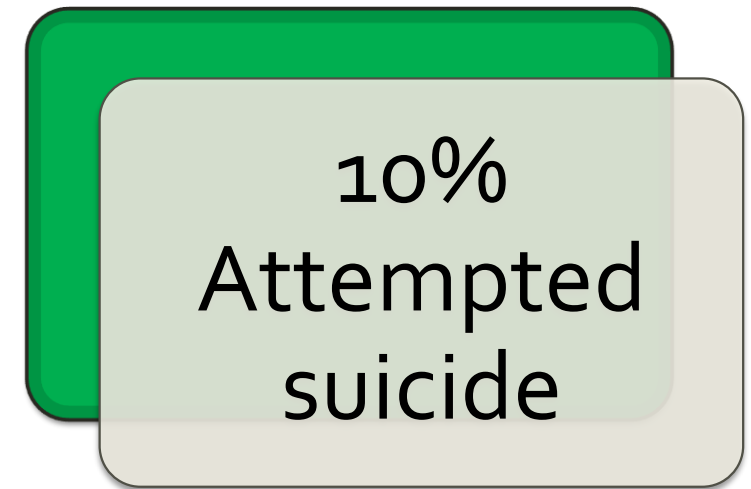
34.7%
Felt
Hopeless/sad

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12.1%
Made a
suicide plan

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10%
Attempted
suicide

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**Youth Risk and
Resiliency – 2017
Preliminary
Data:
Healthy Eating,
Active Living
Indicators for
High School
Students**

22.5 % get at least 5 servings of fruits and vegetables per day



27 % get daily physical activity



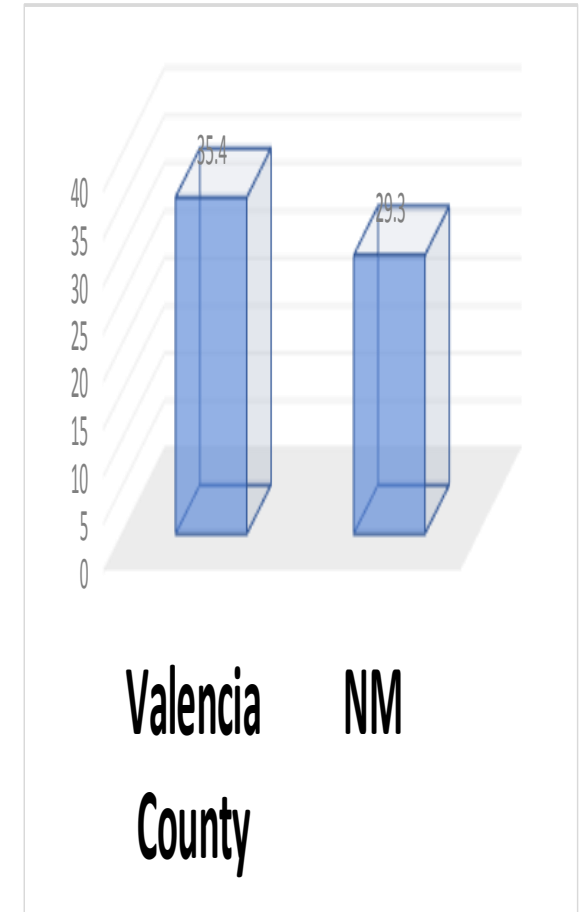
18.1 % obese

Youth Risk and Resiliency 2017 Preliminary Data Substance Use Among High School Students

- 11.3 % binge drink
- 25.8 % are current drinkers
- 32.4 % currently use marijuana, 6.7 % use synthetic marijuana
- 7.8 % use cocaine
- 8.0 % use pain killers to get high
- 5.5 % use heroin
- 6 % use methamphetamines
- 6.9 % use inhalants
- 14.6 % currently smoke cigarettes
- 32.9 % use electronic cigarettes/vape

Adult Risk Factors

- 21.3 % Adults self-report Frequent Mental Distress 2016
- Drug Overdose Death Rate is 22.2 per 100,000 (2012-16)
- Only 13.3% of adults consume at least 5 servings of fruits/veg per day.
- 49.9 % of Adults get the recommended amount of daily exercise.
- 29.0 % Obesity Among Adults, 2014-2016
- 11.4 % Diagnosed Diabetes Age-Adjusted Prevalence 2014-2016
- 30.5 % Prevalence of Diagnosed Arthritis among Adults 2011-2014
- 26.5 % Adult Smoking Prevalence 2014-2016
- 35.4 Average Annual Lung Cancer Deaths per 100,000 Population in Valencia County, 2012-2016
- 31.9 % Adults over 45 have multiple chronic conditions (2011-16)



Leading Causes of Death Valencia - 2016

