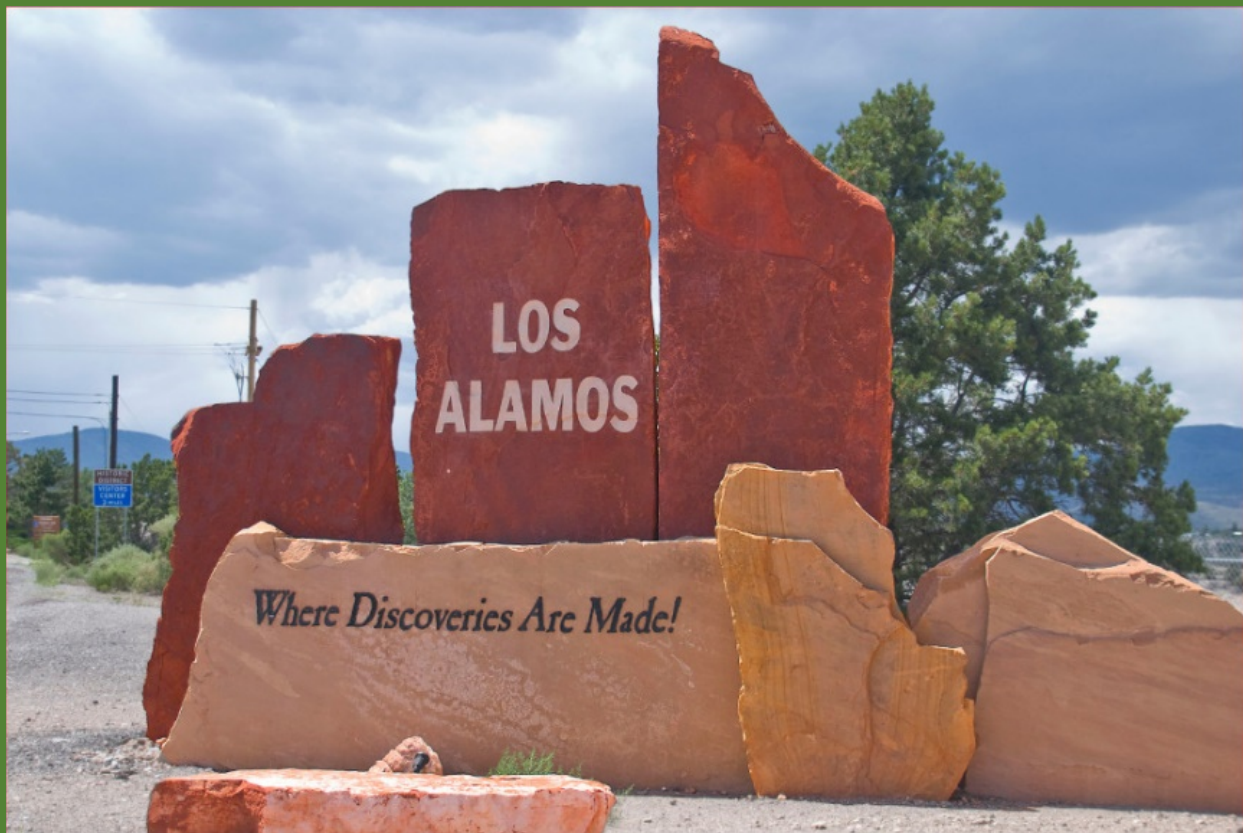


**LOS ALAMOS**  
where discoveries are made

## **HEALTH SERVICES GAP ANALYSIS FINAL REPORT**



## ACKNOWLEDGEMENTS

The Community Services Department, Social Services would like to acknowledge the contribution of the Steering Committee to this report. These individuals represented Los Alamos County and sectors within the community and provided invaluable input throughout this process.

Elizabeth Allen	Legal (Los Alamos Municipal Court Judge)
Kristine Coblenz	Education (Program Director, Healthy Schools Initiative, Los Alamos Public Schools)
Lori Coffelt	Healthcare (Chief Nursing Officer, Los Alamos Medical Center)
Phillip Gursky	General Community
Margi Harrach	Developmental Disabilities and Special Needs Roundtable
Alicia Justus	Lead Psychologist, Occupational Medicine, Los Alamos National Laboratory
Linda Matteson	Community Services Department, Los Alamos County (Acting Director)
Donna Casados	Community Services Department, Social Services Manager
Eloisa Sanchez	Community Services Department, Social Services Health Care Specialist
Deni Fell	Community Services Department, Social Services Case Coordination Specialist

The Health Services Gaps Analysis Steering Committee would like to recognize the numerous contributors to this process including:

Carrie Fanning	Family Strengths Network
Bernadette Lauritzen	Los Alamos Senior Center
George Marsden	Los Alamos Teen Center
Jordan Redmond	Los Alamos Family Council
Lisa Zuhn	Juvenile Justice Advisory Board
Lauren Reichelt	Rio Arriba County (Health & Human Services Director)
Carlos del Campo	Sandoval County (Community Health Services)
Veronica Lopez	Sandoval County (Community Services Department)
Patricia Boies	Santa Fe County (Health Services Division Director)
Jennifer Romero	Santa Fe County (Community Services Department, Health Care Assistance Program)

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## EXECUTIVE SUMMARY

In December 2019, the Community Services Department of Los Alamos County commissioned a Health Services Gap Analysis to be conducted over the Winter of 2020 with results available for the Budgetary process.

Following a Project Launch session on January 6, 2020, the selected consultant conducted fifteen key informant interviews including representatives on the ten-person Steering Committee, of which six were outside the Community Services Department. This initial session established goals of the process which were to “build capacity at the community level, focusing on needs and priorities, addressing gaps with a system that is patient-centered and community-based which will provide for focused and flexible movement forward towards a healthy community.” The process was aimed at “determining the health service needs of people living in Los Alamos County by identifying existing infrastructure that provides direct services locally to County residents; demographics and population details of the County; individual health care risks and challenges faced; and systemic and provider issues impacting access to health services and to the well-being of County residents.”

Key findings centered on Access to Care and Knowledge of Services, specifically that community members are familiar with the contracted services that the County funds (i.e. JJAB, FSN, Teen Center) but are not aware of the Social Services office or the direct services it provides.

The need for Affordable and Accessible Housing ranked equal to Access issues and Knowledge of Services. Concerns were expressed about the availability and access to a healthcare workforce to respond to the rising senior population and related need for specialized care.

The disease burden represented by the historic culture of alcohol acceptance and the impact of that societal practice on an otherwise extremely healthy population is of grave concern. While most chronic diseases were notably absent from the disease burden of Los Alamos County residents, three alcohol-related cancers were striking in incidence—breast, prostate and thyroid cancer. Screenings for these cancers were not perceived as readily available. Preventive measures including education about the impact of alcohol on prevalence are needed.

This concern pairs with frequently referenced mental health issues related to stress and anxiety. A paradoxical culture of a small town in which there is a culture of secrecy is attributed to security clearances specific to the County’s dominant employer, Los Alamos National Laboratory. High performance expectations, issues with employment and acculturation of new residents relocated for work at the Lab were shared. The toll of acclimation experienced by trailing spouses and children was frequently cited.

Gaps were determined for seven (7) priority areas.

- (1) *Health Care Access/ Healthcare Workforce deficits/Health Insurance acceptance by providers*
- (2) *Lack of Affordable and Acceptable Housing Stock*
- (3) *Culture of Alcohol Acceptance & Drug Use: Substance Use*
- (4) *Mental Health: High Stress/Anxiety/Needs of Residents*
- (5) *Silent but Sizeable ‘Near Poor’ Population*
- (6) *Growing populations of two segments stressing the need for social, mental and physical health resources—Seniors (65 years plus) and Adolescents (10-17-year old’s, comprised of Tween (10-12-year old’s and Teens (13-17-year old’s).*
- (7) *Lack of affordable and available childcare*

A poll of the Steering Committee fortified these findings with the following resolutions.

(1) Collaborate with Los Alamos Medical Center (LAMC) to provide input into its future with clarification of the reduced Obstetric practice, discussion of the growing Tween (10-12-year old) and Teen (13-17-year old) populations and related pediatrics/adolescent health needs, review of the need for enhanced preventive screening for cancer and other chronic disease, and concerns related to emergency medical services and transfer for specialized care. Work with the dominant employer, Los Alamos National Laboratory (LANL) to increase preventive screenings provided on-site for cancer and other chronic disease (i.e. hypertension, high cholesterol).

(2) Create a County owned co-location space for non-profits and medical services (including specialists from out of town) including mental health and social services providers to increase access to health care services, reduce the travel burden, and to leverage resources by sharing the office cost burden.

(3) Address the need for a gap identified for 6-8 graders who developmentally do not fit in at the Youth Activity Centers with 3<sup>rd</sup> grade and up. YAC enrollment and usage data demonstrates that they are at capacity. Create a 'Tween' Activity Center for 6<sup>th</sup> – 8<sup>th</sup> grade students.

(4) Collaborate with Community Development Department (CDD) to support the creation of expanded and affordable Housing with focus on young adult populations and new entrants to the community to reduce homelessness, isolation and increase social attachment to Los Alamos County.

(5) Convert the 'name' of *Social Services* to 'Health and Human Services' under the Community Services Department for increased awareness of their role.

## METHODOLOGY

Secondary research consisted of developing three (3) profiles of Los Alamos County which were compared to data for New Mexico and the United States. These were:

- (1) Demographic – statistical review of population of Los Alamos County compared to New Mexico and the United States.
- (2) Socioeconomic – statistical review of socioeconomic status of Los Alamos County compared to New Mexico and the United States
- (3) Epidemiologic – statistical review of disease status of Los Alamos County compared to New Mexico and the United States

In addition, prior studies for specific topics including behavioral health, housing, birth care, special needs and economic development were reviewed and synthesized.

Primary research consisted of:

- (1) Development of an updated Resource Inventory
- (2) Conduct Key Informant Interviews (15)
- (3) Facilitation of eight (8) Focus Groups
- (4) Interview of Benchmark Community Surveys (3 Counties)

This resulted in a derivation of Gaps, areas in which Los Alamos County negatively compared to either the State, neighboring Counties, or perceptions of desired care.

A prioritization matrix was formed with polling by the Steering Committee to arrive at five (5) gaps with resultant policy recommendations.

A contrafactual analysis or projection of outcome if ‘nothing is done’.

## KEY FINDINGS

A Health Services Gap Analysis reviews the County's population and needs along with identifying key gaps in existing services available to meet those needs. This analysis consists of three profiles and a Resource Inventory.

The profiles that were developed as part of this analysis can be found in their entirety in Appendix C with key findings summarized below.

### DEMOGRAPHICS:

- Expanding population base projected from 2020 to 2025 into 2030
- Growth in bimodal tween/teen and senior age groups
- Decrease in population of males 35-45
- Largely homogenous population with significant foreign-born segment

### SOCIOECONOMICS:

- Disproportionate impact of largest employer, Los Alamos National Laboratory
- High housing cost burden
- Significant 'Poor' and 'Working Poor' with high subgroup of females that are 75 years+

### EPIDEMIOLOGY:

- Access to Healthcare (primary and specialty care)
- Healthcare workforce deficit
- Significantly healthy population even given senior cohort
- Alcohol-related cancers
- High alcohol & drug use/mortality
- Suicidal ideation high but not actual suicide rate
- High rate of low-birth weight infants
- High disabled proportion of population living in White Rock

### RESOURCE INVENTORY

- Need for formal referral relationship for high-risk Obstetrics services
- Inadequate number of primary care physicians
- Need for more specialist providers (orthopedics, urology, oncology) especially senior-friendly and for special needs/disabled populations.
- Activity space for middle school population ('tweens or 6<sup>th</sup> to 8<sup>th</sup> graders)
- Co-location space for physical health, behavioral health and social services

The perception that Access to Care and Affordable Housing ranked as priority gaps was validated by other research (prior studies, profiles, key informant interviews and focus groups.)

Childcare that is affordable, accessible during atypical schedules (evening, nights, weekend) and available for children with special needs was frequently cited.

The primary resolution to these issues includes a supply of an adequate volume and type of healthcare workforce including access to specialized services. These gaps were more pronounced for families with special needs or disabled. Frequently referenced was the availability of sufficient and accessible and co-located space to house an array of part and full-time providers.

Causative factors referenced were the culture of Los Alamos County described as pressure for academic and professional achievement, high expectations and stress leading to disproportionate rates of substance use and mental health issues. The atypical demographics of an affluent, highly educated population fosters stigma for the poor or working poor. This results in an unawareness of poverty status and/or a reticence to access resources for assistance. Frequent reference was made to lack of knowledge about available resources and issues identifying appropriate services.

Two subsets of the population in Los Alamos County—adolescents (10-17 years of age) and seniors (65 years of age and over) are growing in the percentage of total population. Both age groups present specific health and social service needs.

**The impacts of gaps in health services in Los Alamos County are summarized below with detail for the Demographic, Socioeconomic and Epidemiologic profiles contained in Appendix C.**

*(1) Health Care Access/ Healthcare Workforce/Health Insurance*

Current deficits are for primary care physicians with a total of 39 currently in Los Alamos. Based on this supply, projections are to increase to 40 in 2021, 41 in 2023 and 42 in 2025. Access to primary care physicians, while favorable compared to State and National benchmarks and even Healthy People 2020 targets, is a recurrent issue mentioned during Key Informant Interviews and by Focus Group participants. Dental access was also referenced as a concern. Both workforce areas, however, are positive compared to State and National benchmarks. This should increase from a current complement of 19 to 20 in 2021, and 20 in 2023 and 2025.

Access to Mental Health providers is an issue, however, with unfavorable ranking compared to State and National benchmarks. Los Alamos County should have 47 mental health providers, giving it a deficit of 8. This issue is believed to reflect the lack of a common space for health and social service providers, with a supply of mental health providers that work part-time and need flexible hours and related space to accommodate demand. Projections based on current state are 38 providers in 2021, 40 in 2023 and 41 in 2025.

Lack of health insurance is not an issue in Los Alamos County but acceptance of Medicaid and even Commercial Health Insurance by providers was cited as a barrier to healthcare access in Key Informant Interviews and Focus Groups.

A consistent high percentage of low birth weight deliveries, a statistic more frequently seen in low income or early age (teen births) is present in Los Alamos County and should be further researched given the reduced profile of Obstetrics at Los Alamos Medical Center. This is further presented in *Clinical Conditions (Screenings & Outcomes)*

**Breast Cancer** screenings (Mammograms) are high compared to New Mexico and the U.S. at 79.2% in 2015, the last recorded year. The rate of breast cancer incidence, however, was 154.8 per 100,000 or 14 new cases in 2015, much higher than New Mexico or the U.S. Given the high senior female population (Medicare eligible), this rate was very high in comparison with 98 cases in 2015. Lack of action will result in 20 females under 50 years of age and over 100 senior females being diagnosed with breast cancer in 2021; 22 females and 102 senior females diagnosed in 2023 and 24 females and 105 senior females diagnosed with breast cancer in 2025.

**Prostate cancer** is of equal concern for Los Alamos males compared to New Mexico and the U.S. Seventy-four males were diagnosed with prostate cancer in Los Alamos County in 2015, a rate of 116.7 per 100,000. This compares to 80/100,000 for the State and 109 for the U.S. Continued



inaction will result in a rate of 118 in 2021 (76 cases), 119 in 2023 (78 cases) and 120 in 2025 (80 cases).

**Thyroid cancer** is also an issue, with 96 cases diagnosed in 2015 or a rate of 19.2 per 100,000 compared to New Mexico at 11.4 and the U.S. at 15.8. In action will result in 98 cases in 2021, 100 in 2023 and 102 in 2025.

#### *Emerging Overweight/Obesity, Pre-Diabetes and Diabetes Risk*

**Obesity** percentages in Los Alamos County are 22.4% in 2017, with projected increases in 2021 to 23.4%, in 2023 to 23.8% and in 2025 to 24.2%. **Diabetes** prevalence could increase from 16.3 per 100,000 to 17.2 in 2021, 17.6 in 2023 and 18 in 2025. This equates to 866 residents diagnosed with diabetes in 2015, 870 in 2021, 875 in 2023 and 880 in 2025. **Fast Food.** This indicator provides a measure of healthy food access and environmental influences on dietary behaviors. This indicator has significantly increased from 2010, when Los Alamos County had a rate of 44.6/100,000 and 2014 at 55.2/100,000. New fast food options have since opened in Los Alamos County. The lack of healthy food choices could be a factor in this emerging risk.

#### *(2) Lack of Affordable and Acceptable Housing Stock*

Almost 14% (13.8%) of Los Alamos County residents or 1,036 report housing affordability at the United States Housing & Urban Development (HUD) level of 'cost-burdened' or 30% or more of income to housing costs. In addition to this high housing burden, there is lack of acceptable housing stock, with an anticipated increase in new entrants to Los Alamos County.

Of the 1,036 households in Los Alamos County that are cost burdened, equivalent to 14% of the total, 502 or 48% are rental households, 40% are owner occupied households with a mortgage and 12% are owner occupied with no mortgage. Alternatively, as a percent of total household by these 3 types, 25% of rental households are cost burdened; 12% of owner occupied households with a mortgage and only 6% of owner occupied households with no mortgage.

A specific subset that needs resources with low housing cost burden is the growing senior component (65 years of age and over) with large houses and little to no family support structure.

The plight of Los Alamos is uniquely at the mid-level, with housing shortages acutely felt by middle income levels. Most new housing developments are either market rate, start at +/- \$400,000, or targeting incomes of \$60,000 or less for a family of four. This leaves a supply gap of housing for income ranges of \$60,000 - \$100,000, the so called 'missing middle housing'.

#### *(3) Culture of Alcohol Acceptance & Drug Use: Substance Use*

**Drug Overdose Mortality.** Potentially the most troubling indicator, with a dramatic increase from 2013 to 2017, the last recorded year (20.2% to 31.8% or 29 deaths). This statistic, if unchecked, will rise to even more alarming rates, to 33 per 100,000 in 2021 (30 deaths), 33.7 per 100,000 in 2023 (31 deaths) and 34.3 per 100,000 in 2025 (32 deaths).

**Alcohol-Related Deaths.** This rate approaches that of the U.S. and while lower than New Mexico, the State 'enjoys' a consistent #1 ranking for most alcohol-related deaths for the past ten years. There were 18 alcohol-related deaths in 2017, projected to increase to 20 in 2021, 21 in 2023, and 22 in 2025.

*(4) Mental Health: High Stress/Anxiety in Total Population/ Focus on Needs of New Residents*

There are high rates of stress/anxiety and depression reported, yet all are normal or less than New Mexico or the U.S., even age-stratified by tweens/teens, adults or seniors. Suicidal Ideation is higher, especially for teens at 14.5% compared to 9.4% for New Mexico. This equates to 195 annual attempts in 2017, projected to increase to 200 in 2021, 202 in 2032 and 205 in 2025. Potential contributors to this risk include a high rate of new residents to Los Alamos County attributed to expansion of Los Alamos National Laboratory, and the referenced 'trailing spouses' or family resulting in social isolation and lack of systems of support, extended family supports.

*(5) Silent but Sizeable 'Near Poor' Population*

Almost 11% of working poor or 1,941 residents of Los Alamos County live at or below 185% of the Federal Poverty Level (FPL) with 2,079 or 11.5% at or below 200%.

While those at the 'poor – 100% of below (5.1% or 920) and extreme poor- 50% or below (2.1% or 386)' are few, the 'working poor' are sizable at almost 12%. This group is considered 'silent' since few self-acknowledge nor accept that they are 'poor' and qualify for assistance.

Nearly a quarter (23%) of Los Alamos therefore qualifies as 'working poor' although societal mores result in a lack of acknowledgement or awareness of this status. This is further complicated by the lack of awareness of social and healthcare resources. The subset of concern is females over 75 years of age comprising a high percentage (94%) of the 5.1% of Los Alamos population that live in poverty.

*(6) Demographic groups of concern*

**Two demographic groups are increasing, both presented significant health and social service gaps.** *There is growth in two population segments of Los Alamos County that is stressing the need for social, mental and physical health resources.*

*Significant and Growing Senior Population*

Almost 20% (18.6%) of Los Alamos residents are 'seniors' or 65 years and older. This is projected to dramatically increase in 2021 to 19.5% (3,614), in 2023 to 20.5% (3,723) and to 21% in 2025 (3,734). Most concerning is the percent of seniors living in poverty (5.1%) with the majority female (94%) and most of those 75 years and older. These issues in addition to social isolation, worry over finances and lack of family support in the region add to mental health concerns.

*Emerging risk issues with a growing population of Tweens (10-12) and Teens (13-17)*

Emerging risk issues for tweens (10-12 years of age) and Teens (13-17 years of age) include exposure to risk factors through social media, easy access to alcohol at the 8<sup>th</sup> grade level and bullying by peers at school and on line. In addition, unauthorized use of prescription drugs and inhalants were reported. This group constitutes 13.4% of Los Alamos residents (1,166 or 6.2% are Tweens, 1,345 or 7.2% are Teens). Incidents of homelessness are reported at higher age levels of adolescence (17 and above) with frequent couch-surfing (staying temporarily in a series of other people's homes or moving from one temporary housing arrangement to another) or sleeping in cars. This was most commonly reported among teens that declared as LGBTQ+.

*(7) Lack of affordable and available childcare*

This issue was referenced by parents as a deficit to significant part-time or full-time employment. It was also cited by Grandparents raising Grandchildren and by Parents with Special Needs Children. Lack of universal pre-Kindergarten or Head Start programs in Los Alamos and limited space in existing daycare programs was provided by Focus Group participants. Lack of a Head Start program

was also cited in the Socioeconomic Profile compared to 8.2 per 10,000 per population in New Mexico and 7.2 in the United States.

## KEY PERFORMANCE INDICATORS

FINDING	KEY PERFORMANCE INDICATOR
<b>1. Codified MOUs, referral relationships for Obstetrics and other specialized services with awareness by Los Alamos County residents</b>	<ul style="list-style-type: none"> <li>• Development of MOU/Referral for OB Services</li> <li>• MOU for Specialized Services with Los Alamos Medical Center (LAMC)</li> <li>• Study of Birthing Center feasibility</li> <li>• Feasibility study of Branch OB Office with Health System</li> </ul>
<b>2. Increased preventive health screening</b>	<ul style="list-style-type: none"> <li>• Increased LAMC health screening events</li> <li>• Increased LANL health screening events</li> <li>• Increase in Primary Care availability</li> </ul>
<b>3. Enhanced mental health and substance use access</b>	<ul style="list-style-type: none"> <li>• Service Availability</li> <li>• Reduced or Eliminated Wait Time for Appointments for mental health treatment and substance abuse rehabilitation</li> <li>• Reduced Alcohol-related disease/injury/death</li> </ul>
<b>4. Develop Acclimation program for new residents of Los Alamos County with focus on LANL or other employees, foreign nationals, trailing spouses, children</b>	<ul style="list-style-type: none"> <li>• Call or Approach to new Residents to help with Acclimation and identifying/meeting their needs</li> <li>• Publicity by Major Employers of LAC Resources</li> <li>• Invitation to access LAC Resources paired to new resident profile</li> <li>• Prevention, risk reduction, and education and mental health support</li> </ul>
<b>5. Create Centralized Health &amp; Human Services Center for colocation of physical health, behavioral health and social service resources</b>	<ul style="list-style-type: none"> <li>• Review of Potential Space for Centralization</li> <li>• Discussion of phasing services into existing building in centrally located area</li> </ul>
<b>5. Create 'Tween' Activity Center for 6<sup>th</sup> to 8<sup>th</sup> grade youth</b>	<ul style="list-style-type: none"> <li>• Creation of Tween Activity Center for 6<sup>th</sup> to 8<sup>th</sup> graders</li> </ul>
<b>6. Change title of 'Social Services' to 'Health &amp; Human Services' similar to Rio Arriba County</b>	<ul style="list-style-type: none"> <li>• Renamed to Health &amp; Human Services</li> <li>• Publicized with updated Resource Directory</li> </ul>
<b>7. Strengthen the Health Care Assistance Program (HCAP) coverage to include preventive screening measures, similar to that of Sandoval County.</b>	<ul style="list-style-type: none"> <li>• Publicity about resources and eligibility criteria for programs including preventive screenings</li> <li>• Coordination for preventive screenings for non-eligible in Los Alamos County with efforts by LAMC and LANL.</li> </ul>

## AMENDMENT TO HEALTH SERVICES GAP ANALYSIS GIVEN COVID-19 SITUATION

*This amendment was created by the Community Services Department to reflect the extraordinary situation created by the emergence of the COVID-19 epidemic at the end of the Health Services Gap Analysis. This epidemic halted end of project activities including two (2) planned focus groups—College-age individuals at University of New Mexico-Los Alamos and employees at Los Alamos National Laboratory. It also adversely impacted the ability of the Health Services Gap Analysis Steering Committee to physically convene to refine this Report.*

As most States, Cities, and Counties across the country continue to be affected by COVID-19, Los Alamos County New Mexico has experienced similar issues. With only fourteen<sup>1</sup> diagnosed cases, the County has followed State and Federal Guidelines to prevent any further infections.

On March 10, 2020, Los Alamos County began taking precautions and communications with its constituents before the State of New Mexico ordered a stay-at-home order. In collaboration with the New Mexico Department of Health, Los Alamos County hosted its first COVID-19 public screening. Donna Casados, Social Services Manager addressed residents to thank them for their social distancing efforts and encouraged the community to follow the advice provided by the Health Department.

The COVID-19 pandemic has also affected KSA and their ability to complete two tasks of this engagement.

1. Meeting with the local hospital
  - a. The goal of meeting with the local hospital leadership team was to identify ways in which the hospital and the county could increase collaboration and transparency.
  - b. Identify ways in which the hospital and the county can work together at closing the local healthcare gaps, especially in Primary Care, Pediatrics, Mental Health among others.
2. Early adulthood focus group to identify the following:
  - a. Identify healthcare impacts affecting individuals in early adulthood.
  - b. Identify any housing-related issues
  - c. Assist in providing tactical training skills for individuals who may not pursue college or professional job.

Los Alamos County is interested in identifying possible systemic impacts due to COVID-19. As most of this analysis was performed pre-pandemic, this report will not address those impacts or gaps. As previously identified, Los Alamos County citizens have reported isolation as a healthcare concern with an impact on Mental/ Behavioral Health. Due to a lack of mental health providers and existing social isolating guidelines, Los Alamos County has expressed the interest of exploring telehealth as a source to address healthcare needs for citizens of Los Alamos County.

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<sup>1</sup> <https://www.msn.com/en-us/news/coronavirus?ocid=msedgdhp>, accessed 7/17/2020

## APPENDICES

APPENDIX	DESCRIPTION
<b>Appendix A: STEERING COMMITTEE NOTES</b>	January 6, February 11 and March 4, 2020
<b>Appendix B: PRIMARY RESEARCH</b>	(1) Summary of Findings from Key Informant Interviews (15 respondents)
	(2) Focus Group Findings: Summary (8 focus groups with 94 participants)
	(3) Benchmark Community Interviews (3 regional counties)
<b>Appendix C: SECONDARY RESEARCH: PROFILES</b>	(1) Demographics
	(2) Epidemiology
	(3) Socioeconomics
<b>Appendix D: GAP PRIORITY MATRIX</b>	
<b>Appendix E: RESOURCE INVENTORY</b>	
<b>Appendix F: CONTRAFACTUAL ANALYSIS</b>	

## APPENDIX A: STEERING COMMITTEE NOTES

### Steering Committee, Monday, January 6, 2020

Not present: Kristine Coblentz, Philip Gursky, Alicia Justus

#### Introductions:

- Elizabeth Allen – 5 years in Los Alamos, Municipal Judge
- Lori Coffelt (Los Alamos Medical Center) – 38 years, Chief Nursing Officer  
[47-bed acute medical center, has Obstetrics but small (250 births/year and one OB/GYN), Urologist, General Surgeon and Podiatrist. Orthopedic needs, but not enough to support a provider]
- Margi Harrach (Special Needs) – 16 years in Los Alamos, focus on disabled/special needs population
- Linda Matteson, Acting Director of Community Service Department
- Donna Casados /Deni Fell/Eloisa Sanchez (Social Services Division Staff)

#### Overview of Discussion

The Los Alamos National Lab (LANL) overshadows the town with 11,000 employees and an annual budget of \$2.45 billion. Forty percent (40%) of the laboratory's employees live in Los Alamos with the remainder commuting from Santa Fe, Espanola, Taos and Albuquerque. The Town works around the LANL schedule, not vice versa. Streets roll up at 5 p.m., many businesses are closed Friday to Monday.

#### Issues/Gaps:

- ✓ Reticent to admit Mental Health, Substance Abuse, Domestic Violence due to Security Clearance
  - This includes issues with Youth
- ✓ High Income, highly educated
- ✓ Now once employees retire from LANL, tend to stay post-retirement (used to leave)
- ✓ Has an Occupational Medicine department, Employee Assistance Program (up to 10 visits/year)
- ✓ Extensive travel to LANL, Long wait times, Kids in crisis
- ✓ Domestic violence is a big issue with high stigma attached, often not reported
- ✓ Verbal account of high sexual battery not reported
- ✓ Ethnic groups (Chinese, Russian) relocate to area for LANL, uncomfortable, not acculturated
- ✓ Post-doctoral largely foreign-born, on 2 to 3-year contracts

#### Medical:

- Presbyterian Medical Center in Espanola with Clinics and FQHCS
- For Los Alamos Medical Centers, issue with low volume of patient impacts provider supply, cost of living is high especially housing
- Staff often lives "Off the Hill"

#### CSCHCN (Children with Special Health Care Needs):

- Adults (Website by diagnosis—also data sent on 1/22 and pilot survey on 1/27)
- Age disparities (age out of LAPS-school systems as of 22<sup>nd</sup> birthday, often transition out of community due to lack of resources outside LAPS)
- Aging in Place is an issue with large (and growing) Senior community
- Recommend creation of a Special Needs Clinic to avoid out-of-town travel

Daycare: Deficit in available and affordable child care

Seniors: Often no family in New Mexico, no children to care for Seniors  
Granny dumping syndrome, Long-Term Care is scarce (1 Nursing Home, 1 Assisted Living) (Sombrillo Nursing Facility in Los Alamos, Aspen Ridge Assisted Living, Beehive Homes of White Rock)

Youth: Hang around town, often at Library, 3<sup>rd</sup> to 8<sup>th</sup> grade at Youth Activity Centers  
Some Y camps have grant funds to staff as teens

White Rock:

- Bedroom community for Los Alamos
- Library, Youth and Senior Activity Centers
- 2 Elementary Schools
- Larger tracts of land for housing
- Smaller population
- Reduced number of community events
- Ride or walk to town vs. Los Alamos

“On the Hill” housing in Los Alamos: Apartments, duplexes,

Cultural:

- Profile of Los Alamos resident is a \$1,000 car with a \$10,000 bike
  - Not materialistic
- Many millionaires
- Hikers/Skiers/Active

#### **Steering Committee #2, Wednesday, March 4, 2020**

*Lori Coffelt and Philip Gursky were not able to make this meeting.*

- Elizabeth Allen
- Donna Casados
- Kristine Coblantz
- Deni Fell
- Margi Harrach
- Alicia Justus
- Linda Matteson
- Eloisa Sanchez

The second steering committee meeting focused on the revised timeline to meet Los Alamos County budget process, review of summary findings from the three (3) profiles—Demographic, Socioeconomic and Epidemiologic, discussion of the Resource Inventory and identification of initial Gaps.

Upcoming events that were discussed with the group included Focus Groups and Benchmark Community Surveys.

## APPENDIX B1: SUMMARY OF FINDINGS FROM KEY INFORMANT INTERVIEWS

COMPOSITION	ROLE
<i>Key Informant Interviews for Health Services Gap Analysis</i>	
Linda Matteson	Acting Director, CSD
Donna Casados	Social Services Manager
Deni Fell	Social Services Case Coordination Specialist
Eloisa Sanchez	Social Services Health Care Specialist
Kristine Coblentz (also on Steering Committee)	Program Director, Healthy Schools Initiative Los Alamos Public Schools
Carrie Fanning	Executive Director, Family Strength Network
Bernadette Lauritzen	Executive Director, Los Alamos County Senior Centers
George Marsden	Director, Teen Center, Board Member for Los Alamos Pride, and Chair of DWI Planning Council
Jordan Redmond	Contractor for Youth Activity Center, Director of Los Alamos Family Council, JJAB Board President
Lisa Zuhn	Executive Director, Juvenile Justice Advisory Board (JJAB)

### THEMES:

- (1) **Housing shortage** – lack of adequate housing stock and issues with housing affordability
- (2) **Silent poor** – unwillingness or unawareness of poverty or social and health care resources to counter this, even among working poor (23% of total population). Females over 75 years of age have disproportionate poverty (94% of the 5.1% of individuals that live in poverty).
- (3) **Justice system** - issues related to substance use, domestic violence and teen risk factors with groups of concern comprised of youth, young adult males, and grandparents raising grandchildren.
- (4) **Education** - high expectations with related stress, need for activities for 6<sup>th</sup>-8<sup>th</sup> grade ‘tweens’ with emerging risks, ability to provide alternate life paths other than high achieving college and post-graduate education and acculturation for children moving to Los Alamos for parental work.
- (5) **Mental Health counseling** – issues with availability of counselors, high percentage of part-time staff, inadequate space to accommodate part-time counselors
- (6) **Family resources** – need to meet the acculturation issues of trailing spouses and foreign nationals with resources and socialization for young mothers that are socially isolated.
- (7) **LBGTQ+** - perception that there are no culturally appropriate services, concerns about safety, transitional homelessness and bullying.
- (8) **Seniors** – issues with social isolation, transportation, financial assistance, poverty and safety.
- (9) **Space** – compromised space for most services reported with lack of centralization or colocation.



	Community Services Division	Legal Resources	Juvenile Justice System	Education	Young Mothers with Children	LGBTQ+ Population	Seniors	Grandparents raising Grandchildren
Housing Issues	X						X	X
Silent Poor	X			X		X	X	X
Justice System	X							X
High Stress, Expectations		X		X	X	X		X
Mental Health	X			X	X		X	X
Substance Use	X			X				X
DWI, Legal Issues	X	X	X					X
Safety (Bullying, Social Isolation)			X	X	X	X	X	
Foreign Nationals				X	X			
Trailing Spouses				X	X			
Space	X		X	X	X			

## APPENDIX B2: FOCUS GROUPS

### SUMMARY:

Eight (8) focus groups were conducted, seven (7) of which were facilitated by KSA.

The groups were identified by the Steering Committee members in the inaugural meeting on January 6<sup>th</sup>, with invitees determined by Donna Casados, Social Services Manager. Further identification occurred in the Key Informant Interview process.

Ms. Casados reached out to the related agencies serving these populations, who recruited attendees, augmented by local marketing.

The groups of interest referenced were:

- (1) Grandparents raising Grandchildren
- (2) Providers serving individuals with Mental or Behavioral Health issues
- (3) Lesbian, Bisexual, Gay, Transgender, Queer+
- (4) Women with Small Children (BabyNet and Family Strengths Network)
- (5) Seniors
- (6) Parents/Guardians of Children with Special Healthcare Needs and Disabled
- (7) Teens (conducted by KSA at Teen Activity Center)
- (8) Teens (conducted by Kristine Coblentz at Leadership Class)

Further discussion occurred about possible Focus Groups at the March 4<sup>th</sup> Steering Committee meeting. The two groups referenced were employees of Los Alamos National Laboratory and College students at University of New Mexico-Los Alamos. Unfortunately, despite outreach on March 12<sup>th</sup> to both contacts, the COVID epidemic resulted in inability to host these sessions.

A summary of topics discussed in each Focus Group is displayed with an overview of Los Alamos County Staff, Steering Committee attendees and KSA facilitators provided.

## **FOCUS GROUP: 'GRANDPARENTS RAISING GRANDCHILDREN'**

**Participants:** Six (6)

**Date:** Monday, February 10, 2020

### **Staff and Consultants in Attendance:**

Donna Casados, Social Services Manager & Deni Fell, Social Services Case Coordination Specialist |  
Marcos Alcorn, KSA

### **Welcome, Introductions, Review Agenda**

Donna Casados of Los Alamos County welcomed everyone and announced the purpose of the meeting and introduced Marcos Alcorn. After introductions, Marcos briefly described the project and the focus group questions.

### **Topic 1. Access to Care**

- Access to Care was discussed with concerns about the lack of mental health providers to care for children with Post-Traumatic Stress Disorder (PTSD), often related to parental substance use and subsequent incarceration.
- Grandparents also suffer from PTSD by having their life plan altered with few providers available to deal with these issues.
- Lack of access to providers even when Grandparents/Grandchildren are insured is often due to being 'out of network'.

### **Topic 2. Legal Services**

- Grandparents reported that it is difficult to understand what their legal rights are in regards to their grandchildren, especially if they have suddenly 'inherited' their care without full guardianship.
- Participants reported that there is little legal assistance available to help with detailed rights given an absent parent (child).

### **Topic 3. Financial Assistance**

- New expenses have arisen such as childcare, food, education and health insurance issues that were not planned for due to unanticipated care of grandchildren with little resources available to provide guidance.

## **FOCUS GROUP: MENTAL HEALTH PROVIDERS**

**Participants:** Eleven (11)

**Date:** Tuesday, February 11, 2020

### **Staff and Consultants in Attendance:**

Donna Casados, Social Services Manager & Deni Fell, Social Services Case Coordination Specialist  
| Marcos Alcorn, KSA | Elizabeth Allen/ Alicia Justus, Steering Committee members

### **Welcome, Introductions, Review Agenda**

Donna Casados of Los Alamos County welcomed everyone and announced the purpose of the meeting and introduced Marcos Alcorn. After introductions, Marcos briefly described the project and the focus group questions.

### **Topic 1. Access to Care**

- There are inadequate number of providers to meet the demand for mental health counseling
- There is a long waiting list to see a provider.

- Local providers are often considered out of network, even for residents with health insurance.
  - Perception that there is no child psychiatry available in Los Alamos (full with waiting list, Brian Haigh).
- Topic 2. Access to Information**
- There is insufficient knowledge about resources available for mental health counseling.

**FOCUS GROUP: LBGTQ+ (LESBIAN, BISEXUAL, GAY, TRANSGENDER, QUEER+)**

**Participants:** Six (6)

**Date:** Monday, February 10, 2020

**Staff and Consultants in Attendance:**

Donna Casados, Social Services Manager & Deni Fell, Social Services Case Coordination Specialist | Marcos Alcorn, KSA -

**Welcome, Introductions, Review Agenda**

Donna Casados of Los Alamos County welcomed everyone and announced the purpose of the meeting and introduced Marcos Alcorn. After introductions, Marcos briefly described the project and the focus group questions.

**Topic 1. Access to Care**

- Perception that no providers in Los Alamos that are culturally sensitive to the needs of LGBTQ+.
- Long waiting lists to see a physician

**Topic 2. Access to Information**

- Not enough information to access available resources in Los Alamos County
- Not aware of services offered by Social Services or the Department of Health
- No knowledge of new Sexually Transmitted Disease Clinic provided by Department of Health
- STD education not provided in Los Alamos Public Schools until 11<sup>th</sup> grade (inaccurate, taught in 6<sup>th</sup> to 8<sup>th</sup> grade per State of New Mexico requirement)

**Topic 3: Housing**

- No homeless shelter for LGBTQ+ youth who are kicked out of their homes
- Perception and ‘word’ that LGBTQ+ frequently access temporary housing options

**Topic 4: Safety**

- LGBTQ+ suffer from bullying on the streets of Los Alamos.

**FOCUS GROUP: TEN (10) BABYNET & FAMILY STRENGTH NETWORK.** Baby Net is a subset from the Los Alamos Community Health Council and collaborates with Family Strength Network to address gaps.

**Participants:** Ten (10)

**Date:** Wednesday, February 12, 2020

**Staff and Consultants in Attendance:**

Linda Matteson, Acting Director of Community Services Department | Donna Casados, Social Services Manager/ Deni Fell, Social Services Case Coordination Specialist | Marcos Alcorn, KSA | Elizabeth Allen & Kristine Coblentz, Steering Committee members

**Welcome, Introductions, Review Agenda**

Donna Casados of Los Alamos County welcomed everyone and announced the purpose of the meeting and introduced Marcos Alcorn. After introductions, Marcos briefly described the project and the focus group questions.

**Topic 1. Access to Care**

- Not enough providers to meet demands of infants and children in Los Alamos
- Reduction of Obstetrics Service at Los Alamos Medical Center is access issue for pregnant women
- Lack of sufficient prenatal care providers in Los Alamos
- Not enough pediatricians for follow-up care
- Increase in home births in Los Alamos
- No women's health clinic in Los Alamos
- Perception that there is no mental health provider for postpartum depression in Los Alamos

**Topic 2. Financial Assistance**

- Working poor in Los Alamos despite unawareness of status or unwillingness to accept assistance
- Stigma in receiving public assistance
- Cost of Childcare is a significant issue as is availability of any part-time childcare
- Concerns that working poor parents and single parents have insufficient savings for emergencies

**Topic 3. Childcare/Education**

- No universal pre-Kindergarten or Head Start programs in Los Alamos
- No childcare for special needs children or infants
- Limited space in childcare programs

**FOCUS GROUP PARTICIPANTS: SENIORS**

**Participants:** Twelve (12)

**Date:** Wednesday, February 12, 2020

**Staff and Consultants in Attendance:**

Donna Casados, Social Services Manager & Deni Fell, Social Services Case Coordination Specialist |  
Marcos Alcorn, KSA

**Welcome, Introductions, Review Agenda**

Donna Casados of Los Alamos County welcomed everyone and announced the purpose of the meeting and introduced Marcos Alcorn. After introductions, Marcos briefly described the project and the focus group questions.

**Topic 1. Access to Care**

- No specialized care perceived as available in Los Alamos (referenced were orthopedics & ENT)
- No mental health providers that can deal with Seniors and their issues

**Topic 2. Safety**

- Most individuals in this focus group live alone
- Concerns about falling at home alone

**Topic 3. Financial**

- No financial assistance to purchase technology in case of emergency
- Individuals in this focus group live on fixed incomes with insufficient savings for emergencies

**Topic 4. Housing**

- 92% (11/12 participants) live alone in a big home

**Topic 5. Transportation**

- No transportation available in emergency situations or for regular medical appointments.

## **FOCUS GROUP: SPECIAL NEEDS**

**Participants:** Fifteen (15)

**Date:** Wednesday, February 12, 2020

### **Staff and Consultants in Attendance:**

Donna Casados, Social Services Manager & Deni Fell, Social Services Case Coordination Specialist  
| Marcos Alcorn, KSA | Margi Harrach & Kristine Coblenz, Steering Committee members

### **Welcome, Introductions, Review Agenda**

Donna Casados of Los Alamos County welcomed everyone and announced the purpose of the meeting and introduced Marcos Alcorn. After introductions, Marcos briefly described the project and the focus group questions.

#### **Topic 1. Access to Care**

- No providers in Los Alamos for services to special need populations
- Specifically, no neurologist, Physical/Occupational/Speech therapists – need to travel outside area

#### **Topic 2. Housing**

- No affordable housing options for individuals with special needs that live alone or in-home living for individuals that can't take care of themselves

#### **Topic 3. Financial**

- No employment opportunities for individuals living with special needs
- No financial assistance programs to assist with out-of-pocket expenses not covered by health insurance

#### **Topic 4. Transportation**

- Limited public transportation available to special needs individuals.

## **FOCUS GROUP: TEENS**

**Participants:** Ten-Twelve (10-12)

**Location:** Teen Activity Center

**Date:** Wednesday, February 12, 2020

### **Staff and Consultants in Attendance:**

Donna Casados, Social Services Manager & Deni Fell, Social Services Case Coordination Specialist  
| Marcos Alcorn & Tracy Kulik, KSA | Kristine Coblenz, Steering Committee member

### **Welcome, Introductions, Review Agenda**

Donna Casados of Los Alamos County welcomed everyone and announced the purpose of the meeting and introduced Marcos Alcorn. After introductions, Marcos briefly described the project and the focus group questions.

#### **Topic 1. Access to Information**

- Not enough information or easy access (i.e. website, electronic) for resources in Los Alamos
- Need format and method of access (i.e. smartphone) that works for them

#### **Topic 2. Space**

- Lack of outdoor space/ activities
- Lack of space other than Teen Center for indoor activities.

#### **Topic 3. Transportation**

- Public transit other than Atomic Transit needed with better schedules.

## **FOCUS GROUP: TEENS (LEADERSHIP CLASS)**

**Participants:** Twenty (20)

**Location:** Los Alamos High School

**Date:** Wednesday, March 11, 2020

### **Staff and Consultants in Attendance:**

Donna Casados, Social Services Manager & Deni Fell, Social Services Case Coordination Specialist  
| Kristine Coblentz, Steering Committee member

### **Welcome, Introductions, Review Agenda**

Kristine Coblentz facilitated this meeting and described the project and the focus group questions.

### **Topic 1. Access to Information**

- Information perceived as inaccurate
- Need transparency when gathering information

### **Topic 2. Space**

- Need areas where teens can get exercise
- Need areas where teens feel safe

### **Topic 3. Coping Skills**

- Teens perceive that they and peers lack self-confidence
- Teens perceive high ability to shame themselves or peers by others
- Need help with Time Management
- Need assistance in development and teen growth without ready supply of solution set.

### **Topic 4. Alternative Paths to Success**

- Careers
- Not all college preparation (testing and application for scholarship)
  - Art/Theater
  - Vocational
  - Culinary
  - Coding
  - Robotics

<b>Grandparents Raising Grandchildren</b>	<b>Mental/Behavioral Health</b>	<b>LGBTQ+</b>
<i>February 10, 2020</i>	<i>February 11, 2020</i>	<i>February 11, 2020</i>
<b>6 Individuals</b>	<b>11 Individuals</b>	<b>6 Individuals</b>
<p>1 – Access to Care</p> <ul style="list-style-type: none"> <li>• Lack of mental health providers to provide services to children with PTSD.</li> <li>• Lack of access to providers even with Health Insurance being out of network.</li> <li>• Grandparents suffering from PTSD by proxy not having providers available.</li> </ul> <p>2 - Legal Services</p> <ul style="list-style-type: none"> <li>• Hard to understand legal rights over the child.</li> <li>• No legal assistance to understand best avenue to care for child with absent parents.</li> </ul> <p>3 – Financial Assistance</p> <ul style="list-style-type: none"> <li>• New expenses arise such as childcare, health insurance issues when taking care of grandchildren.</li> </ul> <p>4 - Housing</p> <p>Concerns about losing existing housing due to new expenses such as childcare, etc.</p>	<p>1 – Access to Care</p> <ul style="list-style-type: none"> <li>• Not enough providers to meet demand.</li> <li>• Long waiting list to see a provider.</li> <li>• Local providers considered out of network for individuals with other health insurance.</li> <li>• No Child Psychiatry in Los Alamos.</li> </ul> <p>2 – Access to information</p> <ul style="list-style-type: none"> <li>• Not having information or access to resources in the community.</li> </ul>	<p>1 – Access to Care</p> <ul style="list-style-type: none"> <li>• No providers in Los Alamos culturally sensitive physicians to provide care.</li> <li>• Long waiting list to see a physician.</li> </ul> <p>2 – Access to information</p> <ul style="list-style-type: none"> <li>• Not having information or access to all available resources in the community.</li> <li>• Not knowing services available by social services and DOH.</li> <li>• No knowledge of newly STD clinic by DOH.</li> <li>• STD education is not provided in schools until the 11<sup>th</sup> grade.</li> </ul> <p>3 – Housing</p> <ul style="list-style-type: none"> <li>• No homeless shelter for LGBTQ+ youth who get kicked out of their homes.</li> </ul> <p>4 – Safety</p> <ul style="list-style-type: none"> <li>• Bullying in the streets of Los Alamos.</li> </ul>



<b>BabyNet &amp; Family Resources</b>	<b>Seniors</b>	<b>Special Needs</b>	
<i>February 12, 2020</i>	<i>February 12, 2020</i>	<i>February 12, 2020</i>	
<b>10 Individuals</b>	<b>12 Individuals</b>	<b>15 Individuals</b>	
<p>1 – Access to Care</p> <ul style="list-style-type: none"> <li>• Not enough providers to meet demand.</li> <li>• Reduced OB service at LAMC creating need.</li> <li>• Lack of prenatal care providers</li> <li>• Not enough pediatricians for follow up care.</li> <li>• Increase in homebirths in Los Alamos.</li> <li>• No women’s health clinic in Los Alamos.</li> <li>• No Mental Health providers for postpartum depression.</li> </ul> <p>2 – Financial Assistance</p> <ul style="list-style-type: none"> <li>• Working poor--Some Los Alamos residents not willing to accept assistance.</li> <li>• Stigma – Shame and vulnerability for receiving assistance.</li> <li>• Cost of Childcare and no part time childcare.</li> <li>• Concerns for working poor parents and single mothers not having enough savings for emergencies</li> </ul> <p>3 – Childcare/Education</p> <ul style="list-style-type: none"> <li>• No universal pre-K or Head Start programs</li> <li>• No childcare for special needs children/ infants</li> <li>• Limited space</li> </ul>	<p>1 – Access to Care</p> <ul style="list-style-type: none"> <li>• No specialized care such as orthopedic, ENT.</li> <li>• No Mental Health providers that understand how to deal with Seniors</li> </ul> <p>2 – Safety</p> <ul style="list-style-type: none"> <li>• Most individuals in the room live alone.</li> <li>• Concerns of falling.</li> </ul> <p>3 – Financial</p> <ul style="list-style-type: none"> <li>• No assistance to purchase technology to warn or call for assistance in an emergency.</li> <li>• Individuals living on fix incomes not having enough support/ money for emergency situations or impromptu situations or unexpected maintenance</li> </ul> <p>4 – Housing</p> <ul style="list-style-type: none"> <li>• 92% of individuals in group live alone in big homes.</li> </ul> <p>5 – Transportation</p> <ul style="list-style-type: none"> <li>• No transport in emergency or regular medical appointments.</li> </ul>	<p>1 – Access to Care</p> <ul style="list-style-type: none"> <li>• No providers in community for services to special need populations.</li> <li>• No Neurologist, PT, OT, ST. They have to travel out for these services.</li> </ul> <p>2 – Housing</p> <ul style="list-style-type: none"> <li>• No affordable housing options for individuals with special needs that live alone or in-home living for individuals who can’t take care of themselves.</li> </ul> <p>3 – Financial</p> <ul style="list-style-type: none"> <li>• No employment opportunities for individuals living with special needs.</li> <li>• No financial assistance programs to assist with out of pocket expenses not covered by health insurance.</li> </ul> <p>4 – Transportation</p> <ul style="list-style-type: none"> <li>• Limited public transportation services available to special needs individuals.</li> </ul> <p>5 – Education</p> <ul style="list-style-type: none"> <li>• At the end of the 19-20 school year in June 2020, we had 742 students with disabilities receiving services through IEPs. This included students in preschool through grade 12.</li> </ul>	
<b>Teens: Teen Center</b>	<b>Teens 2: LAHS</b>	<b>College/Working Young Adults</b>	<b>LANL</b>
<i>March 3, 2020</i>	<i>March 11, 2020</i>		
<b>10 throughout, 12 Individuals</b>	<b>20 individuals, age 13-17 ('Leaders')</b>	<b>Individuals 18-24</b>	<b>Employees</b>
<p>1 – Access to Information</p> <ul style="list-style-type: none"> <li>• Not having information or access to all available resources in the community.</li> <li>• Not having access to information in a format that would work for them.</li> </ul> <p>2 – Space</p> <ul style="list-style-type: none"> <li>• Lack of outdoor space/ activities available to all.</li> <li>• Lack of space other than the youth center available for indoor and outdoor activities.</li> </ul> <p>3 – Transportation</p> <ul style="list-style-type: none"> <li>• Public transit other than Atomic Transit with better schedules.</li> </ul> <p>4- Alternate Paths</p> <ul style="list-style-type: none"> <li>• Careers</li> <li>• Not all college preparation (testing and application for scholarship)</li> </ul>	<p>1 – Access to Information</p> <ul style="list-style-type: none"> <li>• Not having accurate information.</li> <li>• Having transparency when gathering information.</li> </ul> <p>2 – Space</p> <ul style="list-style-type: none"> <li>• Areas where teens can go out and exercise that are safe</li> </ul> <p>3 - Coping Skills</p> <ul style="list-style-type: none"> <li>• Not having self-confidence.</li> <li>• Ability to cope with shame placed by others.</li> <li>• Time Management.</li> <li>• Assist developing teen growth and not providing the answer/ solutions</li> </ul> <p>4- Alternate Paths to Success other than college/graduate</p>	<p><i>COULD NOT COMPLETE DUE TO COVID-19</i></p>	

**(1) SANDOVAL COUNTY**

**Monday, February 10, 2020 at 3 p.m. MST**

**Sandoval County (Bernalillo) – population 145,179**

**Participants:** Carlos Del Campo, Program Manager and Veronica Lopez, HCAP

**Staff and Consultants in Attendance:**

Donna Casados, Community Services Department, Social Services Manager

Marcos Alcorn, Principal, KSA

Tracy Kulik, CEO, KSA

Anne Ryan oversees Community Services

Community Services Director

Phone: (505) 867-7556

Email: aryan@sandovalcountynm.gov

The Community Services Department is one of the largest within the County and has three primary program areas: Community Health, Prevention and Intervention, and Senior Services. CSD also operates the Pena Blanca Multigenerational Center and the Sandoval County Ropes Course. The Senior Services provides a program for Frail & Elderly Seniors, with Child and Adult Protective Services (CPS & APS) operated by the state in Rio Rancho and Albuquerque.

**Community Health Services**

Carlos del Campo, Program Manager (with County for 4 years, prior with State-eligibility prior Healthcare for the Homeless in Albuquerque, prior at Lovelace Health System (ABQ)

Email: cdelcampo@sandovalcountynm.gov

Veronica Lopez, HCAP (with County for 8 years)

Overview of Community Health (Carlos):

- (1) Emergency Medical Services
- (2) State and County employee services
- (3) Dental
- (4) Medical (2 clinics in Rio Rancho and 1 in Cuba)
- (5) SNAP/LIHEP/TANF
  - a. SNAP – Supplemental Nutrition Assistance Program (food stamps)
  - b. LIHEAP – Low Income Home Energy Assistance Program
  - c. TANF – Temporary Assistance for Needy Families (old Welfare)
  - d. WIC – Women, Infants, Children Nutrition (Family Planning every other Thursday)
  - e. Immunizations
  - f. Harm Reduction
- (6) HCAP – Health Care Assistance Program

Outreach services are offered in elementary schools, family clinics and at the Mexican consulate in Albuquerque. The County Director (Anne Ryan) is flexible if individuals qualify for Medicaid or Medicare

(Parts A & B), and don't have Dental, they can access through the County or through Presbyterian Medical/ Dental Services

HCAP offers access to Physical, Behavioral, Dental Health in addition to Audiology services.

Full dental including dentures is available with Vision covered up to \$500/year.

For Medicaid lots of services. If Medicare, tied into QMB and SLMB if no MediGap coverage.

- To be **qualified** for the **QMB** program, you must be a **Medicare** beneficiary and: Be enrolled in **Medicare** Part A (Hospital or In-patient insurance), Be a resident of the state where you are applying for your **QMB** benefits, and Have limited income and assets or financial resources.
- Medicaid QMB is a type of Medicare savings program that helps pay Medicare premiums. The Medicaid QMB (Qualified Medicare Beneficiary Program) pays a portion of the Medicare Part A (hospital insurance) and/or Part B (medical insurance) premium.

SLMB – Specified Low Income Medicare Beneficiary for Dual Eligible (MA/MC) is defined as: "A Medicaid program that pays for Medicare Part B premiums for individuals who have Medicare Part A, a low monthly income, and limited resources."

Food Distribution occur through

- 1) Our Lady of Sorrows
- 2) St. Felix
- 3) Rio Rancho Senior Center

Use CHIS, the New Mexico Medicaid portal

**GAPS:**

- (1) Reimbursement for Oxygen
- (2) Coverage for Lab Work (blood, urine) – if more involved, refer to University of New Mexico
- (3) Outside Clinics (CT Scans, etc.) – again refer to University of New Mexico which uses Sliding Scale Fee Schedule
- (4) Behavioral Health – high Hispanic population, under-utilize benefit. Only 1-2 visits per month Benefit offers coverage up to \$1,500 per year (reduced to \$1,000 per year due to low use)
- (5) Dental Health – high utilization (was 100 claims/month, now 280-350). Dentures, Crowns in addition to cleaning.
- (6) No Jail care

## **(2) RIO ARRIBA COUNTY**

**Tuesday, February 11, 2020 at 12 noon MST**

**Lauren Reichelt**

**Health & Human Services Director**

**(505) 662-8068/ 753-3143**

**Participants:** Lauren Reichelt, Health & Human Services Director, Rio Arriba County

### **Staff and Consultants in Attendance:**

Donna Casados, Community Services Department, Social Services Manager

Marcos Alcorn, Principal, KSA

Tracy Kulik, CEO, KSA

**Rio Arriba County – population of 39,006 with large rural component, borders Colorado to South (90% of population or 35,000 live in the South portion of the County, largely in Espanola. Portion of Northern County are ‘frontier’ with 4 to 7 people per square mile)**

**(505) 662-8068/ 753-3143**

The Health Commons was structured as a one-stop shop designed to meet all of your health care needs in one easy trip. The building is divided into three wings: a medical wing; a behavioral health wing; and a maternal child health wing. Rio Arriba Health and Human Services Department shares the space with El Centro Family Health (a primary care clinic), and the Espanola Public Health Office (serving mothers and infants).

It is governed by the Rio Arriba Community Health Council is the designated Health and Human Services planning council for the Board of Rio Arriba County Commissioners. The RACHC maintains a regularly updated Comprehensive Community Health Profile and plan.

Capacity of Rio Arriba County to directly bill New Mexico Medicaid. There are three (3) FQHCs in Rio Arriba County, 9 community clinics and 9 Senior Centers. Presbyterian Medical Center, Espanola, is the local provider with referral options to Christus Health System in Santa Fe, New Mexico.

### **Three FQHCs:**

- (1) El Centro Family Health
- (2) Presbyterian Medical Center Rio Rancho Family Health
- (3) La Clinica del Pueblo

**Nine Senior Centers:** [congregate meals, home delivered meals, transport, recreation, adult day care (Espanola only), Personal Care Options – in home services (if qualified—Medicaid or Medicare eligible)]

- (1) Alcalde
- (2) Arboleda
- (3) Chama
- (4) Coyote
- (5) Dixon
- (6) El Rito
- (7) Espanola (Adult Day Care Center)
- (8) Tierra Amarilla
- (9) Truchas

Priority and Origination in Substance Abuse, specifically, Heroin Addiction. Started with SAMHSA grants to help deal with high heroin dependency with Medicaid to cover Substance Abuse treatment including a Residential Treatment Center.

Restructured healthcare delivery with current focus on the Jail system.

In addition, the County has high diabetes rates, large and growing senior population and Youth with substance use issues.

Low Cancer or Cardiac incidence/prevalence.

Services offered by Rio Arriba County include intensive care management of current or recovering substance users, with promotoras or Community Health Workers from the Hispanic population.

The past configuration of the triad (County, El Centro FQHC and Espanola Health Department) at their current location is changing since the volume has outstripped the space.

Nursing Home

Substance Use (Case Management) – County

Medical (El Centro)

Espanola (Maternal Child Health augmented by Las Cumbres)

### **GAPS**

- 1) Space
- 2) Sustainability – challenging for Counties to bill Medicaid, sustain grant funding
- 3) Interface with Law Enforcement in provision of services in Jail (education and certification programs)
- 4) CHW/Promotoras – Centennial, need to attach to FQHCs to bill Medicaid; RACHC as pilot to have County based program working with the Department of Financial Assistance of New Mexico
- 5) **Youth Services:**
  - a. Youth Needs – Juvenile probation (diversion program)
  - b. Communities in Schools (Espanola)
  - c. Parents cycling in and out of jails/ Grandparents assuming care of children or children becoming homeless or in shelters due to incarcerated parents)

HCAP – Sheila Vigil oversees this program for Rio Arriba County.

DWI (Louise Sanchez) [http://www.rio-arriba.org/departments\\_and\\_divisions/dwi.html](http://www.rio-arriba.org/departments_and_divisions/dwi.html)

Program Components:

- Prevention
- Enforcement
- Screening of DWI offenders
- Compliance Monitoring/Tracking of DWI Offenders
- Coordination/Planning and Evaluation
- Offender Programs
- Public Information and Education
- Treatment for DWI offenders (Intensive Outpatient Services)
- Detoxification Incarceration Treatment(Inpatient Services within the Tierra Amarilla Detention Center)
- Juvenile Justice Program (Working with adjudicated delinquent youth)

RAC STOP (Rio Arriba County Substance Treatment, Outreach & Prevention Program)

### **(3) SANTA FE COUNTY**

Wednesday, February 12, 2020 (was to be at 3:30 p.m. delayed due to snow)

Jennifer Romero

Health Care Assistance Administrative Program Manager

(505) 995-9525

**Participants:** Jennifer Romero, Health Care Assistance

Administrative Program Manager

#### **Staff and Consultants in Attendance:**

Donna Casados, Community Services Department, Social Services Manager

Marcos Alcorn, Principal, KSA

Tracy Kulik, CEO, KSA

#### **Santa Fe County - Population 150,056**

The Community Services Department is comprised of the following divisions:

1. Community Safety
2. Community Operations
3. Health Services
4. Senior Services

Santa Fe County Community Services does not provide direct healthcare services, it is more of a contract management operation. In that regard, Santa Fe County created the Santa Fe Connect. Santa Fe Connect is a network of navigators to link people to services and resources in the community. Currently Santa Fe County has two hospitals, three FQHC's (La Familia Medical Center, Pecos and First Choice) with around 669 individuals within the network.

Among the services most accessed by the Santa Fe County community through navigators are: Transportation, Basic Needs and Housing (Largest need). Currently they are 13 contracts under Santa Fe Connects with the goal of using the screening tool and electronic referral platform for community network and referrals.

Even though Santa Fe County has a good network of services it still has some gaps:

- Ambulance Services
- Cremation Assistance

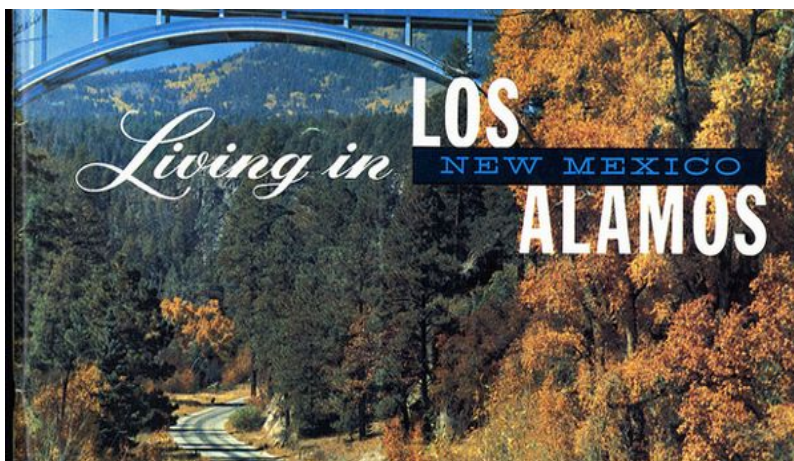
Currently structure of Santa Fe County Community Services is comprised of the following:

- Director
- Administrator Manager
- Internal Navigator
- External Navigator
- Behavioral Health Navigator

Services in a correctional facility are provided to inmates by a different contract not managed by this division.

# LOS ALAMOS

where discoveries are made



## HEALTH SERVICE GAP ANALYSIS DEMOGRAPHIC REPORT

A STATISTICAL DESCRIPTION OF THE POPULATION OF LOS ALAMOS COUNTY  
COMPARED TO NEW MEXICO AND THE UNITED STATES

*JANUARY 15, 2020*

## DEMOGRAPHIC PROFILE OF LOS ALAMOS COUNTY

This report summarizes relevant data about the demographics of residents of Los Alamos County. In all instances, the data for Los Alamos County is compared to New Mexico and the United States.

DESCRIPTION
<b>POPULATION</b>
General Population, 2017
Population by Gender, 2017
Population by Age, Number, 2017
Population by Age, Percent, 2017
<b>RACE/ETHNICITY</b>
Population by Race Alone, Number, 2017
Population by Race Alone, Percent, 2017
Population by Ethnicity, 2017
<b>CHANGE IN POPULATION FROM 2000 TO 2010 CENSUS</b>
Change in Total Population
Change in Population by Gender
Change in Population by Race
Change in Population by Ethnicity
<b>FAMILIES</b>
Total Families with Children
Families with Children by Race
Families with Children by Ethnicity

### DATA SOURCES:



- 14% of the population of Los Alamos, NM are seniors *Source: [Census.gov](https://www.census.gov)*
- 30% of those seniors living in Los Alamos, NM are living alone *Source: [Census.gov](https://www.census.gov)*
- 1% of Los Alamos senior households have an annual income of less than \$10k and 9% less than \$20k *Source: [Census.gov](https://www.census.gov) ACS*
- 36% of Los Alamos, NM residents 60 and over received food stamps in the last year *Source: [Census.gov](https://www.census.gov) ACS*
- The average Social Security Income in Los Alamos is **\$17,287/year** *Source: [Census.gov](https://www.census.gov) ACS*
- The median household income for a Los Alamos senior is **\$93,839** *Source: [Census.gov](https://www.census.gov) ACS*
- Compared to other states, New Mexico ranks **26th** for Long Term Care and **33rd** for America's Health Rankings *Source: [AmericasHealthRankings.org](https://www.AmericasHealthRankings.org)*
- There are **263** working seniors in Los Alamos *Source: [Census.gov](https://www.census.gov) ACS*
- **28%** of the seniors in Los Alamos are veterans *Source: [Census.gov](https://www.census.gov) ACS*




## DEMOGRAPHICS OF LOS ALAMOS COUNTY

DEMOGRAPHIC CHARACTERISTIC				NARRATIVE																																					
<ul style="list-style-type: none"> <li>General Population, 2017</li> </ul> <table border="1"> <thead> <tr> <th>AREA</th> <th>TOTAL POPULATION</th> <th>TOTAL LAND AREA</th> <th>POPULATION DENSITY (Persons Per Square Mile)</th> </tr> </thead> <tbody> <tr> <td>Los Alamos County, NM</td> <td>18,031</td> <td>109.20</td> <td>165.12</td> </tr> <tr> <td>New Mexico</td> <td>2,084,828</td> <td>121,309.99</td> <td>17.19</td> </tr> <tr> <td>United States</td> <td>321,004,407</td> <td>3,532,315.66</td> <td>90.88</td> </tr> </tbody> </table> <p><i>Source: U.S. Census Bureau, American Community Survey, 2013-17 5-year estimate.</i></p>				AREA	TOTAL POPULATION	TOTAL LAND AREA	POPULATION DENSITY (Persons Per Square Mile)	Los Alamos County, NM	18,031	109.20	165.12	New Mexico	2,084,828	121,309.99	17.19	United States	321,004,407	3,532,315.66	90.88	<p>A total of 18,031 people live in the 109.20 square mile report area known as Los Alamos County, New Mexico.</p> <p>Population density is 165.12 persons per square mile, more densely populated than the U.S. at 90.88 persons per square mile but significantly less than the New Mexico sparsely populated figure of 17.19 persons per square mile.</p>																					
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DEMOGRAPHIC CHARACTERISTIC				NARRATIVE
<ul style="list-style-type: none"> <li>Population by Race Alone, Number, 2017</li> </ul>				<p>Whites comprise the highest percentage of residents of Los Alamos County at 86.58%. This is a 12-13% higher figure than for New Mexico or the United States.</p> <p>Blacks are a very small fraction, with Asians constituting the second highest group, slightly higher than the U.S. but much higher than for New Mexico.</p> <p>Multiple races are equivalent to both New Mexico and the U.S.</p> <p>'Other' race is smaller than the U.S. and much lower than for New Mexico.</p> <p>Native Americans represent a much smaller percentage of Los Alamos County than for New Mexico.</p>
<b>Race (Population)</b>	<b>LOS ALAMOS COUNTY, NM</b>	<b>NEW MEXICO</b>	<b>UNITED STATES</b>	
White	15,611	1,547,843	234,370,202	
Black	55	42,187	40,610,815	
Asian	1,074	29,991	17,186,320	
Native American/ Alaska Native	212	197,191	2,632,102	
Native Hawaiian/ Pacific Islander	0	1,390	570,116	
Other Race	479	197,944	15,533,808	
Multiple Race	600	68,282	10,081,044	
<p><i>Source: U.S. Census Bureau, American Community Survey, 2013-17, 5-year estimate.</i></p> <ul style="list-style-type: none"> <li>Population by Race, Percentage, 2017</li> </ul>				
<b>Race (Percentage)</b>	<b>LOS ALAMOS COUNTY, NM</b>	<b>NEW MEXICO</b>	<b>UNITED STATES</b>	
White	86.58%	74.24%	73.01%	
Black	0.31%	2.02%	12.65%	
Asian	5.96%	1.44%	5.35%	
Native American/ Alaska Native	1.18%	9.46%	0.82%	
Native Hawaiian/ Pacific Islander	0%	0.07%	0.18%	
Other Race	2.66%	9.49%	3.28%	
Multiple Race	3.33%	3.28%	3.14%	
<ul style="list-style-type: none"> <li>Population by Ethnicity Alone, 2017</li> </ul>				<p>Los Alamos County residents of Hispanic or Latino ethnicity represent 17.25% of the population. This is equivalent to the U.S. but much lower (2.8 times) than that of New Mexico at 48.16%.</p> <p>The corollary, the non-Hispanic percentage is slightly higher but close to the U.S. at 82.75% compared to 82.4%.</p>
<b>Ethnicity (Percentage)</b>	<b>LOS ALAMOS COUNTY, NM</b>	<b>NEW MEXICO</b>	<b>UNITED STATES</b>	
Total Population	18,031	2,084,828	321,004,407	
Hispanic or Latino	3,110	1,004,103	56,510,571	
% Hispanic/Latino	17.25%	48.16%	17.6%	
Non-Hispanic	14,921	1,080,725	254,493,836	
% Non-Hispanic/ Latino	82.75%	51.84%	82.4%	
<p><i>Source: U.S. Census Bureau, American Community Survey, 2013-17, 5-year estimate</i></p>				

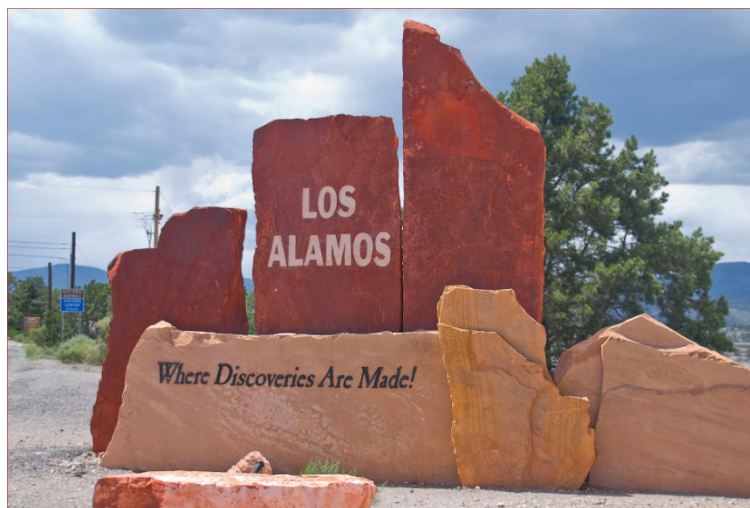
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<ul style="list-style-type: none"> <li>Change in Total Population, 2000-2010</li> </ul> 					<p><b>Population Change, Percent by Tract, US Census 2000 - 2010</b></p> <ul style="list-style-type: none"> <li>Over 10.0% Increase (+)</li> <li>1.0 - 10.0% Increase (+)</li> <li>Less Than 1.0% Change (+/-)</li> <li>1.0 - 10.0% Decrease (-)</li> <li>Over 10.0% Decrease (-)</li> <li>No Population or No Data</li> <li>Los Alamos County, NM</li> </ul>																				
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AREA	2000 CENSUS	2010 CENSUS	TOTAL POPULATION CHANGE	% POPLN CHANGE																					
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<ul style="list-style-type: none"> <li>Change in Population by Gender</li> </ul>  <p><i>Source of Data: U.S. Census Bureau, Decennial Census, 2000-2010, Source of Map: Geographic Census Tract</i></p>					<p>A total of 9,135 males reside in Los Alamos County, representing 50.66% of the total population. This is greater than the national average percentage of 49.23% and the New Mexico average of 49.5%.</p> <p>This percentage, however, is decreasing since the decennial census. Central and Eastern Los Alamos County showed the highest declines.</p> <p><b>Male Population, Percent by Tract, ACS 2013-17</b></p> <ul style="list-style-type: none"> <li>Over 52.0%</li> <li>50.1 - 52.0%</li> <li>48.1 - 50.0%</li> <li>Under 48.1%</li> <li>No Male Population Reported</li> <li>No Data or Data Suppressed</li> <li>Los Alamos County, NM</li> </ul>																				
<p>Explanation from initial Key Informant Interviews:</p> <ol style="list-style-type: none"> <li>(1) Lack of Employment Opportunities Outside of Lab</li> <li>(2) Untreated or treated elsewhere Behavioral Health Issues</li> <li>(3) Stigma related to other Social Issues</li> </ol>																									

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<ul style="list-style-type: none"> <li>• <i>Change in Population by Race Alone, 2000 to 2010</i></li> </ul>				<p>The population significantly increased in percent of Whites, decreased for 'Other Race' and increased for 'Multiple Races.'</p> <p>The low percentage of Black or American Indian made it hard to compute this data.</p>																													
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<ul style="list-style-type: none"> <li>• <i>Change in Population by Ethnicity Alone, 2000 to 2010</i></li> </ul>				<p>Los Alamos County uniquely lost population that was non-Hispanic from 2000 to 2010, with a decline of 5.46% unlike that of New Mexico and the United States that realized near 5% increases.</p>																													
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# LOS ALAMOS

where discoveries are made



## HEALTH SERVICES GAP ANALYSIS SOCIOECONOMIC PROFILE

A STATISTICAL DESCRIPTION OF THE ECONOMY OF LOS ALAMOS COUNTY  
AND ITS IMPACT ON THE SOCIAL STATUS OF RESIDENT  
COMPARED TO NEW MEXICO AND THE UNITED STATES

*JANUARY 24, 2020*

## SOCIOECONOMIC PROFILE OF LOS ALAMOS COUNTY

This report summarizes relevant data about the socioeconomics of residents of Los Alamos County. Where relevant, detail by gender, age group and/or race and ethnic background are provided. In all instances, the data for Los Alamos County is compared to New Mexico and the United States. The few areas for which Los Alamos County experiences lower socioeconomic status than New Mexico or the United States are noted in bold, red font.

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## SOCIOECONOMICS OF LOS ALAMOS COUNTY

SOCIOECONOMIC CHARACTERISTIC							NARRATIVE
<b>INCOME</b>							
<ul style="list-style-type: none"> <li>Median Family Income</li> </ul>							<p>This indicator reports median family income based on the latest 5-year American Community Survey estimates. A family household is any housing unit in which the householder lives with one or more individuals related to him or her by birth, marriage, or adoption. Family income includes the incomes of all family members age 15 and old.</p> <p><i>Source: U.S. Census Bureau, American Community Survey, 2013-2017 by Census Tract.</i></p>
<b>AREA</b>	<b>Total Family Households</b>	<b>Average Family Income</b>	<b>Median Family Income</b>				
Los Alamos	4,969	\$146,406	\$133,523				
New Mexico	491,535	\$75,588	\$57,436				
United States	78,298,703	\$95,031	\$70,850				
<ul style="list-style-type: none"> <li>Median Family Income by Family Composition</li> </ul>							
<b>AREA</b>	<b>Married without Children</b>	<b>Married with Children</b>	<b>Single-Males without Children</b>	<b>Single – Males with Children</b>	<b>Single-Females without Children</b>	<b>Single – Females with Children</b>	
Los Alamos	\$140,093	\$135,093	\$148,314	\$86,188	\$80,268	\$60,787	
New Mexico	\$71,186	\$73,143	\$46,279	\$36,176	\$40,201	\$22,209	
United States	\$81,108	\$91,621	\$55,687	\$41,054	\$46,626	\$26,141	
<ul style="list-style-type: none"> <li>Median Family Income by Race/Ethnicity of Householder</li> </ul>							
<b>AREA</b>	<b>White</b>	<b>Black</b>	<b>Asian</b>	<b>Amer. Indian</b>	<b>Multi Race</b>	<b>Hispanic/Latino</b>	
Los Alamos	\$136,296	No data	\$155,388	\$139,886	\$128,062	\$98,290	
New Mexico	\$75,318	\$53,759	\$73,388	\$36,630	\$58,188	\$45,675	
United States	\$79,837	\$46,688	\$92,200	\$47,085	\$62,458	\$48,932	
<ul style="list-style-type: none"> <li>Per Capita Income</li> </ul>							<p>Per Capita Income for Los Alamos County is \$52,125. This includes all reported income from wages, salaries, interest or dividends, public assistance, retirement and other sources.</p> <p><i>Source: U.S. Census Bureau, American Community Survey, 2013-17; 5-year estimate</i></p>
<b>AREA</b>	<b>Total Population</b>	<b>Total Income (\$)</b>		<b>Per Capita Income (\$)</b>			
Los Alamos	18,031	\$939,872,900		\$52,125			
New Mexico	2,084,828	\$52,656,257,500		\$25,256			
United States	321,004,407	\$10,008,063,515,700		\$31,177			
<ul style="list-style-type: none"> <li>Per Capita Income by Race Alone</li> </ul>							
<b>AREA</b>	<b>White</b>	<b>Black</b>	<b>Asian</b>	<b>American Indian</b>	<b>Multi Race</b>	<b>Other Race</b>	
Los Alamos	\$52,271	\$36,073	\$58,019	\$21,964	\$45,696	\$42,852	
New Mexico	\$27,804	\$24,859	\$31,911	\$14,359	\$17,224	\$18,064	
United States	\$34,221	\$21,117	\$36,158	\$18,822	\$17,948	\$17,051	



SOCIOECONOMIC CHARACTERISTIC							NARRATIVE
<b>INCOME</b>							
<ul style="list-style-type: none"> <li>Per Capita Income by Ethnicity Alone</li> </ul>							<p>Total income includes all reported income from wages and salaries as well as income from self-employment, interest or dividends, public assistance, retirement, and other sources. As defined by the US Census Bureau, a family household is any housing unit in which the householder is living with one or more individuals related to him or her by birth, marriage, or adoption. A non-family household is any household occupied by the householder alone, or by the householder and one or more unrelated persons.</p> <p><i>Source: US Census Bureau, American Community Survey. 2013-17</i></p>
<b>AREA</b>		<b>Total Hispanic/Latino</b>		<b>Total Non-Hispanic/Non-Latino</b>			
Los Alamos		\$33,420		\$56,024			
New Mexico		\$18,859		\$31,452			
United States		\$18,321		\$33,924			
<ul style="list-style-type: none"> <li>Families Earning over \$75,000</li> </ul>							
<b>AREA</b>		<b>TOTAL FAMILIES</b>	<b>FAMILIES EARNING OVER \$75,000/ YEAR</b>		<b>PERCENT FAMILIES EARNING OVER \$75,000/ YEAR</b>		
Los Alamos		4,969	3,923		78.95%		
New Mexico		491,535	184,380		37.51%		
United States		78,298,703	39,926,465		47.16%		
<ul style="list-style-type: none"> <li>Families Earning over \$75,000 by Race Alone, Total &amp; Percent</li> </ul>							
<b>AREA</b>	<b>White</b>	<b>Black</b>	<b>Asian</b>	<b>Amer. Indian</b>	<b>Multi Race</b>	<b>Other Race</b>	
Los Alamos	3,407 (78.5%)	9 (100%)	266 (85.3%)	31 (100%)	153 (100%)	57 (46.7%)	
New Mexico	155,900 (40.7%)	3,055 (35.2%)	3,166 (48.2%)	8,154 (21.3%)	3,868 (36.8%)	10,210 (23.3%)	
United States	30,255,983 (50.4%)	2,646,293 (29.7%)	2,363,628 (59%)	166,706 (29%)	617,568 (41.9%)	830,211 (25.8%)	
<ul style="list-style-type: none"> <li>Families Earning over \$75,000 by Ethnicity Alone, Total &amp; Percent</li> </ul>							
<b>AREA</b>		<b>Hispanic/Latino</b>		<b>Non-Hispanic/Non-Latino</b>			
Los Alamos		409 (62.4%)		3,514 (81.5%)			
New Mexico		59,201 (27.2%)		125,179 (45.7%)			
United States		3,749,216 (30%)		33,447,049 (50.1%)			
<ul style="list-style-type: none"> <li>Public Assistance Income</li> </ul>							<p>This indicator reports the households receiving public assistance. Public assistance includes general assistance and Temporary Assistance to Needy Families (TANF). Separate payments received for hospital or other medical care (vendor payments) are excluded. This does not include Supplemental Security Income (SSI) or noncash benefits such as Food Stamps.</p>
<b>AREA</b>		<b>Total Households</b>		<b>Total Households with Public Assistance and Percent</b>			
Los Alamos		7,525		11 (0.15%)			
New Mexico		770,435		21,421 (2.78%)			
United States		118,825,921		3,041,626 (2.56%)			
<p><i>Source: US Census Bureau, American Community Survey. 2013-17</i></p>							

SOCIOECONOMIC CHARACTERISTIC				NARRATIVE
<b>HEALTH INSURANCE</b>				
<ul style="list-style-type: none"> <li>Persons eligible for, and receiving, Medicaid, 2017</li> </ul>				<p>This indicator reports the percentage of the population with insurance enrolled in Medicaid (or other means-tested public health insurance). This indicator is relevant because it assesses vulnerable populations which are more likely to have multiple health access, health status, and social support needs; when combined with poverty data, providers can use this measure to identify gaps in eligibility and enrollment.</p>
<b>AREA</b>	<b>TOTAL POPULATION (For Whom Health Insurance Can Be Determined)</b>	<b>Population with Any Health Insurance</b>	<b>Population and Percent Receiving Medicaid</b>	
Los Alamos	17,947	17,171	885 (5.2%)	
New Mexico	2,050,101	1,793,939	606,373 (33.8%)	
United States	316,027,641	282,850,495	61,856,728 (21.9%)	
<ul style="list-style-type: none"> <li>Population receiving, Medicaid by Age Group (# and %), 2017</li> </ul>				
<b>AREA</b>	<b>Under Age 18</b>	<b>18-64</b>	<b>65+</b>	
Los Alamos	250 (5.6%)	474 (4.5%)	161 (5.3%)	
New Mexico	285,626 (54.3%)	270,069 (22.5%)	50,678 (15.7%)	
United States	29,582,082 (38%)	25,886,378 (13.5%)	6,388,268 (13.8%)	
<p><i>Source: US Census Bureau, American Community Survey. 2017.</i></p>				
<ul style="list-style-type: none"> <li>Uninsured, by Number and Percent, 2017</li> </ul>				<p>The lack of health insurance is considered a <b>key driver</b> of health status. This indicator reports the percentage of residents without health insurance coverage. Lack of insurance is a primary barrier to healthcare access including regular primary care, specialty care, and other services that contributes to poor health status.</p>
<b>AREA</b>	<b>Total Population (for whom insurance is determined)</b>	<b>Population without Medical Insurance</b>	<b>Percent without Medical Insurance</b>	
Los Alamos	17,947	776	4.32%	
New Mexico	2,051,101	256,162	12.5%	
United States	316,027,641	33,177,146	10.5%	
<p><i>Source: US Census Bureau, Small Area Health Insurance Estimates. 2017.</i></p>				
<ul style="list-style-type: none"> <li>Uninsured Children, 2017</li> </ul>				<p>This indicator reports the percentage of children under age 18 without health insurance coverage. Los Alamos County children are half as likely as New Mexico or United States children to be uninsured.</p>
<b>AREA</b>	<b>Total Population (Under age 18)</b>	<b>Population with Medical Insurance</b>	<b>Population without Medical Insurance</b>	
Los Alamos	4,667	4,561 (97.7%)	106 (2.4%)	
New Mexico	508,395	481,184 (94.7%)	27,211 (5.3%)	
United States	76,244,403	72,436,020 (95%)	3,808,383 (5%)	

SOCIOECONOMIC CHARACTERISTIC							NARRATIVE
<b>HEALTH INSURANCE</b>							The disparity in gender is among males with an uninsured rate 1.7 times higher than females. This disparity is standard across the New Mexico and U.S. regions.
<ul style="list-style-type: none"> <li>Uninsured Population by Gender, 2017</li> </ul>							
<b>AREA</b>	<b>Total Uninsured Males (# and %)</b>			<b>Total Uninsured Females (# and %)</b>			
Los Alamos	490 (5.4%)			286 (3.2%)			
New Mexico	138,908 (13.8%)			117,254 (11.2%)			
United States	17,944,127 (11.6%)			15,233,019 (9.4%)			
<ul style="list-style-type: none"> <li>Uninsured Population by Age Group, 2017</li> </ul>							The highest rates of uninsured are for adults ages 18-64. Access to Medicare and the Children's Health Insurance Program lower the uninsured rates for these ages.
<b>AREA</b>	<b>Under Age 18</b>	<b>Age 18-64</b>		<b>Age 65+</b>			
Los Alamos	2.1%	6.4%		0.5%			
New Mexico	6.6%	18.1%		1.2%			
United States	5.7%	14.8%		0.9%			
<ul style="list-style-type: none"> <li>Uninsured Population by Race Alone, Percent</li> </ul>							The highest uninsured rates are 'Other Race' with similar disparities at the State and national levels. The lower uninsured rate for Native Americans in Los Alamos is commendable.
<b>AREA</b>	<b>Non-Hispanic WHITE</b>	<b>Non-Hispanic BLACK</b>	<b>Asian</b>	<b>Native American</b>	<b>Other Race</b>	<b>Multi Race</b>	
Los Alamos	4%	0%	0%	2.4%	21.8%	6.5%	
New Mexico	7%	9.6%	7.5%	25%	17.8%	10.3%	
United States	7.2%	12.3%	9%	21.6%	23.6%	9.2%	
<ul style="list-style-type: none"> <li>Uninsured Population by Ethnicity Alone, Percent</li> </ul>							Hispanic and Latino have higher uninsured rates at all three geographic areas, including Los Alamos County in which Hispanics have 1.9 times the uninsured rates as non-Hispanics.
<b>AREA</b>	<b>Total Hispanic/Latino (# and %)</b>			<b>Total Non-Hispanic/non-Latino (# and %)</b>			
Los Alamos	218 (7.1%)			558 (3.8%)			
New Mexico	145,188 (14.7%)			110,974 (10.5%)			
United States	11,829,368 (21.2%)			21,347,779 (8.2%)			
<i>Source: US Census Bureau, Small Area Health Insurance Estimates. 2017.</i>							

SOCIOECONOMIC CHARACTERISTIC					NARRATIVE	
<b>POVERTY RATES</b>						
<ul style="list-style-type: none"> <li>Population Below 50% of Federal Poverty Level (FPL) – EXTREME, 2017</li> </ul>					<p>In Los Alamos County, 2.1% or 386 individuals live in households with income below 50% of the Federal Poverty Level (FPL). Below 50% of FPL is considered 'extreme'.</p>	
<b>AREA</b>	<b>Total Population</b>	<b>Population at or Below 50% FPL</b>	<b>% at or Below 50% FPL</b>			
Los Alamos	18,031	386	2.1%			
New Mexico	2,084,828	186,825	9%			
United States	321,004,407	20,276,204	6.3%			
<p>Source: US Census Bureau, American Community Survey. 2013-17.</p> <ul style="list-style-type: none"> <li>Population Below 100% of FPL - Poor, 2017</li> </ul>					<p>Poverty is considered a <i>key driver</i> of health status. In Los Alamos County, 5.1% or 920 individuals live in households with income below the Federal Poverty Level (FPL).</p>	
<b>AREA</b>	<b>Total Population</b>	<b>Population at or Below 100% FPL</b>	<b>% at or Below 100% FPL</b>			
Los Alamos	18,031	920	5.1%			
New Mexico	2,084,828	420,293	20.2%			
United States	321,004,407	45,650,345	14.2%			
<ul style="list-style-type: none"> <li>Population below 100% by Gender, 2017</li> </ul>					<p>The population living at or below 100% of the Federal Poverty Level is considered as qualifying for Medicaid, and the ACA or Health Marketplace Exchange won't consider an application for health insurance coverage.</p>	
<b>AREA</b>	<b>MALE</b>	<b>FEMALE</b>	<b>Total Male Below 100% FPL</b>	<b>Total Female Below 100% FPL</b>		
Los Alamos	9,135	8,896	386 (4.3%)	534 (6%)		
New Mexico	1,032,086	1,052,742	192,619 (19.2%)	227,674 (21.9%)		
United States	158,018,753	162,985,654	20,408,628 (13.3%)	25,241,719 (15.8%)		
<ul style="list-style-type: none"> <li>Population below 100% of FPL by Race, 2017</li> </ul>					<p>Racial differences in Poverty Levels are evident only for Native Americans in Los Alamos County. This is in contrast to the disparities in poverty levels for Blacks and Multi-Race.</p>	
<b>AREA</b>	<b>White</b>	<b>Black</b>	<b>Native American</b>	<b>Asian</b>		<b>Multi Race</b>
Los Alamos	715 (4.6%)	0	30 (14%)	48 (4.5%)		20 (3.3%)
New Mexico	273,759 (18%)	9,459 (24%)	65,053 (33%)	2,896 (9.9%)		13,767 (20.6%)
United States	27,607,156 (12%)	9,807,009 (25.2%)	681,207 (26.8%)	2,011,217 (12%)	1,800,443 (18.4%)	
<ul style="list-style-type: none"> <li>Population below 100% of FPL by Ethnicity, 2017</li> </ul>					<p>For ethnicity, despite strong disparities for Hispanic/Latino in New Mexico and the United States, the poverty rate for Hispanics and Latinos in Los Alamos County, while significantly lower than the State and Nation, <b>is still twice that of non-Hispanic/non-Latinos.</b></p>	
<b>AREA</b>	<b>Male</b>	<b>Female</b>	<b>Total Hispanic/Latino Below 100% FPL</b>	<b>Total Non-Hispanic or Latino Below 100% FPL</b>		
Los Alamos	9,135	8,896	282 (9.2%)	638 (4.3%)		
New Mexico	1,032,086	1,052,742	244,409 (24.9%)	175,884 (16.6%)		
United States	158,018,753	162,985,654	12,269,402 (22.2%)	33,380,893 (13%)		

SOCIOECONOMIC CHARACTERISTIC				NARRATIVE
<b>POVERTY RATES</b>				
<ul style="list-style-type: none"> <li>Population Below 185% of FPL – living in debt, 2017</li> </ul>				<p>In Los Alamos County, 10.82% or 1,941 individuals are living in households with income below 185% of the Federal Poverty Level (FPL). This indicator is relevant because poverty creates barriers to access including health services, healthy food, and other needs that contribute to poor health status.</p>
<b>AREA</b>	<b>Total Population</b>	<b>Population at or Below 185% FPL</b>	<b>% at or Below 185% FPL</b>	
Los Alamos	18,031	1,941	10.8%	
New Mexico	2,084,828	804,773	38.6%	
United States	321,004,407	94,262,439	29.4%	
<ul style="list-style-type: none"> <li>Population Below 200% of FPL – qualify for ACA assistance, typically considered the ‘working poor’, 2017</li> </ul>				<p>This level of poverty may qualify individuals for a health insurance premium tax credit and potentially, a cost-sharing subsidy to lower monthly health insurance premiums in the ACA Health Marketplace Exchange.</p>
<b>AREA</b>	<b>Total Population</b>	<b>Population at or Below 200% FPL</b>	<b>% at or Below 200% FPL</b>	
Los Alamos	18,031	2,079	11.5%	
New Mexico	2,084,828	865,123	41.5%	
United States	321,004,407	102,523,670	31.9%	
<b>SOCIOECONOMIC CHARACTERISTIC</b>				
<b>EMPLOYMENT</b>				<b>NARRATIVE</b>
<ul style="list-style-type: none"> <li>Unemployment Rate, 2019</li> </ul>				<p>Total unemployment in Los Alamos County for October 2019 equals 288, or 3.1% of the civilian non-institutionalized population age 16 and older (non-seasonally adjusted). This indicator is relevant because unemployment creates financial instability and barriers to access including insurance coverage, health services, healthy food, and other necessities that contribute to poor health status.</p>
<b>AREA</b>	<b>Labor Force</b>	<b># Employed</b>	<b># and % Unemployed</b>	
Los Alamos	9,395	9,107	288 (3.1%)	
New Mexico	968,393	924,560	43,833 (4.5%)	
United States	165,638,906	160,033,858	5,605,048 (3.4%)	
<p><i>Source: US Department of Labor, Bureau of Labor Statistics. Oct. 2019</i></p>				
<ul style="list-style-type: none"> <li>Major Industries: <ul style="list-style-type: none"> <li>✓ Los Alamos National Lab (11,000 employees, 40% of whom live in Los Alamos)</li> <li>✓ Smith’s Food &amp; Drug</li> <li>✓ Los Alamos National Bank</li> <li>✓ Los Alamos Medical Center</li> <li>✓ National Security Technologies</li> <li>✓ Los Alamos County</li> <li>✓ Los Alamos Public Schools</li> <li>✓ Del Norte Credit Union</li> </ul> </li> </ul>				11,473

SOCIOECONOMIC CHARACTERISTIC				NARRATIVE
<b>EDUCATION</b>				
<ul style="list-style-type: none"> <li>Head Start</li> </ul>				<p>This indicator reports the number and rate of Head Start program facilities per 10,000 children under age 5. Head Start facility data is acquired from the US Department of Health and Human Services (HHS) 2018 Head Start locator. Population data is from the 2010 US Decennial Census.</p>
<b>AREA</b>	<b>Total Children Under 5 years</b>	<b>Head Start Programs</b>	<b>Head Start Program Rate (per 10,000)</b>	
Los Alamos	960	0	NA	
New Mexico	144,981	206	8.21	
United States	20,426,118	18,886	7.18	
<p>Source: US Department of Health &amp; Human Services, Administration for Children and Families. 2019.</p>				
<ul style="list-style-type: none"> <li>Student Reading Proficiency, 4<sup>th</sup> grade</li> </ul>				<p>This indicator reports the percentage of children in grade 4 whose reading skills tested below "proficient" level for the English Language Arts portion of the state-specific standardized test. An inability to read English is linked to poverty, unemployment, and barriers to healthcare access, and health literacy/education.</p>
<b>AREA</b>	<b>Total Students with Valid Test Scores</b>	<b>% Students Scoring Proficient or Better</b>	<b>% Students Not Scoring Proficient or Better</b>	
Los Alamos	269	57%	43%	
New Mexico	25,097	25.7%	74.3%	
United States	3,569,598	50.8%	49.2%	
<p>Source: US Department of Education, EDData. Accessed via DATA.GOV. 2016-17.</p>				
<ul style="list-style-type: none"> <li>High School Graduation Rates, 2017</li> </ul>				<p>Within the report area 87.5% of students are receiving their high school diploma within four years. This is greater than the Healthy People 2020 target of 82.4%. This indicator is relevant because research suggests education is one the strongest predictors of health (Freudenberg &amp; Ruglis, 2007)</p>
<b>AREA</b>	<b>Total Student Cohort</b>	<b>Total Diplomas Issued</b>		
Los Alamos	297	258 (86.9%)		
New Mexico	24,654	17,865 (72.5%)		
United States	3,095,906	2,688,701 (86.8%)		
<ul style="list-style-type: none"> <li>Population with No High School Diploma, 2017</li> </ul>				<p>There are 260 persons aged 25 and older without a high school diploma (or equivalency) in Los Alamos County. This represents 2% of the total population aged 25 and older. This indicator is relevant because educational attainment is linked to positive health outcomes.</p>
<b>AREA</b>	<b>Total Student Cohort</b>	<b>Total Diplomas Issued</b>		
Los Alamos	12,704	260 (2%)		
New Mexico	1,381,630	207,487 (15%)		
United States	216,271,644	27,437,114 (12.7%)		
<ul style="list-style-type: none"> <li>Population with Bachelor's Level Degree or Higher, 2017</li> </ul>				<p>65.5% of the population aged 25 and older, or 8,315 individuals in Los Alamos County have a Bachelor's level degree or higher.</p>
<b>AREA</b>	<b>Total Student Cohort</b>	<b>Total Diplomas Issued</b>		
Los Alamos	12,704	8,315 (65.5%)		
New Mexico	1,381,630	371,294 (26.9%)		
United States	216,271,644	66,887,603 (31%)		
<p>Source: US Census Bureau, American Community Survey. 2013-17.</p>				
<ul style="list-style-type: none"> <li>Bullying on School Property and Electronically, %, Grades 9-12, 2017</li> </ul>				<p>This self-reported indicator is troubling since it is significantly higher than that of New Mexico. In addition, the trend has increased since 2011 (measured every 2 years—2011 rates shown in parentheses.)</p>
<b>AREA</b>	<b>Bullying Percent on School Property</b>	<b>Bullying Percent Electronically</b>		
Los Alamos	31.5% (24.5%)	22.6% (18.9%)		
New Mexico	18.0%	13.7%		
<p>Source: Youth Risk &amp; Resiliency Survey, 2017.</p>				

**LOS ALAMOS PUBLIC SCHOOL (LAPS) SYSTEM**

<b>Elementary</b>	<b>To Date</b>
Pre School	108
K	254
1st	247
2nd	241
3rd	253
4th	282
5th	302
6th	306
<b>Total K-6</b>	<b>1885</b>
<b>Total Pre-6</b>	<b>1993</b>
<b>Homebound</b>	<b>2</b>
<b>Secondary</b>	
7th	295
8th	274
<b>LAMS Total</b>	<b>569</b>
TFA 9th	307
LAHS 10th	328
LAHS 11th	267
LAHS 12th	296
<b>TFA &amp; LAHS Total</b>	<b>1198</b>
<b>Total K-12</b>	<b>3083</b>
<b>Total Pre-12</b>	<b>3762</b>

**LEGEND:**

<b>Elementary</b>	(1) Aspen Elementary (2) Barranca Elementary (3) Chamisa Elementary (4) Mountain Elementary (5) Pinon Elementary	
<b>Middle</b>	LAMS	Los Alamos Middle School (Grades 7-8)
<b>Freshman</b>	TFA	Topper Freshman Academy (Grade 9)
<b>High School</b>	LAHS	Los Alamos High School (Grades 10-12)
School Grading:		<a href="https://laschools.net/academics/school-grading/">https://laschools.net/academics/school-grading/</a>

<b>Elementary</b>					
School	Grade	Classes	Totals		
A s p e n	K	3	50		
	1st	3	57	1-3 teachers	9
	2nd	3	54	Gr 1-3 Avg	19
	3rd	3	58	State Avg 1-3	22
	4th	3	69	4-6 teachers	9
	5th	3	76	Gr 4-6 Avg	25
	6th	3	76	State Avg 4-6	24
	<b>TOTAL</b>	<b>21</b>	<b>440</b>		
B a r r a n c a	PK 3	3	29		
	PK4	3	31		
	K	3	56		
	1st	3	59	1-3 teachers	9
	2nd	3	60	Gr 1-3 Avg	19
	3rd	3	56	State Avg 1-3	22
	4th	3	62	4-6 teachers	9
5th	3	76	Gr 4-6 Avg	22	
6th	3	62	State Avg 4-6	24	
	<b>Total K-6</b>	<b>21</b>	<b>431</b>		
	Pre School	3	60		
	<b>TOTAL</b>	<b>24</b>	<b>491</b>		
C h a m i s a	K	2	34		
	1st	2	33	1-3 teachers	6
	2nd	2	35	Gr 1-3 Avg	18
	3rd	2	37	State Avg 1-3	22
	4th	2	43	4-6 teachers	6
	5th	2	36	Gr 4-6 Avg	21
	6th	2	44	State Avg 4-6	24
	<b>TOTAL</b>	<b>14</b>	<b>262</b>		
M o u n t a i n	K	3	62		
	1st	3	62	1-3 teachers	9
	2nd	3	54	Gr 1-3 Avg	20
	3rd	3	64	State Avg 1-3	22
	4th	3	64	4-6 teachers	9
	5th	3	77	Gr 4-6 Avg	23
	6th	3	66	State Avg 4-6	24
	<b>TOTAL</b>	<b>21</b>	<b>449</b>		
P i n o n	PK 3	2	12		
	PK4	2	36		
	K	2	52		
	1st	2	36	1-3 teachers	6
	2nd	2	38	Gr 1-3 Avg	19
	3rd	2	38	State Avg 1-3	22
	4th	2	44	4-6 teachers	6
5th	2	37	Gr 4-6 Avg	23.2	
6th	2	58	State Avg 4-6	24	
	<b>Total K-6</b>	<b>14</b>	<b>303</b>		
	Pre- School	2	48		
	<b>TOTAL</b>	<b>18</b>	<b>351</b>		

Source: Los Alamos Public Schools, provided by Kristine Coblentz on 1/9/2020.

**SOCIOECONOMIC CHARACTERISTIC**

**NARRATIVE**

**Social Determinants of Health: “The conditions in which people are born, grow, live, work and age.”**  
**Studies indicate that from 40-60% of health status is based on social determinants versus quality health care.**

**HOUSING**

- Housing Cost Burden (30% or more of income)

AREA	Total Households	Cost Burdened Households
Los Alamos	7,525	1,036 (13.8%)
New Mexico	770,435	225,147 (29.2%)
United States	118,825,921	38,077,410 (32%)

Source: US Department of Housing and Urban Development. 2016

Almost 14% (13.8%) of households in Los Alamos County are considered to be ‘cost-burdened’ where 30% or more of annual income is allocated to housing costs. The information offers a measure of housing affordability and excessive shelter costs. The data also serve to aid in the development of housing programs to meet the needs of people at different economic levels.

- Housing Cost Burden by Type

AREA	Cost Burdened Households	Cost Burdened Rental Households	Cost Burdened Households with Mortgage	Cost Burdened Households no Mortgage
Los Alamos	1,036 (13.8%)	502	411	123
New Mexico	225,147 (29.2%)	110,262	89,328	25,557
United States	38,077,410 (32%)	20,138,321	14,130,580	3,808,509

This indicators shows households that spend more than 30% of household income on housing costs by Type of Household payment.

Of the 1,036 households in Los Alamos County that are cost burdened, equivalent to 14% of the total, 502 or 48% are rental households, 40% are owner occupied households with a mortgage and 12% are owner occupied with no mortgage.

- Housing Cost Burden by Rental

AREA	Rental Households	Cost Burdened Rental Households	% Cost Burdened Rental Households
Los Alamos	1,982	502	25.3%
New Mexico	247,505	110,262	44.6%
United States	42,992,786	20,138,321	46.8%

Alternatively, as a percent of total household by these 3 types, 25% of rental households are cost burdened; 12% of owner occupied households with a mortgage and only 6% of owner occupied households with no mortgage.

- Housing Cost Burden by Owner Occupied with Mortgage

AREA	Owner Occupied Households with Mortgage	Cost Burdened Owner Occupied with Mortgage	% Cost Burdened Owner Occupied with Mortgage
Los Alamos	3,388	411	12.1%
New Mexico	290,369	89,328	30.8%
United States	48,185,314	14,130,580	29.3%

- Housing Cost Burden by Owner Occupied with No Mortgage

AREA	Owner Occupied Households No Mortgage	Cost Burdened Owner Occupied No Mortgage	% Cost Burdened Owner Occupied No Mortgage
Los Alamos	2,155	123	5.7%
New Mexico	232,561	25,557	11%
United States	27,647,821	3,808,509	13.8%

Source: U.S. Census Bureau, American Community Survey, 2013-2017, 5-year estimates.

The plight of Los Alamos is uniquely at the mid-level, with housing shortages acutely felt by middle income levels. Most new housing developments are either market rate, start at +/- \$400,000, or targeting incomes of \$60,000 or less for a family of four. This leaves a supply gap of housing for income ranges of \$60,000 - \$100,000, the so called 'missing middle housing'.



SOCIOECONOMIC CHARACTERISTIC	NARRATIVE
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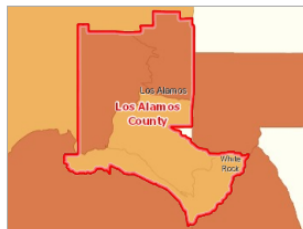
FOOD	
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- Food Insecurity Rate (Low Food Access)

AREA	Total Population	Population with Low Food Access (# & %)
Los Alamos	18,031	10,280 (57%)
New Mexico	2,084,828	685,387 (32.8%)
United States	321,004,407	69,266,771 (21.5%)

Source: US Census Bureau, County Business Patterns. Additional data analysis by CARES. 2016 and US Department of Agriculture, Economic Research Service, USDA - Food Access Research Atlas. 2015

This indicator reports the percentage of the population with low food access. Low food access is defined as living more than ½ mile from the nearest supermarket, supercenter, or large grocery store. Data are from the 2017 report, Low-Income and Low-Supermarket-Access Census Tracts, 2010-2015. This indicator is relevant because it highlights populations and geographies facing food insecurity.



Population with Limited Food Access, Percent by Tract, FARA 2015

- Over 50.0%
- 20.1 - 50.0%
- 5.1 - 20.0%
- Under 5.1%
- No Low Food Access
- Los Alamos County, NM

- Fast Food

AREA	Total Population	Fast Food Establishments (# & Rate/100,000)
Los Alamos	18,031	13 (72.42)
New Mexico	2,084,828	1,459 (70.9)
United States	321,004,407	237,922 (77)

This indicator provides a measure of healthy food access and environmental influences on dietary behaviors. This indicator has significantly increased from 2010, when Los Alamos County had a rate of 44.6/100,000 and 2014 at 55.2/1,000.



Fast Food Restaurants, Rate (Per 100,000 Pop.) by ZCTA, CBP 2016

- Over 100.0
- 75.1 - 100.0
- 50.1 - 75.0
- Under 50.1
- No Fast Food Restaurants
- Los Alamos County, NM

- Fast Food Restaurant Growth

Fast Food establishments in Los Alamos County have grown at a rapid pace over the past seven years, from 2010 to 2016.

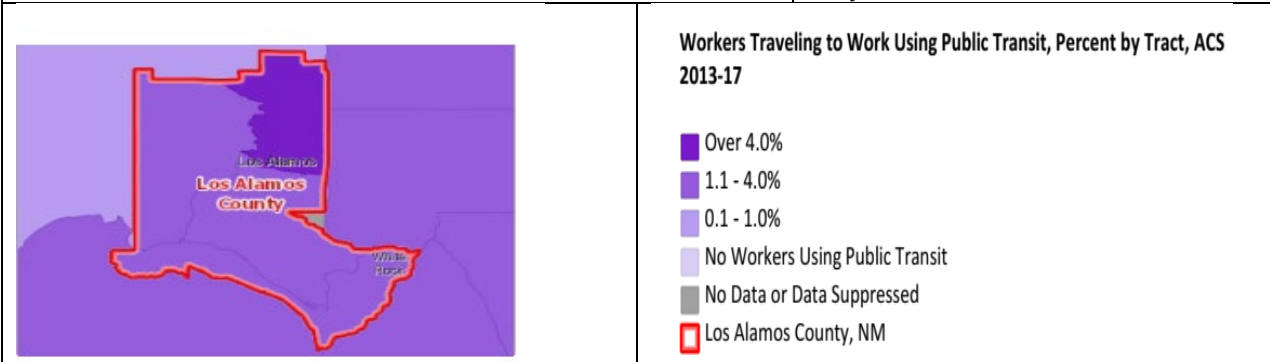
Fast Food Restaurants, Rate per 100,000 Population by Year, 2010 through 2016

Report Area	2010	2011	2012	2013	2014	2015	2016
Los Alamos County, NM	44.57	44.57	61.28	55.71	55.71	72.42	72.42
New Mexico	65.41	66.82	69.35	70.13	70.37	70.8	70.85
United States	69.14	70.04	72.84	73.68	74.07	75.59	77.06

SOCIOECONOMIC CHARACTERISTIC			NARRATIVE
<b>FOOD (continued)</b>			
<ul style="list-style-type: none"> <li>Population receiving SNAP benefits (Supplemental Nutrition Assistance Program)</li> </ul>			<p>An estimated 115 or 1.53% households receive Supplemental Nutrition Assistance Program (SNAP) benefits. The value for the report area is less than the national average of 12.7%. This indicator is relevant because it assesses vulnerable populations which are more likely to have multiple health access, health status, and social support needs; when combined with poverty data, providers can use this measure to identify gaps in eligibility and enrollment.</p>
<b>AREA</b>	<b>Total Population</b>	<b>Population Receiving SNAP Benefits (# &amp; %)</b>	
Los Alamos	18,031	553 (3.1%)	
New Mexico	2,084,828	465,538 (22.3%)	
United States	321,004,407	44,567,069 (13.9%)	
<p style="text-align: center;"><b>Percent of Los Alamos County Residents receiving SNAP Benefits 2006-2015</b></p>			
<ul style="list-style-type: none"> <li>Children Eligible for Free/Reduced Price Lunch</li> </ul>			<p>Within the report area 441 public school students or 12.04% are eligible for Free/Reduced Price lunch out of 3,662 total students enrolled. This indicator is relevant because it assesses vulnerable populations which are more likely to have multiple health access, health status, and social support needs. When combined with poverty data, providers can use this measure to identify gaps in eligibility and enrollment.</p>
<b>AREA</b>	<b>Total Population</b>	<b>Population Eligible for Free Lunch (# &amp; %)</b>	
Los Alamos	3,662	441 (12%)	
New Mexico	336,053	239,689 (71.3%)	
United States	50,737,716	24,970,187 (49.2%)	
<p><i>Source: US Department of Agriculture, Food and Nutrition Service, USDA - SNAP Retailer Locator. Additional data analysis by CARES. 2019.</i></p>			
<ul style="list-style-type: none"> <li>Food Access-WIC Authorized Stores</li> </ul>			<p>This indicator reports the number of food stores and other retail establishments per 100,000 population that are authorized to accept WIC Program (Special Supplemental Nutrition Program for Women, Infants, and Children) benefits and that carry designated WIC foods and food categories. This indicator provides a measure of food security and healthy food access for women and children in poverty as well as environmental influences on dietary behaviors.</p>
<b>AREA</b>	<b>Total Population</b>	<b>WIC Authorized Stores (# &amp; Rate/100,000)</b>	
Los Alamos	18,031	<b>2 (11/100,000)</b>	
New Mexico	2,084,828	370 (17.7/100,000)	
United States	321,004,407	50,042 (15.6/100,000)	
<p><i>Source: US Department of Agriculture, Economic Research Service, USDA - Food Environment Atlas. 2011.</i></p>			

SOCIOECONOMIC CHARACTERISTIC			NARRATIVE
<b>TRANSPORTATION</b>			
<ul style="list-style-type: none"> <li>Households with no Motor Vehicle</li> </ul>			This indicator reports the percentage of households with no motor vehicle.
<b>AREA</b>	<b>Total Occupied Households</b>	<b>Households with No Motor Vehicle (# &amp; %)</b>	
Los Alamos	7,525	265 (3.5%)	
New Mexico	770,435	44,387 (5.8%)	
United States	118,825,921	10,468,418 (8.8%)	
<ul style="list-style-type: none"> <li>Use of Public Transportation</li> </ul>			This indicator reports the percentage of population using public transportation as their primary means of commuting to work. Public transportation includes buses or trolley buses, streetcars or trolley cars, subway or elevated rails, and ferryboats.
<b>AREA</b>	<b>Total Population Employed, Age 16+</b>	<b>Population Using Public Transit to Work (# &amp; %)</b>	
Los Alamos	9,040	296 (3.3%)	
New Mexico	875,493	9,801 (1.1%)	
United States	148,432,042	7,607,907 (5.1%)	

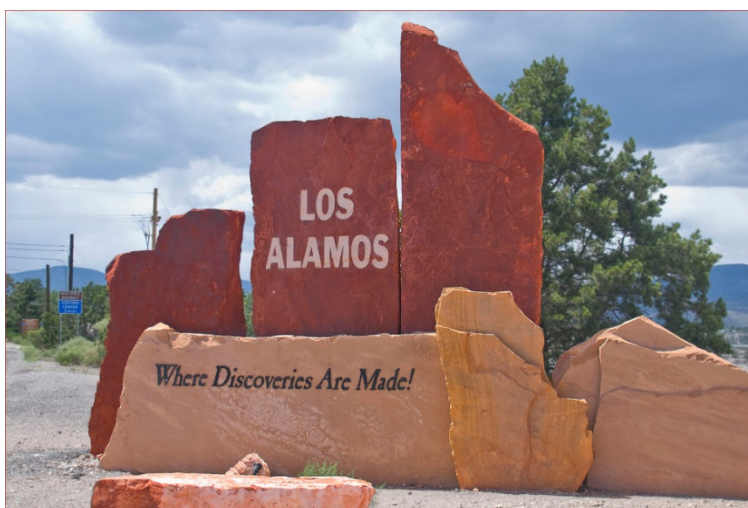
Source: US Census Bureau, American Community Survey. 2013-17.



SOCIOECONOMIC CHARACTERISTIC			NARRATIVE
<b>TEEN BIRTHS</b>			
<ul style="list-style-type: none"> <li>Teen Births</li> </ul>			<p>This indicator reports the rate of total births to women age of 15 - 19 per 1,000 female population age 15 - 19. This indicator is relevant because in many cases, teen parents have unique social, economic, and health support services. Additionally, high rates of teen pregnancy may indicate the prevalence of unsafe sex practices.</p>
<b>AREA</b>	<b>Female Population Ages 15-19</b>	<b>Births to Mothers, Ages 15-19 &amp; Rate</b>	
Los Alamos	534	6 (10.4/1,000)	
New Mexico	73,069	4,165 (57/1,000)	
United States	10,736,677	392,962 (36.6/1,000)	
<ul style="list-style-type: none"> <li>Births to Women Age 15-19, Rate (per 1,000 Population) by Race / Ethnicity</li> </ul>			
<b>AREA</b>	<b>Non-Hispanic White</b>	<b>Non-Hispanic Black</b>	<b>Hispanic or Latino</b>
Los Alamos	No Data	No Data	27.3
New Mexico	31.3	42.9	70.5
United States	24.6	54.9	62
<p><i>Source: US Department of Health &amp; Human Services, Health Indicators Warehouse, Centers for Disease Control &amp; Prevention, National Vital Statistics System, 2006-2012.</i></p>			
SOCIOECONOMIC CHARACTERISTIC			NARRATIVE
<b>CRIME</b>			
<ul style="list-style-type: none"> <li>Violent Crime Rate</li> </ul>			<p>This indicator reports information about violent crime offenses reported by law enforcement. In Los Alamos County, 31.5 violent crimes occurred during the 2014-16 three-year period. The violent crime rate of 178.1 is lower than the statewide rate of 623.9 and national average of 384.8 per 100,000 population. Violent crime includes homicide, rape, robbery, and aggravated assault.</p>
<b>AREA</b>	<b>Violent Crimes</b>	<b>Violent Crime Rate (Per 100,000 Population)</b>	
Los Alamos	31.5	178.1	
New Mexico	12,755	623.9	
United States	1,205,137	384.8	
<p><i>Source: Federal Bureau of Investigation, FBI Uniform Crime Reports for period from 2014-2016. Additional analysis by the National Archive of Criminal Justice Data. Accessed via the Inter-University Consortium for Political and Social Research. 2019.</i></p>			
SOCIOECONOMIC CHARACTERISTIC			NARRATIVE
<b>RECREATION ACCESS</b>			
<ul style="list-style-type: none"> <li>Recreation and Fitness Facility Access</li> </ul>			<p>This indicator reports the number per 100,000 population of recreation and fitness facilities as defined by North American Industry Classification System (NAICS) Code 713940. Access to recreation and fitness facilities encourages physical activity and other healthy behaviors.</p>
<b>AREA</b>	<b>Total Population</b>	<b>Recreational &amp; Fitness Establishments (# &amp; Rate/100,000)</b>	
Los Alamos	18,031	7 (39/100,000)	
New Mexico	2,084,828	173 (8.4/100,000)	
United States	321,004,407	33,980 (11.10/100,000)	
<p><i>Source: US Census Bureau, County Business Patterns. Additional Data Analysis By CARES. 2016.</i></p>			

# LOS ALAMOS

where discoveries are made



## HEALTH SERVICE GAP ANALYSIS EPIDEMIOLOGY REPORT

A STATISTICAL DESCRIPTION OF THE HEALTH STATUS AND DISEASE PROCESS IN  
LOS ALAMOS COUNTY COMPARED TO NEW MEXICO AND THE UNITED STATES

*JANUARY 29, 2020*

## EPIDEMIOLOGY OF LOS ALAMOS COUNTY

This report summarizes relevant data about the health of residents of Los Alamos County and relates those to Health Outcomes. Where relevant, detail by gender, age group and/or race and ethnic background are provided. The few areas for which Los Alamos County experiences worse health than New Mexico or the United States are noted in bold, red font.

DESCRIPTION
<b>ACCESS</b>
Access to Primary Medical Care
Access to Mental Health Providers
Access to Dentists
Lack of a Consistent Source of Primary Medical Care
<b>HEALTH STATUS</b>
Poor General Health
Lack of Emotional or Social Support
Poor Dental Health
Low Birth-Weight Births
Teen Births
<b>WORKFORCE</b>
Ratio of Primary Care Physicians to Population
Population Living in Health Professional Facility Shortage Area (HPSA)
Federally Qualified Health Centers
<b>HEALTH BEHAVIORS</b>
Alcohol
Fruit and Vegetable Consumption
Physical Inactivity
Soda Consumption
Tobacco Consumption
<b>CLINICAL CONDITIONS</b>
Behavioral Health
➤ Mental Health
➤ Substance Use
Cancer
Cardiac
Communicable Disease
Dental Disease
Diabetes
Respiratory
Stroke
<b>DISABILITIES</b>
<b>MORTALITY</b>
Premature Mortality and Years of Potential Life Lost

ACCESS				NARRATIVE	
<ul style="list-style-type: none"> <li>• Access to Primary Care</li> </ul>				<p>This indicator reports the number of primary care physicians per 100,000 population.</p>	
<b>AREA</b>	<b>Total Population</b>	<b>Primary Care Physicians, 2014</b>	<b>Rate of PCP per 100,000 Population</b>		
Los Alamos	18,031	27	149.74		
New Mexico	2,084,828	1,549	74.3		
United States	321,004,407	247,069	75.6		
<p>Source: U.S. Department of Health &amp; Human Services, Health Resources and Services Administration, Area Health Resource File, 2014</p>					
<ul style="list-style-type: none"> <li>• Access to Mental Health Providers</li> </ul>				<p>This indicator includes psychiatrists, psychologists, social workers, and counselors that specialize in mental health.</p>	
<b>AREA</b>	<b>Total Population</b>	<b>Mental Health Providers</b>	<b>Ratio of Mental Health Providers to Population</b>		<b>Mental Health Care Provider Rate (Per 100,000 Population)</b>
Los Alamos	18,031	39	480.5		208.1
New Mexico	2,084,828	7,924	263.4		379.6
United States	321,004,407	643,219	493	202.8	
<p>Source: University of Wisconsin Population Health Institute, County Health Rankings, 2017</p>					
<ul style="list-style-type: none"> <li>• Access to Dentists</li> </ul>				<p>This includes all dentists—those with a Doctorate in Dental Surgery (DDS) or in Dental Medicine (DMD) licensed by New Mexico to practice dentistry and are still practicing.</p>	
<b>AREA</b>	<b>Total Population</b>	<b>Total Dentists</b>	<b>Dentists, Rate Per 100,000 Population</b>		
Los Alamos	18,013	18	101.21		
New Mexico	2,084,828	1,287	61.7		
United States	321,004,407	210,832	65.7		
<p>Source: U.S. Department of Health &amp; Human Services, Health Resources and Services Administration, Area Health Resource File, 2015</p>					
<ul style="list-style-type: none"> <li>• Lack of a Consistent Source of Primary Medical Care</li> </ul>				<p>This survey data is self-reported from adults 18 years and older who do not have a professional that they think of as their personal doctor of healthcare professional.</p>	
<b>AREA</b>	<b>Total Survey Population</b>	<b>Total Adults Without Regular Doctor</b>	<b>Percent Adults Without Regular Doctor</b>		
Los Alamos	17,036	3,031	17.8%		
New Mexico	1,543,870	455,971	29.5%		
United States	236,884,668	52,290,932	22.1%		
<p>Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Additional data analysis by CARES. 2011-12.</p>					

HEALTH STATUS					NARRATIVE		
<ul style="list-style-type: none"> <li>Poor General Health</li> </ul>					<p>Within Los Alamos County, New Mexico, 9.2% of adults age 18 and older self-report having poor or fair health in response to the question "Would you say that in general your health is excellent, very good, good, fair, or poor?". This indicator is relevant because it is a measure of general poor health status.</p> <p>This survey question reports the percent of adults 18 and older that self-report that they have insufficient social or emotional support some or all of the time. This support is critical for daily life, good mental health and is linked to educational achievement and economic stability.</p> <p>This reflects adults age 18 and older who report that six or more of their permanent teeth have been removed due to tooth decay, gum disease or infection.</p>		
AREA	Total Population	Self-Reported Population in Poor or Fair Health	Crude Percent	Age-Adjusted Percent			
Los Alamos	13,462	1,255	9.2%	8.6%			
New Mexico	1,521,911	270,900	17.8%	17.2%			
United States	232,556,016	37,766,703	16.2%	15.7%			
<ul style="list-style-type: none"> <li>Lack of Social or Emotional Support</li> </ul>							
AREA	Total Population	Self-Reported Population with Self-Reported Inadequate Social/Emotional Support	Crude Percent	Age-Adjusted Percent			
Los Alamos	13,462	1,446	10.6%	10.1%			
New Mexico	1,521,911	307,426	20.2%	20.1%			
United States	232,556,016	48,104,656	20.7%	20.7%			
<ul style="list-style-type: none"> <li>Poor Dental Health</li> </ul>							
AREA	Total Population	Self-Reported Population with Self-Reported 6 or More Teeth Removed	Percent of Adults Self-Reporting Poor Dental Health				
Los Alamos	13,462	684	5%				
New Mexico	1,521,911	216,728	14.2%				
United States	232,556,016	36,842,620	15.7%				
<p><i>Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the Health Indicators Warehouse. US Department of Health &amp; Human Services, Health Indicators Warehouse. 2006-12.</i></p>							
PREMATURE DEATH							
<ul style="list-style-type: none"> <li>Premature Death, Years of Potential Life Lost</li> </ul>					<p>This indicator reports Years of Potential Life Lost (YPLL) before age 75 per 100,000 population for all causes of death, age-adjusted to the 2000 standard. YPLL measures premature death and is calculated by subtracting the age of death from the 75-year benchmark. This indicator is relevant because a measure of premature death can provide a unique and comprehensive look at overall health status.</p>		
AREA	Total Population (3-years from 2015-17)	Total Premature Deaths (2015-17)	Total Years of Potential Life Lost, 2015-17 Average	Years of Potential Life Lost, Rate per 100,00 population			
Los Alamos	50,605	123	2,212	4,371			
New Mexico	5,836,294	27,215	516,758	8,854			
United States	908,082,355	3,744,984	63,087,358	6,947			
<p><i>Source: University of Wisconsin Population Health Institute, County Health Rankings, 2017</i></p>							
<ul style="list-style-type: none"> <li>Premature Death, Years of Potential Life Lost</li> </ul>							
Report Area	1997-1999	2000-2002	2003-2005	2006-2008	2009-2011	2012-2014	2015-2017
Los Alamos County, NM	3,487.2	5,913.8	3,251.4	3,255	4,612.6	3,307.9	4,371
New Mexico	8,086.8	8,163.4	8,359.2	8,286.74	7,924.5	8,207.1	8,799.84
United States	7,705.2	7,535	7,345	7,090.49	6,703.7	6,601.2	6,900.63



HEALTH STATUS (continued)				NARRATIVE																									
<ul style="list-style-type: none"> <li>Low-Birth Weight, 2015-17</li> </ul> <table border="1"> <thead> <tr> <th>AREA</th> <th>Total Live Births</th> <th>Low Birth Weight</th> <th>Low Birth Weight, Percent of Total</th> </tr> </thead> <tbody> <tr> <td>Los Alamos</td> <td>1,288</td> <td>135</td> <td>10.5%</td> </tr> <tr> <td>New Mexico</td> <td>204,764</td> <td>17,814</td> <td>8.7%</td> </tr> <tr> <td>United States</td> <td>29,300,495</td> <td>2,402,641</td> <td>8.2%</td> </tr> </tbody> </table> <p>Source: New Mexico Death Data: Bureau of Vital Records and Health Statistics (BVRHS), New Mexico Department of Health, 2015-17</p>				AREA	Total Live Births	Low Birth Weight	Low Birth Weight, Percent of Total	Los Alamos	1,288	135	10.5%	New Mexico	204,764	17,814	8.7%	United States	29,300,495	2,402,641	8.2%	<p>Low birthweight is defined as less than 2,500 grams (5 pounds, 8 ounces). LBW increases the risk for infant mortality and morbidity. As birthweight decreases, the risk for death increases. Low birthweight infants who survive often require intensive care at birth, may develop chronic illnesses, and later may require special education services. Health care costs and length of hospital stay are higher for low birthweight infants.</p>									
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<ul style="list-style-type: none"> <li>Babies born with Low Birth Weight, Percent, 2002-2008 to 2006-2012</li> </ul>				<p>This indicator reports the percentage of total births that are low birth weight (Under 2500g). This indicator is relevant because low birth weight infants are at high risk for health problems. This indicator can also highlight the existence of health disparities.</p>																									
<table border="1"> <thead> <tr> <th>Report Area</th> <th>2002-2008</th> <th>2003-2009</th> <th>2004-2010</th> <th>2005-2011</th> <th>2006-2012</th> </tr> </thead> <tbody> <tr> <td>Los Alamos County, NM</td> <td>8.4%</td> <td>8.6%</td> <td>9.3%</td> <td>10.1%</td> <td>10.5%</td> </tr> <tr> <td>New Mexico</td> <td>8.5%</td> <td>8.5%</td> <td>8.6%</td> <td>8.6%</td> <td>8.7%</td> </tr> <tr> <td>United States</td> <td>8.1%</td> <td>8.1%</td> <td>8.2%</td> <td>8.2%</td> <td>8.2%</td> </tr> </tbody> </table>						Report Area	2002-2008	2003-2009	2004-2010	2005-2011	2006-2012	Los Alamos County, NM	8.4%	8.6%	9.3%	10.1%	10.5%	New Mexico	8.5%	8.5%	8.6%	8.6%	8.7%	United States	8.1%	8.1%	8.2%	8.2%	8.2%
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WORKFORCE				NARRATIVE																																				
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AREA	Primary Medical	Mental	Dental	Health Profession Shortage																																				
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HEALTH BEHAVIORS					NARRATIVE	
<b>ALCOHOL CONSUMPTION</b>						
<ul style="list-style-type: none"> <li>Alcohol Consumption</li> </ul>					<p>This indicator reports the percentage of Los Alamos County residents that self-report heavy alcohol consumption (more than 2 drinks per day for men and 1 per day for women). Future health determinants are cirrhosis, cancer and untreated behavioral health issues.</p>	
<b>AREA</b>	<b>Total Population (18+)</b>	<b>Estimated Adults Drinking Excessively</b>	<b>Crude Percentage</b>	<b>Age-Adjusted Percentage</b>		
Los Alamos	13,656	1,955	15.7%	16.8%		
New Mexico	1,521,911	208,502	13.7%	14.2%		
United States	235,375,690	32,248,349	13.7%	14.9%		
<p>Source: Centers of Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via Health Indicators Warehouse.</p>						
<ul style="list-style-type: none"> <li>Alcohol Expenditures</li> </ul>					<p>This indicator reports estimated annual alcohol expenditures for alcoholic beverages purchased at home as a percent of total food expenditures. Expenditure data is suppressed for single counties. Rank data are no available except for large geographic areas.</p>	
<b>AREA</b>	<b>State Rank</b>	<b>Z-Score (US)</b>	<b>Z-Score (State)</b>	<b>Average Alcohol Expenditures</b>		<b>Percent of Food-At-Home Expenditures</b>
Los Alamos	33	2.61	2.45	Suppressed		Suppressed
New Mexico	No data	0.05	0	\$825.03		14.12%
United States	No data	No data	No data	\$839.54	14.29%	
<p>Source: Nielsen, Nielson SiteReports, 2014.</p>						
<ul style="list-style-type: none"> <li>Alcohol-Related Total Deaths</li> </ul>					<p>The consequences of excessive alcohol use are severe in New Mexico. New Mexico's total alcohol-related death rate has ranked first, second, or third in the US since 1981; and 1st for the period 1997 through 2010 (the most recent year for which state comparison data are available).</p>	
<b>AREA</b>	<b>Total Adult Population (2013-17)</b>	<b># Deaths among Adults (2013-17)-five-year related to Alcohol</b>	<b>Deaths per 100,000 Population, Age-Adjusted Rate per 100,000 population (2013-17)</b>			
Los Alamos	90,641	30	28.5			
New Mexico	10,504,397	6,789	62.2			
United States	1,510,134,705	440,000	29			
<p>Source: New Mexico Indicator-Based Information System, accessed January 23, 2020  <a href="https://ibis.health.state.nm.us/indicator/view/alcoholrelateddth.year.nm_us.html">https://ibis.health.state.nm.us/indicator/view/alcoholrelateddth.year.nm_us.html</a></p>						
<ul style="list-style-type: none"> <li>Alcohol-Chronic Disease Related Deaths</li> </ul>					<p>Chronic heavy drinking (defined as drinking, on average, more than two drinks per day for men, and more than one drink per day for women) is associated with alcoholism or alcohol dependence, and can contribute to a number of diseases, including alcoholic liver cirrhosis. For the past 15 years, New Mexico's death rate from alcohol-related chronic disease has consistently been first or second in the nation, and 1.5 to two times the national rate. The national death rate from alcohol-related chronic disease in 2015 (13.9) was the same as that in 1990. In contrast, New Mexico's rate increased 52 percent from 1990 to 2015.</p>	
<b>AREA</b>	<b>Total Adult Population (2013-17)</b>	<b># Deaths among Adults (2013-17)-five-year period related to Alcohol &amp; Chronic Disease</b>	<b>Deaths per 100,000 Population, Age-Adjusted Rate per 100,000 population (2013-17)</b>			
Los Alamos	90,641	9	9.9			
New Mexico	10,504,397	3,715	32.8			
United States	1,510,134,705	440,000	29			
<p>Sources:            New Mexico Death Data: Bureau of Vital Records and Health Statistics (BVRHS), New Mexico Department of Health.            Population Estimates: University of New Mexico, Geospatial and Population Studies (GPS) Program, <a href="http://gps.unm.edu/">http://gps.unm.edu/</a>.            U.S. Data Source: Centers for Disease Control and Prevention, National Center for Health Statistics, <a href="http://www.cdc.gov/nchs/">http://www.cdc.gov/nchs/</a></p>						

**HEALTH BEHAVIORS**

• Alcohol-Related Injury Deaths

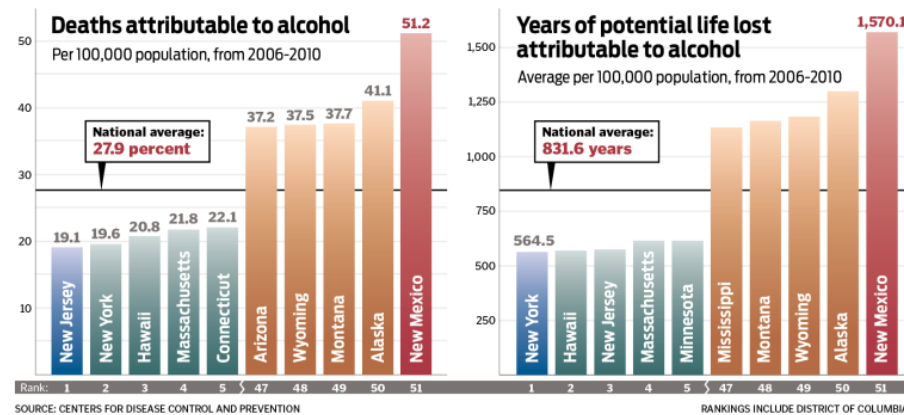
AREA	Total Adult Population (2013-17)	# Alcohol-Related Injury Deaths among Adults (2013-17)-five-year period	Deaths per 100,000 Population, Age-Adjusted Rate per 100,000 population (2013-17)
Los Alamos	90,641	18	19.6
New Mexico	10,504,397	3,073	29.3
United States	1,510,134,705	320,000	21.0

Source: New Mexico Death Data: Bureau of Vital Records and Health Statistics (BVRHS), New Mexico Department of Health

**NARRATIVE**

Binge drinking (defined as having five drinks or more on an occasion for men, and four drinks or more on an occasion for women) is a high-risk behavior associated with numerous injury outcomes, including motor vehicle fatalities, homicide, and suicide. Since 1990, New Mexico's death rate for alcohol-related (AR) injury has consistently been among the highest in the nation, ranging from 1.4 to 1.8 times the national rate.

• Years of Potential Life Lost due to Alcohol, 2006-2010



New Mexico leads the nation in Deaths Attributable to Alcohol (Indicator 1 with increase of Age-Adjusted Rate from 51.2 for 2006 to 2010 to 62 from 2013-2017); and also, Years of Potential Life Lost attributable to Alcohol at 1,570.1 total compared to 831.6 for the U.S. for the time period of 2006-2010.

HEALTH BEHAVIORS						NARRATIVE
<b>FRUIT/VEGETABLE CONSUMPTION</b>						
<ul style="list-style-type: none"> <li>Fruit/Vegetable Consumption</li> </ul>						<p>Compared with people who consume a diet with only small amounts of fruits and vegetables, those who eat more generous amounts are likely to have reduced risk of heart attack, stroke, type 2 diabetes, and certain cancers. The 2015-2020 Dietary Guidelines for Americans recommend that adults eat 2 cups of fruit and 2.5 cups of vegetables per day for a standard 2,000 calorie diet, with varying recommendations based on an individual's age, gender, and activity level.</p>
AREA	Survey Population of Adults (2013, 2015, 2017)	Average Self-Reported Respondents eating 5+ servings of Fruit & Vegetables per day		Percent of Respondents eating 5+ Fruits/Vegetables per Day		
Los Alamos	13,972	9,529		68.2%		
New Mexico	1,460,839	1,133,611		77.6%		
United States	227,279,010	171,972,118		75.7%		
<i>Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. US Department of Health &amp; Human Services, Health Indicators Warehouse. 2006-12.</i>						<p>Food insecurity reports the estimated percentage of the population that experienced food insecurity at some point. Food insecurity is the household-level economic and social condition of limited or uncertain access to adequate food.</p>
<ul style="list-style-type: none"> <li>Fruit/Vegetable Expenditures</li> </ul>						
AREA	State Rank	Z-Score (US)	Z-Score (State)	Average Fruit/Vegetable Expenditures	Percent of Food-At-Home Expenditures	
Los Alamos	7	1.36	0.68	Suppressed	Suppressed	
New Mexico	No data	0.6	0	\$775.81	13.3%	
United States	No data	No data	No data	\$774.71	12.7%	
<i>Source: Nielsen, Nielson SiteReports, 2014.</i>						
<ul style="list-style-type: none"> <li>Food Insecurity</li> </ul>						
AREA	Total Population	Food Insecure Population, Total		Food Insecurity Rate per 100,000		
Los Alamos	18,031	2,290		12.7		
New Mexico	2,084,828	324,000		15.5		
United States	321,004,407	41,933,950		12.5		
<i>Source: Feeding America, 2017.</i>						
<b>PHYSICAL INACTIVITY</b>						
<ul style="list-style-type: none"> <li>Adults with No Leisure Time Physical Activity</li> </ul>						<p>Within Los Alamos County, 1,746 or 12.5% of adults aged 20 and older self-report no leisure time for activity, based on the question: "During the past month, other than your regular job, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise?"</p>
AREA	Total Adult Population, 20 years+, 2016	Population self-reporting no Leisure Time Physical Activity, 20 years+, 2016		Percent Population self-reporting no Leisure Time Physical Activity, 20 years+, 2016		
Los Alamos	13,641	1,746		12.5%		
New Mexico	1,540,019	303,279		19.1%		
United States	241,280,347	56,248,204		22.8%		
<ul style="list-style-type: none"> <li>Adults with No Leisure Time Physical Activity by Gender</li> </ul>						<p>This self-reported question is further detailed by gender.</p>
AREA	Total Males self-reporting No Leisure Time Physical Activity (# & %), 20 years+, 2016			Total Females self-reporting No Leisure Time Physical Activity (# & %), 20 years+, 2016		
Los Alamos	1,034 (15.5%)			717 (9.3%)		
New Mexico	139,697 (18.2%)			163,580 (19.9%)		
United States	25,551, 381 (21.4%)			30,696,841 (24%)		
<i>Source: Centers of Disease Control and Prevention, Behavioral Risk Factor Surveillance System. 2013-17.</i>						
<b>SODA EXPENDITURES</b>						
AREA	State Rank	Z-Score (US)	Z-Score (State)	Average Soda Expenditures	Percent of Food-At-Home Expenditures	
Los Alamos	1	-1.27	-2.93	Suppressed	Suppressed	
New Mexico	No data	0.27	0	\$246.35	4.2%	
United States	No data	No data	No data	\$236.04	4.1%	
<i>Source: Nielsen, Nielson SiteReports, 2014.</i>						<p>This indicator reports soft drink consumption by estimating expenditures for carbonated beverages as a percentage of total food-at-home expenditures.</p>

HEALTH BEHAVIORS						NARRATIVE
TOBACCO						
<ul style="list-style-type: none"> <li>• Tobacco Expenditures</li> </ul>						<p>This indicator reports estimated expenditures for cigarettes, as a percentage of total household expenditures. This indicator is relevant because tobacco use is linked to leading causes of death such as cancer and cardiovascular disease.</p>
AREA	State Rank	Z-Score (US)	Z-Score (State)	Average Tobacco Expenditures	Percent of Food-At-Home Expenditures	
Los Alamos	1	-2.37	-1.80	Suppressed	Suppressed	
New Mexico	No data	0.72	0	\$617.77	1.3%	
United States	No data	No data	No data	\$822.70	1.6%	
<p>Source: Nielsen, Nielson SiteReports, 2014.</p> <ul style="list-style-type: none"> <li>• Tobacco Usage – Current Smokers</li> </ul>						<p>In Los Alamos County, an estimated 1,296, or 9.5% of adults age 18 or older self-report currently smoking cigarettes some days or every day. This indicator is relevant because tobacco use is linked to leading causes of death such as cancer and cardiovascular disease.</p>
AREA	Total Population (18+)	Estimated Adults Regularly Smoking Cigarettes	Crude Percentage	Age-Adjusted Percentage		
Los Alamos	13,656	1,296	9.5%	10.5%		
New Mexico	1,521,911	284,597	18.7%	19.0%		
United States	235,375,690	41,491,223	17.8%	18.1%		
<p>Source: Centers of Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via Health Indicators Warehouse</p> <ul style="list-style-type: none"> <li>• Tobacco Usage – Quit Attempts</li> </ul>						<p>An estimated 70.65% of adult smokers in the report area attempted to quit smoking for at least 1 day in the past year.</p>
AREA	Survey Population (Adults Age 18+)	Estimated Adults Self-Reporting Attempts to Quit Cigarette Smoking in past 12 months	Crude Percentage			
Los Alamos	1,972	1,393	70.7%			
New Mexico	311,727	189,705	60.9%			
United States	45,526,654	27,323,073	60%			
<p>Source: Centers of Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via Health Indicators Warehouse</p>						

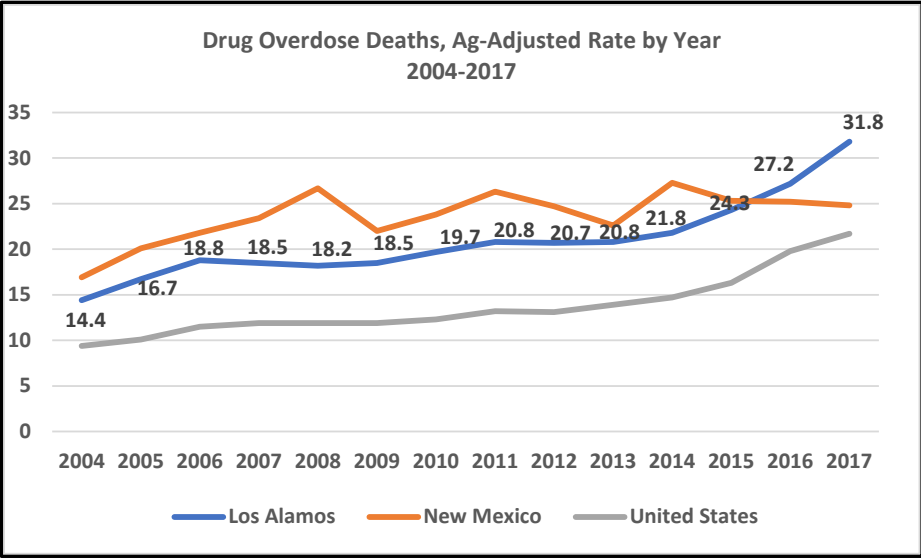
CLINICAL CONDITIONS				NARRATIVE									
<b>BEHAVIORAL HEALTH</b>													
<b>MENTAL HEALTH</b>													
<ul style="list-style-type: none"> <li>Depression – Medicare Population</li> </ul>				Percentage of the Medicare fee-for-service population with depression.									
<b>AREA</b>	<b>Medicare Fee-For-Service</b>	<b>Medicare FFS with Depression</b>	<b>Percent of Medicare FFS with Depression</b>										
Los Alamos	2,702	384	14.2%										
New Mexico	228,157	36,764	16.1%										
United States	33,725,823	6,047,681	17.9%										
<i>Source: Centers for Medicare and Medicaid Services. 2017</i> <ul style="list-style-type: none"> <li>Mortality Rate for Suicide</li> </ul>				This indicator reports the rate of death due to intentional self-harm (suicide) per 100,000 population. Figures are reported as crude rates and also age-adjusted rates where data is available.									
<b>AREA</b>	<b>Total Population</b>	<b>Average Annual Deaths from Suicide, 2012-2016</b>	<b>Crude Death Rate (Per 100,000)</b>		<b>Age-Adjusted Rate</b>								
Los Alamos	18,031	3	15.5		suppressed								
New Mexico	2,084,828	468	22.5		22.2								
United States	321,004,407	44,061	13.7	13.3									
<i>Source: Centers for Disease Control and Prevention. National Vital Statistics System. Accessed via CDC Wonder, 2013-2017.</i> <ul style="list-style-type: none"> <li>Suicide Mortality, Age-Adjusted Rate by Year, 2004 through 2016</li> </ul>													
<b>Suicide Mortality, Age-Adjusted Rate (Per 100,000 Pop.) by Year, 2004 through 2016</b>													
<b>Report Area</b>	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>	<b>2010</b>	<b>2011</b>	<b>2012</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>	<b>2016</b>
New Mexico	18.8	17.76	17.92	20.29	20.86	18.23	20.14	20.34	21.3	20.3	21	23.74	22.49
United States	10.99	10.93	11	11.29	11.6	11.76	12.11	12.34	12.6	12.6	13	13.28	13.47

SUBSTANCE USE			
DRUG OVERDOSE MORTALITY			
<ul style="list-style-type: none"> <li>Drug Overdose Mortality</li> </ul>			
AREA	Total Adult Population (2013-17)	# Deaths among Adults (2013-17)- five-year period related to Alcohol & Chronic Disease	Deaths per 100,000 Population, Age-Adjusted Rate per 100,000 population (2013-17)
Los Alamos	90,641	29	<b>31.8</b>
New Mexico	10,504,397	2,470	24.6
United States	1,510,134,705	440,000	29

This indicator reports the rate of death due to drug overdose of Los Alamos County residents. It is reported as crude death rate and age-adjusted death rate (where data is available).

Source: Centers for Disease Control and Prevention. National Vital Statistics System. Accessed via CDC Wonder, 2013-2017.

• Drug Overdose Mortality, Age-Adjusted Rate, by Year, 2004-2017



New Mexico’s drug overdose death rate has been one of the highest in the nation for most of the last two decades, having more than tripled since 1990. While deaths due to illicit drugs have remained steady during the past decade, deaths due to prescription drugs (particularly opioid pain relievers) have increased dramatically. In addition to the high death rates, drug abuse is one of the costliest health problems in the U. S. In 2007, it was estimated that prescription opioid abuse, dependence, and misuse cost New Mexico \$890 million. As seen below, the rates of drug overdose mortality in Los Alamos County have significantly increased in the past four years, eclipsing that of New Mexico in 2016 & 2017.

Report Area	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
Los Alamos County, NM	14.35	16.72	18.83	18.47	18.19	18.45	19.73	20.84	20.65	20.75	21.75	24.33	27.23	31.83
New Mexico	16.94	20.08	21.76	23.39	26.69	22.04	23.82	26.31	24.66	22.63	27.29	25.31	25.19	24.84
United States	9.38	10.07	11.49	11.88	11.89	11.94	12.30	13.19	13.14	13.80	14.68	16.29	19.79	21.70



CLINICAL CONDITIONS					NARRATIVE
<b>CANCER SCREENING</b>					
<ul style="list-style-type: none"> <li>Cancer Screening – Mammogram</li> </ul>					Percent of women aged 67-69 who self-report a mammogram in the past two years.
<b>AREA</b>	<b>Total Medicare Enrollees</b>	<b>Females Medicare Enrollees Ages 67-69</b>	<b>Female Medicare Enrollees with Mammogram in past 2 years</b>	<b>%</b>	
Los Alamos	2,397	202	159	79.2%	
New Mexico	180,688	17,687	10,076	57%	
United States	26,937,083	2,544,732	1,607,329	63.2%	
<i>Source: Dartmouth College Institute for Health Policy &amp; Clinical Practice, Dartmouth Atlas of Health Care. 2015.</i>					
<ul style="list-style-type: none"> <li>Cancer Screening – PAP Test</li> </ul>					Percent of women aged 18 and older who self-report a PAP test in the past three years.
<b>AREA</b>	<b>Female Population age 18+</b>	<b>Self-Report PAP Test in past 3 years</b>	<b>Crude Percent</b>	<b>Age-Adjusted Percent</b>	
Los Alamos	12,240	9,351	76.4%	74.9%	
New Mexico	1,129,469	849,361	75.2%	75.9%	
United States	176,847,182	137,191,142	77.6%	78.5%	
<i>Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the Health Indicators Warehouse. US Department of Health &amp; Human Services, Health Indicators Warehouse. 2006-12.</i>					
<ul style="list-style-type: none"> <li>Cancer Screening – Sigmoidoscopy or Colonoscopy</li> </ul>					Percent of adults 50 years of age and older who self-report 'ever' having a sigmoidoscopy or colonoscopy.
<b>AREA</b>	<b>Total Population Age 50+</b>	<b>Population 'Ever' Screened for Colon Cancer</b>	<b>Crude Percent</b>	<b>Age-Adjusted Percent</b>	
Los Alamos	5,310	3,850	72.5%	70%	
New Mexico	515,474	306,192	59.4%	56%	
United States	75,116,406	48,549,269	64.6%	61.3%	
<i>Source: Centers of Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via Health Indicators Warehouse. 2006-12.</i>					
<b>CANCER INCIDENCE</b>					
<ul style="list-style-type: none"> <li>Breast Cancer Incidence (Average Annual New Cases), 2011-2015</li> </ul>					This indicator reports the age adjusted incidence rate (cases per 100,000 population per year) of females with breast cancer adjusted to 2000 U.S. standard population age groups.
<b>AREA</b>	<b>Total Population under age 50</b>	<b>New Cases of Breast Cancer under age 50</b>	<b>Crude Rate</b>	<b>Age-Adjusted Rate</b>	
Los Alamos	26,013	14	53.8	48.3	
New Mexico	3,377,387	1,297	38.4	42.7	
<b>AREA</b>	<b>Total Population over age 50</b>	<b>New Cases of Breast Cancer over age 50</b>	<b>Crude Rate</b>	<b>Age-Adjusted Rate</b>	
Los Alamos	18,557	98	528.1	529.7	
New Mexico	1,913,686	7,068	369.3	369.7	
<i>Source: New Mexico Tumor Registry, University of New Mexico Health Sciences Center, <a href="http://hsc.unm.edu/som/nmtr/">http://hsc.unm.edu/som/nmtr/</a>; accessed January 23, 2020.</i>					Breast cancer is the most common cancer diagnosed in women. It is estimated that one in eight women will develop breast cancer sometime during her life. Breast cancer can occur at any age, but most cases occur in women over age 50.
<i>Note: The incidence of female breast cancer for ALL AGES in 2016 was 124.2 with 245,299 new cases reported.</i>					

CLINICAL CONDITION					NARRATIVE
<b>CANCER INCIDENCE (continued)</b>					
<ul style="list-style-type: none"> <li>Cervical Cancer Incidence</li> </ul>					<p>Invasive cervical cancer represents approximately 2% of all new cancer cases and 2% of all cancer deaths in New Mexican women. Regular screening with Pap tests and/or human papillomavirus (HPV) tests, can detect pre-cancers caused by HPV, which, when treated, can stop cervical cancer before it develops.</p>
<b>AREA</b>	<b>Total Population affected (females)</b>	<b>New Cases of Cervical Cancer</b>	<b>Crude Cervical Cancer Incidence Rate per 100,000</b>	<b>Age-Adjusted Rate Cervical Cancer Incidence Rate per 100,000</b>	
Los Alamos	44,570	4	8.9	6.5	
New Mexico	1,722,717	126	7.3	7.3	
United States	803,266,518	62,645	7.9	7.5	
<p><i>Source: The New Mexico Tumor Registry, University of New Mexico Health Sciences Center, <a href="http://hsc.unm.edu/som/nmtr/">http://hsc.unm.edu/som/nmtr/</a>; accessed January 23, 2020.</i></p>					
<ul style="list-style-type: none"> <li>Colon &amp; Rectal Cancer Incidence</li> </ul>					<p>Of cancers that affect both men and women, colorectal cancer is the second leading cause of new cancer cases and cancer deaths in New Mexico.</p> <p>Lung cancer is by far the leading cause of cancer death among both men and women. Most lung cancers are diagnosed at a late stage, when the prognosis is poor. Each year, lung cancer accounts for over 13% of all new cancer cases and nearly 27% of all cancer deaths in the U.S. This equates to 224,000 cases and 158,000 deaths. The five-year survival rate is 18%.</p> <p>In New Mexico, prostate cancer is the most commonly diagnosed cancer for African American, Asian, Hispanic and White men, and is the second most commonly diagnosed cancer for American Indian men. Prostate cancer is the leading cause of death from cancer for American Indian men, the second leading cause of death from cancer for African American and White men, and is the third leading cause of cancer death for Asian and Hispanic men in New Mexico.</p>
<b>AREA</b>	<b>Total Population affected</b>	<b>New Cases of Colorectal Cancer</b>	<b>Crude Colorectal Cancer Incidence Rate per 100,000</b>	<b>Age-Adjusted Rate Colorectal Cancer Incidence Rate per 100,000</b>	
Los Alamos	89,968	31	34.5	31	
New Mexico	10,472,086	3,985	38.1	33.1	
United States	1,581,326,719	699,747	44.3	39.2	
<ul style="list-style-type: none"> <li>Lung Cancer Incidence</li> </ul>					
<b>AREA</b>	<b>Total Population affected</b>	<b>New Cases of Lung Cancer</b>	<b>Crude Lung Cancer Incidence Rate per 100,000</b>	<b>Age-Adjusted Rate Lung Cancer Incidence Rate per 100,000</b>	
Los Alamos	89,968	32	35.6	24.5	
New Mexico	10,472,086	4,897	467.6	467.6	
United States	1,581,326,719	224,000	141.7	141.7	
<ul style="list-style-type: none"> <li>Prostate Cancer Incidence</li> </ul>					
<b>AREA</b>	<b>Total Population affected (adult men)</b>	<b>New Cases of Prostate Cancer</b>	<b>Crude Prostate Cancer Incidence Rate per 100,000</b>	<b>Age-Adjusted Rate Prostate Cancer Incidence Rate per 100,000</b>	
Los Alamos	45,399	74	163.0	116.7	
New Mexico	1,655,016	1,460	88.2	80	
United States	778,060,201	953,204	122.5	109	
<p><i>Source: The New Mexico Tumor Registry, University of New Mexico Health Sciences Center, <a href="http://hsc.unm.edu/som/nmtr/">http://hsc.unm.edu/som/nmtr/</a>; accessed January 23, 2020</i></p>					

## CANCER DEATHS

- Breast Cancer Deaths per 100,000 population, 2013-2017

AREA	Total Population affected (females)	Breast Cancer Deaths	Crude Breast Cancer Death Rate per 100,000	Age-Adjusted Rate Breast Cancer Death Rate per 100,000
Los Alamos	44,827	10	22.3	14.1
New Mexico	5,303,760	1,289	24.3	19.2
United States	814,946,978	207,086	25.4	20.3

- Colorectal Cancer Deaths: Rate per 100,000 population, 2013-17

AREA	Total Population affected over 3-year period	Colorectal Cancer Deaths	Crude Colorectal Cancer Death Rate per 100,000	Age-Adjusted Rate Colorectal Death Rate per 100,000
Los Alamos	90,641	11	12.1	8.5
New Mexico	10,504,397	1,709	16.3	13.8
United States	1,605,251,406	267,566	16.7	14.3

- Lung Cancer Deaths

AREA	Total Population affected over 3-year period	Lung Cancer Deaths	Crude Lung Cancer Death Rate per 100,000	Age-Adjusted Rate Lung Cancer Death Rate per 100,000
Los Alamos	90,641	22	24.2	16.4
New Mexico	10,504,397	3,586	34.1	28.1
United States	1,605,251,406	760,148	47.4	40.1

- Prostate Cancer Deaths

AREA	Total Population affected over 3-year period	Prostate Cancer Deaths	Crude Prostate Cancer Death Rate per 100,000	Age-Adjusted Rate Prostate Death Rate per 100,000
Los Alamos	45,815	15	32.7	28.1
New Mexico	5,200,637	1,023	19.7	19.3
United States	790,304,428	145,732	18.4	19

N.M. Source: New Mexico Death Data: Bureau of Vital Records and Health Statistics (BVRHS), New Mexico Department of Health

U.S. Source: Centers for Disease Control and Prevention, National Center for Health Statistics, CDC WONDER Online Database (<http://wonder.cdc.gov>)

Among New Mexican women, breast cancer is the most commonly diagnosed cancer, and is the second leading cause of death from cancer.

Of cancers that affect both men and women, colorectal cancer is the second leading cause of new cancer cases and cancer deaths in New Mexico.

Among New Mexicans, lung cancer is the second most commonly diagnosed cancer in both men and women, and is the leading cause of cancer death overall. Approximately 90% of lung cancer cases in men and 80% in women are attributable to cigarette smoking (New Mexico Cancer Plan 2012-2017).

In New Mexico, prostate cancer is the most commonly diagnosed cancer for African American, Asian, Hispanic and White men, and is the second most commonly diagnosed cancer for American Indian men. Prostate cancer is the leading cause of death from cancer for American Indian men, the second leading cause of death from cancer for African American and White men, and is the third leading cause of cancer death for Asian and Hispanic men in New Mexico.

CANCER MORTALITY						NARRATIVE
<ul style="list-style-type: none"> <li>• Cancer Mortality</li> </ul>						<p>This indicator reports the rate of death due to malignant neoplasm (cancer) per 100,000 population. Figures are reported as crude rates, and as rates age-adjusted to year 2000 standard.</p> <p>Rates by gender show higher male than female cancer death rates.</p> <p>The only race/ethnic groups with statistically significant numbers is for Non-Hispanic Whites.</p>
<b>AREA</b>	<b>Total Population</b>	<b>Average Annual Deaths, 2011-2016</b>	<b>Crude Death Rate (per 100,000)</b>	<b>Age-Adjusted Death Rate (per 100,000)</b>		
Los Alamos	18,031	38	154.2	112		
New Mexico	2,084,828	3,546	170.08	141.6		
United States	321,004,407	593,931	185	158.1		
<ul style="list-style-type: none"> <li>• Cancer Mortality Age-Adjusted Rate per 100,000 by Gender</li> </ul>						
<b>AREA</b>	<b>Male Cancer Death Rate, per 100,000 population 2011-2016</b>		<b>Female Cancer Death Rate, Per 100,000 population 2011-2016</b>			
Los Alamos	140.2		89.3			
New Mexico	166.4		122.3			
United States	188.8		135.7			
<ul style="list-style-type: none"> <li>• Cancer Mortality, Age-Adjusted Rate per 100,000 by Race/Ethnicity</li> </ul>						
<b>AREA</b>	<b>Non-Hispanic White Cancer Death Rate</b>	<b>Non-Hispanic Black Cancer Death Rate</b>	<b>Non-Hispanic Asian Cancer Death Rate</b>	<b>Non-Hispanic American Indian Cancer Death Rate</b>	<b>Hispanic Cancer Death Rate</b>	
Los Alamos	120.9	No data	No data	No data	No data	
New Mexico	146.2	154.1	88.1	115.8	135.6	
United States	163.2	185.9	97.8	105.2	110.9	

CLINICAL CONDITIONS				NARRATIVE
<b>CARDIAC</b>				
<ul style="list-style-type: none"> <li>Hypertension-High Blood Pressure (Adult), 2017</li> </ul>				<p>3,083, or 22.6% of adults aged 18 and older have ever been told by a doctor that they have high blood pressure or hypertension.</p> <p>This is higher for the 65 years of age and older population, with 1,259 or 46.6% (roughly twice) reporting a hypertension diagnosis.</p> <p>Of adults in Los Alamos County diagnosed with hypertension, 1,996 or 14.6% reported NOT taking their high blood pressure medication when indicated.</p>
<b>AREA</b>	<b>Total Population (18+)</b>	<b>Total Adults with High Blood Pressure</b>	<b>Percent Adults with High Blood Pressure</b>	
Los Alamos	13,656	3,083	22.6%	
New Mexico	1,521,911	385,565	25.3%	
United States	235,375,690	65,476,522	27.9%	
<ul style="list-style-type: none"> <li>High Blood Pressure – Medicare Population, 2017</li> </ul>				
<b>AREA</b>	<b>Total Medicare Enrollees</b>	<b>Medicare Beneficiaries with HBP</b>	<b>%</b>	
Los Alamos	2,702	1,259	46.6%	
New Mexico	228,157	108,393	47.5%	
United States	33,725,823	19,269,721	57.1%	
<ul style="list-style-type: none"> <li>Percentage of Medicare Population with High Blood Pressure by Age</li> </ul>				
<b>AREA</b>	<b>LESS THAN 65 YEARS</b>	<b>65 YEARS AND OLDER</b>		
Los Alamos	28.8%	47.7%		
New Mexico	34.5%	50.1%		
United States	42.6%	59.9%		
<ul style="list-style-type: none"> <li>High Blood Pressure Management, 20017</li> </ul>				
<b>AREA</b>	<b>Total Population (18+)</b>	<b>Total Adults Not taking HBP Medication (when needed)</b>	<b>Percent Adults not taking HBP Medication (needed)</b>	
Los Alamos	13,656	1,996	14.6%	
New Mexico	1,521,911	379,012	24.9%	
United States	235,375,690	51,175,402	21.7%	
<small>Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the Health Indicators Warehouse. US Department of Health &amp; Human Services, Health Indicators Warehouse. 2006-12.</small>				
<ul style="list-style-type: none"> <li>High Cholesterol (Adult), 2017</li> </ul>				<p>This indicator reports the percentage of adults aged 18 and older who self-report that they have ever been told by a doctor, nurse, or other health professional that they had high blood cholesterol.</p>
<b>AREA</b>	<b>Survey Population (Adults 18+)</b>	<b>Total Adults Self-Report High Cholesterol</b>	<b>Percent</b>	
Los Alamos	11,352	4,766	<b>41.9%</b>	
New Mexico	1,094,015	389,796	35.6%	
United States	180,861,326	69,662,357	38.5%	
<ul style="list-style-type: none"> <li>High Cholesterol (Medicare Population), 2017</li> </ul>				<p>The issues with high cholesterol continue to be displayed with the elderly population in Los Alamos County. Hyperlipidemia is one of the few health indicators that is worse than that of New Mexico or the United States.</p>
<b>AREA</b>	<b>Total Medicare FFS Beneficiaries</b>	<b>Total Beneficiaries report High Cholesterol</b>	<b>Percent</b>	
Los Alamos	2,702	1,219	<b>45.1%</b>	
New Mexico	228,157	78,979	34.6%	
United States	33,725,823	13,714,033	40.6%	
<small>Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the Health Indicators Warehouse. US Department of Health &amp; Human Services, Health Indicators Warehouse. 2006-12.</small>				

CLINICAL CONDITIONS				NARRATIVE		
<b>CARDIAC (continued)</b>						
<ul style="list-style-type: none"> <li>Heart Disease – Adult, 2011-2012</li> </ul>				<p>659, or 3.9% of adults aged 18 and older in Los Alamos County have ever been told by a doctor that they have coronary heart disease or angina. Coronary heart disease is a leading cause of death in the U.S. and is related to high blood pressure, high cholesterol, and heart attacks.</p>		
<b>AREA</b>	<b>Survey Population (Adults 18+)</b>	<b>Total Adults Self-Report Heart Disease</b>	<b>Percent</b>			
Los Alamos	17,037	659	3.9%			
New Mexico	1,542,982	59,625	3.9%			
United States	236,406,904	10,407,185	4.4%			
<ul style="list-style-type: none"> <li>Heart Disease – Medicare Population, 2011-2012</li> </ul>						
<b>AREA</b>	<b>Medicare Fee-For-Service</b>	<b>Medicare FFS with Heart Disease</b>	<b>Percent of Medicare FFS with Heart Disease</b>			
Los Alamos	2,702	462	17.1%			
New Mexico	228,157	48,713	21.4%			
United States	33,725,823	9,076,698	26.9%			
<b>CARDIAC MORTALITY</b>						
<ul style="list-style-type: none"> <li>Coronary Heart Disease Mortality, 2011-2016</li> </ul>				<p>Within Los Alamos County, the rate of death due to coronary heart disease (ICD10 Codes I20-I25) per 100,000 population is 61.9. This rate is less than the Healthy People 2020 target of less than or equal to 103.4. Figures are reported as crude rates, and as rates age-adjusted to year 2000 standard.</p> <p>This indicator offers the same data for those 65 year of age and older.</p> <p>The only group by race or ethnicity with sufficient data was Non-Hispanic Whites with two-thirds of the death rate from coronary heart disease than for the State, and 40% less than that of the U.S.</p>		
<b>AREA</b>	<b>Total Population</b>	<b>Average Annual Deaths, 2011-2016</b>	<b>Crude Death Rate (per 100,000)</b>			<b>Age-Adjusted Death Rate (per 100,000)</b>
Los Alamos	18,031	16	86.5			61.9
New Mexico	2,084,828	2,407	115.4			97.3
United States	321,004,407	366,195	114.1			97.1
<ul style="list-style-type: none"> <li>Coronary Heart Disease Mortality, Age-Adjusted Rate by Gender</li> </ul>						
<b>AREA</b>	<b>Male CHD Death Rate, per 100,000 population 2011-2016</b>	<b>Female CHD Death Rate, Per 100,000 population 2011-2016</b>				
Los Alamos	91.7	36.6				
New Mexico	132.5	67.9				
United States	131.5	70				
<ul style="list-style-type: none"> <li>Coronary Heart Disease Mortality, Age-Adjusted Rate by Race/Ethnicity</li> </ul>						
<b>AREA</b>	<b>Non-Hispanic White CHD Death Rate</b>	<b>Non-Hispanic Black CHD Death Rate</b>	<b>Non-Hispanic Asian CHD Death Rate</b>	<b>Non-Hispanic American Indian CHD Death Rate</b>	<b>Hispanic CHD Death Rate</b>	
Los Alamos	65.9	No data	No data	No data	No data	
New Mexico	102.7	121.6	51.4	68.5	90.1	
United States	99.5	112.6	55.2	73.1	74.4	
<p><i>Source: Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER. 2013-17</i></p>						


CLINICAL CONDITIONS				NARRATIVE																																																				
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<ul style="list-style-type: none"> <li>STI – HIV Screening</li> </ul>				<p>This indicator reports the self-reported percentage of Los Alamos County adults 18 to 70 years of age they have NEVER had a HIV screening</p>																																																				
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CLINICAL CONDITIONS				NARRATIVE									
COMMUNICABLE DISEASE (continued)													
<ul style="list-style-type: none"> <li>STI – Gonorrhea Incidence</li> </ul>				This indicator reports the incidence rate (new cases) of gonorrhea cases per 100,000 population.									
AREA	TOTAL POPULATION	TOTAL GONORRHEA INFECTIONS	GONORRHEA INCIDENCE RATE (PER 100,000)										
Los Alamos	18,031	1	5.5										
New Mexico	2,084,828	3,516	168.6										
United States	321,004,407	468,514	145.8										
Source: US Department of Health & Human Services, Health Indicators Warehouse. Centers for Disease Control and Prevention, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention. 2016.													
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Gonorrhea Incidence Rate (Per 100,000 Pop.) by Year, 2005 through 2016													
Report Area	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	
Los Alamos County, NM	37.19	26.29	10.78	5.51	0	0	10.98	10.98	0	11.24	11.25	5.62	
New Mexico	81.06	89.3	91.34	70.71	53.9	59.52	88.5	90.38	92	107.7	119.37	168.62	
United States	114.9	120.1	118.1	110.7	98.2	100	103.3	106.7	105.3	110.7	122.96	145.76	
CLINICAL CONDITIONS				NARRATIVE									
DENTAL DISEASE													
<ul style="list-style-type: none"> <li>Access to Dentist (repeated from 'ACCESS')</li> </ul>				This includes all dentists—those with a Doctorate in Dental Surgery (DDS) or in Dental Medicine (DMD) licensed by New Mexico to practice dentistry and are still practicing.									
AREA	Total Population	Total Dentists	Dentists, Rate Per 100,000 Population										
Los Alamos	18,013	18	101.21										
New Mexico	2,084,828	1,287	61.7										
United States	321,004,407	210,832	65.7										
Source: U.S. Department of Health & Human Services, Health Resources and Services Administration, Area Health Resource File, 2015													
<ul style="list-style-type: none"> <li>Poor Dental Health (repeated from 'Health Status')</li> </ul>				This reflects adults age 18 and older who report that six or more of their permanent teeth have been removed due to tooth decay, gum disease or infection.									
AREA	Total Population	Self-Reported Population with self-reported 6 or more teeth removed	Percent of Adults self-reporting Poor Dental Health										
Los Alamos	13,462	684	5%										
New Mexico	1,521,911	216,728	14.2%										
United States	232,556,016	36,842,620	15.7%										
<ul style="list-style-type: none"> <li>Dental Utilization</li> </ul>				This indicator reports the percent of adults that self-reported that they have not visited a dentist, dental hygienist or dental clinic within the past year. This is relevant because it indicates the likelihood of developing future problems.									
AREA	Total Population (Age 18+)	Total Adults without Recent Dental Exam	Percent Adults without Recent Dental Exam										
Los Alamos	13,656	2,130	15.6%										
New Mexico	1,522,911	516,983	34%										
United States	235,375,690	70,965,788	30.2%										
Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the Health Indicators Warehouse. US Department of Health & Human Services, Health Indicators Warehouse. 2006-12													



CLINICAL CONDITIONS				NARRATIVE										
<b>DIABETES</b>														
<ul style="list-style-type: none"> <li>Diabetes - Adult</li> </ul>				<p>This indicator reports the percent of adults aged 20 and older who have ever been told by a doctor that they have diabetes. This indicator is relevant because diabetes is a prevalent problem in the U.S.; it may indicate an unhealthy lifestyle and puts individuals at risk for further health issues. The second statistic offers this data by gender.</p>										
<b>AREA</b>	<b>Survey Population (Adults 20+)</b>	<b>Total Adults Self-Report Diabetes</b>	<b>Percent</b>											
Los Alamos	13,531	866	5%											
New Mexico	1,539,723	137,373	7.9%											
United States	243,852,590	25,204,602	9.3%											
<ul style="list-style-type: none"> <li>Adults with Diabetes by Gender</li> </ul>														
<b>AREA</b>	<b>Males with Diabetes (# and %)</b>	<b>Females with Diabetes (# and %)</b>												
Los Alamos	430 (5%)	436 (5%)												
New Mexico	70,711 (8.5%)	66,664 (7.3%)												
United States	12,561,953 (10%)	12,193,905 (8.7%)												
<p><i>Source: Centers for Disease Control &amp; Prevention, National Center for Chronic Disease and Health Promotion, 2016.</i></p>														
<ul style="list-style-type: none"> <li>Diabetes Population by Year (Adult then just Medicare)</li> </ul>														
<b>Report Area</b>	<b>2011</b>	<b>2012</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>							
Los Alamos County, NM	14.40%	14.50%	14.90%	15.47%	15%	15.72%	16.28%							
New Mexico	24.92%	25.20%	25.23%	25.34%	25.42%	25.45%	25.64%							
United States	27.52%	27.62%	27.54%	27.43%	27.36%	27.33%	27.24%							
<ul style="list-style-type: none"> <li>Diabetes Management – Hemoglobin A1C Test</li> </ul>				<p>This indicator provides self-reported data on the percent of diabetic Medicare patients who had a hemoglobin A1c (hA1c) test, a blood test which measures blood sugar levels, administered by a health care professional in the past year.</p>										
<b>AREA</b>	<b>Medicare Fee-For-Service Enrollees</b>	<b>Medicare FFS with Diabetes</b>	<b>Medicare FFS with Diabetes with Annual HB A1c</b>					<b>% Medicare FFS with Diabetes with Annual HB A1c</b>						
Los Alamos	2,387	152	136					90.1%						
New Mexico	180,688	19,289	14,116					73.2%						
United States	26,937,083	2,919,457	2,501,671					85.7%						
<p><i>Source: Dartmouth College Institute for Health Policy &amp; Clinical Practice, Dartmouth Atlas, 2015</i></p>														
<b>OVERWEIGHT/OBESE</b>														
<ul style="list-style-type: none"> <li>Adults that self-report Overweight, 2016</li> </ul>								<p>Over one-third (33.4%) of Los Alamos County residents self-report that they are overweight (BMI between 25 and 30).</p>						
<b>AREA</b>	<b>Total Population (Age 18+)</b>	<b>Total Adults self-reporting Overweight</b>	<b>Percent Adults self-reporting Overweight</b>											
Los Alamos	16,326	5,449	33.4%											
New Mexico	1,474,996	527,781	35.8%											
United States	224,991,207	80,499,532	35.8%											
<p><i>Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the Health Indicators Warehouse. US Department of Health &amp; Human Services, Health Indicators Warehouse. 2016.</i></p>														

CLINICAL CONDITIONS													NARRATIVE	
<b>OVERWEIGHT/OBESE</b>														
<ul style="list-style-type: none"> <li>Adults that self-report Obesity (Body Mass Index &gt; 30.0), 2016</li> </ul>													Over one-fifth of Los Alamos County residents (22.4% of adults aged 20 and older) self-report that they have a Body Mass Index (BMI) greater than 30.0 (obese).	
<b>AREA</b>	<b>Total Population (Age 20+)</b>	<b>Total Adults self-reporting Body Mass Index &gt; 30.0</b>					<b>Percent Adults self-reporting Body Mass Index &gt; 30.0</b>							
Los Alamos	13,589	3,139					22.4%							
New Mexico	1,538,106	409,344					26.6%							
United States	241,490,773	69,953,947					28.8%							
<ul style="list-style-type: none"> <li>Percent of Adults that self-report Obesity by Gender, 2016</li> </ul>													Males are higher for Female self-reported obesity in all three comparative areas, although for the United States, this gap is narrowing.	
<b>AREA</b>	<b>Males self-reporting Body Mass Index &gt; 30.0 (# and %)</b>					<b>Females self-reporting Body Mass Index &gt; 30.0 (# and %)</b>								
Los Alamos	1,727 (24.2%)					1,411 (20.6%)								
New Mexico	208,478 (27.5%)					200,868 (25.7%)								
United States	34,425,823 (29.1%)					35,528,108 (28.6%)								
<ul style="list-style-type: none"> <li>Percent of Adults that are Obese by Year, 2004-2016</li> </ul>													The rate of self-reported obesity has increased for Los Alamos County New Mexico and the U.S. since 2004 with movement into the 20 <sup>th</sup> percentile for Los Alamos County area in 2014 (eight years after New Mexico).	
<b>Report Area</b>	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>	<b>2010</b>	<b>2011</b>	<b>2012</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>		<b>2016</b>
Los Alamos County, NM	15.3%	16.32%	18%	19%	19.2%	18.8%	18.4%	19.7%	19.9%	19.5%	20.1%	21.2%		22.4%
New Mexico	18.9%	19.8%	20.6%	21.7%	22.4%	23.3%	23.1%	23%	23.1%	23.4%	24%	24.9%		25.8%
United States	23.1%	23.8%	24.8%	25.6%	26.2%	27.2%	27.1%	27%	26.8%	27.1%	27.4%	27.7%	28.3%	
<i>Source: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion. 2016.</i>														
CLINICAL CONDITIONS													NARRATIVE	
<b>RESPIRATORY</b>														
<ul style="list-style-type: none"> <li>Asthma - Prevalence</li> </ul>													This indicator reports the percentage of adults aged 18 and older who self-report that they have ever been told by a doctor, nurse, or other health professional that they had asthma. This indicator is relevant because asthma is a prevalent problem in the U.S. exacerbated by poor environmental conditions	
<b>AREA</b>	<b>Survey Population (Adults 18+)</b>	<b>Total Adults Self-Report Asthma</b>					<b>Percent</b>							
Los Alamos	16,886	2,239					13.3%							
New Mexico	1,543,499	219,680					14.2%							
United States	237,197,465	31,697,608					13.4%							
<i>Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Additional data analysis by CARES. 2011-12.</i>														
<b>STROKE</b>														
<ul style="list-style-type: none"> <li>Cerebrovascular Disease (Stroke) Deaths – Adult, 2015-2017</li> </ul>													Within Los Alamos County, there are an estimated 31.3 deaths due to stroke (cerebrovascular disease) per 100,000 population.	
<b>AREA</b>	<b>Total Population</b>	<b>Total Deaths from CVA (Stroke)</b>		<b>Crude Death Rate (per 100,000)</b>		<b>Age-Adjusted Death Rate (per 100,000)</b>								
Los Alamos	54,939	17		36.8		31.3								
New Mexico	6,308,753	2,540		34		33.6								
United States	908,082,355	33,872		37.3		37.1		This is less than the Healthy People 2020 target of less than or equal to 33.8.						
<i>Source: Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER. 2013-17.</i>														

DISABILITY	NARRATIVE																																																																																																			
	In Los Alamos County, there are 1,978 residents living with a disability or 11% of the total population. This compares to 26% of the adult population in the U.S.																																																																																																			
 <p>EXPLORE LIVE MAP AT: <a href="http://arcg.is/0WVGK000">http://arcg.is/0WVGK000</a></p>	<p><i>People have more than one disability by type. Given a total of 1,978 disabled and 3,224 disabilities, there are 1.63 disabilities per disabled in Los Alamos County, New Mexico.</i></p>																																																																																																			
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MORTALITY					NARRATIVE
<b>UNINTENTIONAL INJURY MORTALITY</b>					
<ul style="list-style-type: none"> <li>Unintentional Injury (Accident) Mortality</li> </ul>					<p>This indicator reports the rate of death due to unintentional injury (accident) per 100,000 population.</p> <p>The crude and age-adjusted rates for Los Alamos County are higher than that of the U.S., but lower than New Mexico. The disparity appears to be for males, with a higher rate for New Mexico and the U.S.</p>
<b>AREA</b>	<b>TOTAL POPULATION</b>	<b>AVERAGE ANNUAL DEATHS FROM UNINTENTIONAL INJURY, 2012-2016</b>	<b>CRUDE DEATH RATE (per 100,000)</b>	<b>AGE-ADJUSTED DEATH RATE</b>	
Los Alamos	18,031	10	55.5	49.2	
New Mexico	2,084,828	1,431	68.6	67.2	
United States	321,004,407	148,873	46.4	44	
<ul style="list-style-type: none"> <li>Unintentional Injury Mortality, Age-Adjusted Rate by Gender</li> </ul>					
<b>AREA</b>	<b>MALE</b>	<b>FEMALE</b>			
Los Alamos	62.5	35.5			
New Mexico	89.9	44.9			
United States	59.9	29.1			
<b>DRUG OVERDOSE MORTALITY (repeated from Mental Health)</b>					
<ul style="list-style-type: none"> <li>Drug Overdose Mortality</li> </ul>					<p>This indicator reports the rate of death due to drug overdose of Los Alamos County residents. It is reported as crude death rate and age-adjusted death rate (where data is available). <i>This indicator is only somewhat reliable due to stigma in accurate reporting.</i></p>
<b>AREA</b>	<b>Total Population</b>	<b>Average Annual Deaths by Drug Overdose, 2011-16</b>	<b>Crude Death Rate (Per 100,000)</b>	<b>Age-Adjusted Death Rate</b>	
Los Alamos	17,914	3	14.5	suppressed	
New Mexico	2,084,504	500	23.9	25	
United States	318,689,254	49,715	15.4	15.6	
<p><i>Source: Centers for Disease Control and Prevention. National Vital Statistics System. Accessed via CDC Wonder, 2013-2017.</i></p>					
<b>ALCOHOL RELATED DEATHS)</b>					
<ul style="list-style-type: none"> <li>Alcohol-Related Deaths, 2014-2018</li> </ul>					<p>The consequences of excessive alcohol use are severe in New Mexico. New Mexico's total alcohol-related death rate has ranked first, second, or third in the US since 1981; and 1st for the period 1997 through 2010 (the most recent year for which state comparison data are available). The negative consequences of excessive alcohol use in New Mexico are also include domestic violence, crime, poverty, and unemployment, as well as chronic liver disease, motor vehicle crash and other injuries, mental illness, and a variety of other medical problems. Nationally, one in ten deaths among working age adults (age 20-64) is attributable to alcohol. In New Mexico this ratio is one in six deaths.</p>
<b>AREA</b>	<b>Total Population (2014-18)</b>	<b>Total Alcohol Related Deaths (2014-18)</b>	<b>Crude Alcohol Related Death Rate 2014-2018</b>	<b>Age-Adjusted Alcohol Related Death Rate per 100,00 population</b>	
Los Alamos	90,641	31	34	31	
New Mexico	10,504,397	7,183	64.6	65.6	
United States	1,510,134,705	483,240	32	34	
<p><i>Sources: NMDOH BVRHS death files and UNM-GPS population files; CDC ARDI; SAES</i></p>					

PREMATURE DEATH (repeated from Health Status)					This indicator reports Years of Potential Life Lost (YPLL) before age 75 per 100,000 population for all causes of death, age-adjusted to the 2000 standard. YPLL measures premature death and is calculated by subtracting the age of death from the 75-year benchmark. This indicator is relevant because a measure of premature death can provide a unique and comprehensive look at overall health status.
• Premature Death, Years of Potential Life Lost					
AREA	Total Population (3-years from 2015-17)	Total Premature Deaths (2015-17)	Total Years of Potential Life Lost, 2015-17 Average	Years of Potential Life Lost, Rate per 100,00 population	
Los Alamos	50,605	123	2,212	4,371	
New Mexico	5,836,294	27,215	516,758	8,854	
United States	908,082,355	3,744.984	63,087,358	6,947	

*Source: University of Wisconsin Population Health Institute, County Health Rankings, 2017*

• Premature Death, Years of Potential Life Lost							
Report Area	1997-1999	2000-2002	2003-2005	2006-2008	2009-2011	2012-2014	2015-2017
Los Alamos County, NM	3,487.2	5,913.8	3,251.4	3,255	4,612.6	3,307.9	4,371
New Mexico	8,086.8	8,163.4	8,359.2	8,286.74	7,924.5	8,207.1	8,799.84
United States	7,705.2	7,535	7,345	7,090.49	6,703.7	6,601.2	6,900.63

**APPENDIX D: GAP PRIORITY MATRIX**

Priority of Gaps	Count	Percent
Health Care Access/ Healthcare Workforce/Health Insurance	5	56%
Lack of Affordable and Acceptable Housing Stock	5	56%
Culture of Alcohol Acceptance & Drug Use: Substance Use	5	56%
Mental Health: High Stress/Anxiety/Needs of New Residents	4	44%
Silent but Sizeable 'Near Poor' Population with high stigma and unawareness of resources	4	44%
Demographic groups of concern that are growing in size with risk factors	2	22%
Other: Lack of affordable childcare	2	22%

## APPENDIX E: RESOURCE INVENTORY

CATEGORY	DETAIL OF SUB-CATEGORIES OF SERVICES (an Excel file details these by Agency/Organization with Services, Contact Information provided)										
Basic Needs	Food Pantries	Heating Fuel	Housing/ Shelter	Material Goods/ Personal Care	Temporary Financial Assistance	Transport	Utilities	Clothing			
Consumer Services	Consumer Assistance & Protection	Consumer Regulation	Tax Organization Assistance Services	Financial & Budgeting Assistance							
Criminal Justice and Legal Services	Courts	Criminal Justice	Judicial Service	Law Enforcement Agencies	Law Enforcement	Legal Assistance Modalities	Legal Services	Juvenile Justice			
Education	Schools	Education Programs	Educational Support Services	Senior or Target Group Programs							
Environment and Public Health/Safety	Environment Protection	Public Health	Public Safety	Safety Inspections							
Health Care	Dental Services	Disability Services	Emergency Medical Care	General Medical Care	Health Screen/ Diagnosis	Health Supportive Services	Home Care	Human Reproduction	Indigent Health	Inpatient & Outpatient Health	Rehab
Income Support and Employment	Employment Assistance	Public Assistance	Social Insurance	Temporary Financial Assistance	Employment Training						
Individual and Family Life	Domestic Animal Services	Family Violence	Individual & Family Support	Leisure Activities	Mutual Support	Senior Services	Social Development & Enrichment	Spiritual Enrichment	Volunteer Programs	Counseling (i.e. Triple P)	
Mental Health and Substance Abuse	Counseling Approaches	Counseling Services	Counseling Settings	Crisis Hotlines	Mental Health Care Facilities	Mental Health Treatment	Mental Health Support	Substance Abuse Services	Spectrum of SUD: OP, IOP, Residential		
Community Services	Arts & Culture	Community Economic Development.	Community Groups	Community Planning	Disaster Services	Donor Services	Information Services	Military Services	Organizational Development	Services aimed at Special Needs	
Target Populations	Age Groups	Disabled & Chronic Health	Ethnic Groups/ National	Families & Individuals needing Support	Religious Groups	Sex/ Gender	LGBTQIA				

AN EXCEL SPREADSHEET DISPLAYS THIS INFORMATION IN DETAIL WITH CONTACT INFORMATION.

# LOS ALAMOS

where discoveries are made



## **CONTRAFACTUAL ANALYSIS: KEY INDICATORS AT 1 (2021), 3 (2023) & 5 (2025) YEARS IF 'DO NOTHING'**

A STATISTICAL DESCRIPTION OF THE IMPACT OF INACTION  
OR TREND ANALYSIS OF LOS ALAMOS COUNTY

**March 12, 2020**



## EXECUTIVE SUMMARY

**A sizable population of 5-8% is projected at the 5-year future with more significant growth anticipated in the next ten years due to funding increases of 30% for the dominant employer, the Los Alamos National Laboratory.**

While the historical trend shows a 2019 population of 19,101; recent funding increases to the Los Alamos National Laboratory (LANL) and related construction indicate a 5-8% increase in population growth by 2025-2030 resulting in a total of 22,000 to 24,000 in total population.

From the 2018 Economic Vitality Strategic Plan (p. 30), “LANL is working to fill projected vacancies created by retirees with new employees, hiring approximately 1,000 in 2016, another 1,000 in 2017, 800 in 2018 and an estimated 800 in 2019. The County is working with the Lab to support recruitment efforts to bring new workers and their families to live and work in Los Alamos.”

*Table 1. Population Trend for Los Alamos County, New Mexico with 1, 3- and 5-year projections*

LOS ALAMOS COUNTY	2010	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	2030
POPULATION	17950	17830	18239	18804	19101	19,660	21,000	21,200	21,500	21,700	21,900	22,000	24,000

Source: U.S. Census 200, Population Division, Annual Estimate of Resident Population, April 1, 2010 to July 1, 2018 (PEPANRES)

*Table 2. New Mexico Projections for Population in Los Alamos County in 5-year increments*

County Projection	2010-2015	2015-2020	2020-2025	2025-2030
Los Alamos % change	0.04	0.01	5-7%	8-14%

Source: bber-old.unm.edu/demo/PopProjTable2.htm (Bureau of Business & Economic Research)

*Table 3. Population in Los Alamos County by Age Group, 2017*

Population by Age, Number, 2017				Population by Age, Percent, 2017			
Age Group	LOS ALAMOS COUNTY NM	NEW MEXICO	UNITED STATES	Age Group (Percent)	LOS ALAMOS COUNTY, NM	NEW MEXICO	UNITED STATES
0-4 years	974	131,062	19,853,515	0-4 years	5.4%	6.29%	6.18%
5-17 years	3,186	366,665	53,747,764	5-17 years	17.67%	17.59%	16.74%
18-24 years	1,167	205,471	31,131,484	18-24 years	6.47%	9.86%	9.7%
25-34 years	1,912	278,395	44,044,173	25-34 years	10.6%	13.35%	13.72%
35-44 years	2,061	244,717	40,656,419	35-44 years	11.43%	11.74%	12.67%
45-54 years	2,852	258,110	43,091,143	45-54 years	15.82%	12.38%	13.42%
55-64 years	3,153	271,726	40,747,520	55-64 years	16.76%	13.03%	12.69%
65+ years	3,499	328,682	47,732,389	65+ years	18.61%	15.77%	14.87%

Source: U.S. Census Bureau, American Community Survey, 2013-17 5-year estimate.

## PREFACE

The indicators shown below represent key gaps in Health Services presented by Demographic, Socioeconomic and Health (Epidemiologic) factors in Los Alamos County and supported by process and qualitative research (interviews, focus groups). This summary presents the cost of ‘doing nothing’ over the next 1, 3 and 5 years or a contrafactual case.

The demographic issues are serious as a decline in population base exacerbates case rates and percentage impact of individual indicators. Socioeconomic impact for Los Alamos County is not as key a factor as for many county or regional analyses due to the affluent nature of the community, although the invisible ‘near poor’ are presented as a potential issue with detail provided by age group, gender and occupation. Epidemiologic or health factors are the focus of this study, and are presented for key areas although it must be stated that the current and historical health status of Los Alamos County is superb compared to any metric—to Healthy People 2020 goals (many of which it exceeds), to the State of New Mexico, to the United States and to neighboring Benchmark Counties or Communities.

The areas recurrently referenced as gaps for healthcare services that contribute to diminished health status include:

- (1) *Health Care Access/ Healthcare Workforce deficits/Health Insurance acceptance by providers*
- (2) *Lack of Affordable and Acceptable Housing Stock*
- (3) *Culture of Alcohol Acceptance & Drug Use: Substance Use*
- (4) *Mental Health: High Stress/Anxiety/Needs of Residents*
- (5) *Silent but Sizeable ‘Near Poor’ Population*

It should be noted that these five (5) gaps link to other issues. The growing senior population and the issue with inadequate healthcare access due to a small workforce are highly linked to lower screening rates for clinical conditions resulting in the few unfavorable health outcomes that were noted. Similarly, the silent but sizeable ‘near poor’ segment is related to subsistence issues of housing.

The study is in the final stages of completion, with a Steering Committee comprised of ten (10) members, six of whom represent different sectors of Los Alamos County, currently being polled for consensus on identified gaps. The remaining four (4) individuals are employees of Los Alamos County, in the Community Services Department.

These are shown in the following ballot with related data source inputs. Not all identified gaps lend themselves to a quantitative, contrafactual or ‘cost of doing nothing’ analysis.

Areas that were referenced but do not have a clear contrafactual analysis are not ‘checked.’

## Steering Committee Rank of Gaps (due by noon on July 23, 2020)

1. Below please find the six (6) identified Health Services Gaps for Los Alamos County based on the process followed in 2020. Please rank your top 3 Gap Priorities.

We have provided 'Other' if you believe a Gap is missing.

### Select Top 3 (ONLY 3)

- Health Care Access/ Healthcare Workforce/Health Insurance
- Lack of Affordable and Acceptable Housing Stock
- Culture of Alcohol Acceptance & Drug Use: Substance Use
- Mental Health: High Stress/Anxiety/Needs of New Residents
- Silent but Sizeable 'Near Poor' Population with high stigma and unawareness of resources
- Demographic groups of concern that are growing in size with risk factors
- OTHER (please fill in any other findings that you derived from this process)

## EXECUTIVE SUMMARY

### 1) HEALTH CARE ACCESS/ HEALTH CARE WORKFORCE/HEALTH INSURANCE

*Los Alamos County Health Care Workforce, 2015-16 and 1, 3 and 5-year projections*

HEALTH CARE WORKFORCE	RATIO PER 1,000 POPULATION/%	NUMERATOR	DENOMINATOR	YEAR	PROJECTION		
					2021	2023	2025
Primary Care Providers	2.07 per 1,000	39	18,804	2017	40	41	42
Dentists	1.01 per 1,000	18	17,785	2015	19	20	20
Mental Health	2.08 per 1,000	39	17,785	2015	38	40	41
Uninsured	4.3%	776	17,947	2017			
Lack of Access to Prenatal Care	68.5%	115	168	2017	69%	70%	72%

Sources: 2015-2016 - New Mexico Health Care Workforce Committee, University of New Mexico Health Sciences Center  
2025 - Population Estimates: University of New Mexico, Geospatial and Population Studies (GPS) Program, <http://gps.unm.edu/>

### CLINICAL CONDITIONS

*Los Alamos County Cancer Incidence, 2015-16 and 1, 3 and 5-year projections*

CANCER TYPE INCIDENCE	RATE PER 100,000 POPULATION	NUMERATOR	DENOMINATOR	YEARS	PROJECTION		
					2021	2023	2025
Cervical	6.5	4	44,570	2011-15	6.5	6.5	6.5
Breast	154.8	14	26,013		155.2	155.4	155.7
Prostate	116.7	74	45,399		116.9	117	117.2
Thyroid	19.2	96	47,791		19.5	19.7	19.8

### EMERGING OVERWEIGHT/OBESITY AND DIABETES RISK

*Los Alamos County: Overweight/Obese & Diabetes Incidence, 2015-16 and 1, 3 and 5-year projections*

CATEGORY	PERCENT	NUMERATOR	DENOMINATOR	YEAR	PROJECTION		
					2021	2023	2025
Overweight	33.4%	5,449	16,326	2016	34%	35%	35%
Obese	22.4%	3,139	13,589		23.4%	23.8%	24.2%
Diabetes	5%	866	13,531		5.6%	5.7%	5.9%

### 2) LACK OF AFFORDABLE AND ACCEPTABLE HOUSING STOCK

*Los Alamos County: Housing Type and Cost Burden, 2015-16 and 1, 3 and 5-year projections*

CATEGORY	PERCENT	NUMERATOR	DENOMINATOR	YEARS	PROJECTION		
					2021	2023	2025
TOTAL COST BURDENED DUE TO HOUSING	13.8%	1,036	7,525	2013-17	14%	14.5%	15%
Rent	25.3%	502	1,982	2011-15	25.5%	25.7%	26%
Mortgage	12.1%	411	3,388		12.1%	12.2%	12.3%
No Mortgage	5.7%	123	2,155		5.7%	5.8%	5.8%

### 3) CULTURE OF ALCOHOL ACCEPTANCE & DRUG USE: SUBSTANCE USE

Los Alamos County: Alcohol Consumption, Deaths, Drug Overdose Death and 1, 3 and 5-year projections

CATEGORY	PERCENT/ RATE PER 100,000 POPULATION	NUMERATOR	DENOMINATOR	YEARS	PROJECTION		
					2021	2023	2025
Alcohol Use	16.8%	1,955	13,656	2006-12 2014-18 2013-17	17%	17.2%	17/4%
Alcohol related deaths	31/ 100,000	31	90,641		32/ 100,000	32.2	32.3
Alcohol Related Injury Deaths	19..6/ 100,000	18	90,641		19.6/ 100,000	19.7	19.7
Drug Overdose Deaths	31.8/ 100,000	29	90,641	2004-17	33.0/ 100,000	33.7	34.3

### 4) MENTAL HEALTH

Los Alamos County: Depression, Suicidal Ideation, Suicide Deaths, 2015-16 and 1, 3 and 5-year projections

CATEGORY	PERCENT. RATE PER 100,000 POPULATION	NUMERATOR	DENOMINATOR	YEARS	PROJECTION		
					2021	2023	2025
Depression	14.2%	384	2,702	2017- 2019	15%	15%	15.5%
Suicidal Ideation	21.2%	DNA	DNA	2003, 2015	23.7%	24.2%	24.7%
Suicide Attempts	14.5% (2003) to 9.4% (2015)				10%	11%	11.5%
Suicide Deaths	15.5/ 100,000	3	18,031	2013-17	16/ 100,000	16	16

### SIGNIFICANT AND GROWING SENIOR POPULATION

Los Alamos County: % Seniors, Poverty Level, 2015-16 and 1, 3 and 5-year projections

CATEGORY	PERCENT	NUMERATOR	DENOMINATOR	YEAR	PROJECTION		
					2021	2023	2025
% Seniors	18.61%	3,499	328,682	2017	19.2%	20.4%	21%
Seniors in Poverty	5.1%	155 (75+) 10 (65-74) = 165	3,254		5.2%	5.3%	5.5%

### MERGING RISK ISSUES WITH TWEEN (10-12) AND TEEN (13-17) POPULATION

Los Alamos County: % Tweens, Teens & Risk Factors, 2015-16 and 1, 3 and 5-year projections

CATEGORY	PERCENT	%	NUMERATOR	DENOMINATOR	YEAR	PROJECTION		
						2021	2023	2025
Tweens	6.2%	13.4%	1,166	18,804	2017	14.2%	14.7%	15%
Teens	7.2%		1,354	18,804				
Bullying-school	31.5%					32%	32%	33%
Electronic	22.6%					23%	24%	25%
Substance Use-Drugs	16.6%					17%	17%	17.5%
Alcohol	22%					22%	23%	23%

### 5) SILENT BUT SIZEABLE 'NEAR POOR' POPULATION

*Los Alamos County: % by FPL, 2015-16 and 1, 3 and 5-year projections*

CATEGORY	FPL (At or Below)	NUMERATOR	DENOMINATOR	YEARS	PROJECTION		
					2021	2023	2025
Extreme Poor	50%	2.1%	386	2017	1.9%	2.0%	2.0%
Poor	100%	5.1%	920		5.1%	5.1%	5.1%
Living in Debt	185%	10.8%	1,941		11%	11.2%	11.2%
Working Poor	200%	11.5%	2,079		11.8%	12%	12.2%

## DETAIL OF FINDINGS

### 1. HEALTH CARE ACCESS/ HEALTH CARE WORKFORCE

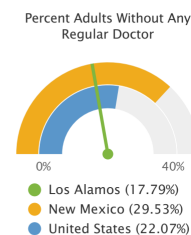
Table 5. Access to Primary Medical Care per 100,000 population, 2017

AREA	TOTAL POPULATION	PRIMARY CARE PHYSICIANS, 2017	PCP, RATE PER 100,000 POPULATION
Los Alamos County	18,804	39	207.4
New Mexico	2,095,428	1,779	84.9
United States	327,167,434	372,204	87.9

The ratio of primary care physicians to total population is 180.98, favorable compared to New Mexico or the United States.

Figure 1. Total Adults without a Regular Doctor

Report Area	Survey Population (Adults Age 18+)	Total Adults Without Any Regular Doctor	Percent Adults Without Any Regular Doctor
Los Alamos County, NM	17,036	3,031	17.79%
New Mexico	1,543,870	455,971	29.53%
United States	236,884,668	52,290,932	22.07%



Note: This indicator is compared to the state average.  
Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Additional data analysis by CARES, 2011-12. Source geography: County

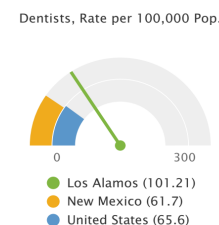
Almost twenty-percent (17.8%) of adults perceive that they don't have access to a regular primary care physician in Los Alamos County per the most recent Behavioral Risk Factor Surveillance System (BRFSS) study sponsored by the Centers for Disease Control & Prevention (CDC). While this is 'favorable' compared to New Mexico and the United States, and has improved over a ten-year period, analysis of individual provider types results in perceived gaps. Healthy People 2020 benchmarks are 1.7 per 1,000 for primary care providers which is a favorable indicator for Los Alamos County. This figure may represent the need for more intense care due to the high senior population. The response reflects survey, not actual healthcare ratios, and may reflect perceptions of waiting times.

Figure 23. Rate of Dentists per 100,000 population in Los Alamos County, 2015

#### Access to Dentists

This indicator reports the number of dentists per 100,000 population. This indicator includes all dentists - qualified as having a doctorate in dental surgery (D.D.S.) or dental medicine (D.M.D.), who are licensed by the state to practice dentistry and who are practicing within the scope of that license.

Report Area	Total Population, 2015	Dentists, 2015	Dentists, Rate per 100,000 Pop.
Los Alamos County, NM	17,785	18	101.21
New Mexico	2,085,109	1,287	61.7
United States	321,418,820	210,832	65.6



Note: This indicator is compared to the state average.  
Data Source: US Department of Health & Human Services, Health Resources and Services Administration, Area Health Resource File, 2015. Source geography: County

Figure 3. Adults with Dental Exam in Past Year, 2016

AREA	NUMERATOR	DENOMINATOR	PERCENTAGE
Los Alamos County	152	185	74%
New Mexico	9,428	14,127	62%
United States			66%

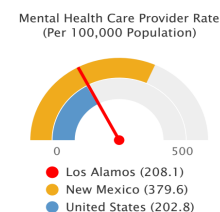
Source: Behavioral Risk Factor Surveillance System Survey Data, U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, together with New Mexico Department of Health, Injury and Behavioral Epidemiology Bureau, 2016.

The Healthy People 2020 goal of 69% is much lower than the 74% of Los Alamos County residents that have seen a dentist in the past year, with much higher rankings than the State (62%) and U.S. (66%).

Figure 4. Ratio of Mental Health Providers to Los Alamos County Population, 2017

This indicator reports the rate of the county population to the number of mental health providers including psychiatrists, psychologists, clinical social workers, and counsellors that specialize in mental health care.

Report Area	Estimated Population	Number of Mental Health Providers	Ratio of Mental Health Providers to Population (1 Provider per x Persons)	Mental Health Care Provider Rate (Per 100,000 Population)
Los Alamos County, NM	18,738	39	480.5	208.1
New Mexico	2,087,378	7,924	263.4	379.6
United States	317,105,555	643,219	493	202.8



Note: This indicator is compared to the state average.  
Data Source: University of Wisconsin Population Health Institute, County Health Rankings, 2017. Source geography: County

The rate of mental health providers per population is lower than that of New Mexico and the United States. The clinical conditions that present, with Findings #2 and #3 (culture of alcohol and drug acceptance and mental health issues, respectively) argue for more mental health and substance use counseling resources. Contributing to these issues is item #18 in the Gap Poll (Staff) and #16 (Space) listed in Table 4. Key Informant Interviews shared that there is a supply of mental health professionals that could alleviate this issue, but they are largely part-time due to family concerns and space available, sometimes shared space is not conducive to staggered shifts to improve access.

### Health Insurance Coverage

• Health Insurance by Type, 2017				Health insurance is considered a <b>key driver</b> of health status. This indicator reports the type of health insurance carried by residents of Los Alamos County.
TYPE	Total Population	Insured	Percent	
Employer	17,947	12,759	71.1%	
Individual		1,525	8.5%	
Medicare		2,350	13.1%	
Medicaid		465	2.6%	
Military/VA		72	0.4%	
Uninsured		776	4.3%	
Source: US Census Bureau, Small Area Health Insurance Estimates, 2017.				
• Uninsured, by Number and Percent, 2017				This indicator reports the percentage of residents without health insurance coverage. Lack of insurance is a primary barrier to healthcare access including regular primary care, specialty care, and other services that contributes to poor health status.
AREA	Total Population (for whom insurance is determined)	Population without Medical Insurance	Percent without Medical Insurance	
Los Alamos	17,947	776	4.32%	
New Mexico	2,051,101	256,162	12.5%	
United States	316,027,641	33,177,146	10.5%	



• Persons eligible for, and receiving, Medicaid, 2017

AREA	TOTAL POPULATION (For Whom Health Insurance Can Be Determined)	Population with Any Health Insurance	Population and Percent Receiving Medicaid
Los Alamos	17,947	17,171	885 (5.2%)
New Mexico	2,050,101	1,793,939	606,373 (33.8%)
United States	316,027,641	282,850,495	61,856,728 (21.9%)

Source: US Census Bureau, Small Area Health Insurance Estimates. 2017.

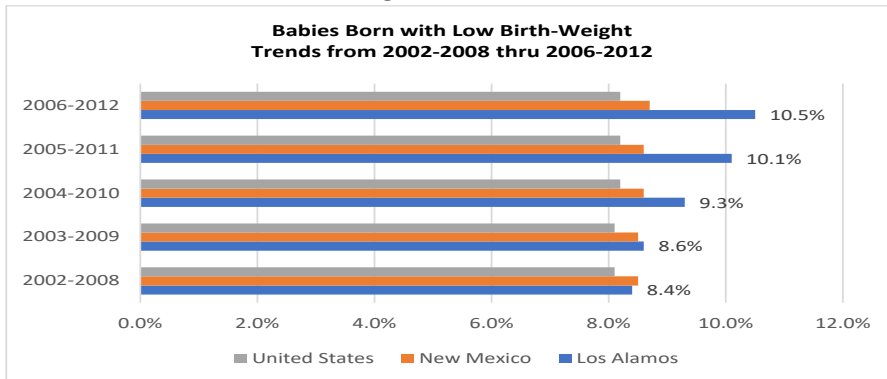
This indicator reports the percentage of the population with insurance enrolled in Medicaid. This indicator is relevant because it assesses vulnerable populations more likely to have multiple health access, health status, and social support needs. When combined with poverty data, providers can use this measure to identify gaps in eligibility and enrollment.

• Low-Birth Weight, 2015-17

AREA	Total Live Births	Low Birth Weight	Low Birth Weight, Percent of Total
Los Alamos	1,288	135	10.5%
New Mexico	204,764	17,814	8.7%
United States	29,300,495	2,402,641	8.2%

Low birthweight is defined as less than 2,500 grams (5 pounds, 8 ounces). LBW increases the risk for infant mortality and morbidity. As birthweight decreases, the risk for death increases. Low birthweight infants who survive often require intensive care at birth, may develop chronic illnesses, and later may require special education services. Health care costs and length of hospital stay are higher for low birthweight infants.

• Babies born with Low Birth Weight, Percent, 2002-2008 to 2006-2012



Source: US Department of Health & Human Services, Health Indicators Warehouse.

This indicator reports the percentage of total births that are low birth weight (Under 2500g). This indicator is relevant because low birth weight infants are at high risk for health problems. This indicator can also highlight the existence of health disparities.

Trend-Line for Low Birth-Weight expressed in 6-year increments from 2002 to 2012

Report Area	2002-2008	2003-2009	2004-2010	2005-2011	2006-2012
Los Alamos County, NM	8.4%	8.6%	9.3%	10.1%	10.5%
New Mexico	8.5%	8.5%	8.6%	8.6%	8.7%
United States	8.1%	8.1%	8.2%	8.2%	8.2%

• Prenatal Care in First Trimester, 2017

AREA	% First Trimester Prenatal Care	Numerator	Denominator
Los Alamos	68.5%	115	168
New Mexico	63.8%	15,131	23,708
United States	77.3%	DNA	DNA

Source: Birth Certificate Data, Bureau of Vital Records and Health Statist, 2015-ics (BVRHS), New Mexico Department of Health.2017 (DNA – Data Not Available)

The percent of early (first trimester) prenatal care in Los Alamos County is not favorable compared to the U.S., but is higher than that of New Mexico.

Both contribute to the unfavorable Low Birth Weight adverse health outcome. The Healthy People 2020 goal is 77.9%.

### Health Care Access/ Health Care Workforce/Health Insurance

Los Alamos County Health Care Workforce, 2015-16 and 1, 3 and 5-year projections

HEALTH CARE WORKFORCE	RATIO PER 1,000 POPULATION/%	NUMERATOR	DENOMINATOR	YEAR	PROJECTION		
					2021	2023	2025
Primary Care Providers	2.07 per 1,000	39	18,804	2017	40-42	41	42
Dentists	1.01 per 1,000	18	17,785	2015	19	20	20
Mental Health	2.08 per 1,000	39	17,785	2015	38	40	41
Uninsured	4.3%	776	17,947	2017	772	765	760
Lack of Access to Prenatal Care	68.5%	115	168	2017	120	125	130

Sources: 2015-2016 - New Mexico Health Care Workforce Committee, University of New Mexico Health Sciences Center

2025 - Population Estimates: University of New Mexico, Geospatial and Population Studies (GPS) Program, <http://gps.unm.edu/>

Access to Mental Health providers is an issue, however, with unfavorable ranking compared to State and National benchmarks. Los Alamos County should have 47 mental health providers, giving it a deficit of 8. This issue is believed to reflect the lack of a common space for health and social service providers, with a supply of mental health providers that work part-time and need flexible hours and related space to accommodate demand.

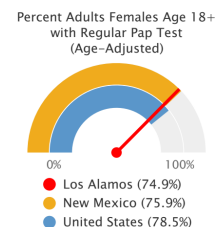
Lack of health insurance is not an issue in Los Alamos County but acceptance of Medicaid and even Commercial Health Insurance by providers was cited as a barrier to healthcare access in Key Informant Interviews and Focus Groups.

Lack of access to Prenatal Care, frequently referenced in Focus Groups and Key Informant Interviews, appears to be reflected in the percent of low birth weight deliveries, a statistic more frequently seen in low income or early age (teen births) despite neither of these factors being relevant in Los Alamos County.

## CLINICAL CONDITIONS

Figure 5. Estimated Number of Adult Females with Regular PAP test (screening for Cervical Cancer), 2012

Report Area	Female Population Age 18+	Estimated Number with Regular Pap Test	Crude Percentage	Age-Adjusted Percentage
Los Alamos County, NM	12,240	9,351	76.4%	<b>74.9%</b>
New Mexico	1,129,469	849,361	75.2%	75.9%
United States	176,847,182	137,191,142	77.6%	78.5%



Note: This indicator is compared to the state average.

Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the Health Indicators Warehouse. US Department of Health & Human Services, Health Indicators Warehouse. 2006-12. Source geography: County

Table 6. Estimated Number of Females with Cervical Cancer, 2011-2015

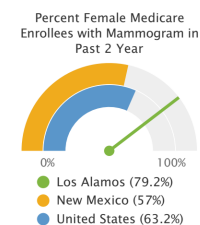
AREA	Total Population	New Cases of Cervical Cancer	Cervical Cancer Cases per 100,000
Los Alamos	44,570	4	<b>6.5</b>
New Mexico	1,722,717	126	7.3
United States	803,266,518	62,645	7.5

Sources for All following Figures and Tables:

1. Numerator: The New Mexico Tumor Registry, University of New Mexico Health Sciences Center, <http://hsc.unm.edu/som/nmtr/>
2. Population Estimates: University of New Mexico, Geospatial and Population Studies (GPS) Program, <http://gps.unm.edu/>
3. Centers for Disease Control and Prevention, National Center for Health Statistics, CDC WONDER Online Database

Figure 6. Estimated Number of Medicare Females with regular Mammogram (screening for Breast Cancer), 2015

Report Area	Total Medicare Enrollees	Female Medicare Enrollees Age 67-69	Female Medicare Enrollees with Mammogram in Past 2 Years	Percent Female Medicare Enrollees with Mammogram in Past 2 Year
Los Alamos County, NM	2,387	202	159	<b>79.2%</b>
New Mexico	180,688	17,687	10,076	57%
United States	26,937,083	2,544,732	1,607,329	63.2%



Note: This indicator is compared to the state average.

Data Source: Dartmouth College Institute for Health Policy & Clinical Practice, Dartmouth Atlas of Health Care. 2015. Source geography: County

Figure 7. Mammogram screening Trend-Line (screening for Breast Cancer), 2015

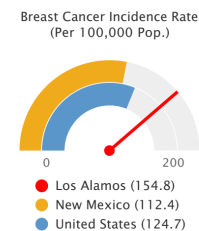
Breast Cancer Screening by Year, 2009 through 2015

Percent of Female Medicare Beneficiaries Age 67-69 with Mammogram trend

Report Area	2009	2010	2011	2012	2013	2014	2015
Los Alamos County, NM	76.10%	76.63%	75%	81.46%	84.38%	80.30%	79.21%
New Mexico	59.60%	58.83%	56.10%	56.37%	68.38%	57.06%	56.97%
United States	65.87%	65.37%	62.90%	62.98%	62.82%	63.06%	63.16%

Figure 8. Breast Cancer Incidence Rate per 100,000 population of women, 2011-2015

Report Area	Estimated Total Population (Female)	New Cases (Annual Average)	Cancer Incidence Rate (Per 100,000 Pop.)
Los Alamos County, NM	1,227	19	<b>154.8</b>
New Mexico	125,444	1,410	112.4
United States	18,800,721	234,445	124.7



Note: This indicator is compared to the state average.  
Data Source: State Cancer Profiles, 2011-15. Source geography: County

Table 7. Breast Cancer Incidence, Females, 2011-2015

Breast Cancer Incidence (Average Annual New Cases), Females under 50 years of age 2011-2015

AREA	Total Population under age 50	New Cases of Breast Cancer under age 50	Crude Rate	Cases per 100,000 Age-Adjusted
Los Alamos	26,013	14	<b>53.8</b>	<b>48.3</b>
New Mexico	3,377,387	1,297	38.4	42.7

Breast Cancer Incidence (Average Annual New Cases), Females over age 50, 2011-2015

AREA	Total Population over age 50	New Cases of Breast Cancer over age 50	Crude Rate	Cases per 100,000 Age-Adjusted
Los Alamos	18,557	98	<b>528.1</b>	<b>529.7</b>
New Mexico	1,913,686	7,068	369.3	369.7

Source: New Mexico Tumor Registry, University of New Mexico Health Sciences Center, <http://hsc.unm.edu/som/nmtr/>; accessed January 23, 2020.

Note: The incidence of female breast cancer for ALL AGES in 2016 was 124.2 with 245,299 new cases reported.

Table 8. Prostate Cancer Incidence Rate per 100,000 population of males, 2011-2015

AREA	Total Male Population	New Cases of Prostate Cancer	Cases per 100,000 Age-Adjusted
Los Alamos	45,399	74	<b>116.7</b>
New Mexico	1,655,016	1,460	80
United States	788,060,201	953,204	109

Table 9. Thyroid Cancer Incidence, 2015-16 and 1, 3 and 5-year projections

AREA	Total Population	New Cases of Thyroid Cancer	Cases per 100,000 Age-Adjusted
Los Alamos	47,791	96	<b>19.2</b>
New Mexico	48,553,586	5,461	11.4
United States			15.8

## CLINICAL CONDITIONS

Table 10. Los Alamos County Cancer Incidence, 2015-16 and 1, 3 and 5-year projections

CANCER TYPE INCIDENCE	RATE PER 100,000 POPULATION	NUMERATOR	DENOMINATOR	YEARS	PROJECTION		
					2021	2023	2025
Cervical	6.5	4	44,570	2011-15	5	5	6
Breast	154.8	14	26,013		16	18	18
Prostate	116.7	74	45,399		75	76	78
Thyroid	19.2	96	47,791		98	100	102

**Conclusion:** The rates of cancer cases for breast, prostate and thyroid cancer are higher than the State and National incidence. Breast cancer rates are higher for women under 50 and much higher for women over 50 years of age in Los Alamos County. The higher rates of breast cancer screening (mammograms) is refuted by the concerns expressed in Key Informant Interviews and Focus Groups about lack of available screening appointments. The Los Alamos National Laboratory (LANL) instituted on-site screenings in response to issues with high deductibles, but only has about 30 slots available with an eligible workforce of 3,500 females.

### 3. EMERGING OVERWEIGHT/OBESITY AND DIABETES RISK

CLINICAL CONDITIONS				NARRATIVE			
DIABETES							
<ul style="list-style-type: none"> <li>Diabetes - Adult</li> </ul>				<p>This indicator reports the percent of adults aged 20 and older who have ever been told by a doctor that they have diabetes. This indicator is relevant because diabetes is a prevalent problem in the U.S.; it may indicate an unhealthy lifestyle and puts individuals at risk for further health issues. The second statistic offers this data by gender.</p>			
AREA	Survey Population (Adults 20+)	Total Adults Self-Report Diabetes	Percent				
Los Alamos	13,531	866	5%				
New Mexico	1,539,723	137,373	7.9%				
United States	243,852,590	25,204,602	9.3%				
<ul style="list-style-type: none"> <li>Adults with Diabetes by Gender</li> </ul>							
AREA	Males with Diabetes (# and %)	Females with Diabetes (# and %)					
Los Alamos	430 (5%)	436 (5%)					
New Mexico	70,711 (8.5%)	66,664 (7.3%)					
United States	12,561,953 (10%)	12,193,905 (8.7%)					
<p>Source: Centers for Disease Control &amp; Prevention, National Center for Chronic Disease and Health Promotion, 2016.</p>							
<ul style="list-style-type: none"> <li>Diabetes Population by Year (Adult then just Medicare)</li> </ul>							
Report Area	2011	2012	2013	2014	2015	2016	2017
Los Alamos County, NM	14.40%	14.50%	14.90%	15.47%	15%	15.72%	16.28%
New Mexico	24.92%	25.20%	25.23%	25.34%	25.42%	25.45%	25.64%
United States	27.52%	27.62%	27.54%	27.43%	27.36%	27.33%	27.24%

• Diabetes Management – Hemoglobin A1C Test					This indicator provides self-reported data on the percent of diabetic Medicare patients who had a hemoglobin A1c (hA1c) test, a blood test which measures blood sugar levels, administered by a health care professional in the past year.
AREA	Medicare Fee-For-Service Enrollees	Medicare FFS with Diabetes	Medicare FFS with Diabetes with Annual HB A1c	% Medicare FFS with Diabetes with Annual HB A1c	
Los Alamos	2,387	152	136	90.1%	
New Mexico	180,688	19,289	14,116	73.2%	
United States	26,937,083	2,919,457	2,501,671	85.7%	
<i>Source: Dartmouth College Institute for Health Policy &amp; Clinical Practice, Dartmouth Atlas, 2015</i>					

OVERWEIGHT/OBESE				
• Adults that self-report Overweight, 2016				Over one-third (33.4%) of Los Alamos County residents self-report that they are overweight (BMI between 25 and 30).
AREA	Total Population (Age 18+)	Total Adults self-reporting Overweight	Percent Adults self-reporting Overweight	
Los Alamos	16,326	5,449	33.4%	
New Mexico	1,474,996	527,781	35.8%	
United States	224,991,207	80,499,532	35.8%	
<i>Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the Health Indicators Warehouse. US Department of Health &amp; Human Services, Health Indicators Warehouse. 2016.</i>				

• Adults that self-report Obesity (Body Mass Index > 30.0), 2016				Over one-fifth of Los Alamos County residents (22.4% of adults aged 20 and older) self-report that they have a Body Mass Index (BMI) greater than 30.0 (obese)
AREA	Total Population (Age 20+)	Total Adults self-reporting Body Mass Index > 30.0	Percent Adults self-reporting Body Mass Index > 30.0	
Los Alamos	13,589	3,139	22.4%	
New Mexico	1,538,106	409,344	26.6%	
United States	241,490,773	69,953,947	28.8%	

• Percent of Adults that are Obese by Year, 2004-2016													
Report Area	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Los Alamos County, NM	15.3%	16.32%	18%	19%	19.2%	18.8%	18.4%	19.7%	19.9%	19.5%	20.1%	21.2%	22.4%
New Mexico	18.9%	19.8%	20.6%	21.7%	22.4%	23.3%	23.1%	23%	23.1%	23.4%	24%	24.9%	25.8%
United States	23.1%	23.8%	24.8%	25.6%	26.2%	27.2%	27.1%	27%	26.8%	27.1%	27.4%	27.7%	28.3%

*Source: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion. 2016.*

*Los Alamos County: Overweight/Obese & Diabetes Incidence, 2015-16 and 1, 3 and 5-year projections*

CATEGORY	PERCENT	NUMERATOR	DENOMINATOR	YEAR	PROJECTION		
					2021	2023	2025
Overweight	33.4%	5,449	16,326	2016	35%	36%	37%
Obese	22.4%	3,139	13,589		23%	25%	27%
Diabetes	5%	866	13,531		6%	7%	8%

## 2. LACK OF AFFORDABLE AND ACCEPTABLE HOUSING STOCK

SOCIOECONOMIC CHARACTERISTIC																																																																								
<b>Social Determinants of Health: “The conditions in which people are born, grow, live, work and age.”</b> <b>Studies indicate that from 40-60% of health status is based on social determinants versus quality health care.</b>																																																																								
HOUSING			NARRATIVE																																																																					
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3. Table 11. Area Median Income for Los Alamos County, 2019								
\$ OF AMI	1	2	3	4	5	6	7	8
<b>Extremely Low Income (30%)</b>	\$25,400	\$29,000	\$32,650	<b>\$36,250</b>	\$39,150	\$42,050	\$44,950	\$47,850
<b>Very Low Income (50%)</b>	\$42,300	\$48,350	\$54,400	<b>\$60,400</b>	\$65,250	\$70,100	\$74,900	\$79,750
<b>Low Income (80%)</b>	\$52,850	\$60,400	\$67,950	<b>\$75,500</b>	\$81,550	\$87,600	\$93,650	\$99,700

Source: Housing & Urban Development Exchange

### LACK OF AFFORDABLE AND ACCEPTABLE HOUSING STOCK

Los Alamos County: Housing Type and Cost Burden, 2015-16 and 1, 3 and 5-year projections

CATEGORY	PERCENT	NUMERATOR	DENOMINATOR	YEARS	PROJECTION		
					2021	2023	2025
TOTAL COST BURDENED DUE TO HOUSING	13.8%	1,036	7,525	2013-17	14%	15%	15%
Rent	25.3%	502	1,982		26%	28%	29%
Mortgage	12.1%	411	3,388		12%	12%	12%
No Mortgage	5.7%	123	2,155		6%	6%	6%

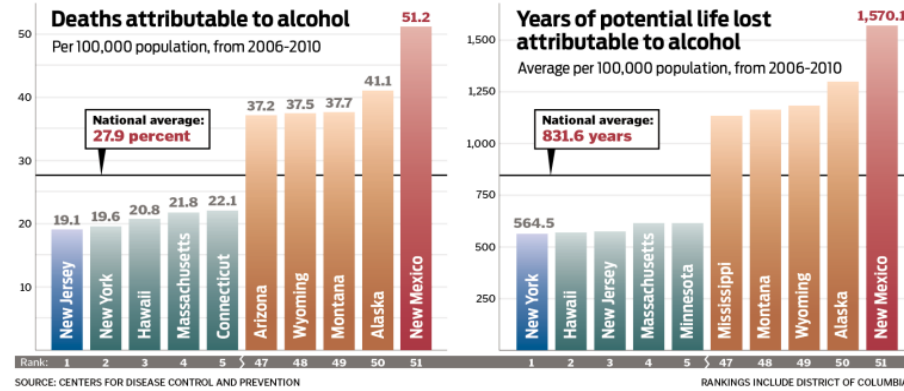


### 3. CULTURE OF ALCOHOL ACCEPTANCE & DRUG USE: SUBSTANCE USE

ALCOHOL CONSUMPTION					NARRATIVE	
<ul style="list-style-type: none"> <li>Alcohol Consumption</li> </ul>					<p>This indicator reports the percentage of Los Alamos County residents that self-report heavy alcohol consumption (more than 2 drinks per day for men and 1 per day for women). Future health determinants are cirrhosis, cancer and untreated behavioral health issues.</p>	
AREA	Total Population (18+)	Estimated Adults Drinking Excessively	Crude Percentage	Age-Adjusted Percentage		
Los Alamos	13,656	1,955	15.7%	16.8%		
New Mexico	1,521,911	208,502	13.7%	14.2%		
United States	235,375,690	32,248,349	13.7%	14.9%		
<p>Source: Centers of Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via Health Indicators Warehouse, 2006-12.</p>						
<ul style="list-style-type: none"> <li>Alcohol Expenditures</li> </ul>					<p>This indicator reports estimated annual alcohol expenditures for alcoholic beverages purchased at home as a percent of total food expenditures. Expenditure data is suppressed for single counties. Rank data are no available except for large geographic areas.</p>	
AREA	State Rank	Z-Score (US)	Z-Score (State)	Average Alcohol Expenditures		Percent of Food-At-Home Expenditures
Los Alamos	33	2.61	2.45	Suppressed		Suppressed
New Mexico	No data	0.05	0	\$825.03		14.12%
United States	No data	No data	No data	\$839.54	14.29%	
<p>Source: Nielsen, Nielson SiteReports, 2014.</p>						
<ul style="list-style-type: none"> <li>Alcohol-Related Deaths, 2014-2018</li> </ul>					<p>The negative consequences of excessive alcohol use in New Mexico include domestic violence, crime, poverty, and unemployment, as well as chronic liver disease, motor vehicle crash and other injuries, mental illness, and a variety of other medical problems. Nationally, one in ten deaths among working age adults (age 20-64) is attributable to alcohol. In New Mexico this ratio is one in six deaths.</p>	
AREA	Total Population (2014-18)	Total Alcohol Related Deaths (2014-18)	Crude Alcohol Related Death Rate 2014-2018	Age-Adjusted Alcohol Related Death Rate per 100,00 population		
Los Alamos	90,641	31	34	31		
New Mexico	10,504,397	7,183	64.6	65.6		
United States	1,510,134,705	483,240	32	34		
<p>Sources: NMDOH BVRHS death files and UNM-GPS population files; CDC ARDI; SAES</p>						
<ul style="list-style-type: none"> <li>Alcohol-Related Injury Deaths, 2013-17</li> </ul>					<p>Binge drinking (defined as having five drinks or more on an occasion for men, and four drinks or more on an occasion for women) is a high-risk behavior associated with numerous injury outcomes, including motor vehicle fatalities, homicide, and suicide. Since 1990, New Mexico's death rate for alcohol-related (AR) injury has consistently been among the highest in the nation, ranging from 1.4 to 1.8 times the national rate.</p>	
AREA	Total Adult Population (2013-17)	# Alcohol-Related Injury Deaths among Adults (2013-17)-five-year period	Deaths per 100,000 Population, Age-Adjusted Rate per 100,000 population (2013-17)			
Los Alamos	90,641	18	19.6			
New Mexico	10,504,397	3,073	29.3			
United States	1,510,134,705	320,000	21.0			
<p>Source: New Mexico Death Data: Bureau of Vital Records and Health Statistics (BVRHS), New Mexico Department of Health</p>						

## HEALTH BEHAVIORS

- Years of Potential Life Lost due to Alcohol, 2006-2010



## NARRATIVE

New Mexico leads the nation in Deaths Attributable to Alcohol (Indicator 1 with increase of Age-Adjusted Rate from 51.2 for 2006 to 2010 to 62 from 2013-2017); and also, Years of Potential Life Lost attributable to Alcohol at 1,570.1 total compared to 831.6 for the U.S. for the time period of 2006-2010.

## SUBSTANCE USE

### DRUG OVERDOSE MORTALITY

- Drug Overdose Mortality

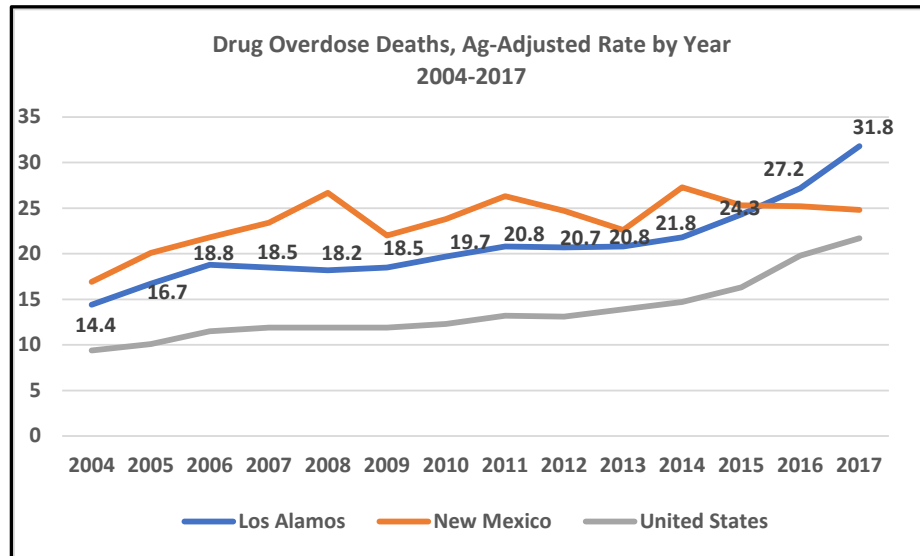
AREA	Total Adult Population (2013-17)	# Deaths among Adults (2013-17)-five-year period related to Alcohol & Chronic Disease	Deaths per 100,000 Population, Age-Adjusted Rate per 100,000 population (2013-17)
Los Alamos	90,641	29	31.8
New Mexico	10,504,397	2,470	24.6
United States	1,510,134,705	440,000	29

Source: Centers for Disease Control and Prevention. National Vital Statistics System. Accessed via CDC Wonder, 2013-2017.

## NARRATIVE

This indicator reports the rate of death due to drug overdose of Los Alamos County residents. It is reported as crude death rate and age-adjusted death rate (where data is available).

- Drug Overdose Mortality, Age-Adjusted Rate, by Year, 2004-2017



New Mexico's drug overdose death rate is one of the highest in the US for the last two decades, tripling since 1990. While deaths due to illicit drugs remained steady during the past decade, deaths due to prescription drugs (particularly opioid pain relievers) increased dramatically. Drug abuse is one of the costliest health problems in the U. S. In 2007, it was estimated that prescription opioid abuse, dependence, and misuse cost New Mexico \$890 million. The rates of drug overdose mortality in Los Alamos County significantly increased in the past four years, eclipsing that of New Mexico in 2016 & 2017.

Report Area	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
Los Alamos County, NM	14.35	16.72	18.83	18.47	18.19	18.45	19.73	20.84	20.65	20.75	21.75	24.33	27.23	31.83
New Mexico	16.94	20.08	21.76	23.39	26.69	22.04	23.82	26.31	24.66	22.63	27.29	25.31	25.19	24.84
United States	9.38	10.07	11.49	11.88	11.89	11.94	12.30	13.19	13.14	13.80	14.68	16.29	19.79	21.70

## CULTURE OF ALCOHOL ACCEPTANCE & DRUG USE: SUBSTANCE USE

Los Alamos County: Alcohol Consumption, Deaths, Drug Overdose Death and 1, 3 and 5-year projections

CATEGORY	PERCENT/ RATE PER 100,000 POPULATION	NUMERATOR	DENOMINATOR	YEARS	PROJECTION		
					2021	2023	2025
Alcohol Use	16.8%	1,955	13,656	2006-12	17%	19%	21%
Alcohol related deaths	31/100,000	31	90,641	2014-18	33	35	36
Alcohol Related Injury Deaths	19.6/100,000	18	90,641	2013-17	20	23	26
Drug Overdose Deaths	31.8/100,000	29	90,641	2004-17	31	35	38

## 4. MENTAL HEALTH

BEHAVIORAL HEALTH													
MENTAL HEALTH				NARRATIVE									
<ul style="list-style-type: none"> <li>Depression – Medicare Population</li> </ul>				Percentage of the Medicare fee-for-service population with depression.									
AREA	Medicare Fee-For-Service	Medicare FFS with Depression	Percent of Medicare FFS with Depression										
Los Alamos	2,702	384	14.2%										
New Mexico	228,157	36,764	16.1%										
United States	33,725,823	6,047,681	17.9%										
Source: Centers for Medicare and Medicaid Services. 2017													
<ul style="list-style-type: none"> <li>Mortality Rate for Suicide</li> </ul>				This indicator reports the rate of death due to intentional self-harm (suicide) per 100,000 population. Figures are reported as crude rates and also age-adjusted rates where data is available.									
AREA	Total Population	Average Annual Deaths from Suicide, 2012-2016	Crude Death Rate (Per 100,000)			Age-Adjusted Rate							
Los Alamos	18,031	3	15.5			suppressed							
New Mexico	2,084,828	468	22.5			22.2							
United States	321,004,407	44,061	13.7	13.3									
Source: Centers for Disease Control and Prevention. National Vital Statistics System. Accessed via CDC Wonder, 2013-2017.													
<ul style="list-style-type: none"> <li>Suicide Mortality, Age-Adjusted Rate by Year, 2004 through 2016</li> </ul>													
Suicide Mortality, Age-Adjusted Rate (Per 100,000 Pop.) by Year, 2004 through 2016													
Report Area	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
New Mexico	18.8	17.76	17.92	20.29	20.86	18.23	20.14	20.34	21.3	20.3	21	23.74	22.49
United States	10.99	10.93	11	11.29	11.6	11.76	12.11	12.34	12.6	12.6	13	13.28	13.47

## MENTAL HEALTH

Los Alamos County: Depression, Suicidal Ideation, Suicide Deaths, 2015-16 and 1, 3 and 5-year projections

CATEGORY	PERCENT/ RATE	NUMERATOR	DENOMINATOR	YEARS	PROJECTION		
					2021	2023	2025
Depression	14.2%	384	2,702	2017	390	400	410
Suicidal Ideation	21.2%	DNA	DNA	2019	22%	22%	22%
Suicide Attempts	14.5% (2003) to 9.4% (2015)			2003, 2015	15%	15%	15%
Suicide Deaths	15.5/100,000	3	18,031	2013-17	3	4	4

## 5. SIGNIFICANT AND GROWING SENIOR POPULATION

Population by Age, Number, 2017				Population by Age, Percent, 2017			
Age Group (Population)	LOS ALAMOS COUNTY NM	NEW MEXICO	UNITED STATES	Age Group (Percent)	LOS ALAMOS COUNTY, NM	NEW MEXICO	UNITED STATES
0-4 years	974	131,062	19,853,515	0-4 years	5.4%	6.29%	6.18%
5-17 years	3,186	366,665	53,747,764	5-17 years	17.67%	17.59%	16.74%
18-24 years	1,167	205,471	31,131,484	18-24 years	6.47%	9.86%	9.7%
25-34 years	1,912	278,395	44,044,173	25-34 years	10.6%	13.35%	13.72%
35-44 years	2,061	244,717	40,656,419	35-44 years	11.43%	11.74%	12.67%
45-54 years	2,852	258,110	43,091,143	45-54 years	15.82%	12.38%	13.42%
55-64 years	3,153	271,726	40,747,520	55-64 years	16.76%	13.03%	12.69%
65+ years	3,499	328,682	47,732,389	65+ years	18.61%	15.77%	14.87%

Source: U.S. Census Bureau, American Community Survey, 2013-17 5-year estimate.

## SIGNIFICANT AND GROWING SENIOR POPULATION

Los Alamos County: % Seniors, Poverty Level, Specialist Access, 2015-16 and 1, 3 and 5-year projections

CATEGORY	PERCENT	NUMERATOR	DENOMINATOR	YEAR	PROJECTION		
					2021	2023	2025
% Seniors	18.6%	3,499	328,682	2017	20%	20%	21%
Seniors in Poverty	5.1%	155 (75+) 10 (65-74) = 165	3,254		6%	8%	8%

Source: Population Estimates: University of New Mexico, Geospatial and Population Studies (GPS) Program, <http://gps.unm.edu>, 2017

## EMERGING RISK ISSUES WITH TWEEN (10-12) AND TEEN (13-17) POPULATION

Population by Age, Number, 2017				Population by Age, Percent, 2017			
Age Group (Population)	LOS ALAMOS COUNTY NM	NEW MEXICO	UNITED STATES	Age Group (Percent)	LOS ALAMOS COUNTY, NM	NEW MEXICO	UNITED STATES
0-4 years	974	131,062	19,853,515	0-4 years	5.4%	6.29%	6.18%
5-17 years	3,186	366,665	53,747,764	5-17 years	17.67%	17.59%	16.74%
18-24 years	1,167	205,471	31,131,484	18-24 years	6.47%	9.86%	9.7%
25-34 years	1,912	278,395	44,044,173	25-34 years	10.6%	13.35%	13.72%
35-44 years	2,061	244,717	40,656,419	35-44 years	11.43%	11.74%	12.67%
45-54 years	2,852	258,110	43,091,143	45-54 years	15.82%	12.38%	13.42%
55-64 years	3,153	271,726	40,747,520	55-64 years	16.76%	13.03%	12.69%
65+ years	3,499	328,682	47,732,389	65+ years	18.61%	15.77%	14.87%

*Source: U.S. Census Bureau, American Community Survey, 2013-17 5-year estimate.*

### Risk factors include:

- 1) Access to Alcohol
- 2) Use of Prescription Drugs/Inhalants
- 3) Bullying – At School and Electronic
- 4) Stress/Anxiety
- 5) Accidental Injury
- 6) Homelessness/Couch-Surfing
- 7) Food Insecurity

## EMERGING RISK ISSUES WITH TWEEN (10-12) AND TEEN (13-17) POPULATION

*Los Alamos County: % Tweens, Teens, 2015-16 and 1, 3 and 5-year projections*

CATEGORY	PERCENT	NUMERATOR	DENOMINATOR	YEAR	PROJECTION		
					2021	2023	2025
Tweens	6.2%	1,166	18,804	2017	7%	7%	7%
Teens	7.2%	1,354	18,804		7.3%	7.5%	7.6%

## 5. SILENT BUT SIZEABLE 'NEAR POOR' POPULATION

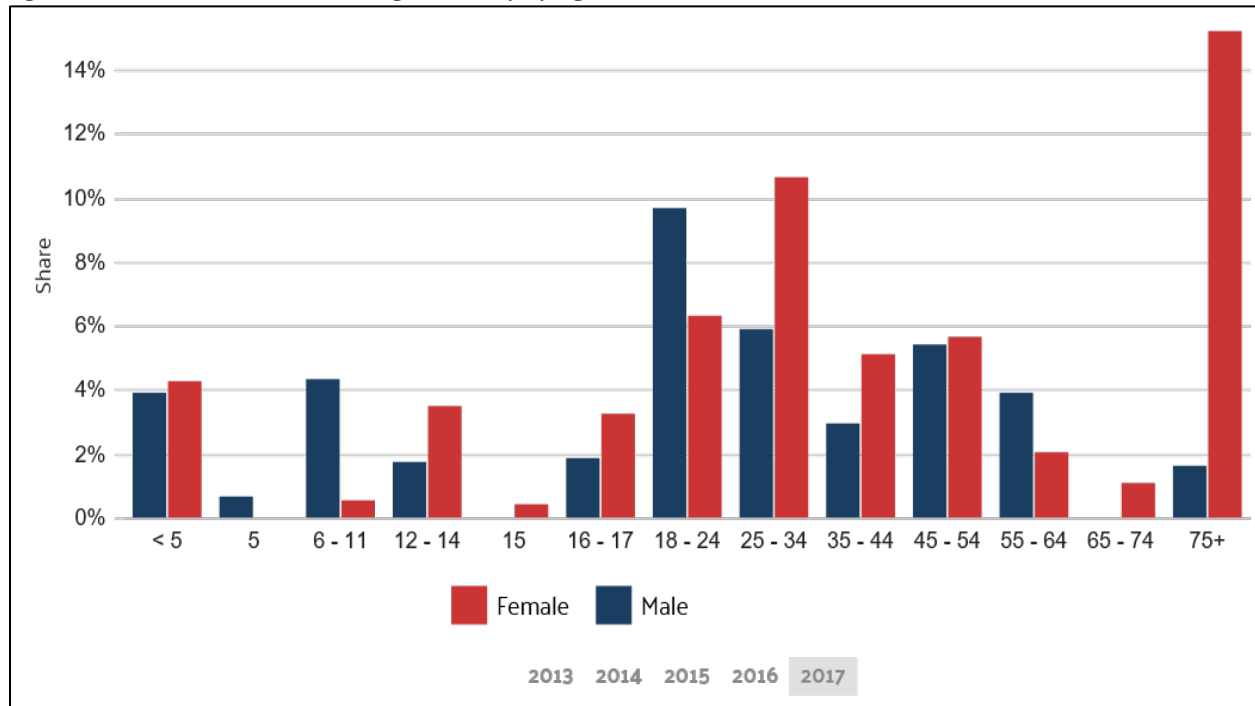
The poverty level is a metric of the U.S. Census Bureau to define poverty. It is a specific income level considered to be the minimum a person or family needs to meet basic needs. If a family's annual pre-tax income is below this income level, then they are considered poor. Over seven million families in the U.S. live in poverty – a figure that has held steady since 1990. The national poverty rate was 11.8% in 2018.

SOCIOECONOMIC CHARACTERISTIC					NARRATIVE	
<b>POVERTY RATES</b>					<b>NARRATIVE</b>	
<ul style="list-style-type: none"> <li>Population Below 50% of Federal Poverty Level (FPL) – EXTREME, 2017</li> </ul>						
<b>AREA</b>	<b>Total Population</b>	<b>Population at or Below 50% FPL</b>		<b>% at or Below 50% FPL</b>	<p>In Los Alamos County, 2.1% or 386 individuals live in households with income below 50% of the Federal Poverty Level (FPL). Below 50% of FPL is considered 'extreme'.</p>	
Los Alamos	18,031	386		2.1%		
New Mexico	2,084,828	186,825		9%		
United States	321,004,407	20,276,204		6.3%		
<p>Source: US Census Bureau, American Community Survey. 2013-17.</p> <ul style="list-style-type: none"> <li>Population Below 100% of FPL - Poor, 2017</li> </ul>					<p>Poverty is considered a <i>key driver</i> of health status. In Los Alamos County, 5.1% or 920 individuals live in households with income below the Federal Poverty Level (FPL).</p>	
<b>AREA</b>	<b>Total Population</b>	<b>Population at or Below 100% FPL</b>		<b>% at or Below 100% FPL</b>		
Los Alamos	18,031	920		5.1%		
New Mexico	2,084,828	420,293		20.2%		
United States	321,004,407	45,650,345		14.2%	<p>The population living at or below 100% of the Federal Poverty Level is considered as qualifying for Medicaid, and the ACA or Health Marketplace Exchange won't consider an application for health insurance coverage.</p>	
<ul style="list-style-type: none"> <li>Population below 100% by Gender, 2017</li> </ul>						
<b>AREA</b>	<b>MALE</b>	<b>FEMALE</b>	<b>Total Male Below 100% FPL</b>	<b>Total Female Below 100% FPL</b>		
Los Alamos	9,135	8,896	386 (4.3%)	534 (6%)		
New Mexico	1,032,086	1,052,742	192,619 (19.2%)	227,674 (21.9%)		
United States	158,018,753	162,985,654	20,408,628 (13.3%)	25,241,719 (15.8%)	<p>Racial differences in Poverty Levels are evident only for Native Americans in Los Alamos County. This is in contrast to the disparities in poverty levels for Blacks and Multi-Race.</p>	
<ul style="list-style-type: none"> <li>Population below 100% of FPL by Race, 2017</li> </ul>						
<b>AREA</b>	<b>White</b>	<b>Black</b>	<b>Native American</b>	<b>Asian</b>		<b>Multi Race</b>
Los Alamos	715 (4.6%)	0	30 (14%)	48 (4.5%)		20 (3.3%)
New Mexico	273,759 (18%)	9,459 (24%)	65,053 (33%)	2,896 (9.9%)	13,767 (20.6%)	
United States	27,607,156 (12%)	9,807,009 (25.2%)	681,207 (26.8%)	2,011,217 (12%)	1,800,443 (18.4%)	<p>For ethnicity, despite strong disparities for Hispanic/Latino in New Mexico and the United States, the poverty rate for Hispanics and Latinos in Los Alamos County, while significantly lower than the State and Nation, <b>is still twice that of non-Hispanic/non-Latinos</b>.</p>
<ul style="list-style-type: none"> <li>Population below 100% of FPL by Ethnicity, 2017</li> </ul>						
<b>AREA</b>	<b>Male</b>	<b>Female</b>	<b>Total Hispanic/Latino Below 100% FPL</b>	<b>Total Non-Hispanic Below 100% FPL</b>		
Los Alamos	9,135	8,896	282 (9.2%)	638 (4.3%)		
New Mexico	1,032,086	1,052,742	244,409 (24.9%)	175,884 (16.6%)		
United States	158,018,753	162,985,654	12,269,402 (22.2%)	33,380,893 (13%)		

SOCIOECONOMIC CHARACTERISTIC				NARRATIVE
POVERTY RATES				
<ul style="list-style-type: none"> <li>Population Below 185% of FPL – living in debt, 2017</li> </ul>				<p>In Los Alamos County, 10.82% or 1,941 individuals are living in households with income below 185% of the Federal Poverty Level (FPL). This indicator is relevant because poverty creates barriers to access including health services, healthy food, and other needs that contribute to poor health status.</p>
AREA	Total Population	Population at or Below 185% FPL	% at or Below 185% FPL	
Los Alamos	18,031	1,941	10.8%	
New Mexico	2,084,828	804,773	38.6%	
United States	321,004,407	94,262,439	29.4%	
<ul style="list-style-type: none"> <li>Population Below 200% of FPL – qualify for ACA assistance, typically considered the ‘working poor’, 2017</li> </ul>				<p>This level of poverty may qualify individuals for a health insurance premium tax credit and potentially, a cost-sharing subsidy to lower monthly health insurance premiums in the ACA Health Marketplace Exchange.</p>
AREA	Total Population	Population at or Below 200% FPL	% at or Below 200% FPL	
Los Alamos	18,031	2,079	11.5%	
New Mexico	2,084,828	865,123	41.5%	
United States	321,004,407	102,523,670	31.9%	

The largest demographic living in poverty are Females 75+, followed by Females 25 - 34 and then Males 18 - 24.

Figure 9. Los Alamos Residents Living in Poverty by Age and Gender, 2017



Source: U.S. Census Bureau, American Community Survey, 2017

**In comparison,** the poverty rate in the United States in 2018 was highest among people between the ages of 18 and 24 years old, with a rate of 18.28 percent for male Americans and 23.1 percent for female Americans. The lowest poverty rate for both genders in the United States was found in individuals between the ages of 65 and 74 years old.

Figure 10. United States Living in Poverty by Age and Gender, 2018

**SILENT BUT SIZEABLE ‘NEAR POOR’ POPULATION**

*Los Alamos County: % by FPL, 2015-16 and 1, 3 and 5-year projections*

CATEGORY	FPL	PERCENT	NUMERATOR	DENOMINATOR	YEAR	PROJECTION		
						2021	2023	2025
Extreme Poor	50%	2.1%	386	18,031	2017	2%	2%	2.1%
Poor	100%	5.1%	920			5%	5.1%	5.1%
Living in Debt	185%	10.8%	1,941			11%	11.2%	11.5%
Working Poor	200%	11.5%	2,079			12%	12.1%	12.3%