

2005 Community Needs Assessment

Health

The Health Chapter is divided into six sections: Access to Care, Physical Health and Wellness, Mental Health, Substance Abuse, Disabilities, and Chronic Illness.

Access to Care is important because it has an impact on all of the other sections. The ability to obtain and afford preventative care and treatment has a large impact on the general population. However, it has an even greater impact on disadvantaged populations, those with: low incomes, mental and physical illnesses, mental and physical disabilities, chronic illnesses, and chemical addictions.

A number of indicators are identified for each section. Supporting data, in the form of tables and graphs, are provided at the end of the sections. The division of Health into six sections is for purposes of organization and presentation. There is often overlap between the sections, and many of the indicators are relevant to more than one section. In addition, while many people suffer from a single condition, many also suffer from multiple conditions.

Some important State and regional health issues identified in the Health section include:

- The high number and percentage of people without health insurance
- The increasing cost of medical care
- A rapid decrease in the number of children enrolled in the Children's Insurance Program (CHIP)
- A rapid increase in the number of Medicaid recipients
- Notable disparities in dental health between poor and non-poor populations, and among different racial/ethnic groups
- A decrease in the number of deaths from AIDS, and an increase in the number of persons living with AIDS
- The high numbers and rates of HIV/AIDS cases among African Americans
- An increasing number of infant deaths
- An increasing number of low-weight births
- An increasing number of Supplemental Security Income recipients (Blind and Disabled Category)
- An increasing rate of diabetes
- An increase in the rate of overweight and obese individuals
- An increase in the number of substance abuse related deaths

The Community Assessment covers four counties that make up the United Way of Metropolitan Dallas service area: Collin, Dallas, Denton, and Rockwall. In terms of population, Dallas is by far the largest, followed by Collin and Denton which are comparable in size to each other, followed by Rockwall—a much smaller county. Because the differences in scale are so large, two charts are often provided for a single indicator. One chart displays data for Dallas County and the UWMD four county service region, and a second chart displays data for Collin, Denton, and Rockwall Counties.

Providing separate charts makes it much easier to see the trends for each of the individual counties, and for the region as a whole.

Regional Priorities

Access to health care

- With one out of very four residents without health insurance, Texas has the highest percentage of persons without health insurance in the nation.
- The percentage of persons without health insurance coverage is especially high among racial-ethnic minority populations. While the Anglo population has 13% of its population without health insurance, 39% of Hispanics and 24% of African Americans do not have health insurance.
- The rising cost of insurance has placed health care beyond the reach of low and moderate income families.
- There are gaps in public funding and services for individuals suffering from mental health, substance abuse, dental problems, and physical and cognitive disability issues. With current resources, many people who are eligible for services will have to wait for long periods of time before they receive help.

Prevalence of Chronic Illnesses*

- The number of overweight and obese adults and children has steadily increased. Obesity leads to an increased risk of diabetes and other chronic illness, such as heart disease and stroke.
- African Americans have a higher prevalence of chronic illnesses than other racial/ethnic groups. This is true for specific causes of death, such as heart disease, stroke, diabetes, and cancer. Infant mortality rates are also much higher for African Americans than for Anglos and Hispanics.
- The number of people in the UWMD four county service region living with AIDS has continued to increase dramatically. The number of new AIDS cases has increased between 2000-2003. Rates of new HIV cases are much higher among African Americans, than among Anglos or Hispanics and higher for Hispanics than Anglos. The number of women, particularly African Americans, diagnosed and living with HIV/AIDS has increased far above that of our population as a whole.

** Chronic conditions include a variety of illnesses and disabilities such as arthritis, visual impairments, hearing impairments, speech impairments, paralysis, HIV/AIDS, epilepsy, diabetes, cerebral palsy, mental retardation (developmental disabilities), severe mental illness, etc.*

Prevalence of Substance Abuse

- Alcohol and substance abuse continues to be an issue. The consequences of substance abuse show direct and indirect costs in the form of reduced and lost productivity, crime, premature death, law enforcement, health care, property damage, motor vehicle accidents, and social welfare administration.
- Gaps in public funding have led to long waiting lists for substance abuse services.

Priorities of Concerns for Individual Counties

COLLIN COUNTY

- High rate of uninsured individuals, particularly among Hispanic and African Americans, which limits access to health care.
- Gaps in funding and services for individuals with physical and cognitive disabilities, mental health, dental health, and substance abuse issues.
- Increasing prevalence of obesity leading to chronic illnesses.
- Continued prevalence of substance abuse.

DALLAS COUNTY

- High rate of uninsured individuals, particularly among Hispanic and African Americans, which limits access to health care.
- Gaps in funding and services for individuals with physical and cognitive disabilities, mental health, dental health, and substance abuse issues.
- Increasing prevalence of obesity leading to chronic illnesses.
- Continued prevalence of substance abuse.
- Dallas has much higher rates of sexually transmitted diseases than the other counties in the UWMD four county service region. Rates in Dallas County are also much higher than Texas rates.

DENTON COUNTY

- Access to health care is an issue due to the high percent of uninsured individuals.
- There is a lack of physicians willing to accept Medicare/Medicaid/CHIP.
- There are gaps in funding and services for individuals with physical and cognitive disabilities, mental health, dental health, and substance abuse issues.
- Highest rate of death from diabetes in the UWMD four county service region.

ROCKWALL COUNTY

- Highest rate of substance abuse deaths in the UWMD four county service region. The rate of drug related offense arrests is 2.5 times higher than in Dallas County.

Legislative Impact









There are many issues greatly impacted by decisions of the state legislature: level of funding, criteria for both initial eligibility and continuation in the system, reimbursement rates for providers (which help determine if recipients who are eligible for services can find available providers), etc.

The 2003 Legislative Session had a major impact on many of the issues discussed in this report. An analysis and discussion of those impacts on both service recipients and to community as a whole are found on the United Way website (<http://www.unitedwaydallas.org/InsideUW/PublicPolicy.htm>)

By the time this report is published, the 2005 Legislative Session will have changed some of those outcomes and will have enacted legislation that will have new impacts. At the time of the publication of this report, information will be available on how to access a revised legislative impact report online. For additional information, visit the Public Policy page of the United Way website located at <http://www.unitedwaydallas.org/InsideUW/PublicPolicy.htm>





2005 Community Needs Assessment

Health











INDICATOR	SUMMARY	TREND	CONDITION
Access To Care	<p>The high number and percent of people without health insurance coverage is of critical concern. Although the percent of persons who are uninsured has not changed significantly within the past several years, the percent is much higher in Texas (24.5%) than in the nation as a whole (16.1%).</p>	 Same or Mixed	 Critical
Physical Health and Wellness	<p>Death rates from three leading causes of death—heart disease, cancer, and cerebrovascular disease are trending downward.</p> <p>Other health indicators for the UWMD four county service region have remained stable. However, on some indicators such as diabetes and obesity, the UWMD four county service region is much worse than most other states, and the U.S. as a whole.</p>	 Same or Mixed	 Concerned
Chronic Illness	<p>On a number of indicators the trend is worsening. These include diabetes, arthritis, HIV/AIDS, and asthma. The rate of increase of HIV/AIDS among African Americans is of particular concern.</p>	 Worsening	 Concerned
Disabilities	<p>There is an increasing number of low weight births, and many of these children may face disabilities as they mature. The proportion of the aging population with disabilities is higher than the population as a whole.</p>	 Worsening	 Concerned





2005 Community Needs Assessment

Health

INDICATOR	SUMMARY	TREND	CONDITION
Mental Health And Counseling	A study by the Office of the U.S. Surgeon General estimates that, during a one-year period, about 20% of the adult population has a diagnosable mental health disorder, and that about 5% have a serious disorder. About 7% of children are thought to have a serious mental or emotional disorder.	 Same or Mixed	 Concerned
Substance Abuse	A study by the Office of the U.S. Surgeon General estimates that about 6% of the adult population has an addictive disorder, and an additional 3% have an addictive disorder and a mental health disorder. The rate of substance abuse-related deaths in the UWMD four county service region has increased each year for the past four years.	 Worsening	 Concerned

HEALTH ACCESS TO CARE

INDICATOR	SUMMARY	TREND	CONDITION
Number and Rate of Persons Unemployed	<p>The unemployment rate in the UWMD four county service region increased dramatically from 2000 to 2002 and has slightly decreased since that point, although not to the same level as that in 2000.</p> <p>Since 1995, Dallas has had the highest unemployment rate in the region. Since 2000, Collin and Dallas counties have had similar percent increases and decreases.</p> <p>In terms of change in net employment by industry, only the telecommunications and goods producing industries have less jobs in 2004 than in 1998.</p> <p>From 1995-2000 jobs were added to the Dallas MSA, with the highest number of jobs being added in 1997. Since 2001, there has been a loss of non-farm jobs in the Dallas Metropolitan Statistical Area.</p>	 Worsening	 Concerned
Percent of Persons Without Health Insurance	The percent of persons without health insurance coverage is very high in Texas compared to the U.S. and to other states. (24.6% in Texas compared to 15.6% in the U.S.)	 Same or Mixed	 Critical
Percent of Persons Without Health Insurance by Race/Ethnicity	The percent of persons without health insurance is higher for racial-ethnic minority populations, especially for Hispanics. (39.3% in Texas, 2002)	 Same or Mixed	 Critical
Consumer Price Index (CPI) for All Items and CPI for Medical Care	The CPI for Medical Care increased each year from 1995 through 2003. The rate of increase for Medical Care was higher than the rate for All Items.	 Worsening	 Concerned
Medicaid Enrollment (all ages)*	Medicaid enrollment increased rapidly in the UWMD four county service region, from 142,819 in 2000 to 285,945 in 2004, a 100% increase.	 Worsening	 Concerned

INDICATOR	SUMMARY	TREND	CONDITION
Medicaid Enrollment (0-18 years)	The number of children in the UWMD four county service region enrolled in Medicaid increased from 81,014 in 2000 to 204,225 in 2004, a 152% increase.	 Improving	 Concerned
Children's Health Insurance Program (CHIP) Enrollment*	CHIP enrollment in UWMD four county service region declined from 58,127 in 2003 to 41,237 in 2005, despite an increase in the number of potentially eligible children.	 Worsening	 Critical

* While Medicaid and CHIP enrollment data are indicators for health care, these data sources are dependent on funding levels and eligibility criteria.

Access to Health Care - North Texas Overview

Access to care is a critical issue that affects all of the impact categories within the area of Health. Two key indicators of Access to Care are:

- the number and percent of persons who are unemployed
- the number and percent of persons without health insurance coverage

The two indicators are related due to the fact that most adults in the labor force, and their family members, receive health insurance coverage through their employers. However, it should be noted that not all workers are covered, and in many instances coverage may be inadequate.

Numerous other factors affect access to care such as: income, geography (place of residence and place of employment), age, language, and citizenship status.

Trends

- During the past 10 years, the UWMD four county service region and each county in the region followed a similar pattern. Beginning with 1995, the unemployment rate decreased for several years, increased considerably in 2001 and 2002, then decreased in 2004, but not as low as 2000. While the unemployment rate has decreased, the rate is still higher than it was in 2000.
- The number and percent of people without health insurance is very high in relation to U.S. rates, and rates in other states. Texas had the highest percent of persons without health insurance in the nation (24.6%).
- The percent of persons without health insurance coverage is especially high among racial-ethnic minority populations—particularly Hispanics. (39.3% in Texas)
- The Consumer Price Index (CPI) for medical and dental care in the Dallas/Fort Worth Metropolitan Statistical Area has continued to increase at a faster rate than the CPI for all items.
- The number of children covered under the State CHIP decreased by 29% from January 2001 to January 2005, while the eligible population increased.
- Medicaid enrollment (a program for low-income individuals and families) increased by 100% from 2000 to 2004.

Access to Care

Collin County

- The number of persons unemployed peaked in 2002, and decreased slightly in 2003 and 2004. However, the number of persons unemployed in 2004 was nearly three times the number unemployed in 2000. (15,705 in 2004 compared to 5,810 in 2000)
- Medicaid enrollment increased steadily from 2000 through 2004. The number more than doubled--from 7,346 in 2000 to 19,416 in 2004.
- Enrollment in CHIP decreased from 4,172 in 2003 to 3,404 in 2005.

Dallas County

- The number of persons unemployed peaked in 2002 and 2003, and decreased slightly in 2004. However, the number of persons unemployed in 2004 was nearly twice the number unemployed in 2000. (83,745 in 2004 compared to 43,107 in 2000).
- The unemployment rate (6.7% in 2004) was the highest among the four counties in the UWMD four county service region, and also higher than the State rate.
- Medicaid enrollment increased steadily--from 125,631 in 2000 to 243,497 in 2004.
- Enrollment in CHIP decreased from 48,126 in 2003 to 33,418 in 2005.

Access to Care

Denton County

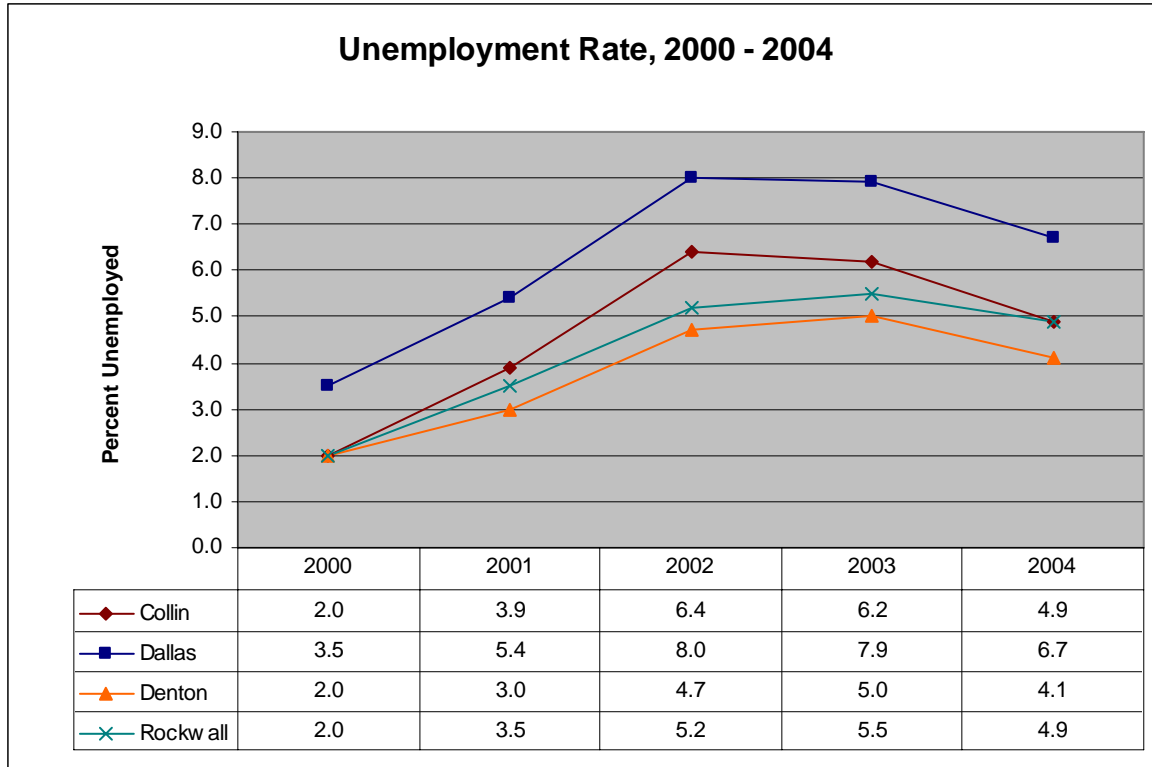
- The number of persons unemployed peaked in 2003 at 13,980, and decreased slightly in 2004 to 11,560 (compared to 5,266 in 2000).
- Medicaid enrollment increased from 8,683 in 2000 to 20,314 in 2004.
- Enrollment in CHIP decreased from 5,135 in 2003 to 3,793 in 2005.

Rockwall County

- The number of persons unemployed peaked at 1,482 in 2003, and decreased slightly to 1,333 in 2004 (compared to 485 in 2000).
- Medicaid enrollment increased from 1,159 in 2000 to 2,718 in 2004.
- Enrollment in CHIP decreased slightly—from 694 in 2003 to 622 in 2005.

Access to Care - Supporting Data

Employment

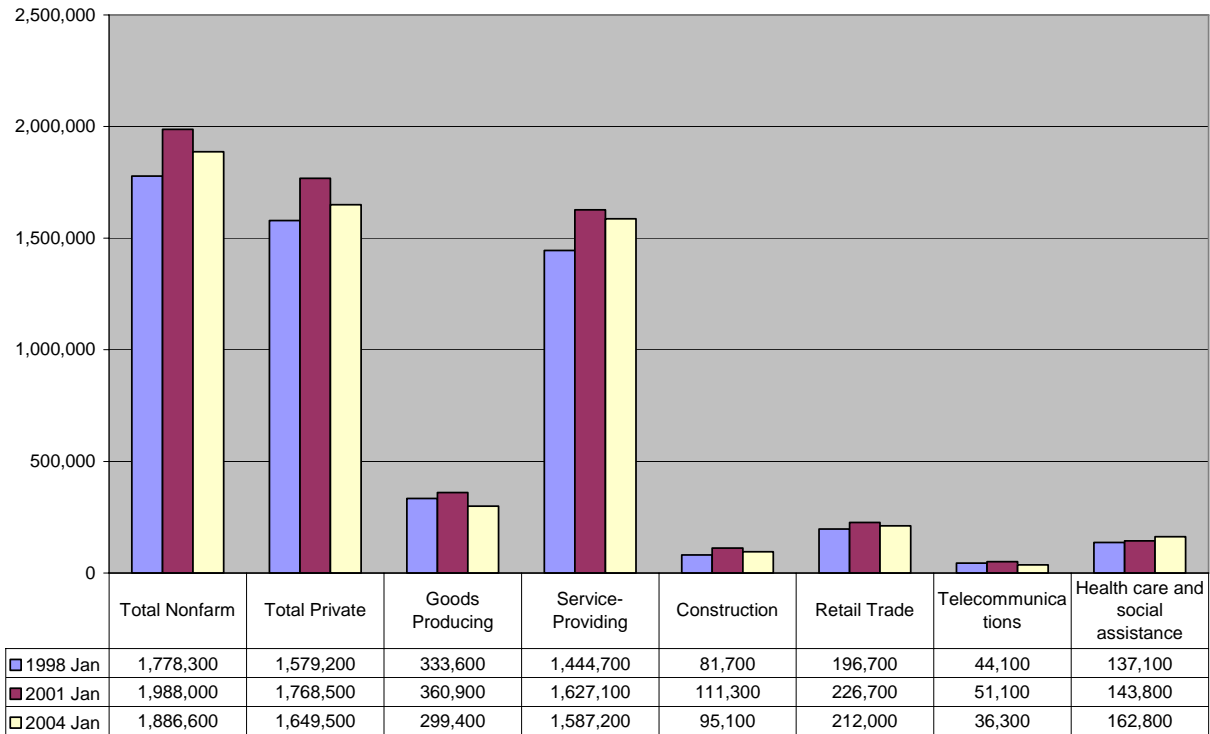


Source: Texas Workforce Commission

Access to Care - Supporting Data

Employment

Change in Net Employment by Industry

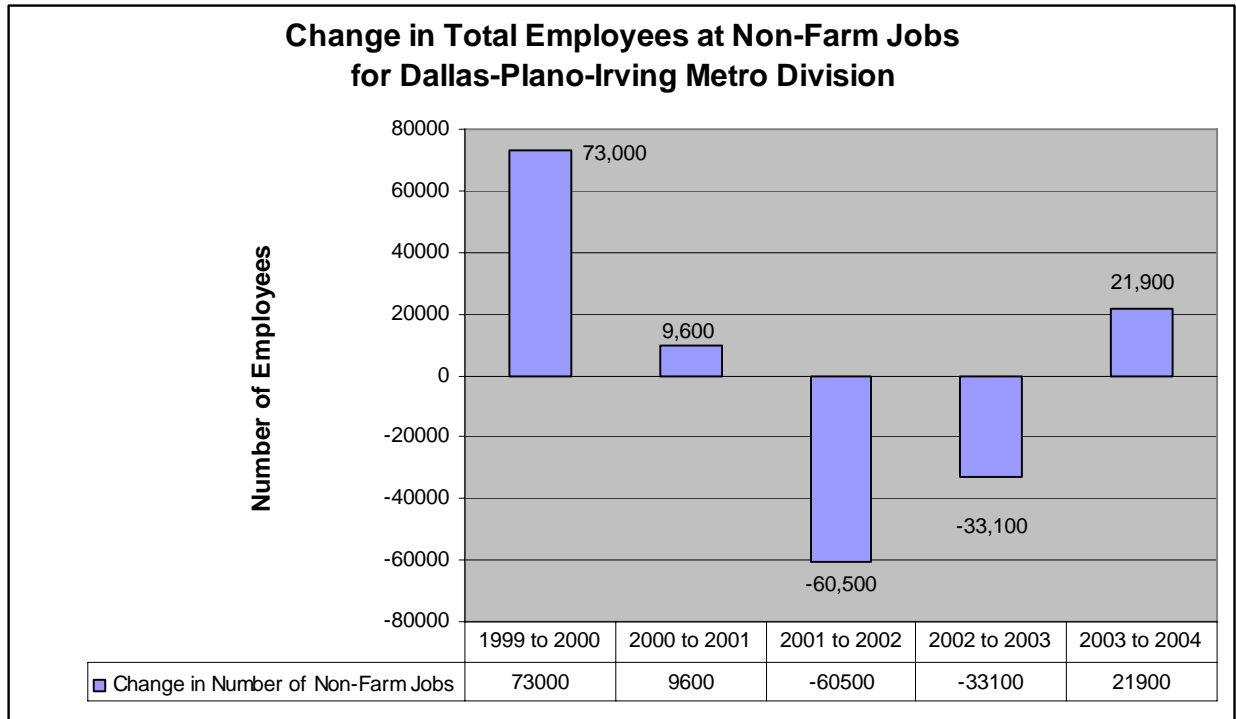


Source: Bureau of Labor Statistics

* The Dallas Metropolitan Statistical Area includes: Collin, Dallas, Denton, Ellis, Henderson, Hunt, Kaufman, and Rockwall Counties.

Access to Care - Supporting Data

Employment

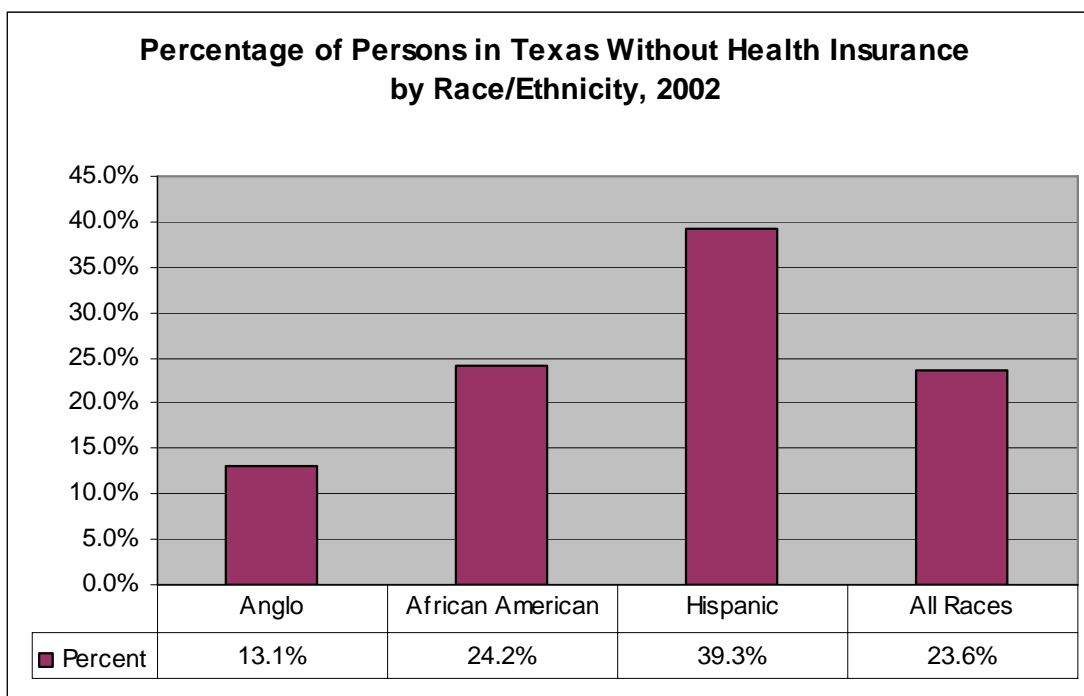


Source: Texas Workforce Commission

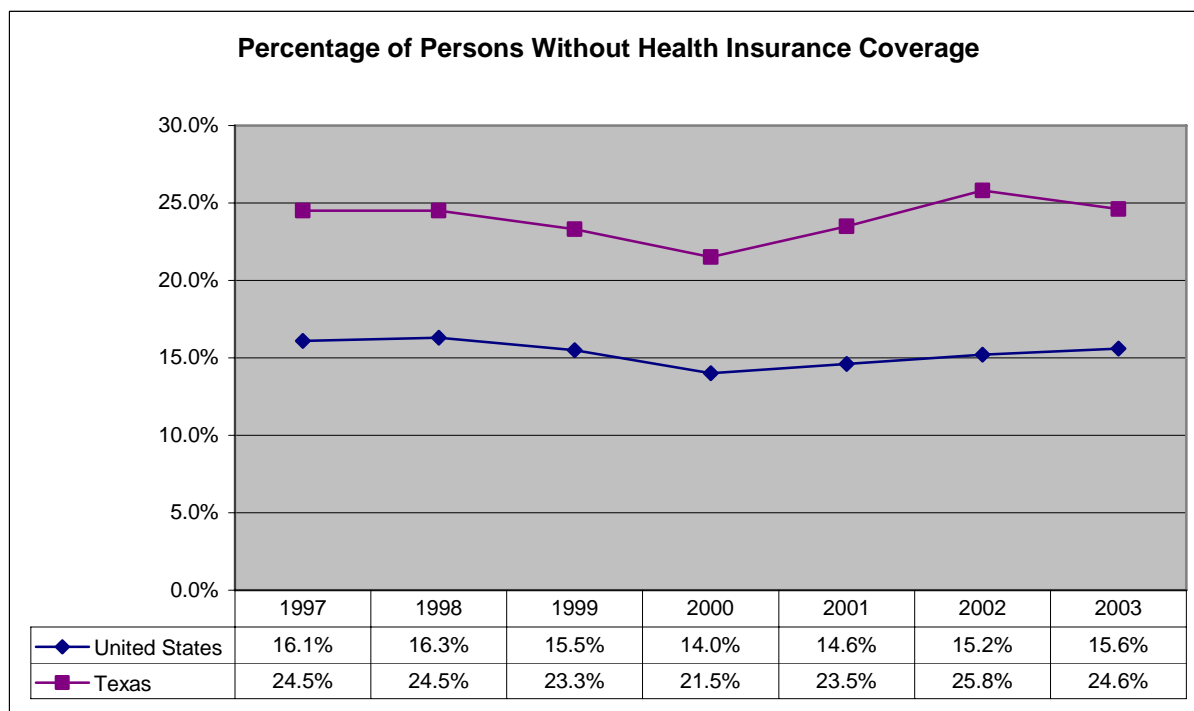
* The Dallas-Plano-Irving Metro Division includes: Collin, Dallas, Delta, Denton, Ellis, Hunt, Kaufman, and Rockwall Counties

Access to Care - Supporting Data

Health Insurance



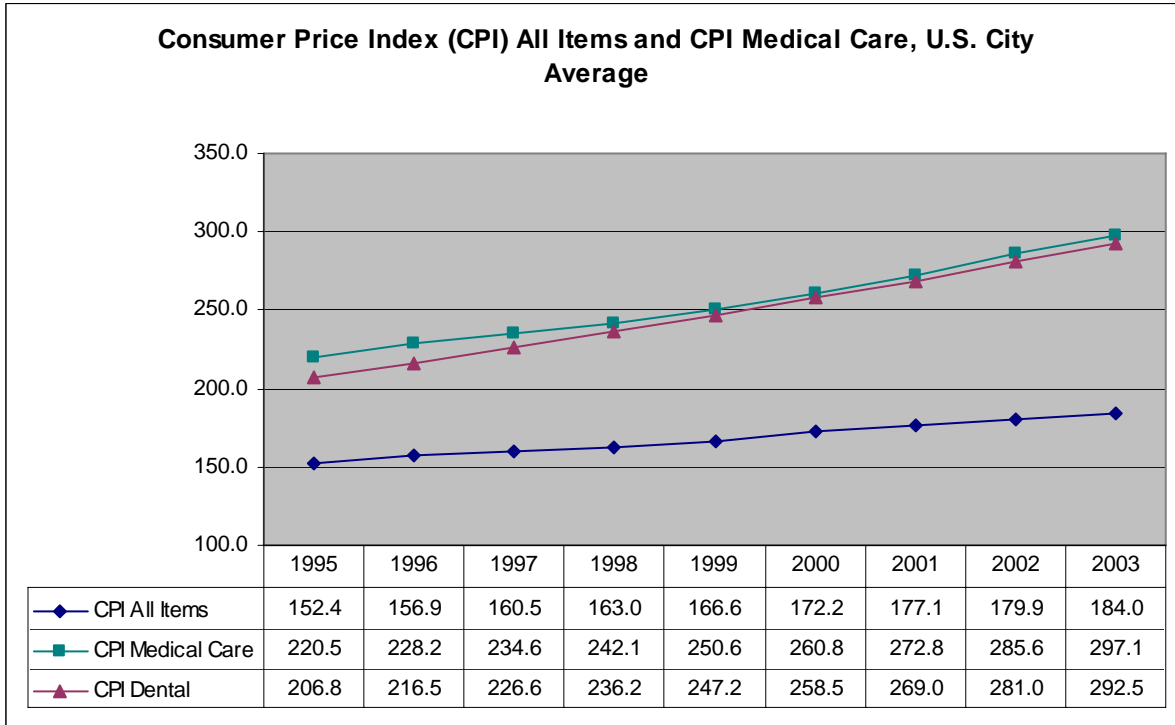
Source: U.S. Census Bureau, Current Population Survey, Annual Demographic Survey, March Supplement, 2004



Source: U.S. Census Bureau, Current Population Survey, Annual Demographic Survey, March Supplement, 2004

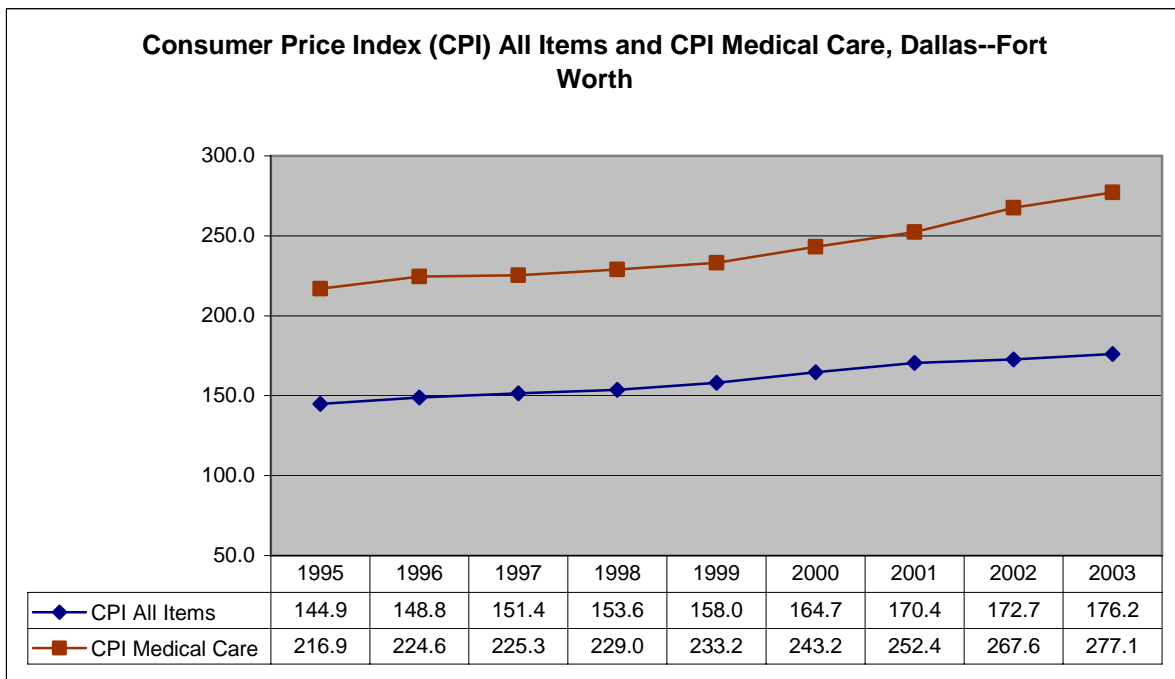
Access to Care - Supporting Data

Consumer Price Index for Medical Care



Source: Bureau of Labor Statistics

* Dallas—Fort Worth Metropolitan Area includes Collin, Dallas, Delta, Denton, Ellis, Hunt, Kaufman, Rockwall, Johnson, Parker, Tarrant, and Wise counties.

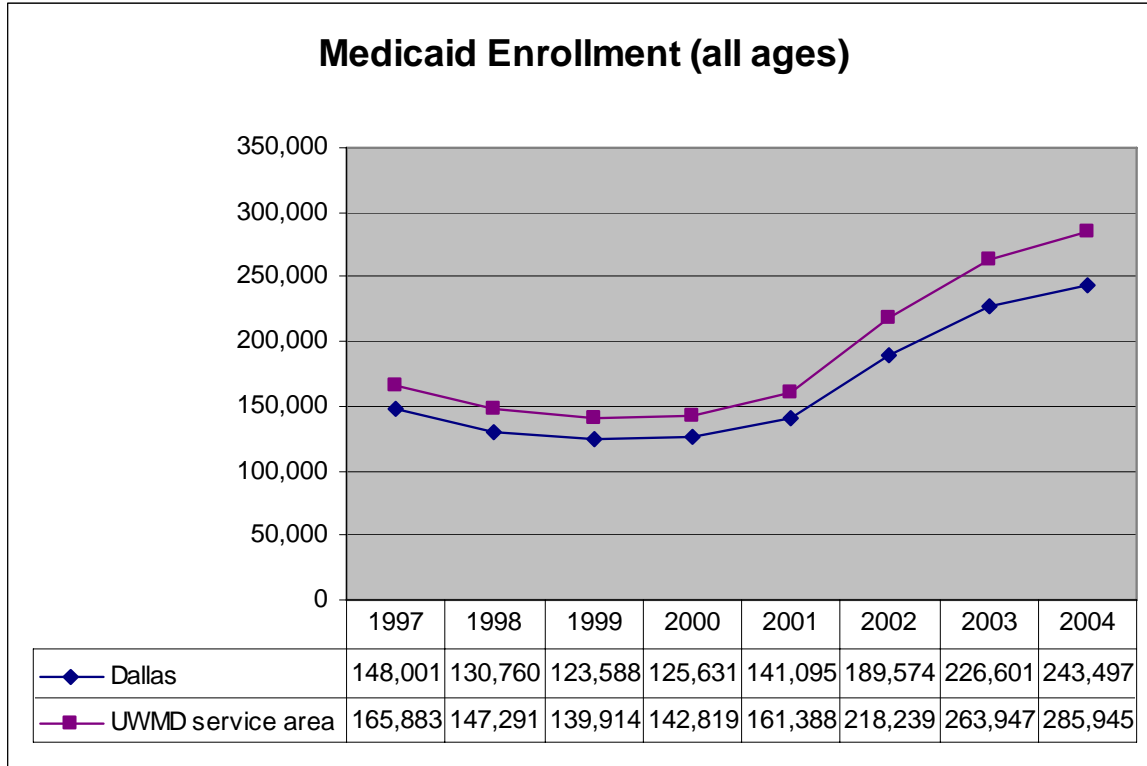


Source: Bureau of Labor Statistics

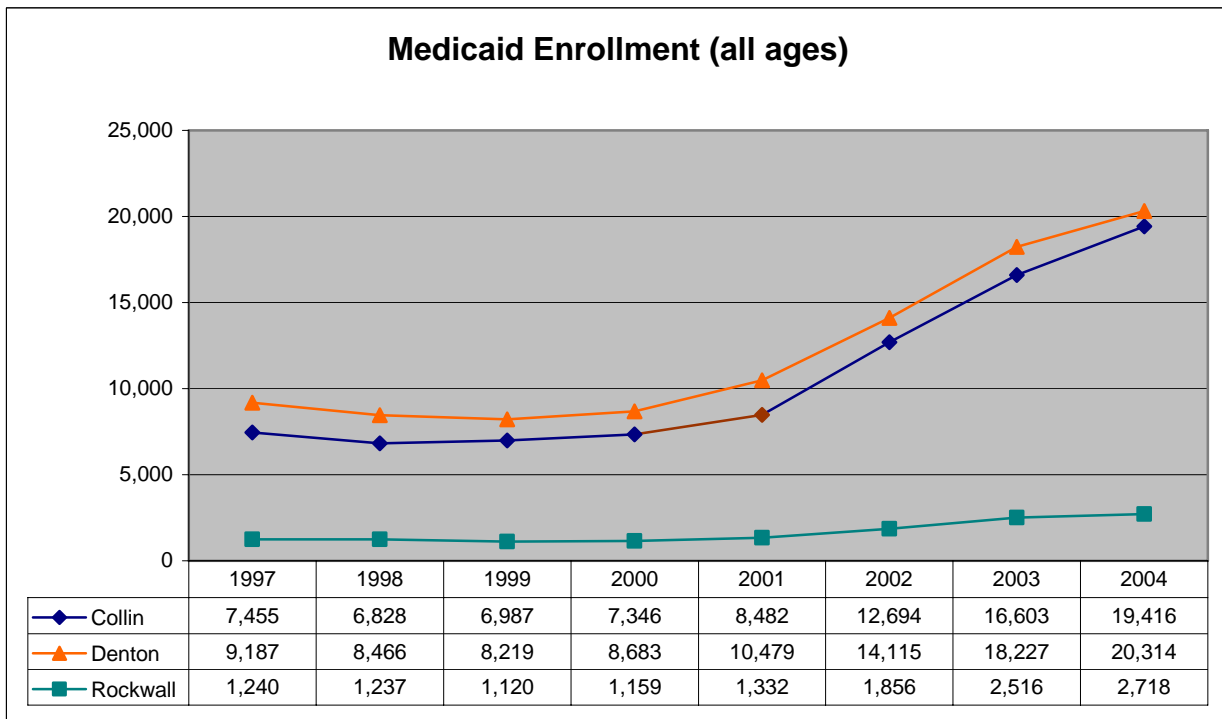
* Dallas—Fort Worth Metropolitan Area includes Collin, Dallas, Delta, Denton, Ellis, Hunt, Kaufman, Rockwall, Johnson, Parker, Tarrant, and Wise counties.

Access to Care - Supporting Data

Medicaid



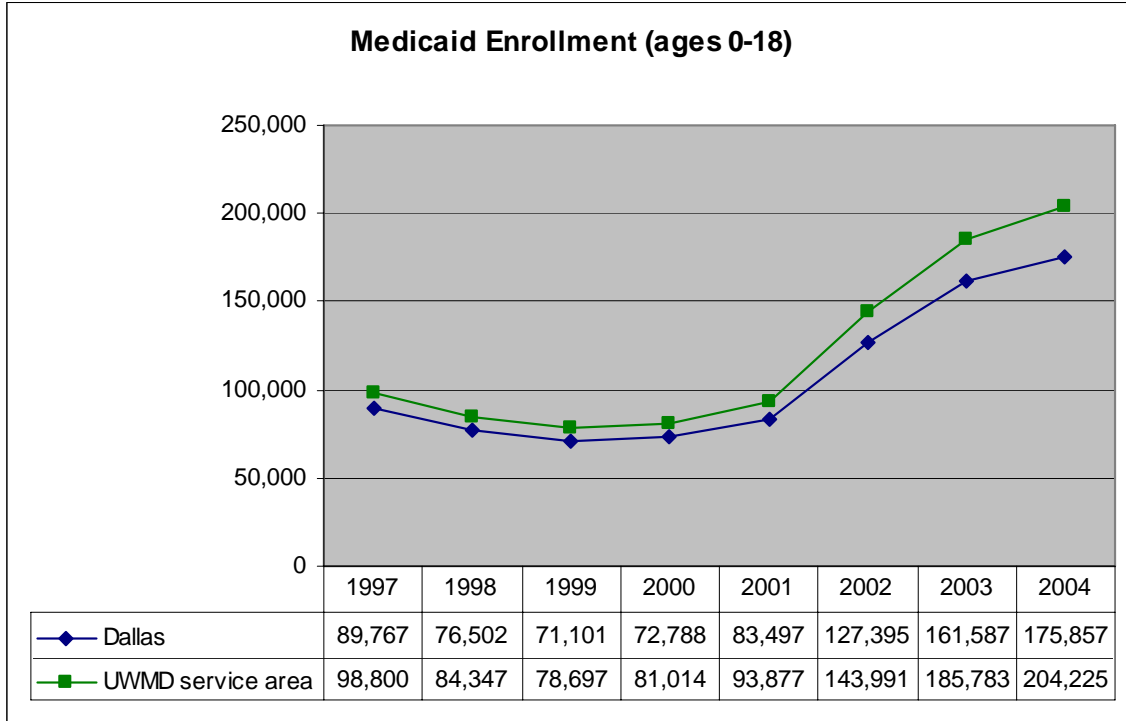
Source: Texas Health & Human Services Commission



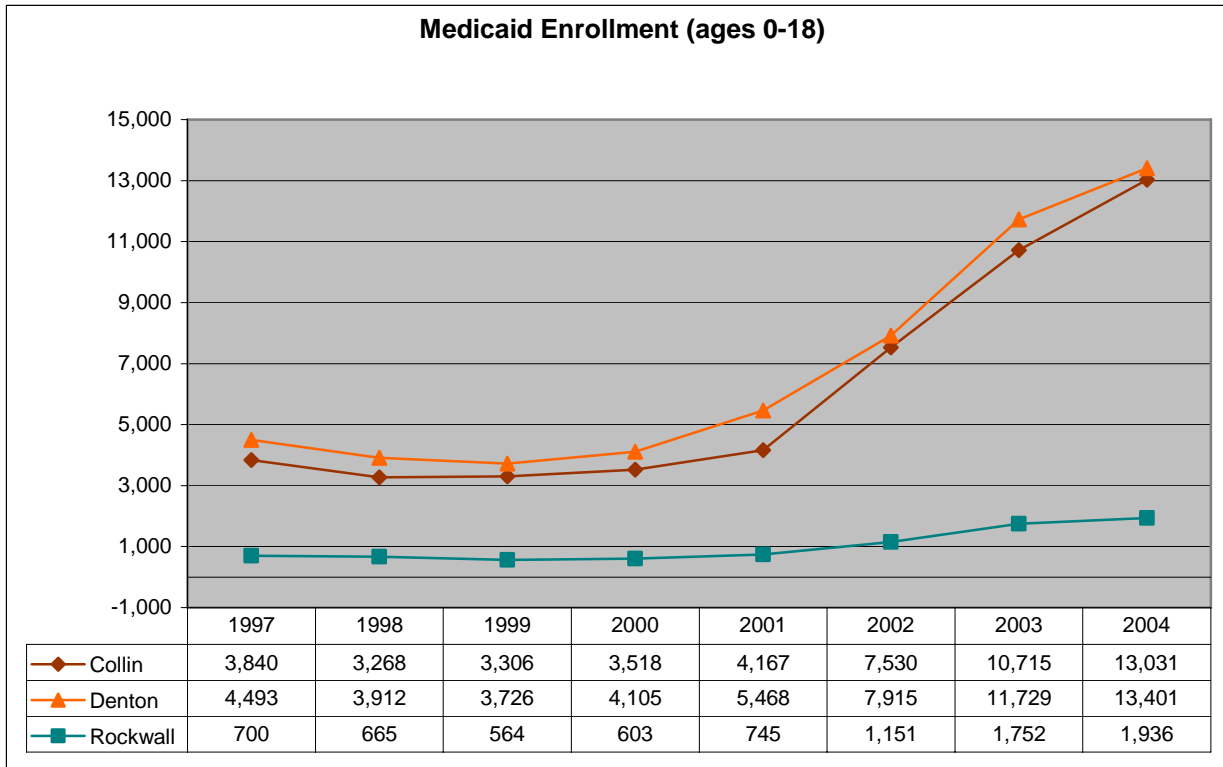
Source: Texas Health & Human Services Commission

Access to Care - Supporting Data

Medicaid



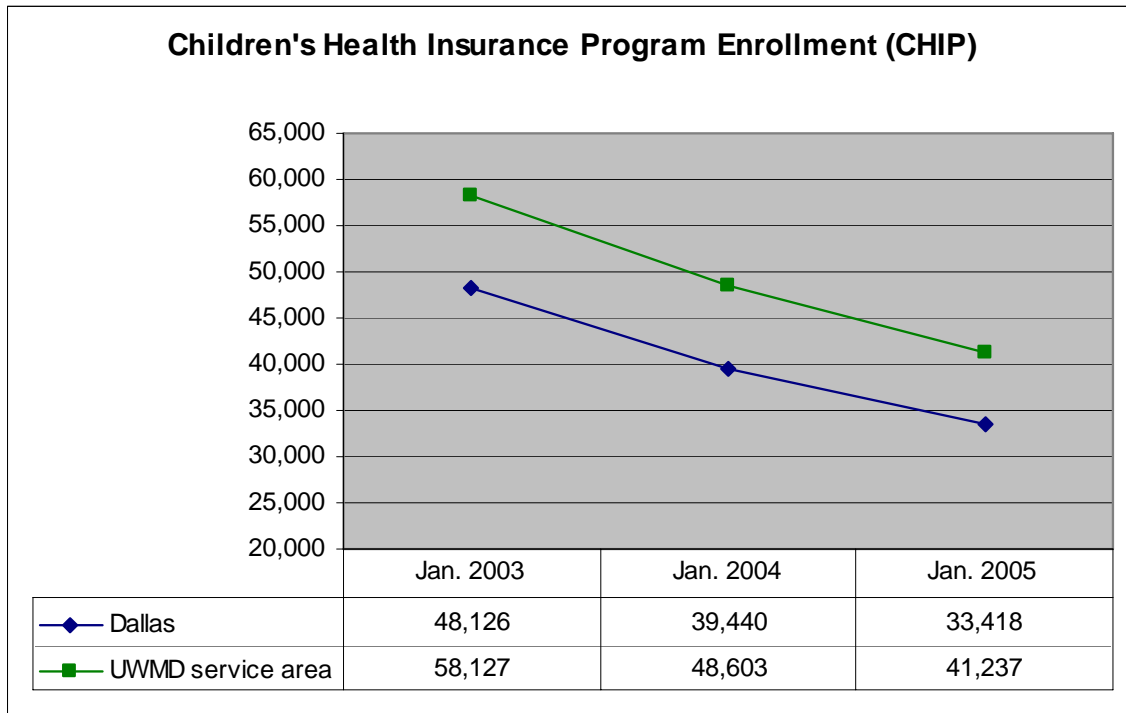
Source: Texas Health and Human Services Commission



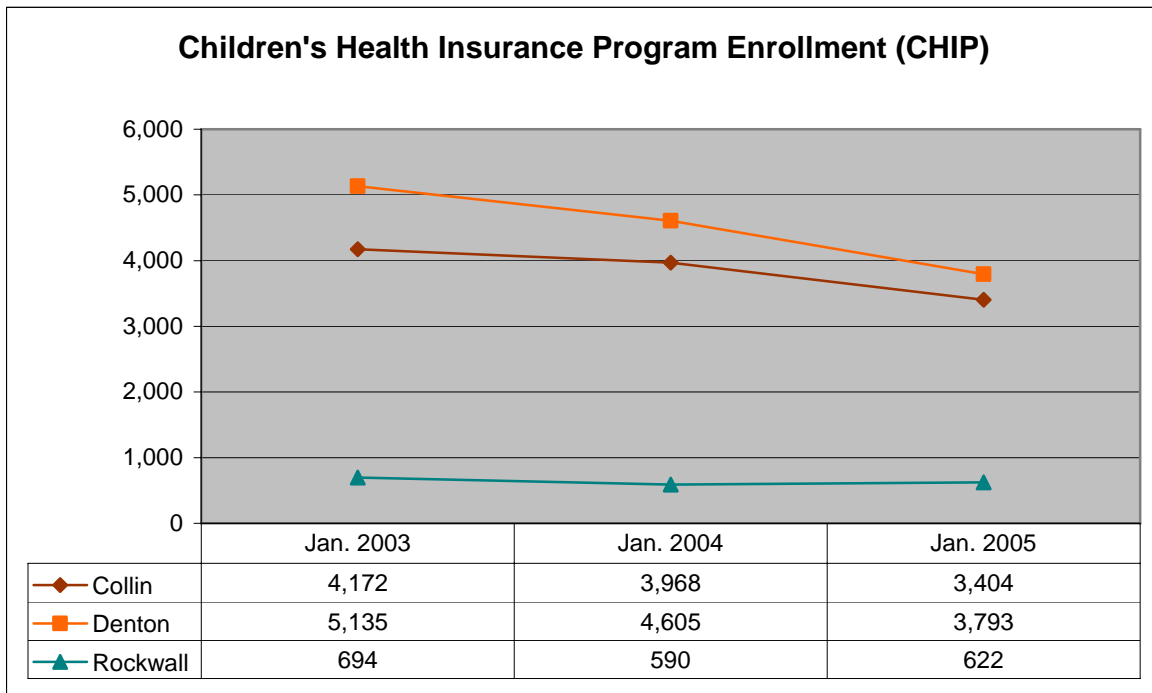
Source: Texas Health and Human Services Commission

Access to Care - Supporting Data

Children's Health Insurance Program (CHIP)


















Source: Texas Health and Human Services Commission

















Source: Texas Health and Human Services Commission

HEALTH

PHYSICAL HEALTH AND WELLNESS

INDICATOR	SUMMARY	TREND	CONDITION
Percentage of Adults Reporting Selected Health Risks	Compared to the U.S., Texas and the Dallas Metropolitan Area have high percentages on three risk factors: binge drinkers, people with no health insurance, and people reporting health as poor or fair.	N/A	 Critical
Births with No Prenatal Care	The percentage of births with no prenatal care has remained stable. Rates are higher among African Americans and Hispanics.	 Same or Mixed	 Concerned
Sexually Transmitted Diseases (STD)--Case Rates	STD rates have generally remained stable or decreased. However, syphilis rates have increased in Dallas County.	 Same or Mixed	 Concerned
Estimated Immunization Rates--Children 19-35 Months	Texas and Dallas County child immunization rates are somewhat lower than U.S. rates. African American and Hispanic rates are lower than Anglo and Asian.	 Same or Mixed	 Concerned
Estimated Number of Persons with at Least One Untreated Decayed Tooth	The percentage of poor persons with at least one untreated cavity is higher than the percentage of non-poor. This is true across all age groups, and all racial-ethnic groups.	 Same or Mixed	 Concerned
Infant Mortality Rates	The infant mortality rate in the UWMD four county service region increased each year from 2000 through 2003.	 Worsening	 Concerned
Death Rates from Heart Disease	There has been a gradual decrease in the rate of deaths from heart disease in the UWMD four county service region. Age-adjusted rates are notably higher among African Americans, and lower among Hispanics.	 Improving	 Manageable
Death Rates from Cancer Disease	Across the region, there has been a decrease in the rate of deaths from cancer. Age-adjusted rates are higher among African Americans, and higher among Hispanics.	 Improving	 Manageable

PHYSICAL HEALTH AND WELLNESS

INDICATOR	SUMMARY	TREND	CONDITION
Death Rates from Cerebrovascular Diseases (includes stroke, subarachnoid hemorrhage, intracerebral hemorrhage, cerebral infarction, and other cerebrovascular diseases)	Death rates from cerebrovascular disease have decreased in the UWMD four county service region. Age-adjusted rates are higher among African Americans.	 Improving	 Manageable
Death Rates from All Accidents	The rate of deaths from all accidents in the UWMD four county service region decreased slightly from 1997 through 1999, and has remained stable since 1999. Age-adjusted rates are higher for African Americans, lower for Hispanics.	 Same or Mixed	 Concerned
Death Rates from Motor Vehicle Accidents	The rate of deaths from motor-vehicle accidents in the UWMD four county service region has remained stable. Age-adjusted rates among racial-ethnic groups are relatively small compared to other causes of death.	 Same or Mixed	 Concerned
Death Rates from Diabetes	The rate of deaths from diabetes in the UWMD four county service region fluctuates from year to year. The rate remained stable from 1996 to 2001, increased in 2002 and decreased in 2003. Age-adjusted death rates in the UWMD four county service region are much higher for African Americans and Hispanics.	 Same or Mixed	 Concerned
Number of Deaths from AIDS	The number of deaths from AIDS decreased dramatically from 1995 to 1997, and has remained stable since 1998. Age-adjusted death rates are much higher for African Americans.	 Improving	 Concerned
Percentage of Children and Adolescents Who Are Overweight	The percentage of children and adolescents in the U.S. who are overweight increased from 4% in 1971-74, to 16% in 1999-2002.	 Worsening	 Concerned
Age-adjusted Prevalence of Overweight and Obesity Among U.S. Adults	The percentage of adults in the U.S. who are overweight or obese increased from 47% in 1976-80, to 65% in 1999-2002.	 Worsening	 Concerned

Physical Health and Wellness - North Texas

Overview

There are many possible indicators of Physical Health and Wellness. These include data related to healthy habits and lifestyle, data on various illnesses and conditions, and data on the leading causes of death.

There are often important disparities in rates of illness and death among racial-ethnic groups. Therefore, for many of the Health and Wellness indicators, data are reported both “all races,” and for specific racial-ethnic groups.

Note on age adjusted death rates: Most of the data in the “Deaths by Cause” charts are age adjusted. As explained by the Texas Department of State Health Services website: “Age adjusted death rates provide unbiased comparisons that are not influenced by differences in age distribution in subject populations. The standard used is the US 2000 standard population .” A more detailed explanation is provided at the Texas Department of State Health Services website: <http://soupon.tdh.state.tx.us/deathdoc.htm> .

Regional Trends

- The Dallas Metropolitan Area has rates that are higher than U.S. rates on several indicators, as measured by the Behavioral Risk Factor Surveillance System:
 - Binge drinking (20.6% in Dallas compared to 16.1% in the U.S.)
 - Lack of health insurance (29.5% in Dallas compared to 14.1% in the U.S.)
 - Obesity (24.5% in Dallas compared to 22.2% in the U.S.)
 - Persons reporting health status as “fair or poor” (18.7% in Dallas compared to 14.7% in the U.S.)
- In 2002, the rates of mothers who receive no prenatal care were lower in the UWMMD four county service region (1.4%) than in the State (2 %). However, rates for African Americans and Hispanics are higher than for Anglos.
- In general, sexually transmitted disease rates decreased or remained about the same since 1998. However, syphilis rates in Dallas County increased from 2000 through 2002.
- In the area of dental health, there are notable disparities between poor and non-poor, and among racial-ethnic groups. The number of untreated cavities in poor children ages 2-9 years in the U.S. was twice as high as for non-poor children. The number of untreated cavities in poor adults 18 years and over was more than three times as high as for non-poor adults. (Note: poor is defined as persons with annual incomes below the Federal Poverty Guidelines. The 2005 Federal Poverty Guidelines are included in the Executive Summary of the Community Assessment.)
- In the U.S., a much larger percentage of African Americans and Hispanics (both children and adults, poor and non-poor) have untreated cavities compared to Anglos.
- Infant mortality rates increased from 5 in 2000 to 7.1 in 2003 (per 1,000 live births). The infant mortality rate is especially high among African American

compared to the racial-ethnic groups. (11.6 for African Americans compared to 4.6 for Anglos/deaths per 1,000 live births)

- In 2003, the infant mortality rate in the UWMD four county service region exceeded the rate in the State. (7.1 in the region compared to 6.6 in the State/rates per 1,000 live births.
- From 1996 to 2003, there was a decrease in death rates from heart disease, cancer, and cerebrovascular disease.
- Death rates from heart disease, cancer, and cerebrovascular disease are higher for African Americans than for other racial-ethnic groups.
- Death rates from diabetes are lower in the UWMD four county service region than in the State. (21.6 in the region compared to 31.4 in Texas/age-adjusted rates per 100,000 persons)
- Death rates from diabetes are higher among African Americans and Hispanics. (52.4 for African Americans and 47 for Hispanics, compared to 20.1 for Anglos)
- Death rates from accidents are lower in the UWMD four county service region than in the State. (32.8 in the region compared to 40 in the State/age-adjusted rates per 100,000 persons)
- The number of deaths from AIDS decreased dramatically, from 611 in 1995 to 177 in 1998; the annual number of deaths has remained stable since that time.

Physical Health and Wellness

Collin County

- The number of infant deaths increased each year between 2000 and 2003—from 30 in 2000 to 49 in 2003.
- In the past four years, infant mortality rates have remained lower than rates in Dallas County, and in the State. (4.1 in Collin County compared to 6.6 in Dallas County and 6.4 in Texas/death rates per 1,000 live births in 2002)
- In 2003, Collin County had the lowest rate of deaths from heart disease among the counties in the UWMD four county service region.
- In general, rates of death and disease are slightly lower than in the region as a whole.

Dallas County

- In 2002, Dallas County had the highest percentage of births with no prenatal care (1.5%) among counties in the UWMD four county service region.
- Dallas has much higher rates of sexually transmitted diseases than the other counties in the UWMD four county service region. Rates in Dallas County are also much higher than State rates.
- Syphilis rates have risen noticeably in the past four years—from 26.5 in 2000 to 44.4 in 2003/rates per 100,000 persons.
- The number of infant deaths increased each year between 2000 and 2003—from 235 in 2000 to 340 in 2003.
- In 2003, the infant mortality rate increased to 8, higher than regional and State rates. (7.1 in the region and 6.6 in the State/rates per 1,000 live births)
- In 2003, Dallas County had the highest rate of deaths from cancer among the Counties in the UWMD four county service region. The rate was also higher than the State rate. (195.7 in Dallas County compared to 181.8 in the region, and 185 in Texas/age-adjusted death rates per 100,000 persons in 2003)
- The number of deaths from AIDS decreased from 562 in 1995 to 166 in 1998, and has remained stable relatively low since 1998.

Physical Health and Wellness

Denton County

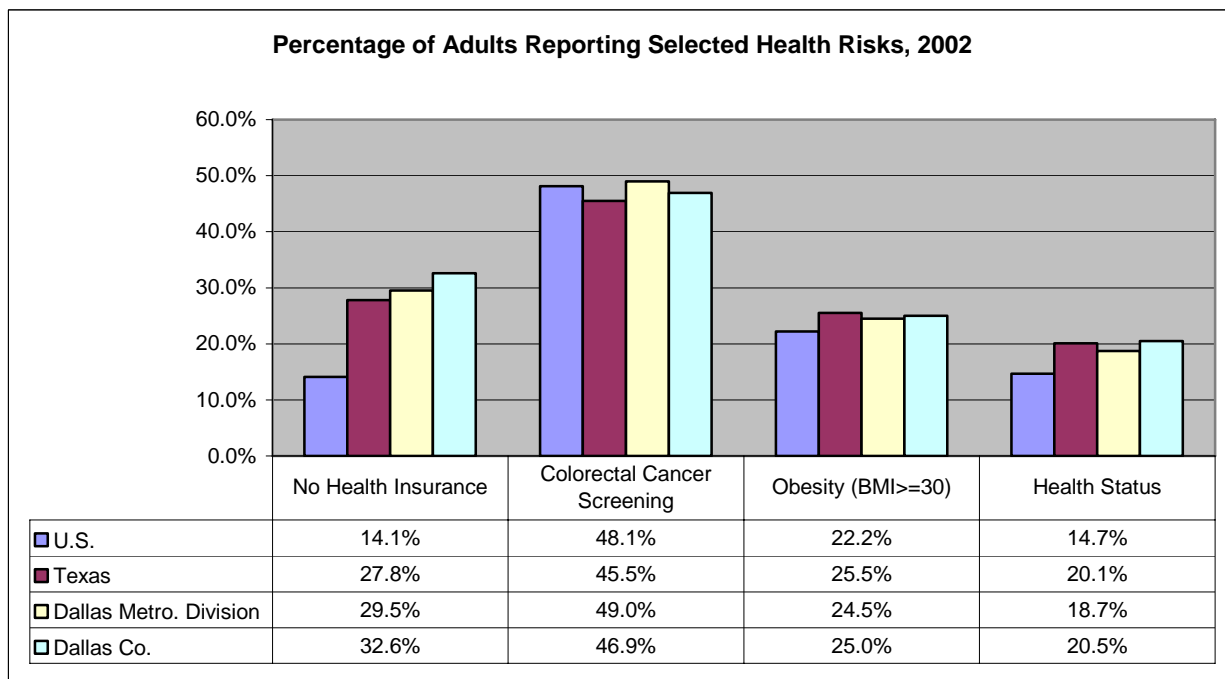
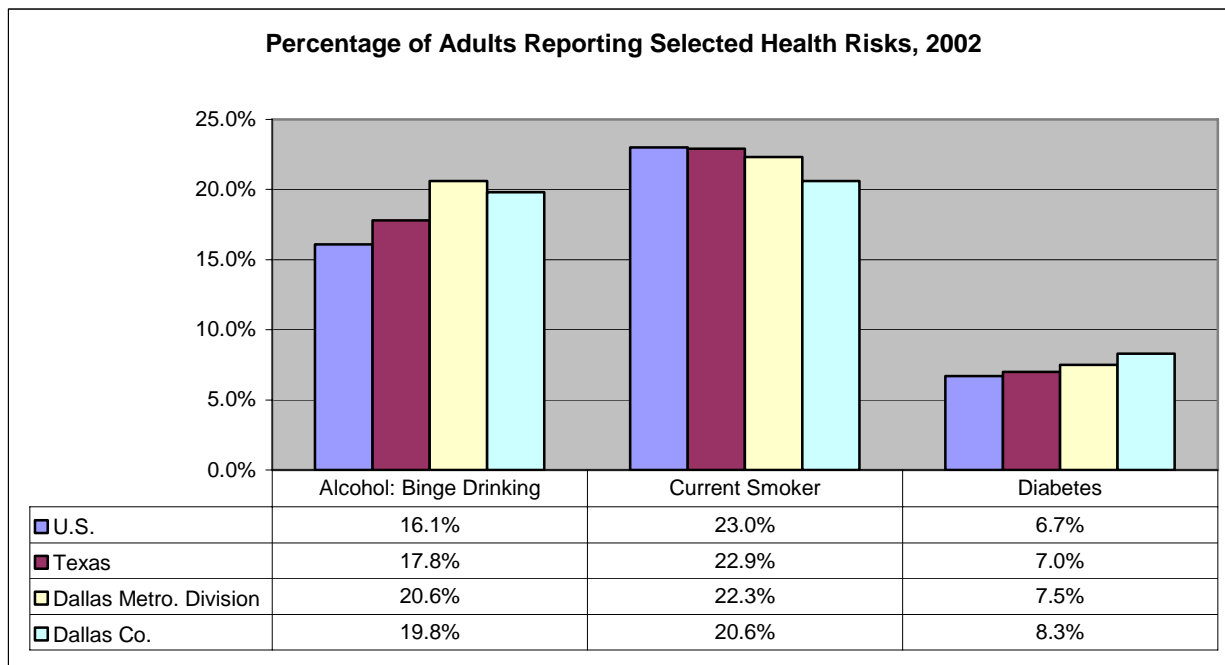
- There was an upward trend in death rates from motor vehicle accidents--from 9.2 in 2000 to 15.8 in 2003 (rates per 100,000 persons). In comparison, Collin and Dallas County have remained stable.
- In 2003, Denton County had the highest rate of death from motor vehicle accident among counties in the UWMD four county service region. (15.8 in Denton County Compared to 13.3 in the UWMD four county service region/age-adjusted rates per 100,000 persons)
- In 2002, Denton County had the lowest percentage of births with no prenatal care among counties in the UWMD four county service region. (1 % in Denton County compared to 1.4% in the region, and 2 % in Texas)
- The infant mortality rate increased each year between 2000 and 2003--from 4 in 2000 to 5.9 in 2003.
- Deaths from cerebrovascular disease peaked in 1999, and have decreased since that year. (from 87.2 in 1999 to 59.3 in 2003/age-adjusted rates per 100,000 persons)
- In 2003, Denton County had the highest rate of deaths from diabetes among the counties in the UWMD four county service region. (31.3 in Denton County compared to 21.6 in the region/age-adjusted rates per 100,000 persons)
- The number of AIDS deaths remained low--eight deaths in 2002, and eight in 2003.

Rockwall County

- In 2003, Rockwall County had the highest rate of deaths from heart disease among the counties in the UWMD four county service region. The rate was also higher than the State rate. (293.7 in Rockwall County compared to 230.5 in the region, and 237.3 in Texas/age-adjusted rates per 100,000 persons)
- Because the number of deaths is relatively small, annual death rates are often not calculated for Rockwall County. This makes it difficult to compare Rockwall County to the larger counties in the region. Some of the numbers reported in 2003 include:
 - 113 deaths from heart disease
 - 63 deaths from cancer
 - 22 deaths from cerebrovascular disease
 - 14 deaths from all accidents
 - 4 deaths from motor vehicle accidents
 - 7 deaths from diabetes
 - 1 infant death (under 1 year) in 2003

Physical Health and Wellness - Supporting Data

Selected Health Risks



Source: Centers for Disease Control, Behavioral Risk Factor Surveillance System (SMART BRFSS)
 *Metropolitan Division includes Collin, Dallas, Delta, Denton, Ellis, Hunt, Kaufman, & Rockwall Counties.

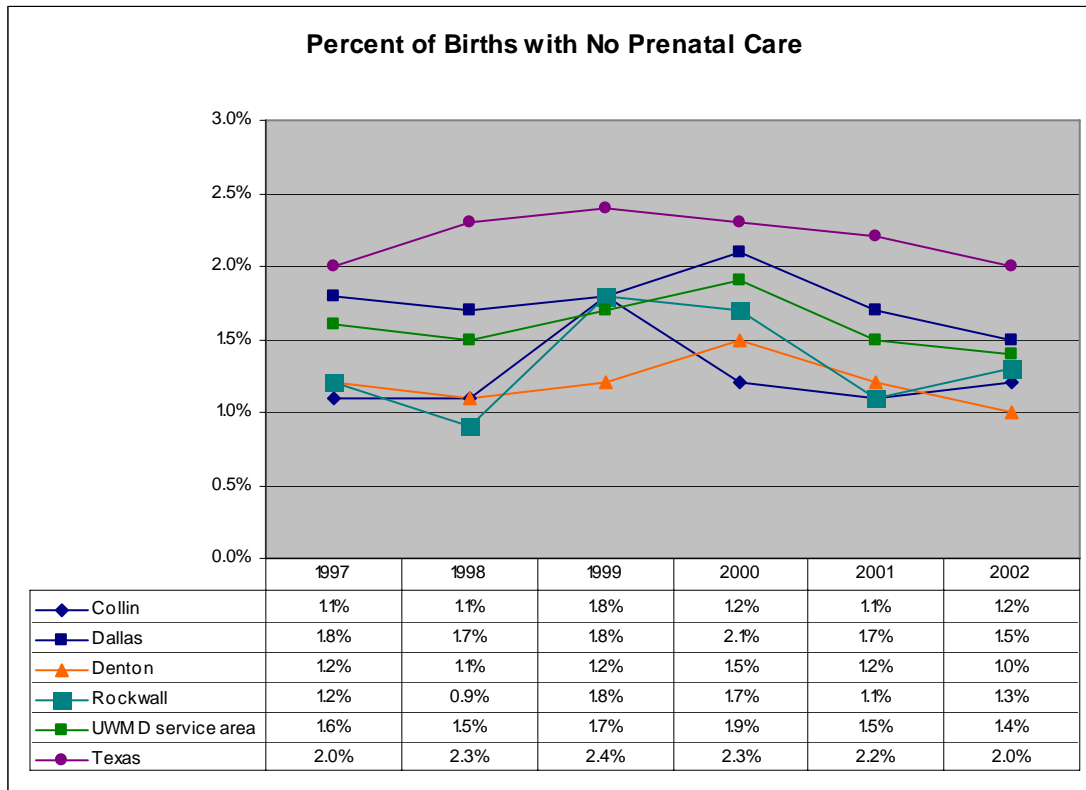
Survey Definitions:

- No Health Insurance—Percentage of adults reporting no health care coverage in the past year.
- Current Smoking—Percentage of adults reporting having smoked at least 100 cigarettes in lifetime & currently smoking.
- Obesity—Percentage of adults reporting Body Mass Index greater than or equal to 30.
- Diabetes—Percentage of adults told by doctor they have diabetes.
- Colorectal Cancer Screening—% of adults 50 yrs. & over reporting having had sigmoidoscopy or colonoscopy exam.
- Binge Drinking—Percent of adults reporting having five or more drinks on an occasion, one or more times past month.

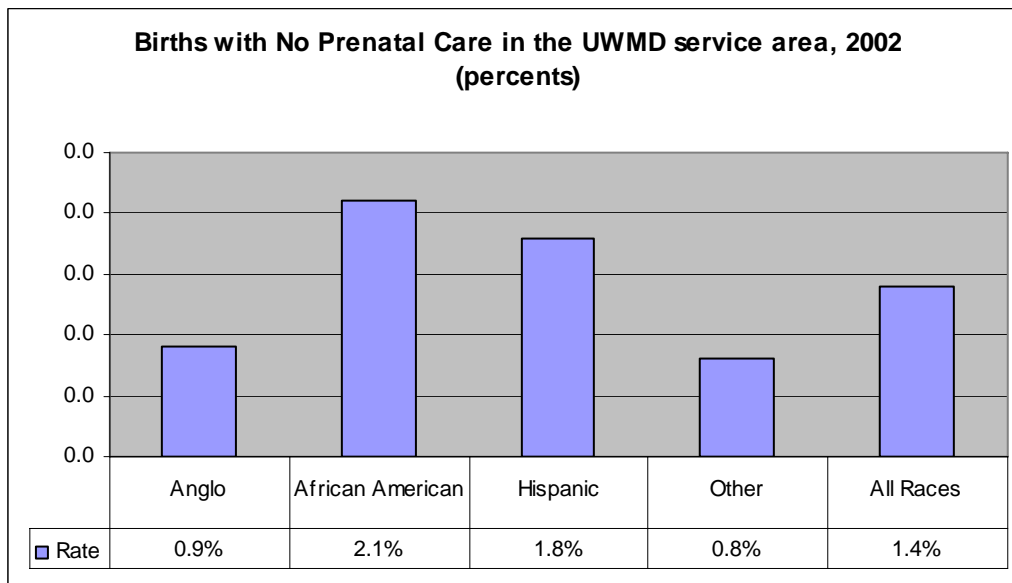
Health Status—Percentage of adults reporting general health as fair or poor.

Physical Health and Wellness - Supporting Data

No Prenatal Care



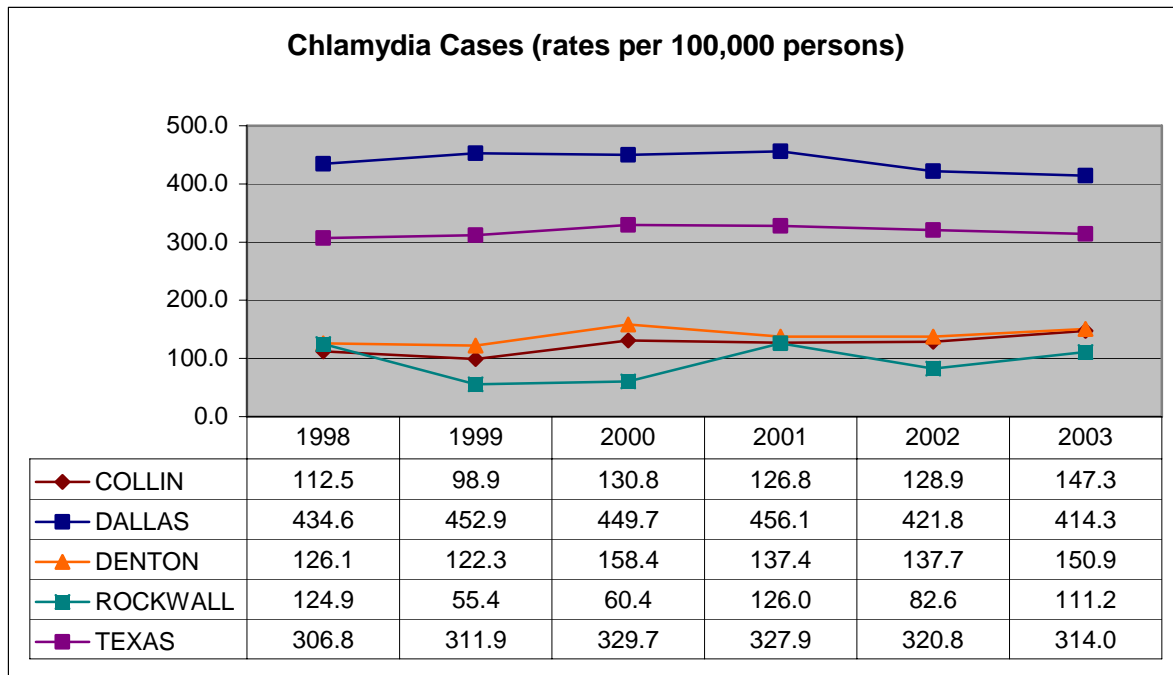
Source: Texas Department of State Health Services



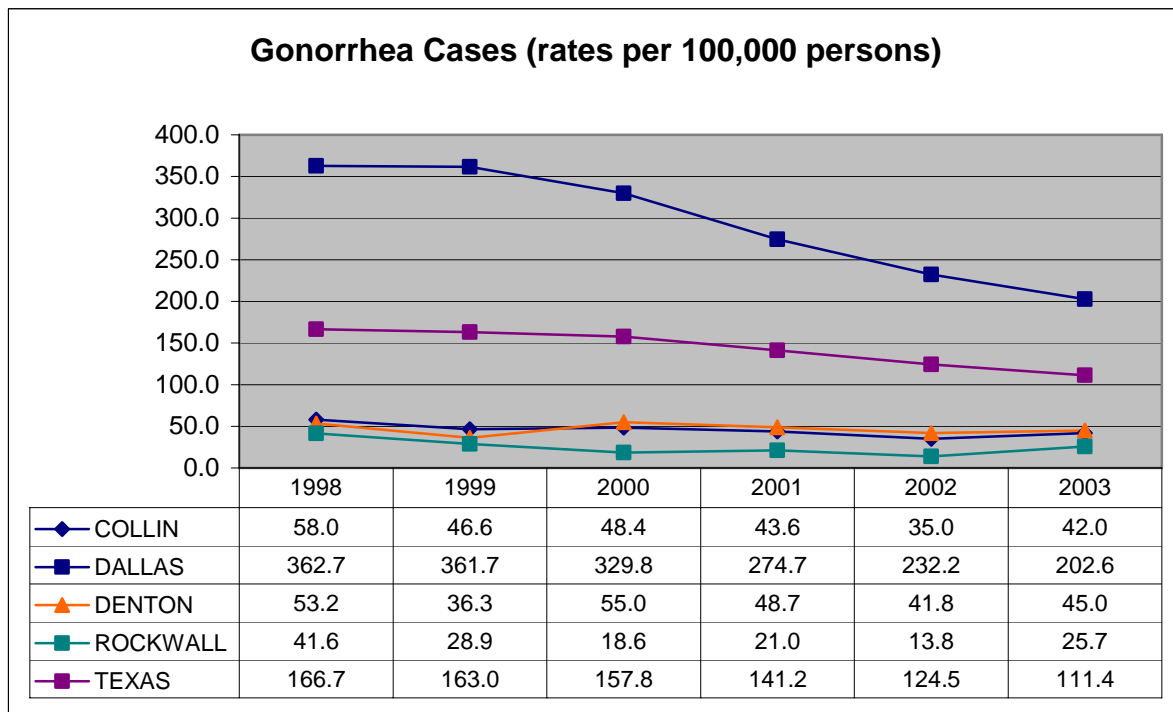
Source: Texas Department of State Health Services

Physical Health and Wellness - Supporting Data

Sexually Transmitted Diseases



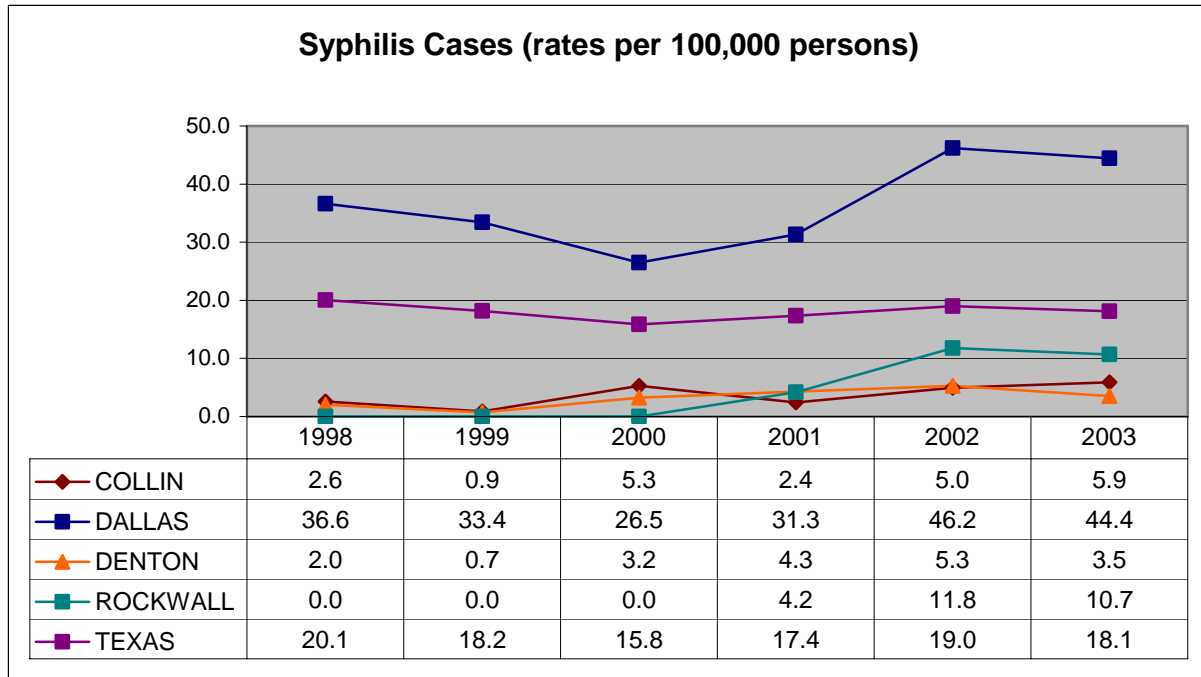
Source: Texas Department of State Health Services



Source: Texas Department of State Health Services

Physical Health and Wellness - Supporting Data

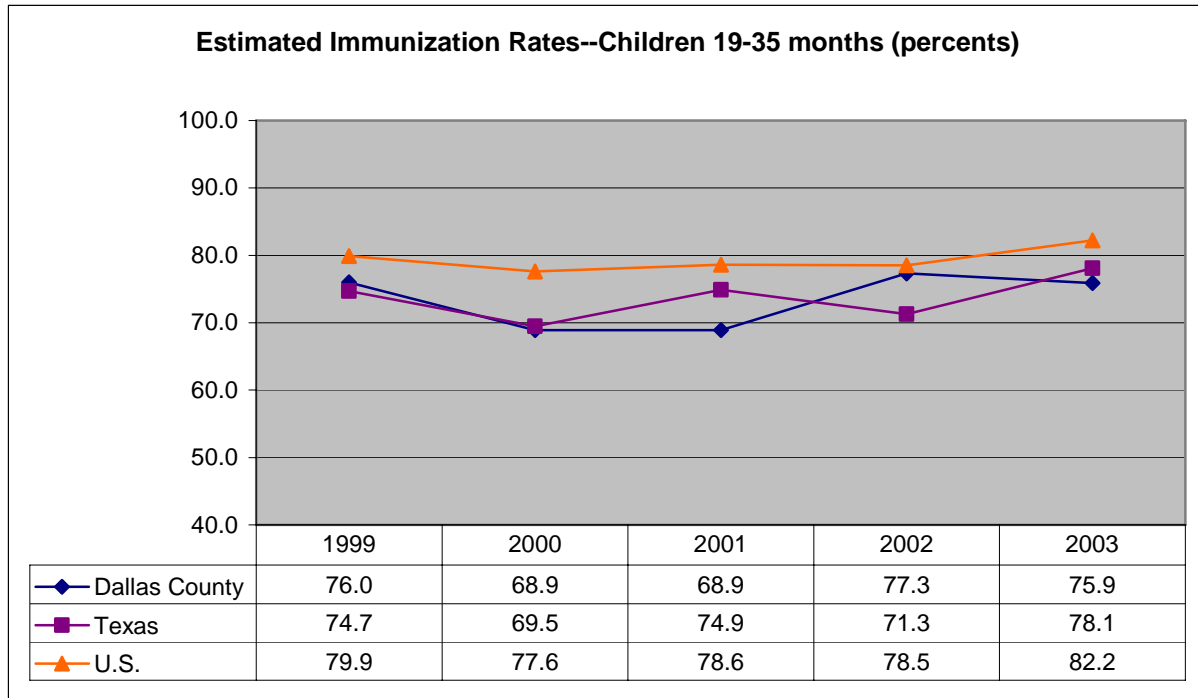
Sexually Transmitted Diseases



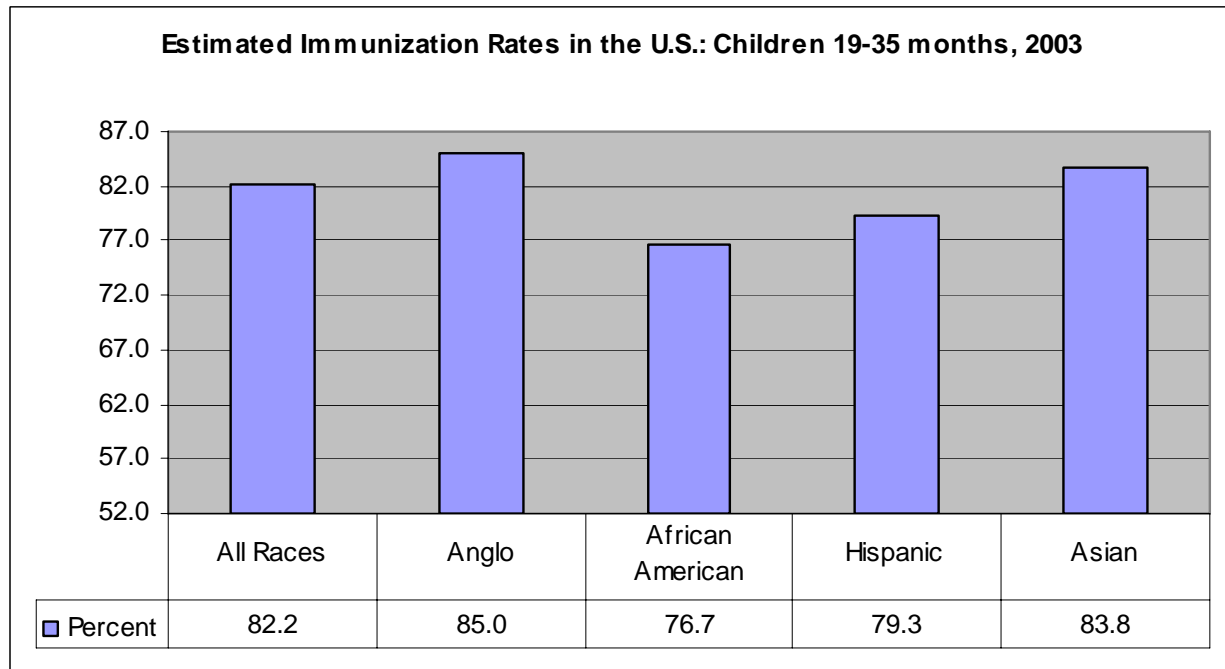
Source: Texas Department of State Health Services

Physical Health and Wellness - Supporting Data

Immunization Rates



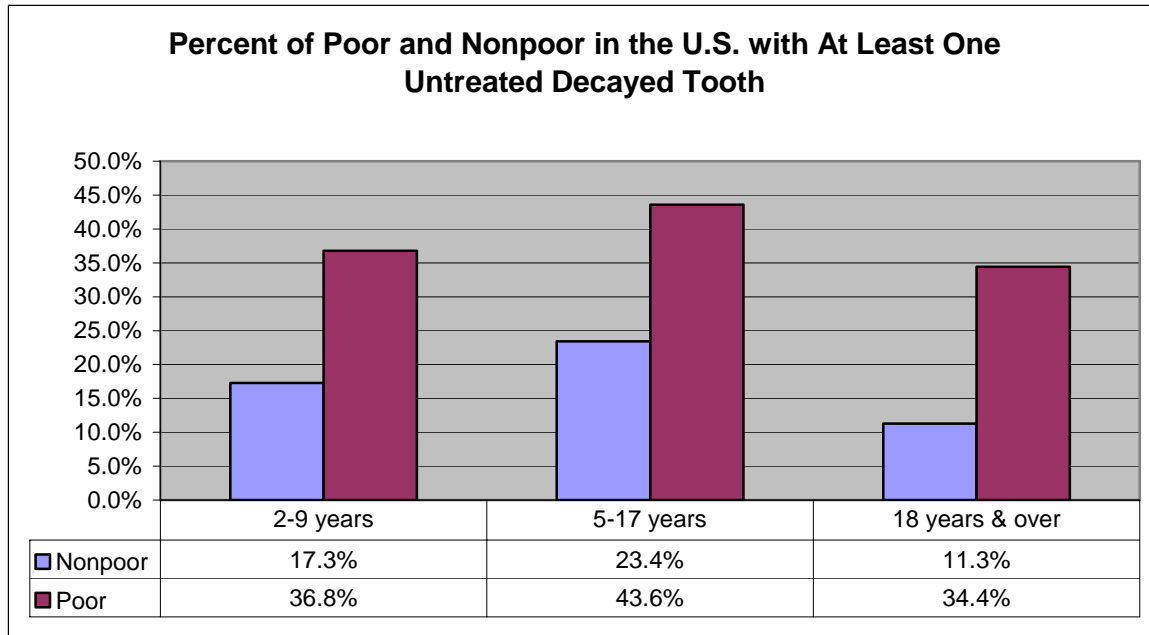
Source: Centers for Disease Control, National Immunization Survey
 4:3:1 = four or more doses of DTP, three or more of poliovirus, & one or more of MCV



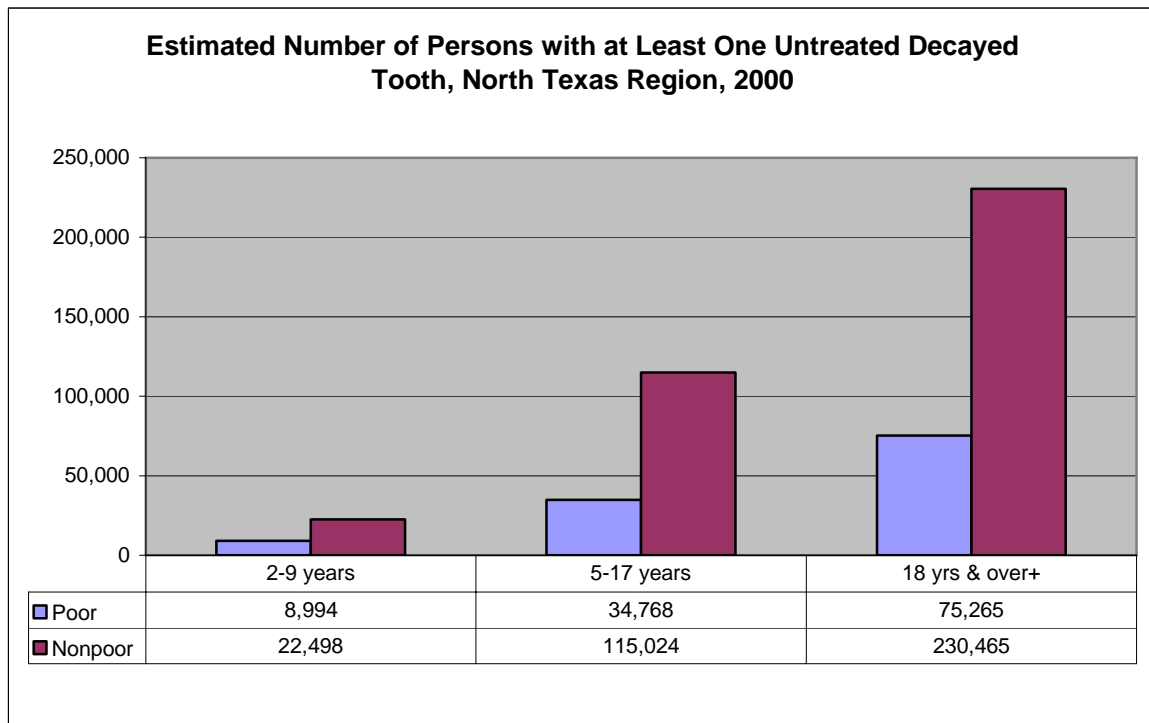
Source: Centers for Disease Control, National Immunization Survey
 4:3:1 = four or more doses of DTP, three or more of poliovirus, & one or more of MCV

Physical Health and Wellness - Supporting Data

Dental Care



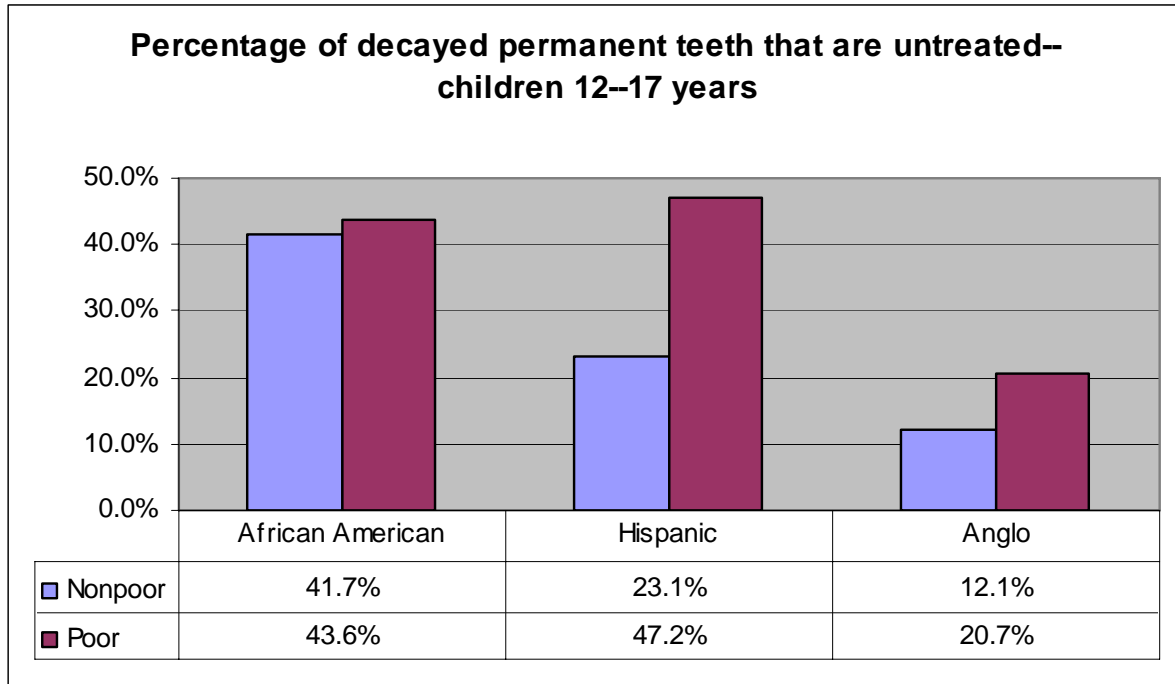
Source: Oral Health in America: A Report of the Surgeon General; May 2000
 Poor is defined as persons with annual incomes below 100% the Federal Poverty Guidelines.



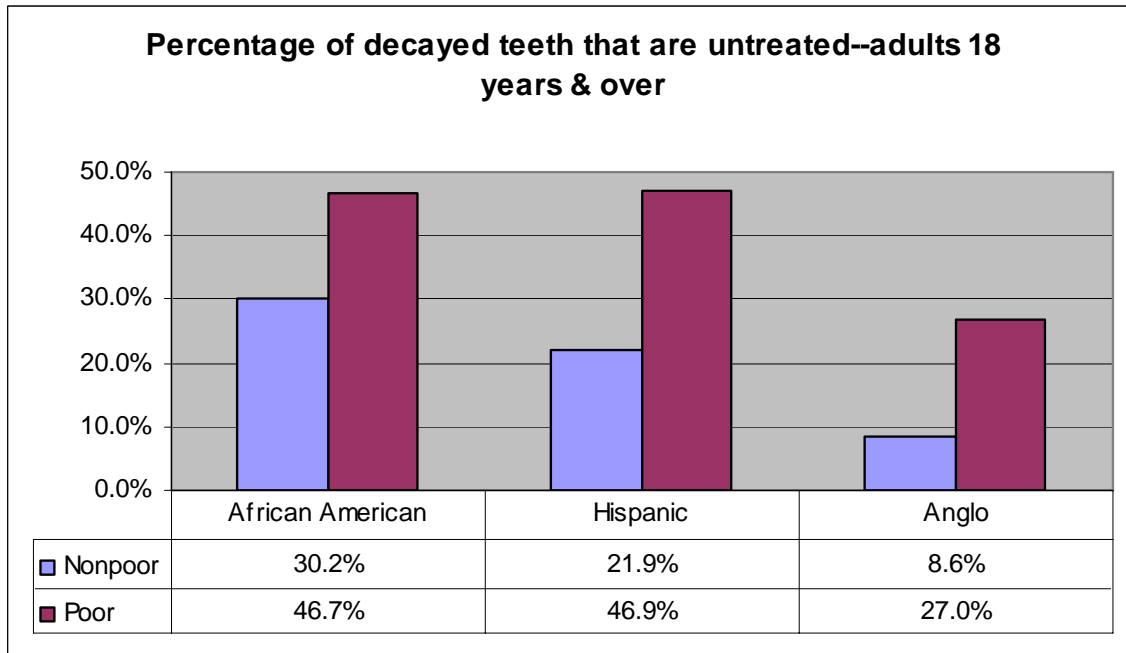
Source: Oral Health in America: A Report of the Surgeon General; May 2000
 Poor is defined as persons with annual incomes below 100% the Federal Poverty Guidelines.

Physical Health and Wellness - Supporting Data

Dental Care



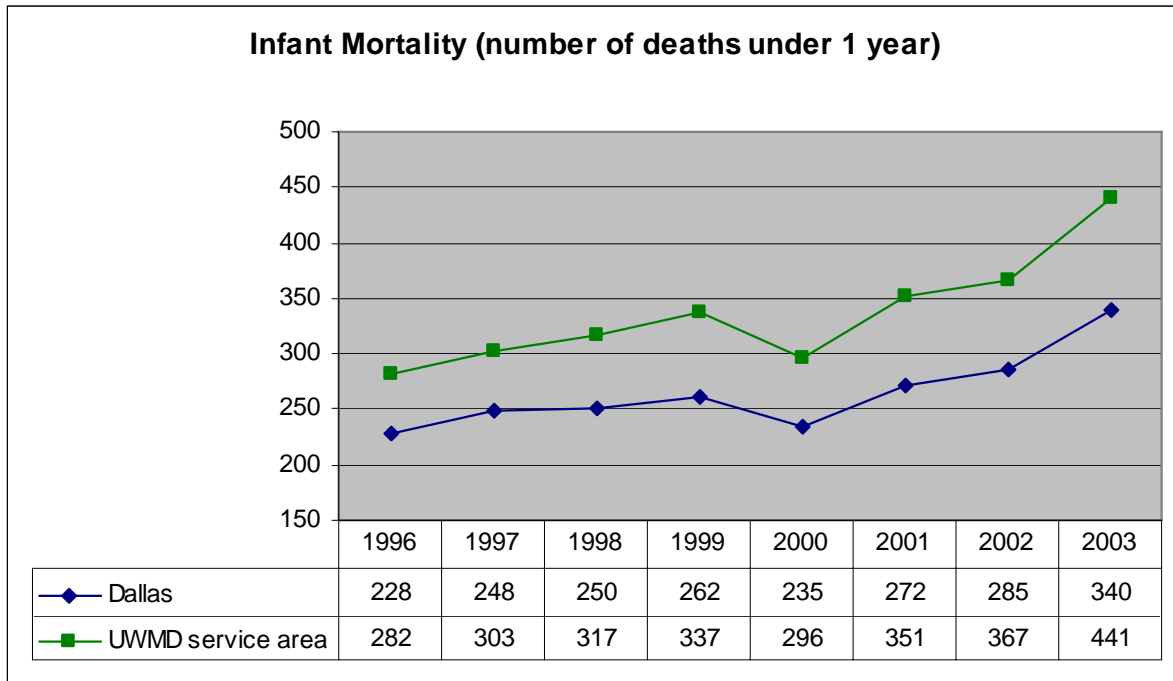
Source: Oral Health in America: A Report of the Surgeon General; May 2000
 Poor is defined as persons with annual incomes below the Federal Poverty Guidelines.



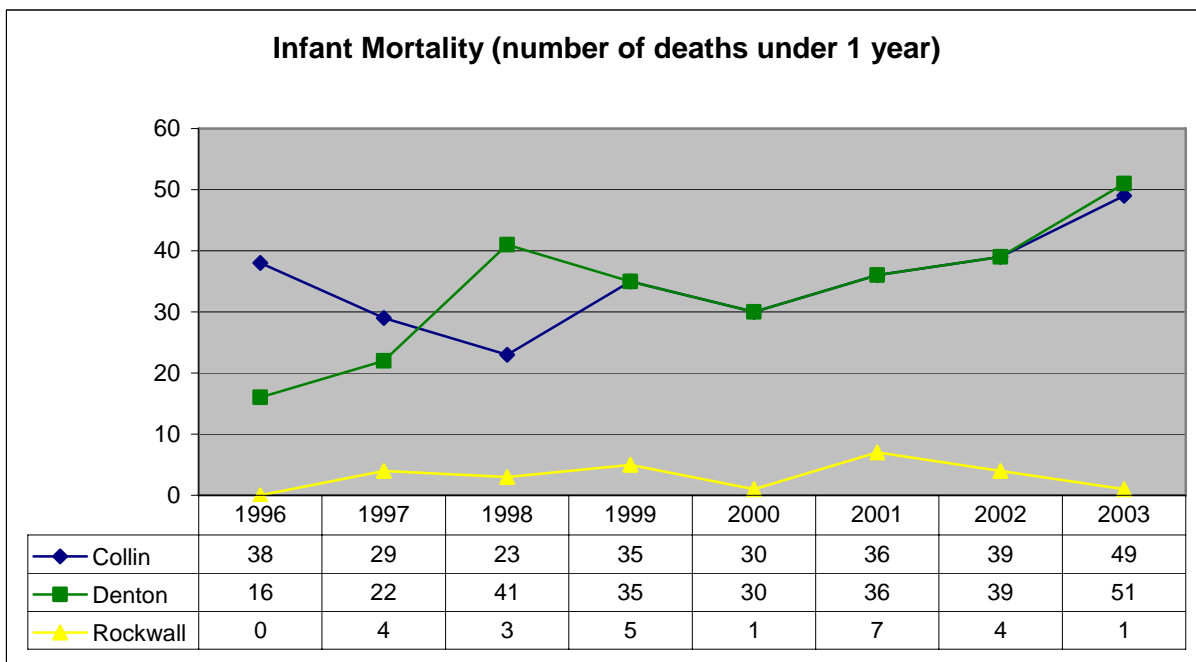
Source: Oral Health in America: A Report of the Surgeon General; May 2000
 Poor is defined as persons with annual incomes below the Federal Poverty Guidelines.

Physical Health and Wellness - Supporting Data

Infant Mortality



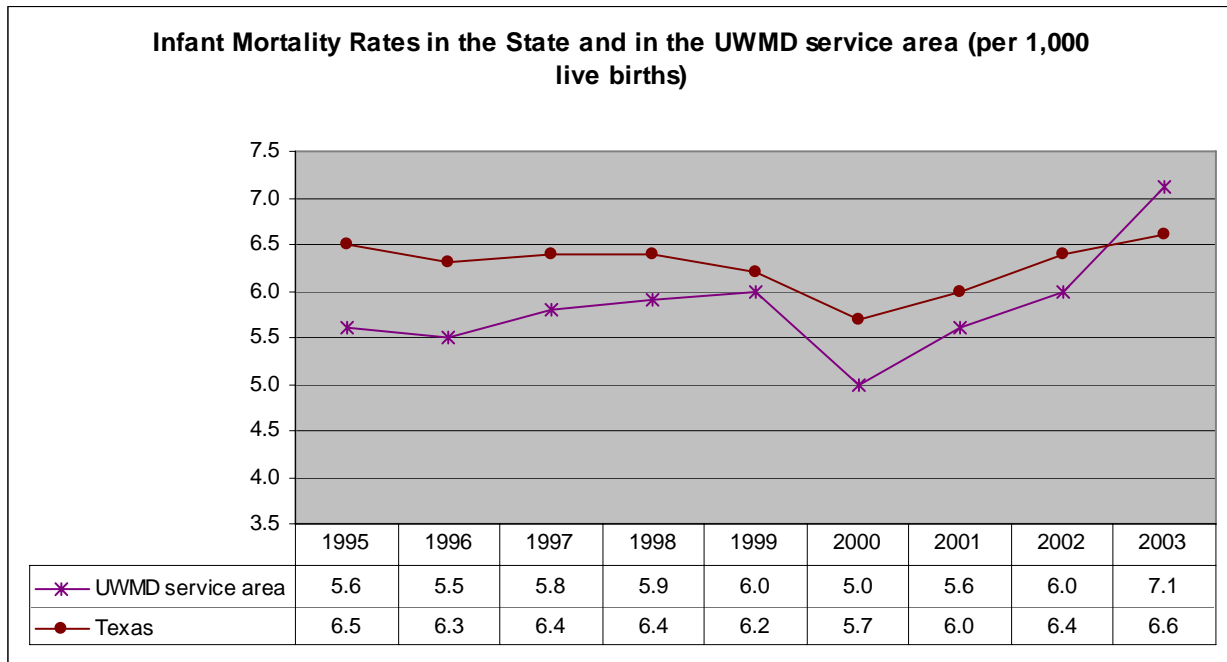
Source: Texas Department of State Health Services



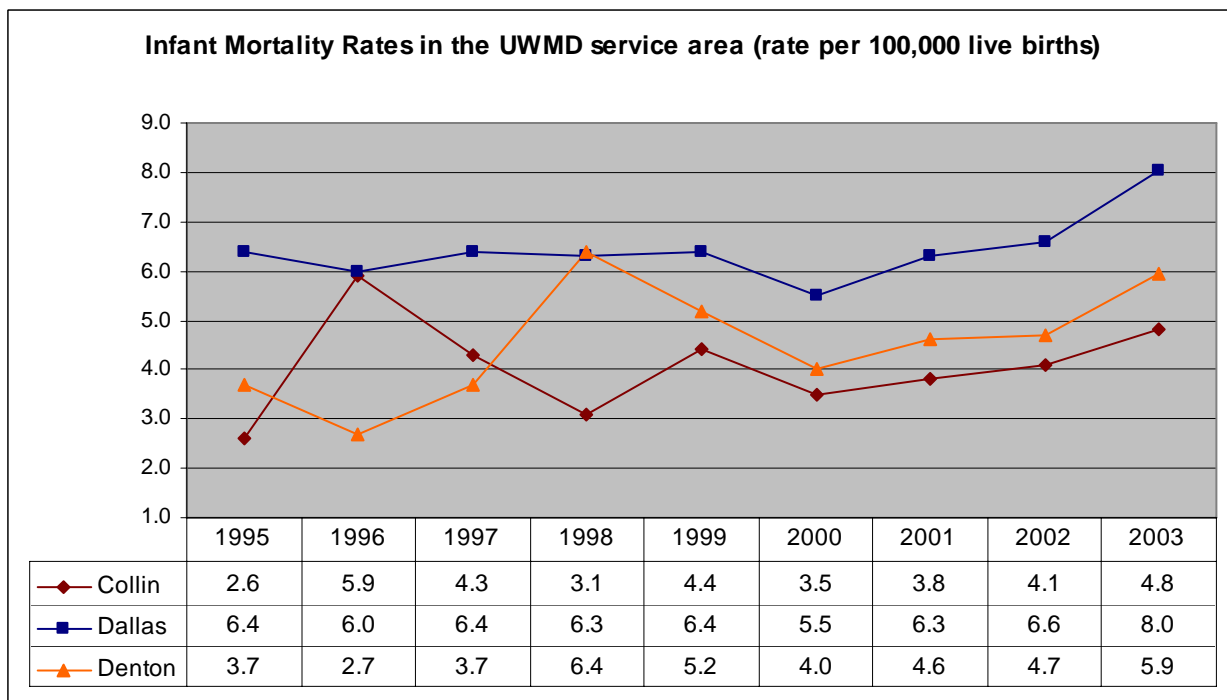
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Physical Health and Wellness - Supporting Data

Infant Mortality



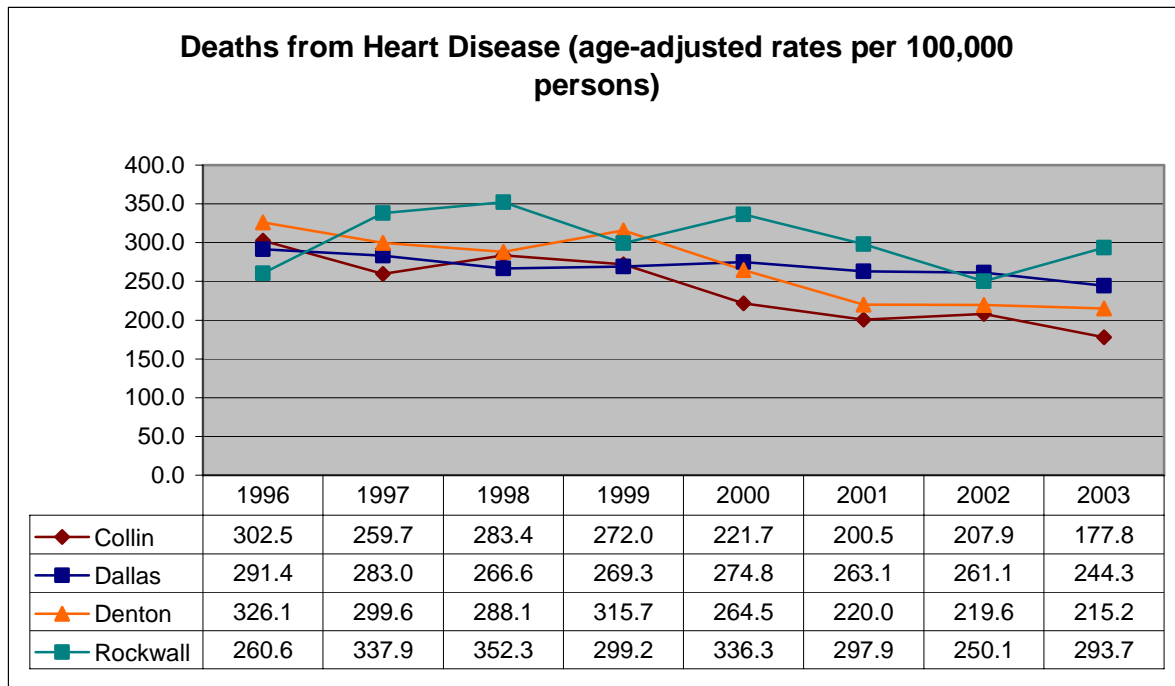
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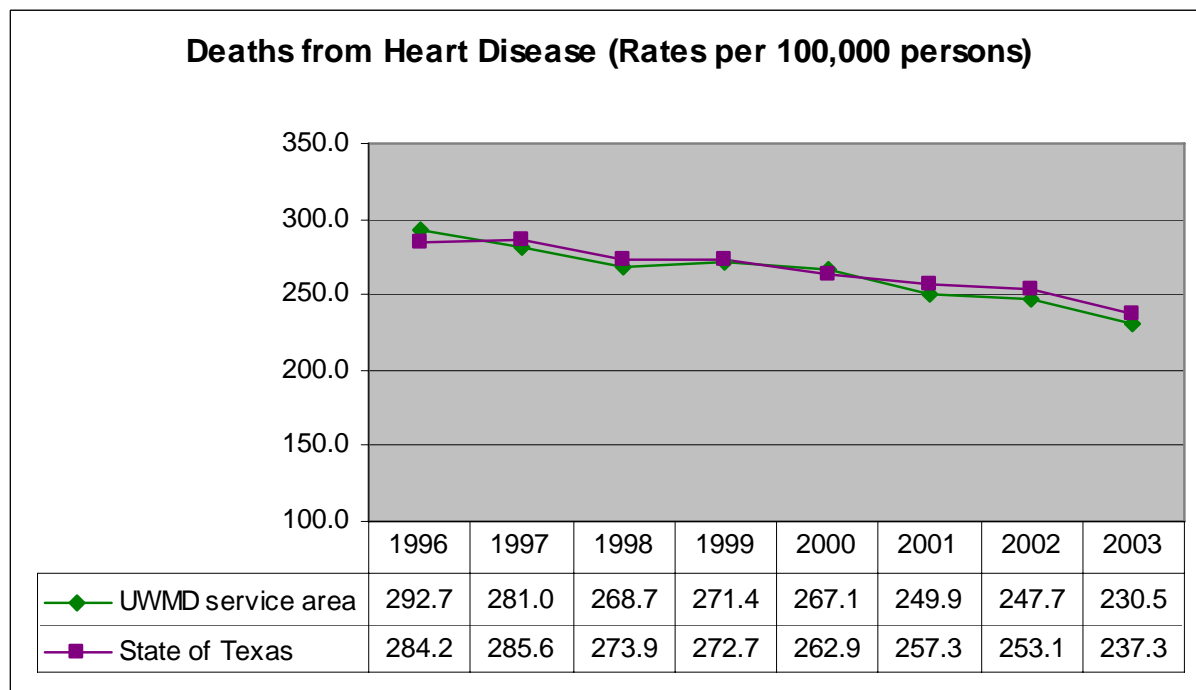
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Physical Health and Wellness - Supporting Data

Heart Disease



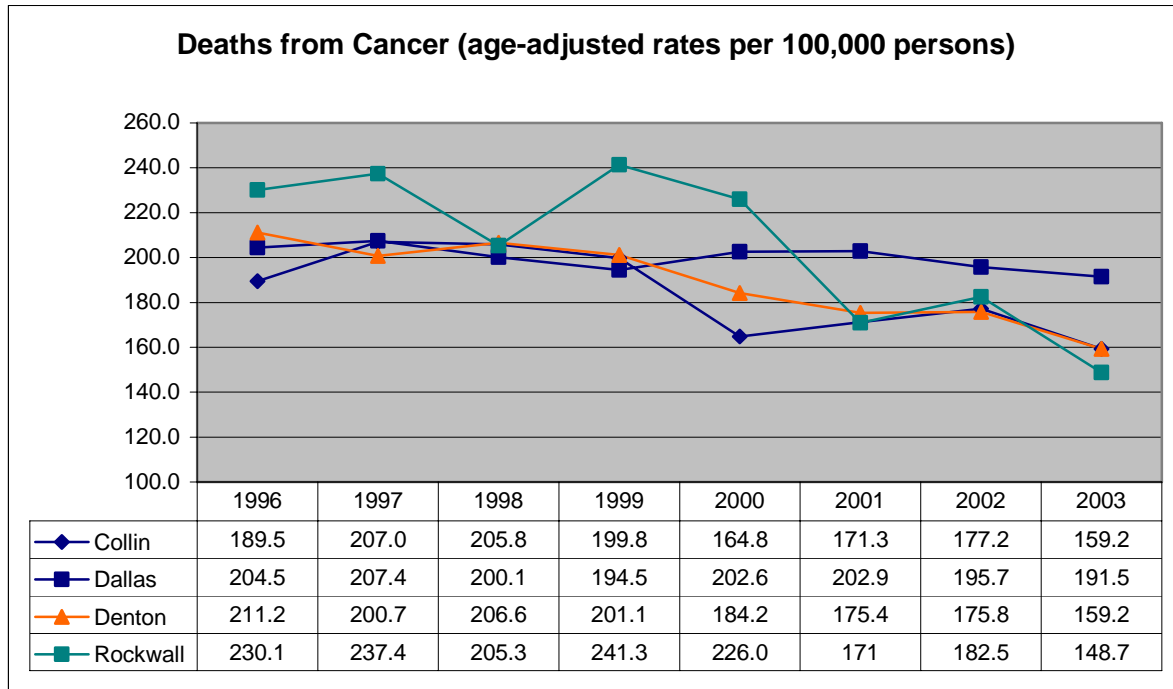
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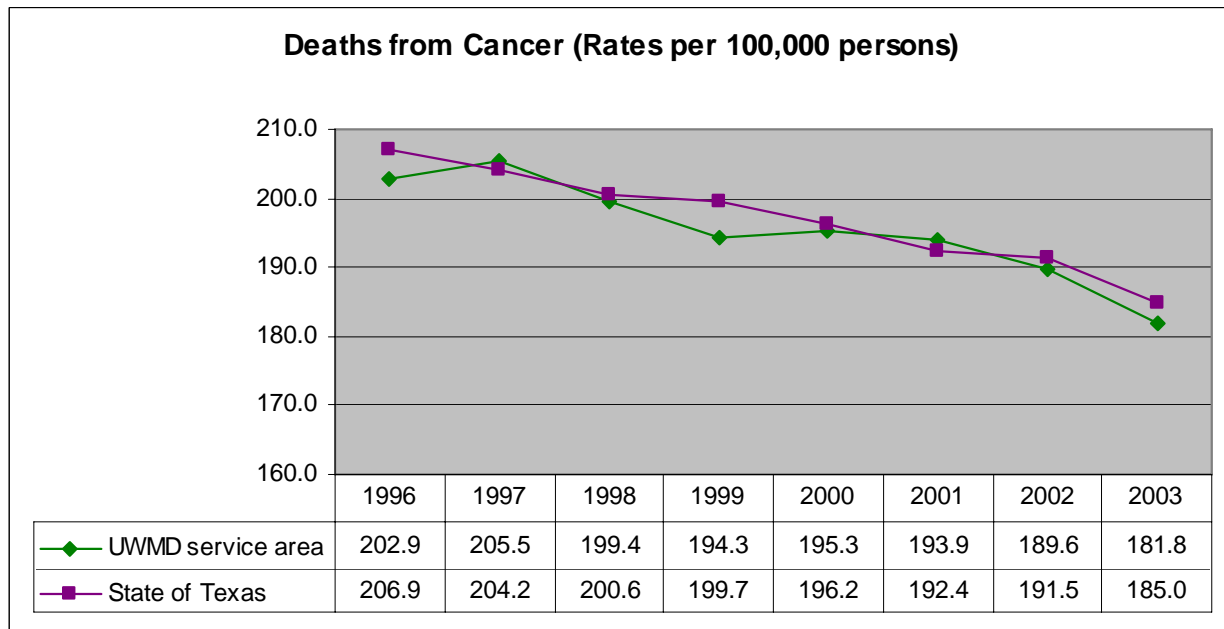
Source: Texas Department of State Health Services

Physical Health and Wellness - Supporting Data

Cancer



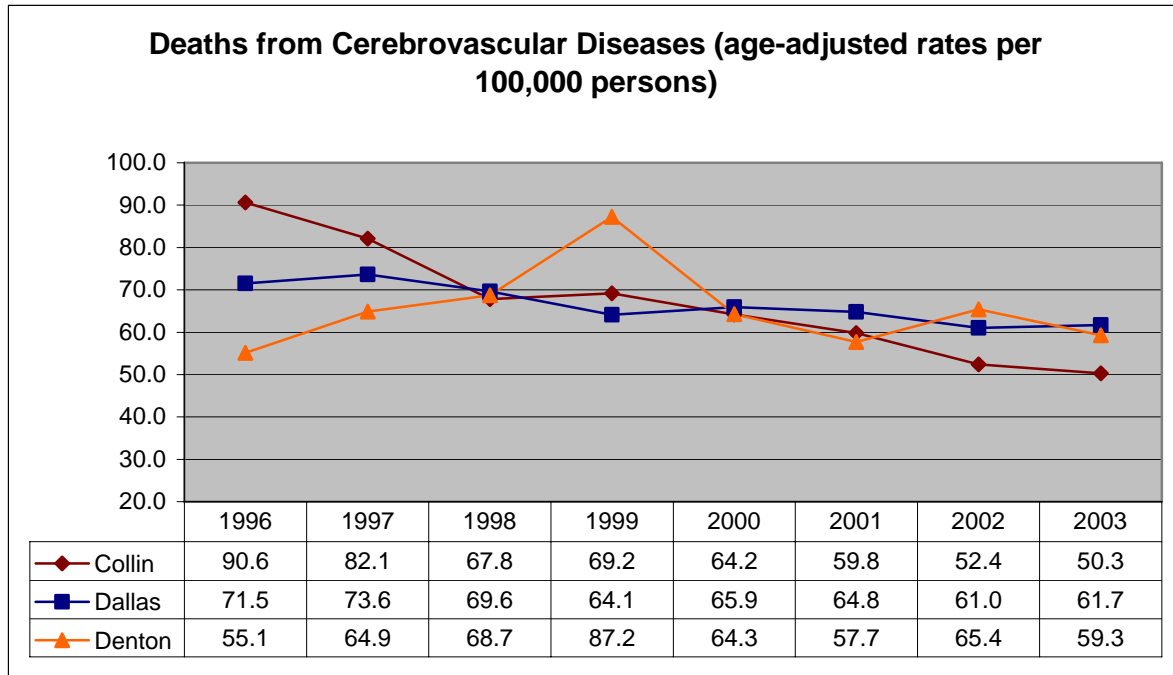
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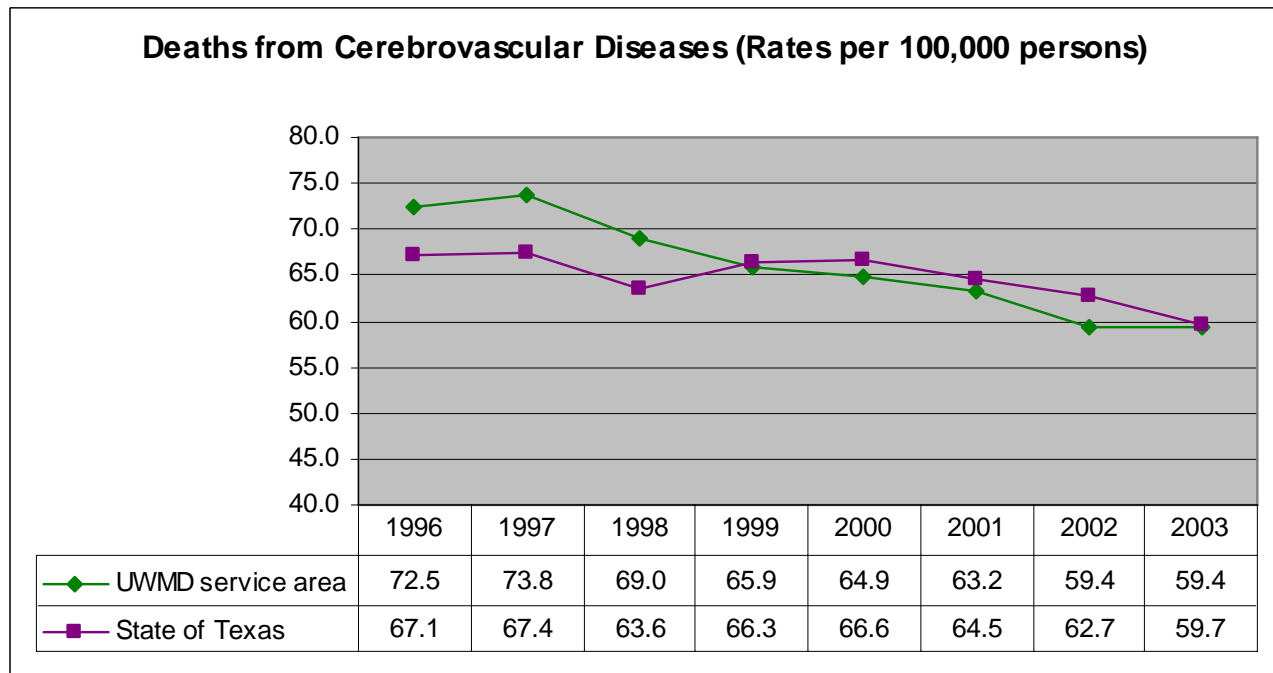
Source: Texas Department of State Health Services

Physical Health and Wellness - Supporting Data

Cerebrovascular Disease (stroke)



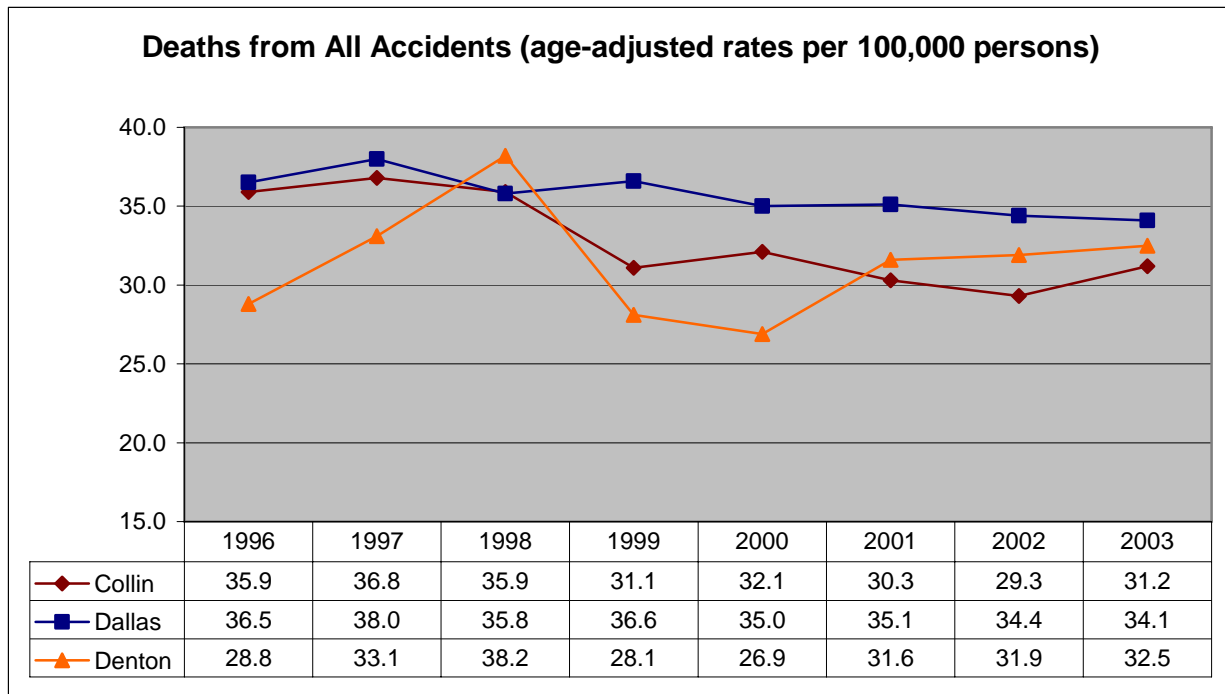
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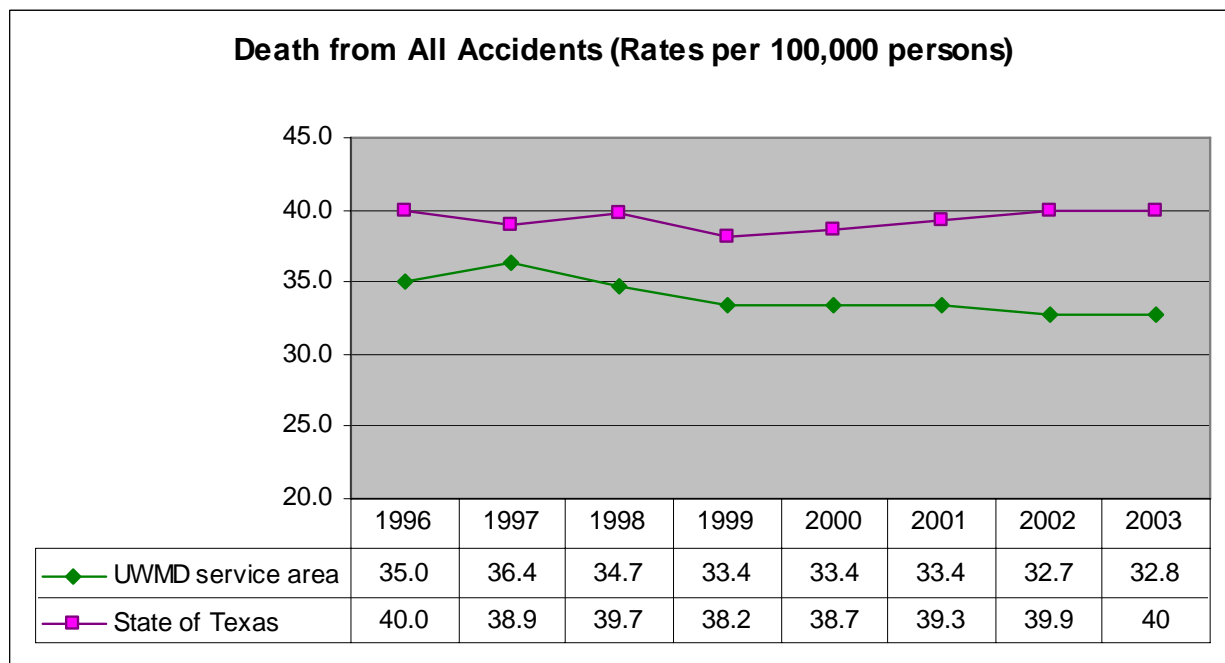
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Physical Health and Wellness - Supporting Data

Deaths from Accidents



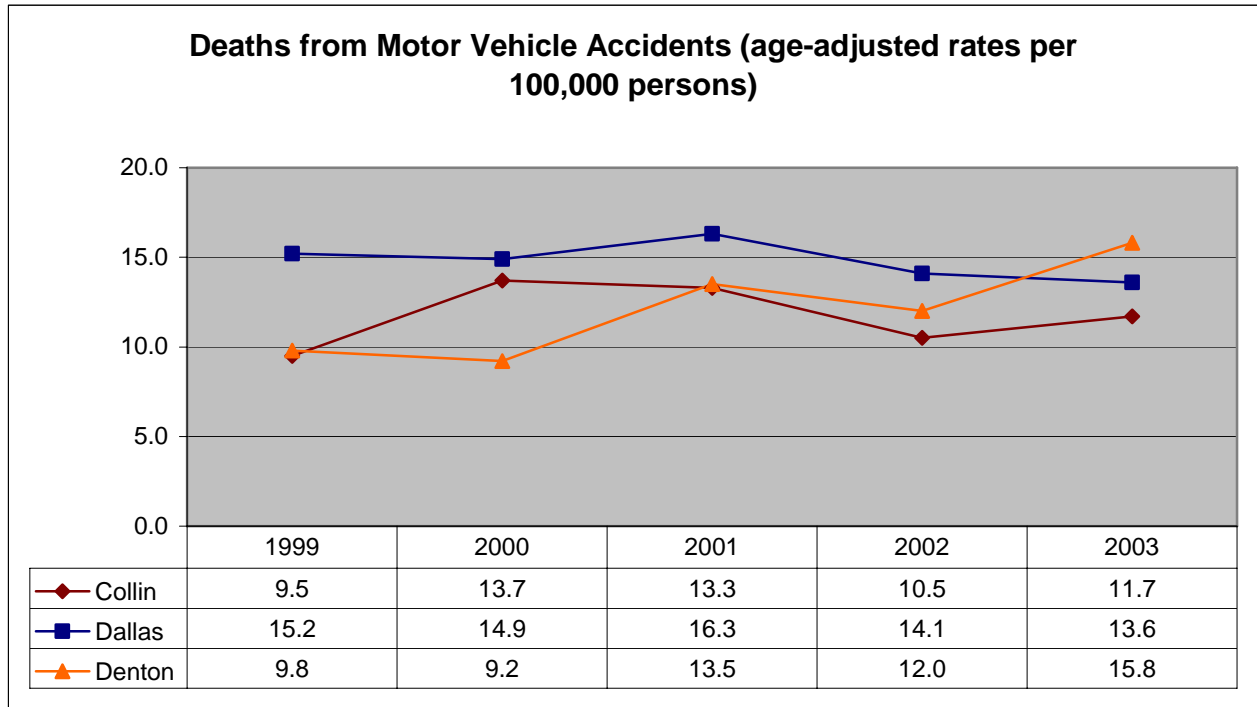
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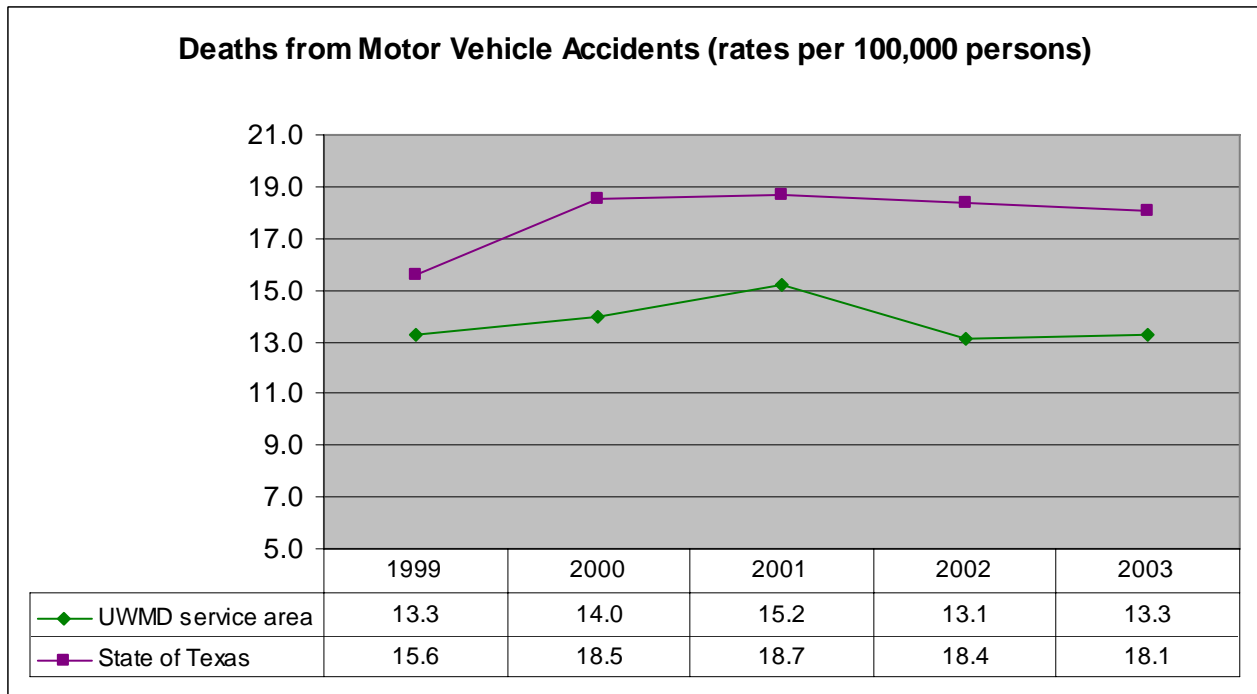
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Physical Health and Wellness - Supporting Data

Deaths from Accidents



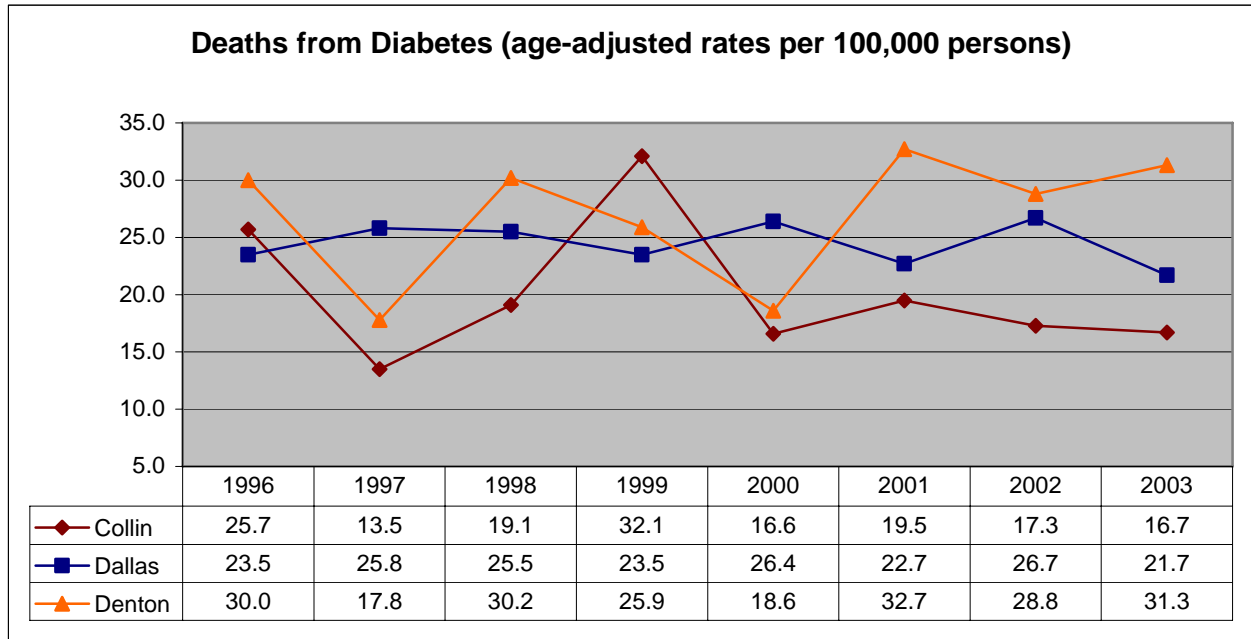
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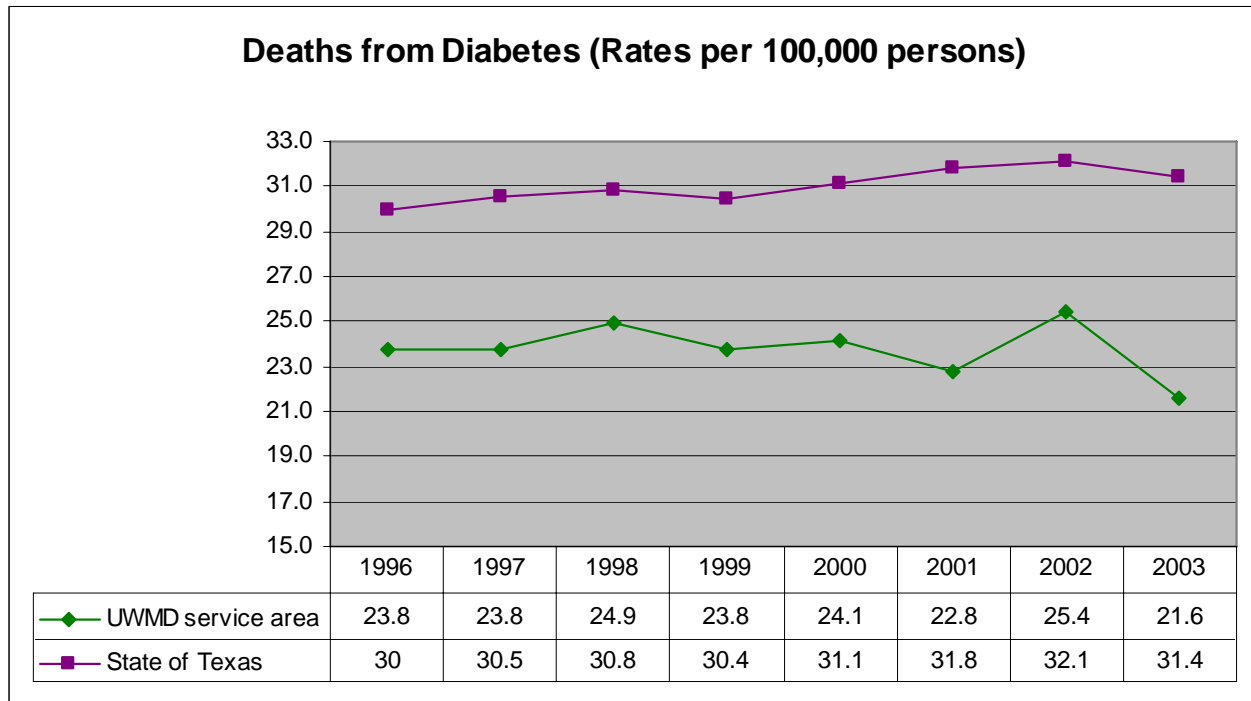
Source: Texas Department of State Health Services

Physical Health and Wellness - Supporting Data

Deaths from Diabetes



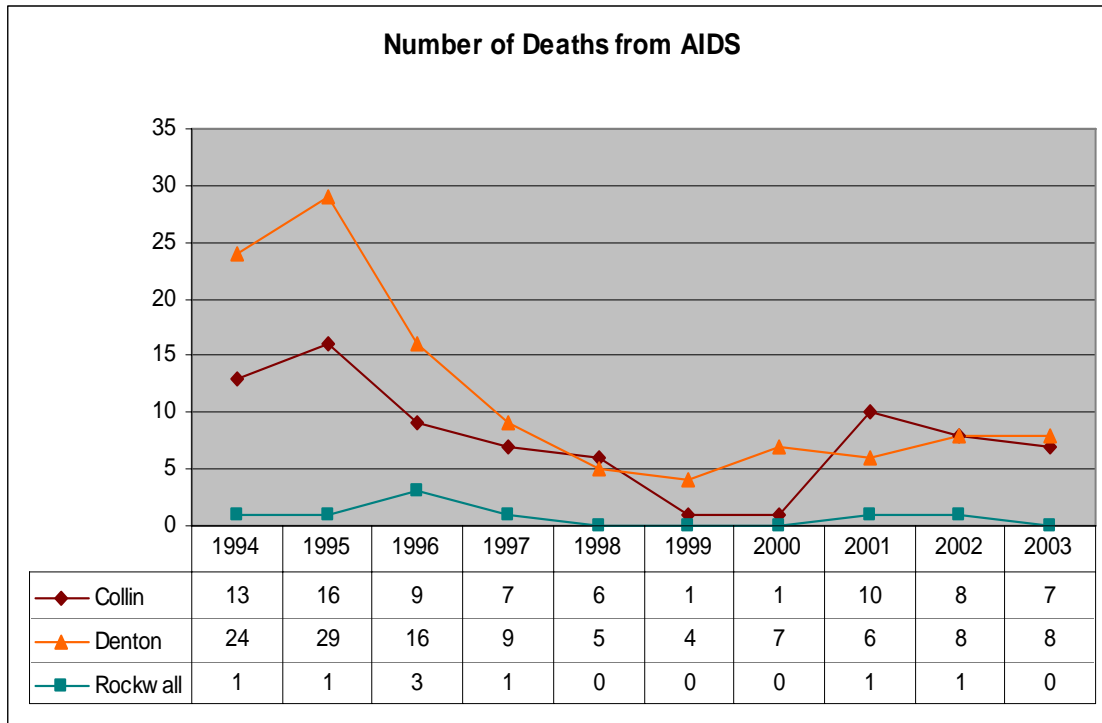
Source: Texas Department of State Health Services



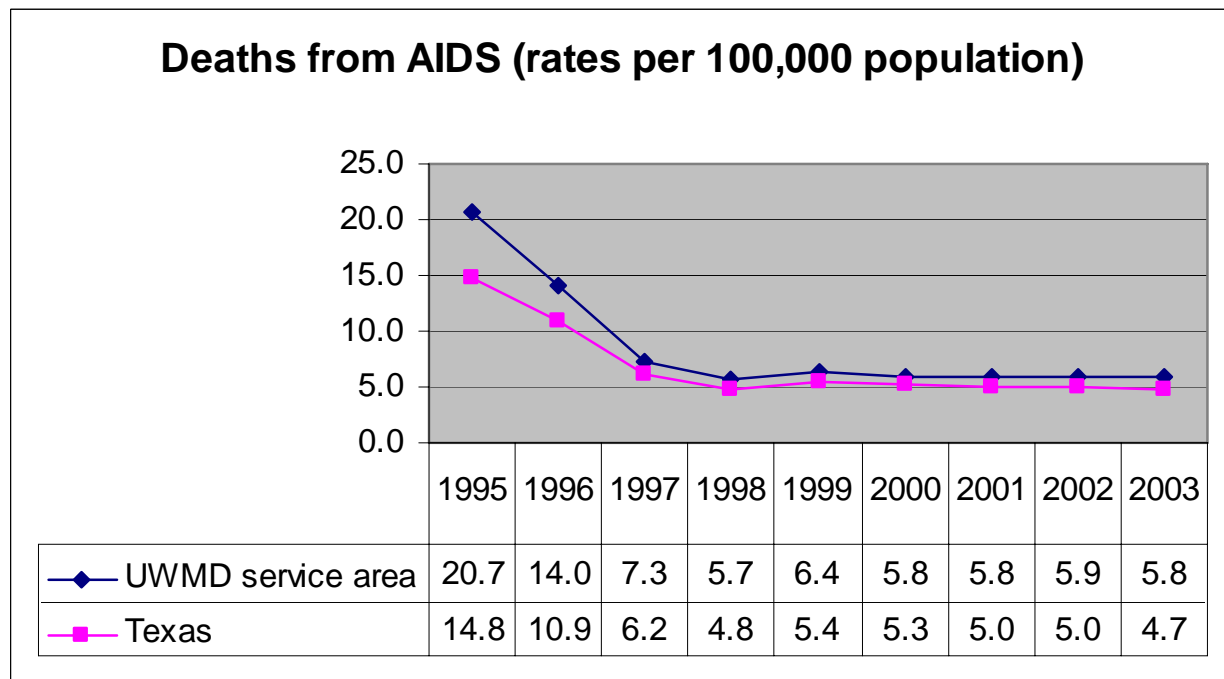
Source: Texas Department of State Health Services

Physical Health and Wellness - Supporting Data

Deaths from AIDS



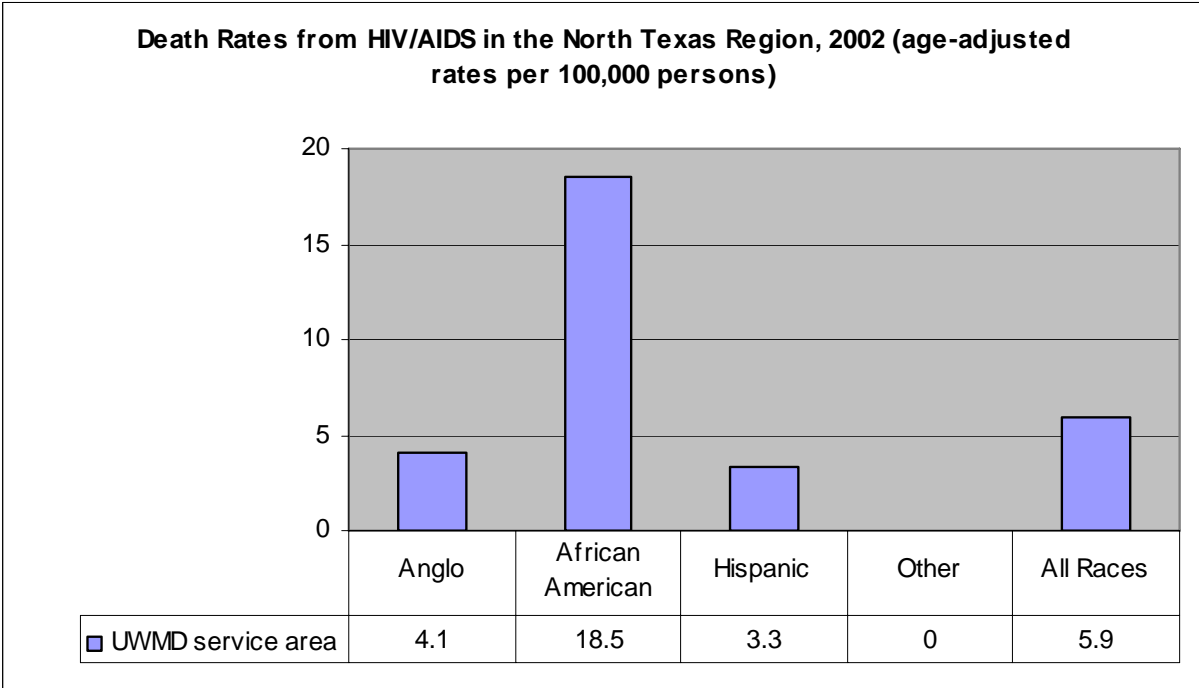
Source: Texas Department of State Health Services



Source: Texas Department of State Health Services

Physical Health and Wellness - Supporting Data

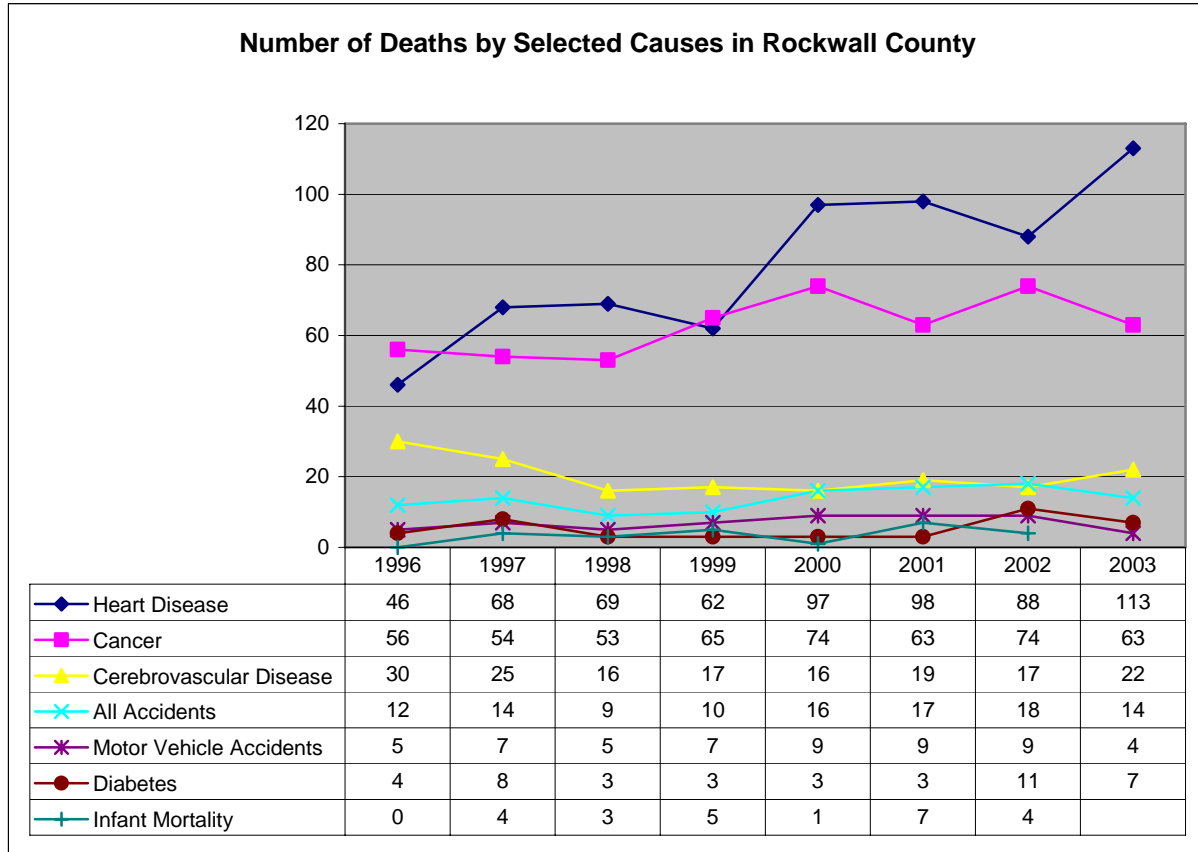
Deaths from AIDS



Source: Texas Department of State Health Services

Physical Health and Wellness - Supporting Data

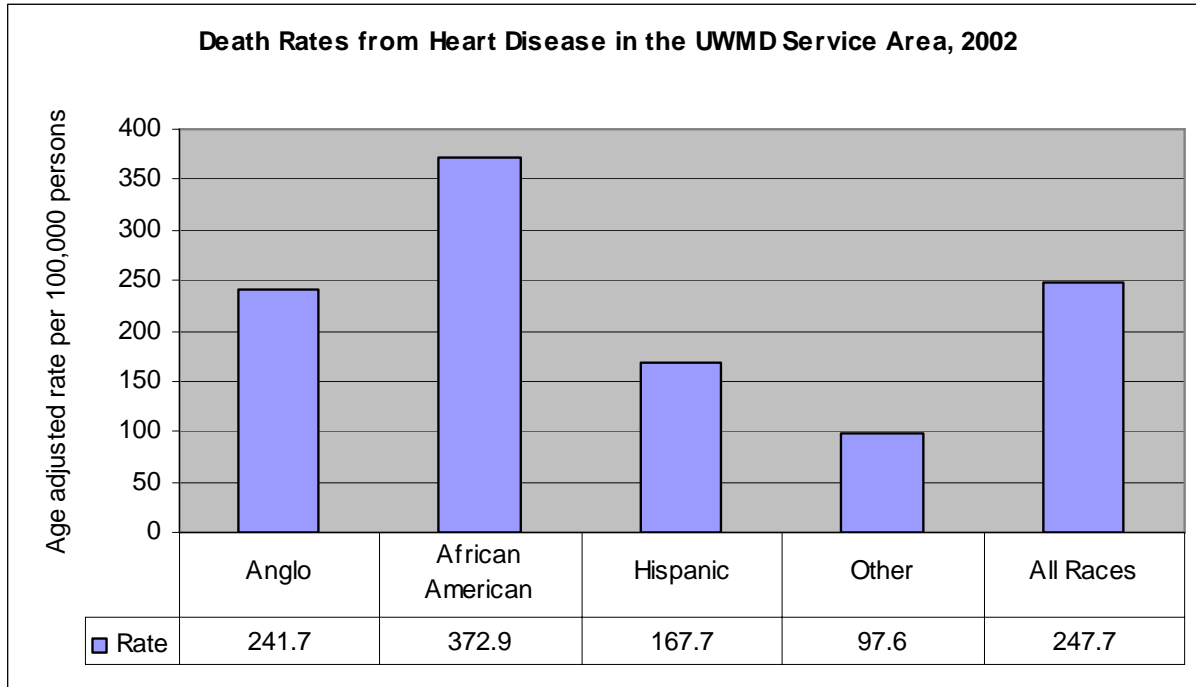
Number of Deaths by Selected Causes in Rockwall County



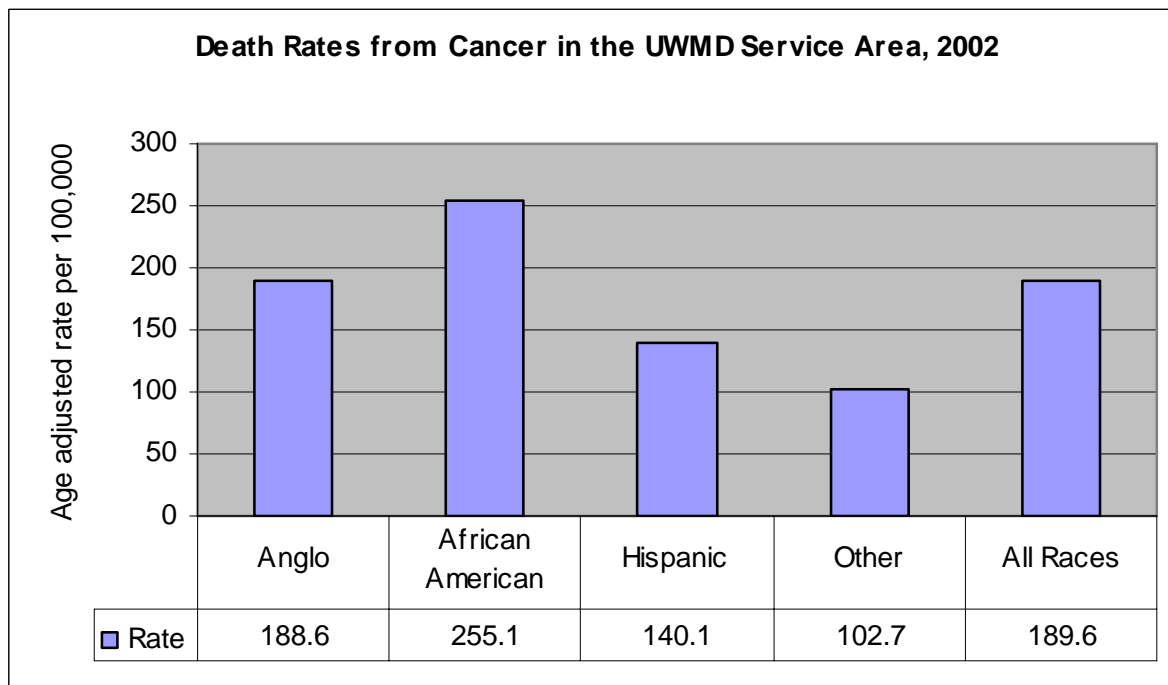
Source: Texas Department of State Health Services

Physical Health and Wellness - Supporting Data

Death Rates by Race/Ethnicity



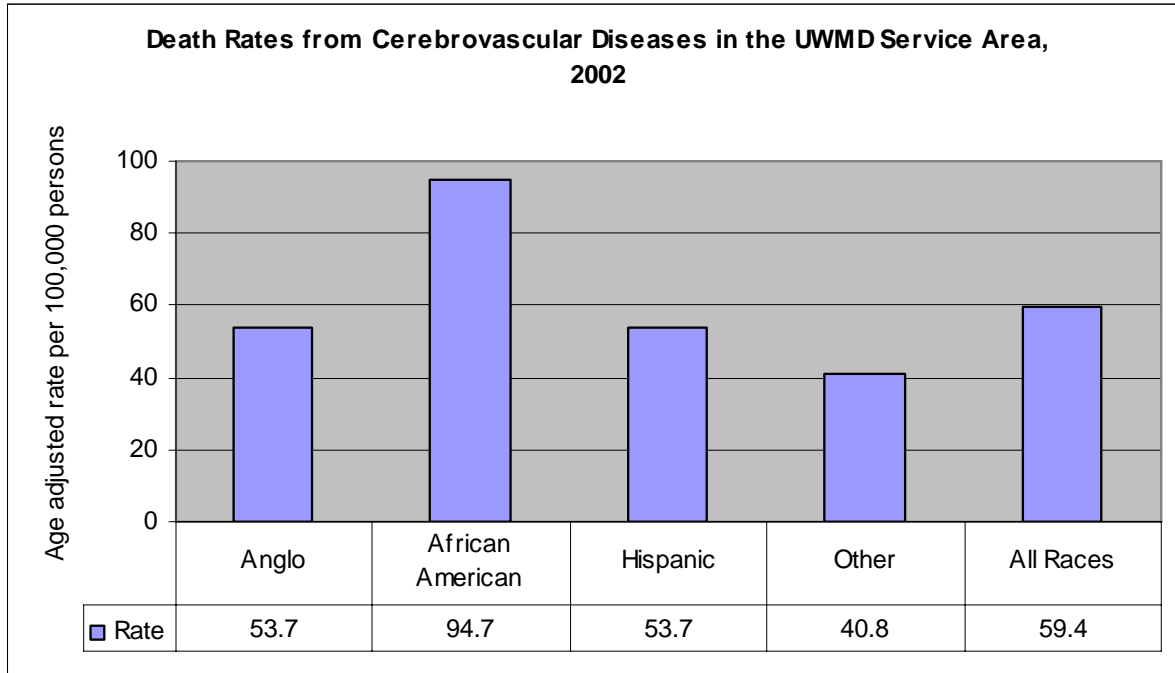
Source: Texas Department of State Health Services



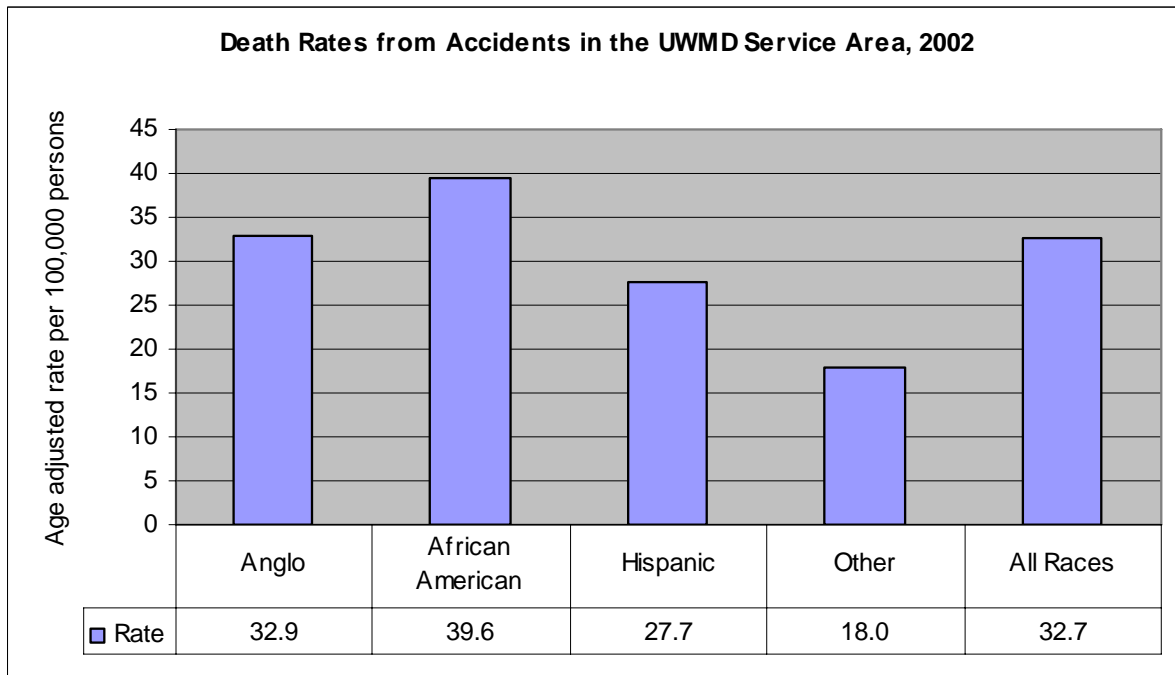
Source: Texas Department of State Health Services

Physical Health and Wellness - Supporting Data

Death Rates by Race/Ethnicity



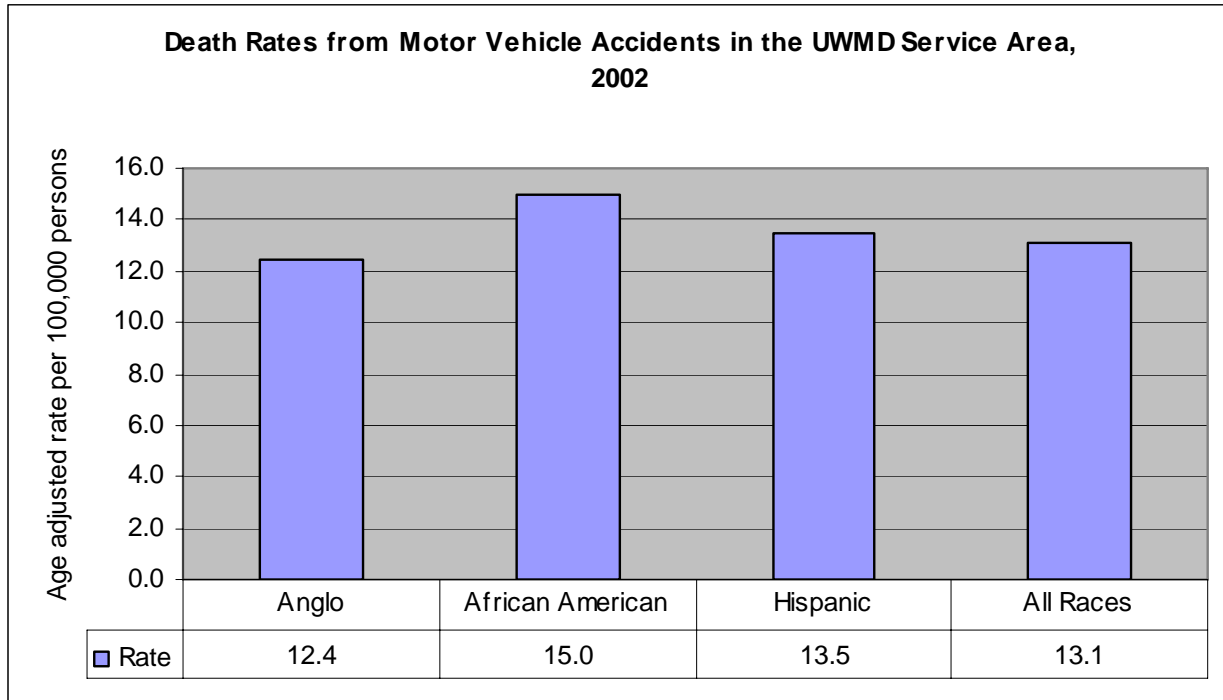
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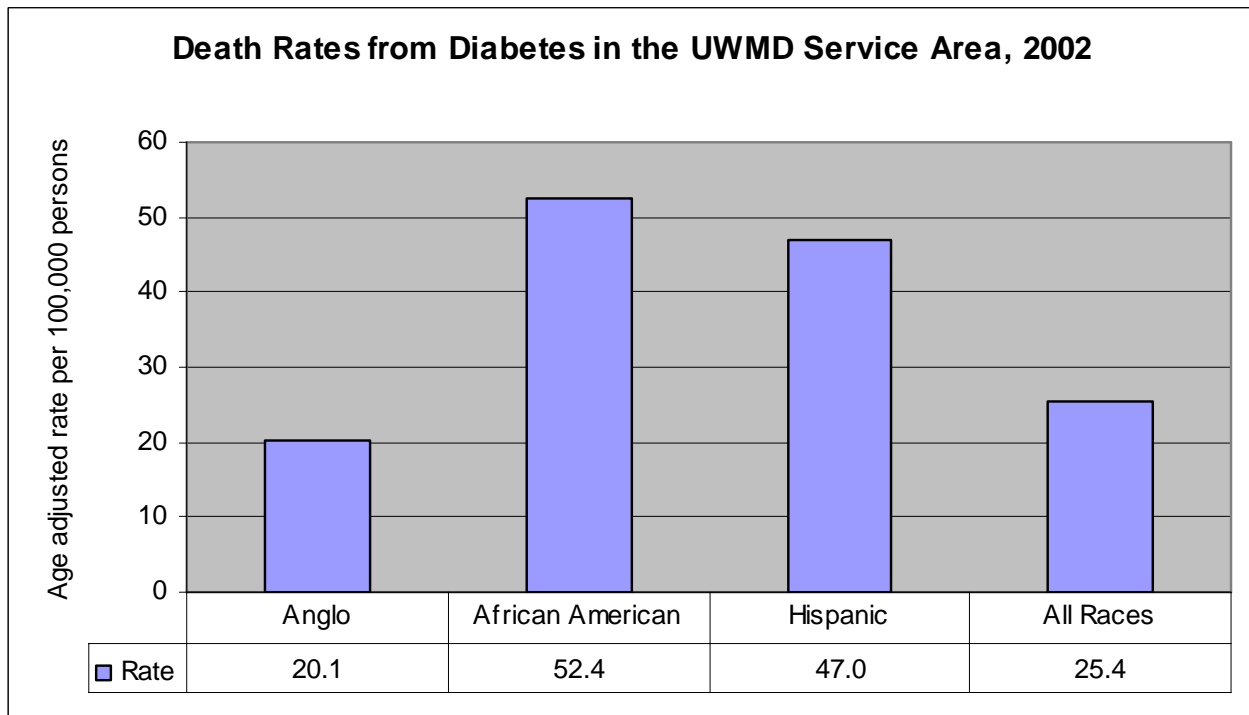
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Physical Health and Wellness - Supporting Data

Death Rates by Race/Ethnicity



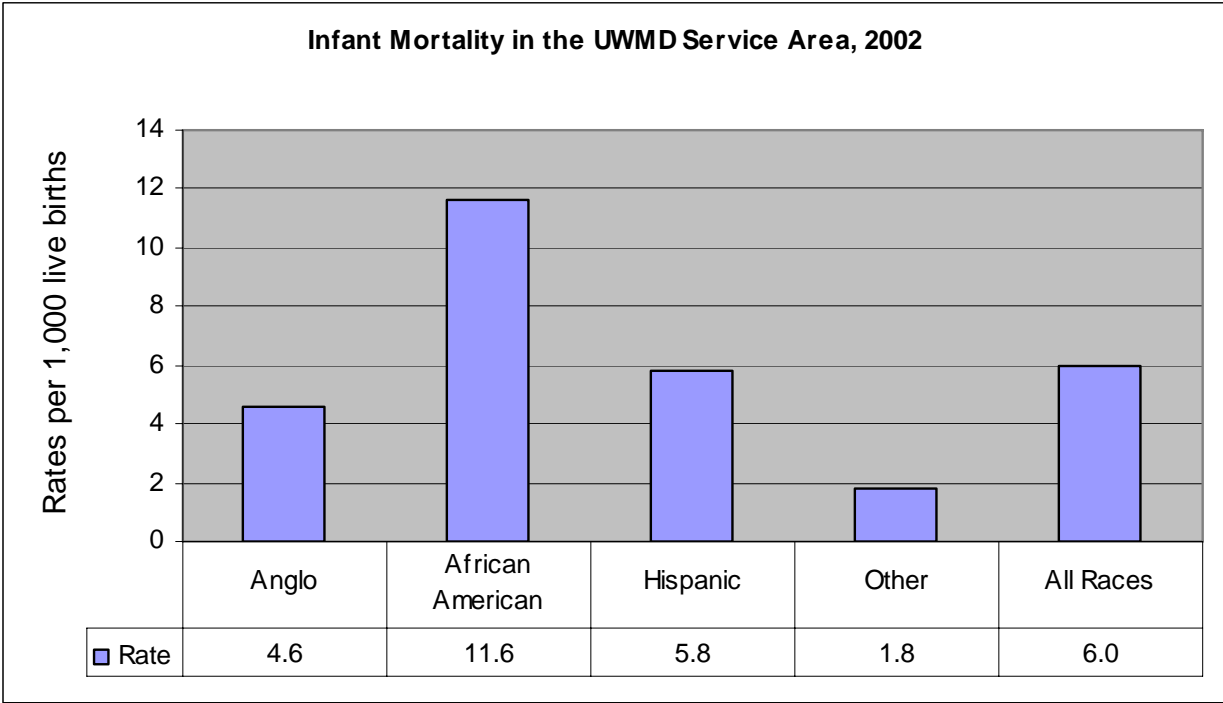
Source: Texas Department of State Health Services



Source: Texas Department of State Health Services

Physical Health and Wellness - Supporting Data










Death Rates by Race/Ethnicity



Source: Texas Department of State Health Services

HEALTH

CHRONIC ILLNESS

INDICATOR	SUMMARY	TREND	CONDITION
Percent of Children and Adolescents Who Are Overweight	The percent of children and adolescents in the U.S. who are overweight increased from 4% in 1971-74, to 16% in 1999-2002.	↓ Worsening	 Concerned
Age-adjusted Prevalence of Overweight and Obesity Among U.S. Adults	The percent of adults in the U.S. who are overweight or obese increased from 47% in 1976-80, to 65% in 1999-2002.	↓ Worsening	 Concerned
Prevalence of Diagnosed Diabetes	Rates of type II diabetes are increasing among adults 18 years & over. In Texas the rate increased from 5.1 in 1995 to 8 in 2003/rate per 100 adults.	↓ Worsening	 Concerned
Prevalence of Doctor Diagnosed Arthritis	Arthritis, one of the most common chronic conditions, affects approximately 20% of adults in Texas, and more than 50% of persons 65 years and over.	N/A	 Concerned
Number of New AIDS Cases	The number of new cases declined from 1997 to 1999, but has increased during the past four years. Rates of new AIDS cases are much higher among African Americans.	↓ Worsening	 Concerned
Number New HIV Cases (Non-AIDS)	The number of cases increased between 2000 and 2002, and decreased from 2002 to 2003. Rates of new HIV cases are much higher among African Americans.	↔ Same or Mixed	 Concerned
Number of People Living with AIDS	The number of people living with AIDS is continuing to increase in the UWMD four county service region—from 7,046 in 2000 to 11,371 in 2003.	↓ Worsening	 Concerned
Number of Tuberculosis Cases	Tuberculosis rates remain high in Dallas County, compared to State rates and other counties in the UWMD four county service region. (11.7 in Dallas County compared to 7.3 in Texas/rates per 100,000 persons)	↔ Same or Mixed	 Concerned
Current Asthma Prevalence	The Centers for Disease control reports increasing rates of asthma, particularly in children, during the past two decades.	↓ Worsening	 Concerned

Chronic Illness - North Texas Overview

Chronic illnesses are defined by the Centers for Disease Control and Prevention (CDC) as illnesses or conditions that last more than three months. Some conditions are considered chronic regardless of duration. Examples include diabetes, heart disease, emphysema, and arthritis.

There are numerous chronic illnesses and conditions, classified generally into six broad categories:

- Circulatory conditions
- Respiratory conditions
- Digestive conditions
- Impairments and conditions of the nervous system and senses organs
- Conditions of the skin, musculoskeletal system and connective tissue
- Endocrine, nutritional, and metabolic diseases, and immunity disorders and blood diseases

This section highlights just a few indicators of chronic illness. The increasing prevalence of overweight and obesity among both children and adults is highlighted because being overweight contributes to, and complicates, many illnesses and conditions—including arthritis, diabetes, asthma, heart disease, and cancer.

Data relevant to chronic illness may also be found in the Physical Health and Wellness and Disabilities sections.

Regional Trends

- The rate of Type 2 Diabetes among adults (18 years and over) in Texas increased each year since 1995. (from 5.% in 1995 to 8% in 2003.
- The CDC indicates that reliable trend data on Type 2 Diabetes among children are not available. However, the CDC states that “clinic based reports and regional studies indicate that Type 2 Diabetes is becoming more common among children and adolescents, particularly in American Indians, African Americans, and Hispanic/Latinos.”
- The number of people with AIDS in the UWMD four county service region continued to increase dramatically, due both to new cases and to higher survival rates. (from 7,046 persons living with AIDS in 2000 to 11,371 in 2003)
- Better treatment and new drugs have resulted in much higher survival rates for AIDS patients. This is a positive trend. However, the higher survival rates have resulted in higher case loads, creating serious strains on the service delivery system.
- Across the UWMD four county service region, AIDS/HIV disproportionately affected racial and ethnic minorities, particularly African Americans. This is seen in death rates, new AIDS case rates, and new HIV (non-AIDS) case rates.
- Arthritis, one of the most common chronic conditions, affects approximately 20% of adults in Texas, and more than 50% of persons 65 years and over.

- The CDC reports that the prevalence of asthma has increased during the past two decades--from 31.4 in 1980 to 38.4 in 1999/rate per 1,000 persons/episode in past year. (Surveillance for Asthma--United States: 1980-1999.)
- The CDC reports that the prevalence of asthma for adults in Texas increased from 5.1% in 1995 to 8% in 2003.
- In 2001, asthma was listed as one of the leading causes of preventable hospitalizations for adults and children by the Texas Healthcare Information Council.

Chronic Illness

Collin County

- The number of new AIDS cases increased steadily--from 18 cases in 1999 to 44 cases 2003.
- The number of HIV cases (non-AIDS) increased from 33 in 2000 to 55 in 2003.
- In 2003, there were more than 400 people in Collin County living with AIDS.
- The rates of tuberculosis in Collin County are much lower than in the State and in Dallas County. (2.4 in Collin County compared to 11.7 in Dallas County, and 7.3 in Texas/rates per 100,000 persons)

Dallas County

- There were 679 new AIDS cases and 877 new HIV (non-AIDS) cases in 2003.
- In 2003, there were more than 10,000 people in Dallas County living with AIDS.
- The rates of tuberculosis cases in Dallas County are higher than State rate, and much higher than other counties in the UWMD four county service region. (11.7 in Dallas County compared to 7.3 in Texas / rates per 100,000 persons)

Chronic Illness

Denton County

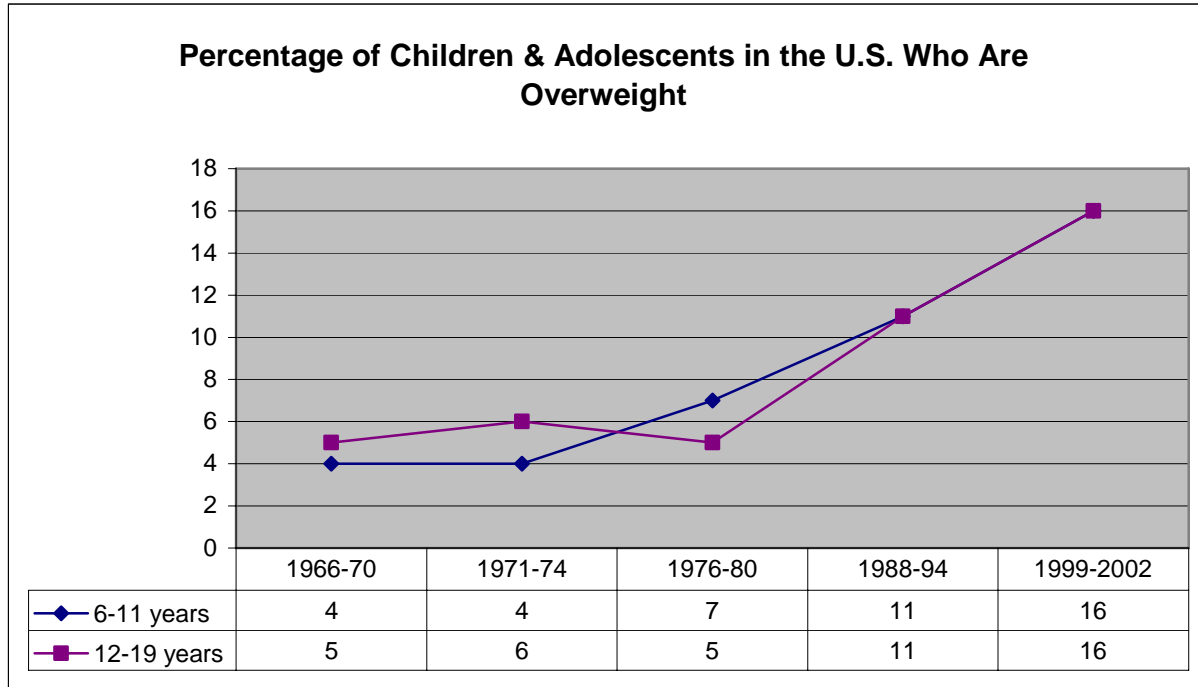
- The number of new AIDS cases increased sharply—from 17 in 2002 to 56 in 2003.
- The number of new HIV cases (non-AIDS) increased from 28 in 2002 to 35 in 2003.
- There were nearly 400 people in Denton County living with AIDS in 2003.
- The rate of tuberculosis cases in Denton County is low compared to State rates and to Dallas County rates. (1.7 in Denton County compared to 11.7 in Dallas County, and 7.3 in Texas/rates per 100,000 persons)

Rockwall County

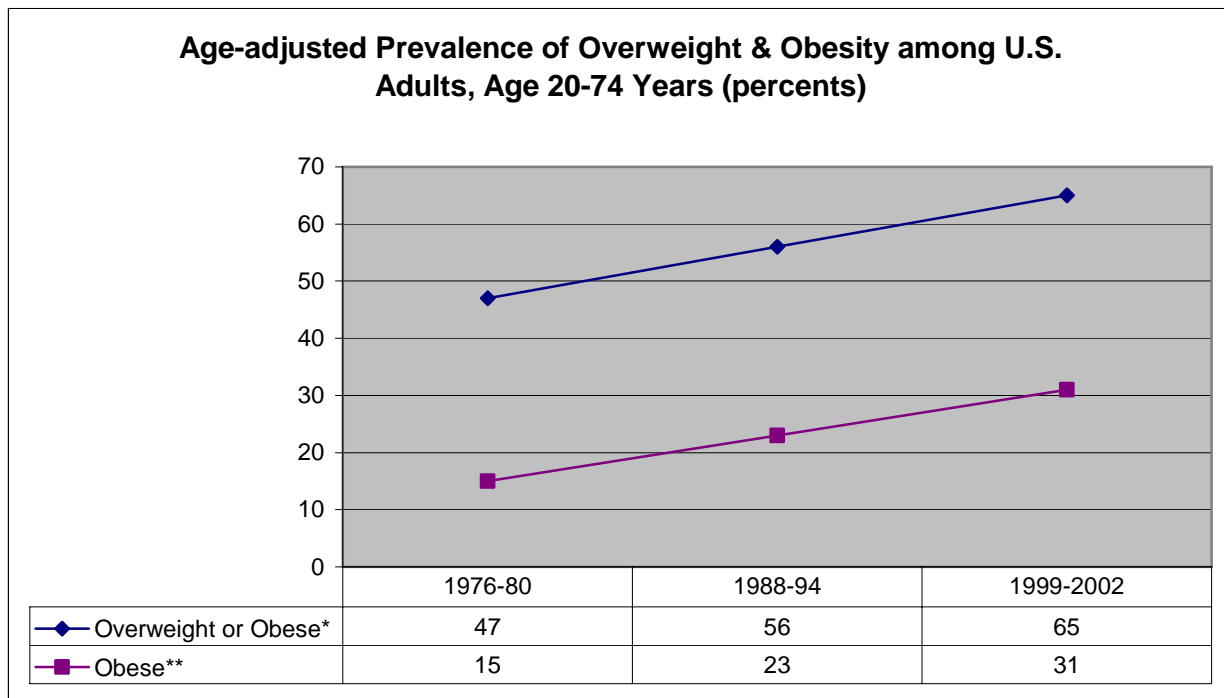
- Reported in Rockwall County, 2003:
 - No deaths from AIDS
 - 4 new AIDS cases
 - 1 new HIV (non-AIDS) case
 - 31 people living with AIDS/HIV
 - 1 new case of tuberculosis

Chronic Illness - Supporting Data

Obesity



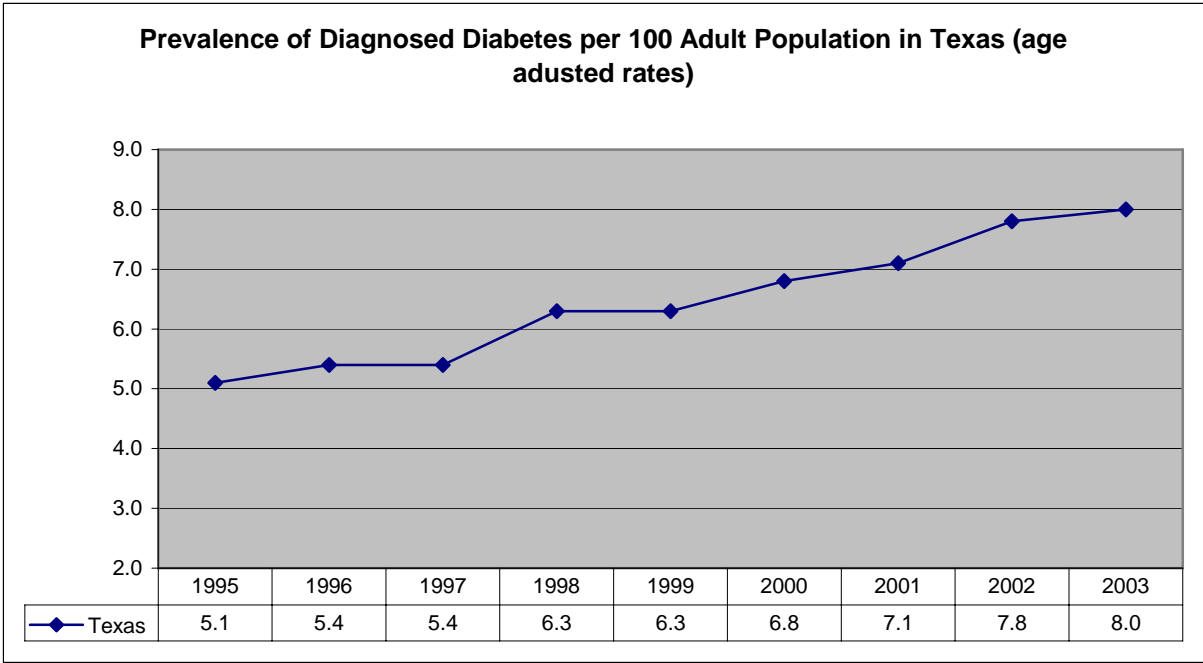
Source: National Health & Nutrition Examination Survey (NHANES), 1999-2002, Centers for Disease Control and Prevention
 * Overweight defined as greater than or equal to 95th percentile of age- and sex- specific Body Mass Index (BMI)



Source: National Health & Nutrition Examination Survey (NHANES), 1999-2002, Centers for Disease Control and Prevention
 *Body Mass Index (BMI) greater than or equal to 25
 **BMI greater than or equal to 30

Chronic Illness - Supporting Data

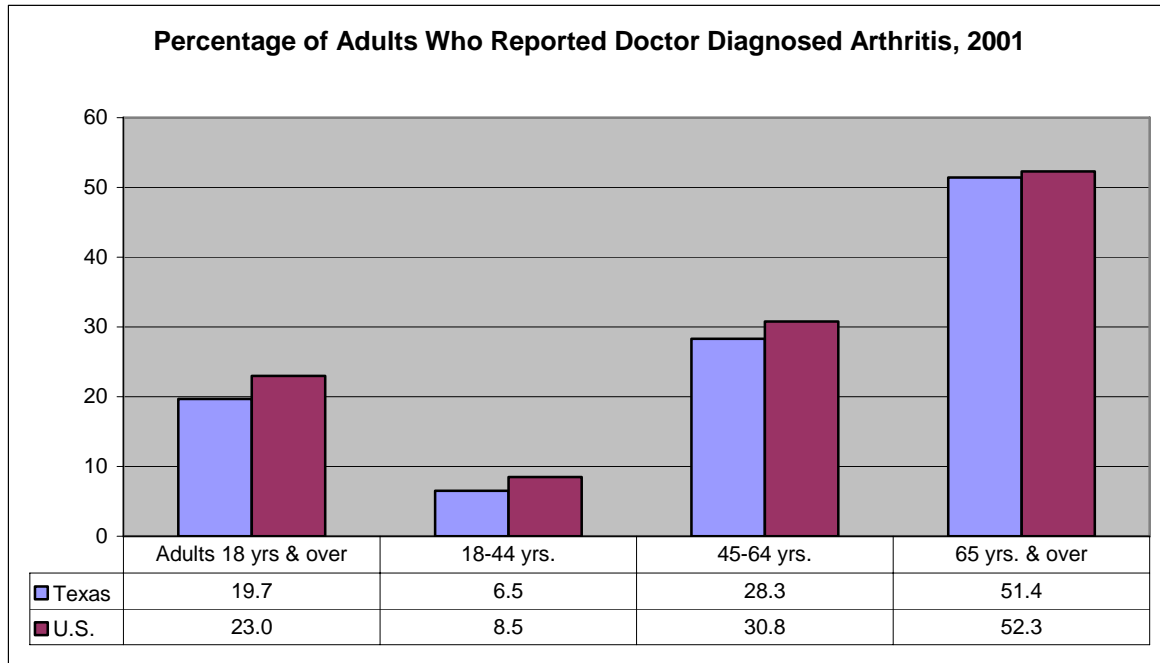
Diabetes



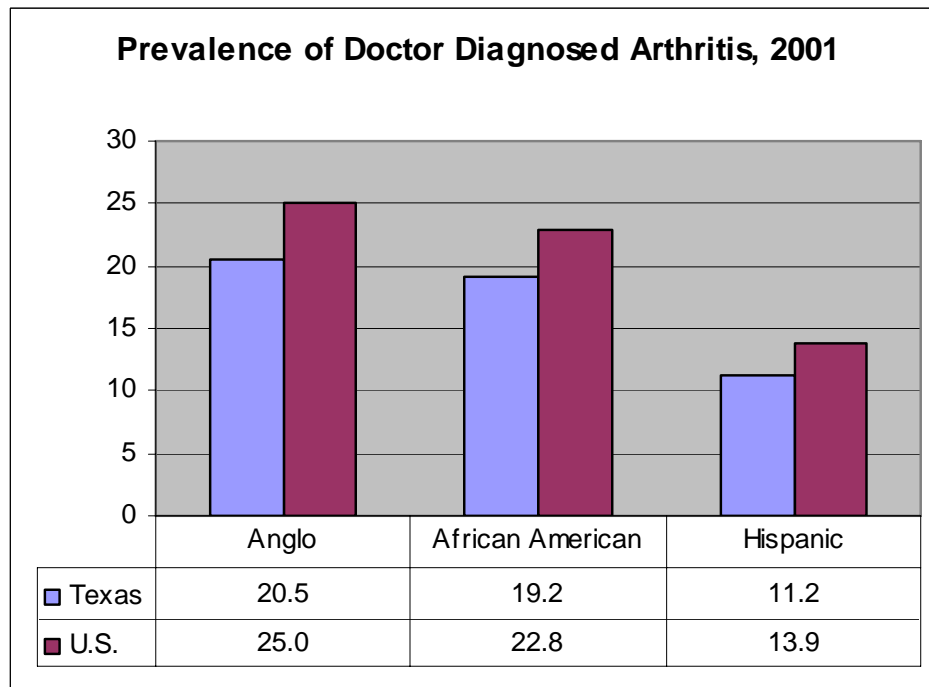
Source: Centers for Disease Control and Prevention

Chronic Illness - Supporting Data

Arthritis



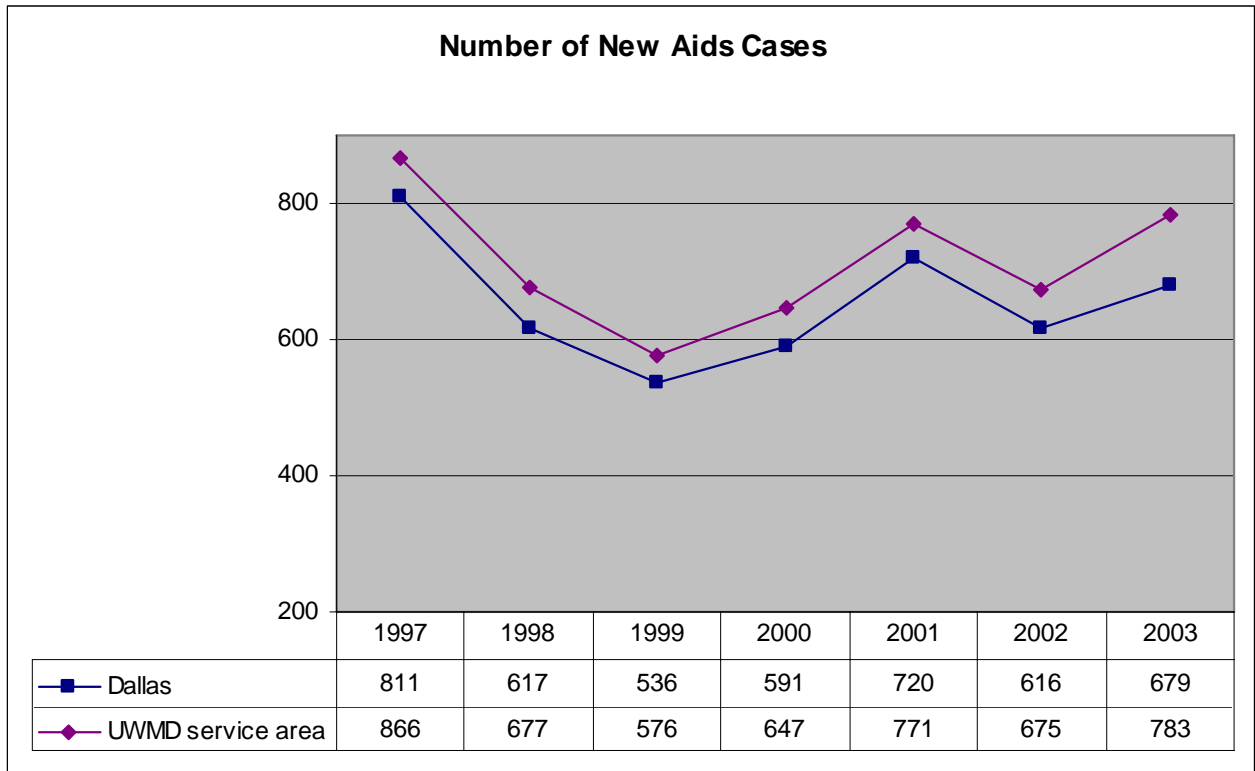
Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System



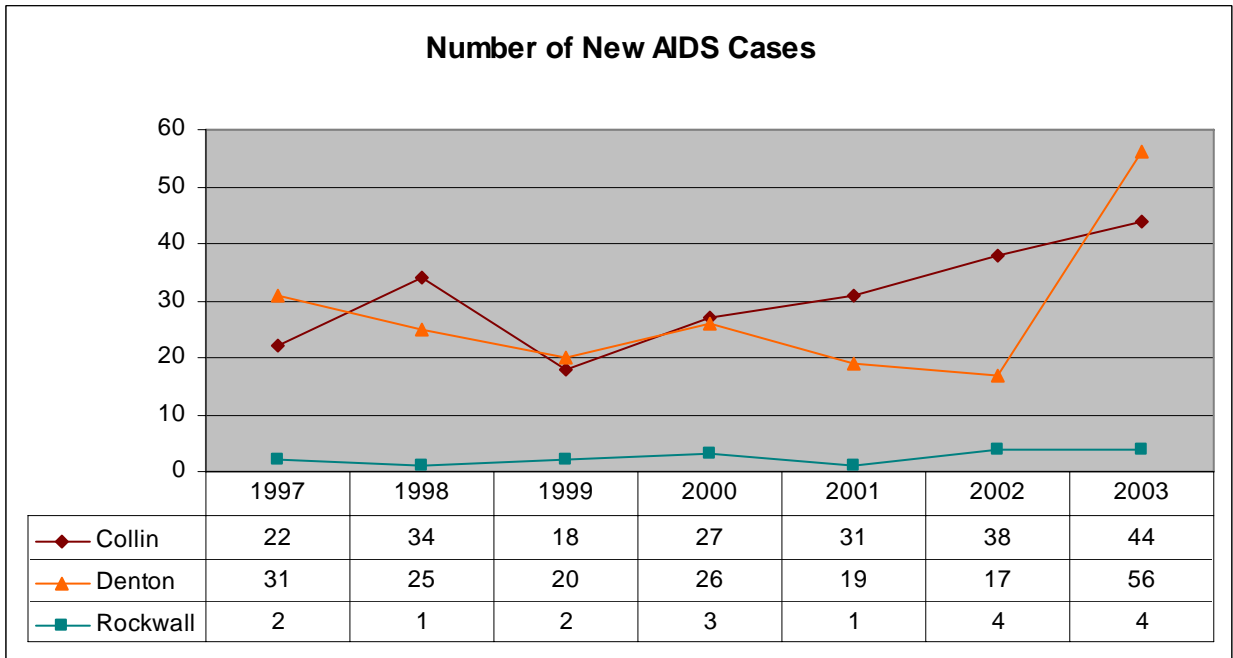
Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System

Chronic Illness - Supporting Data

AIDS Cases



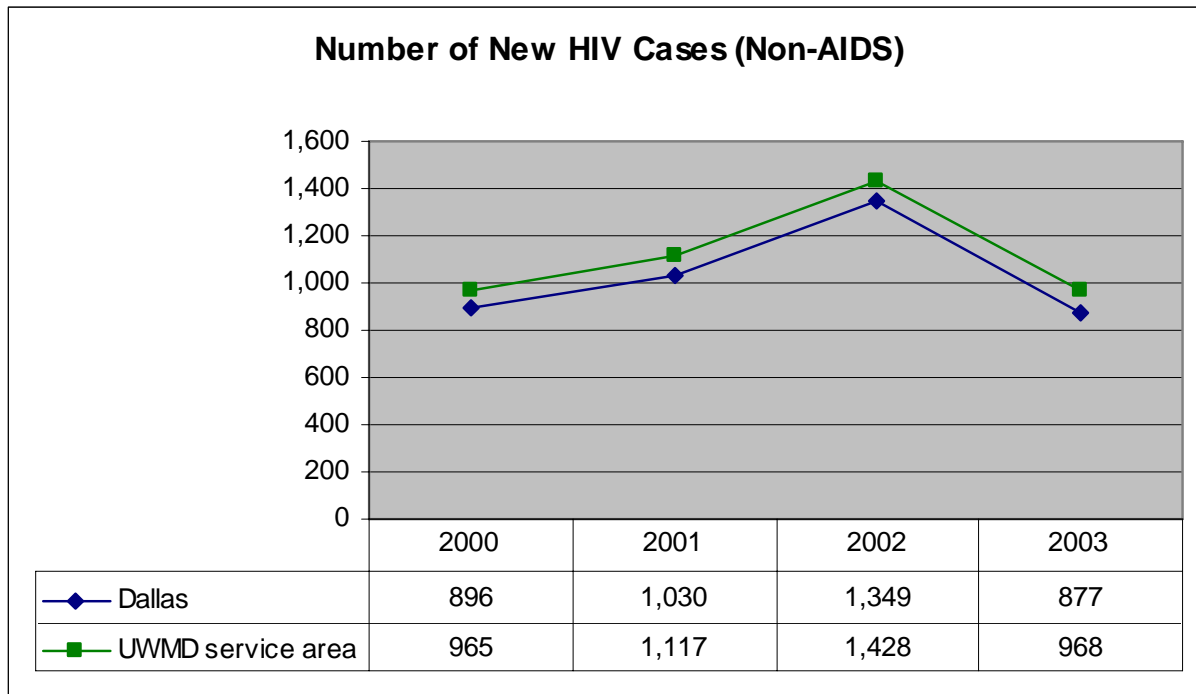
Source: Texas Department of State Health Services



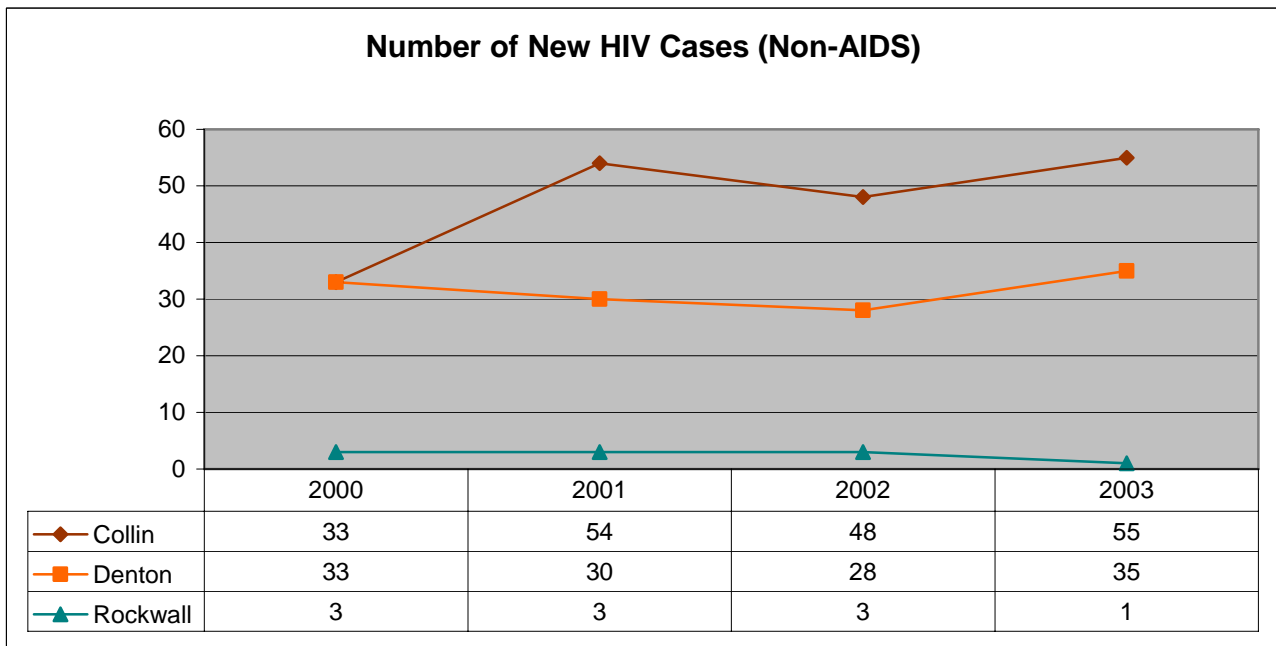
Source: Texas Department of State Health Services

Chronic Illness - Supporting Data

New HIV (Non-AIDS) Cases



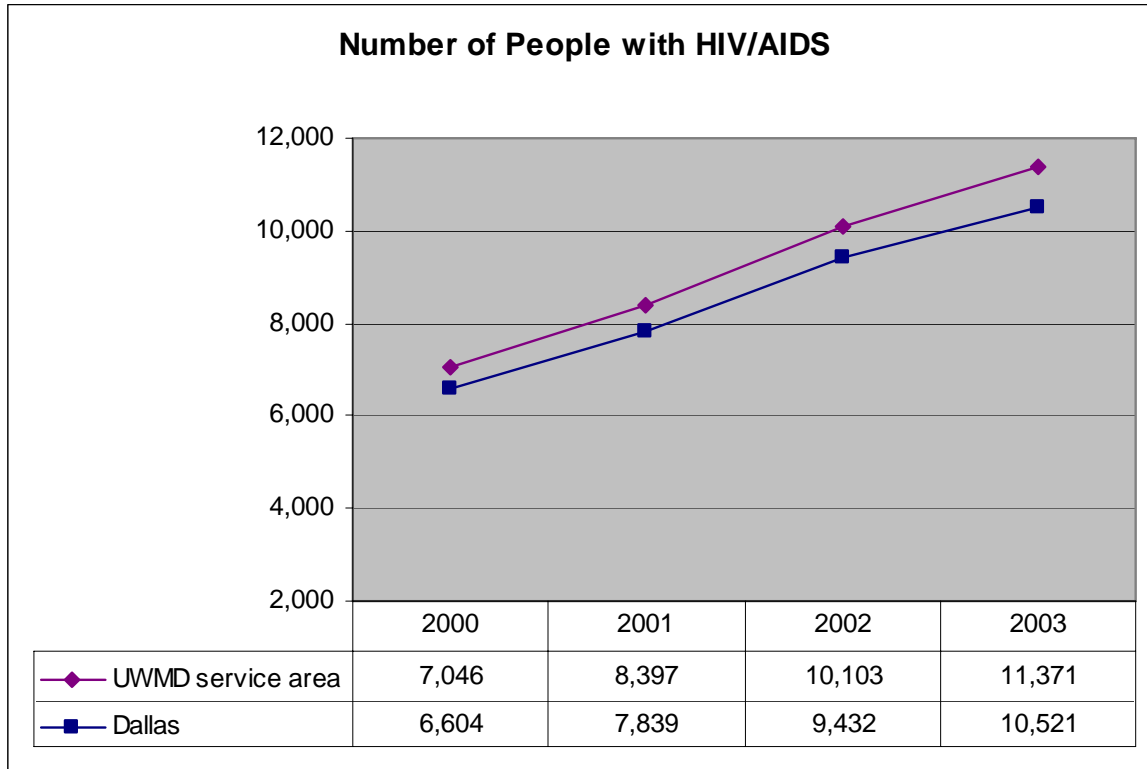
Source: Texas Department of State Health Services



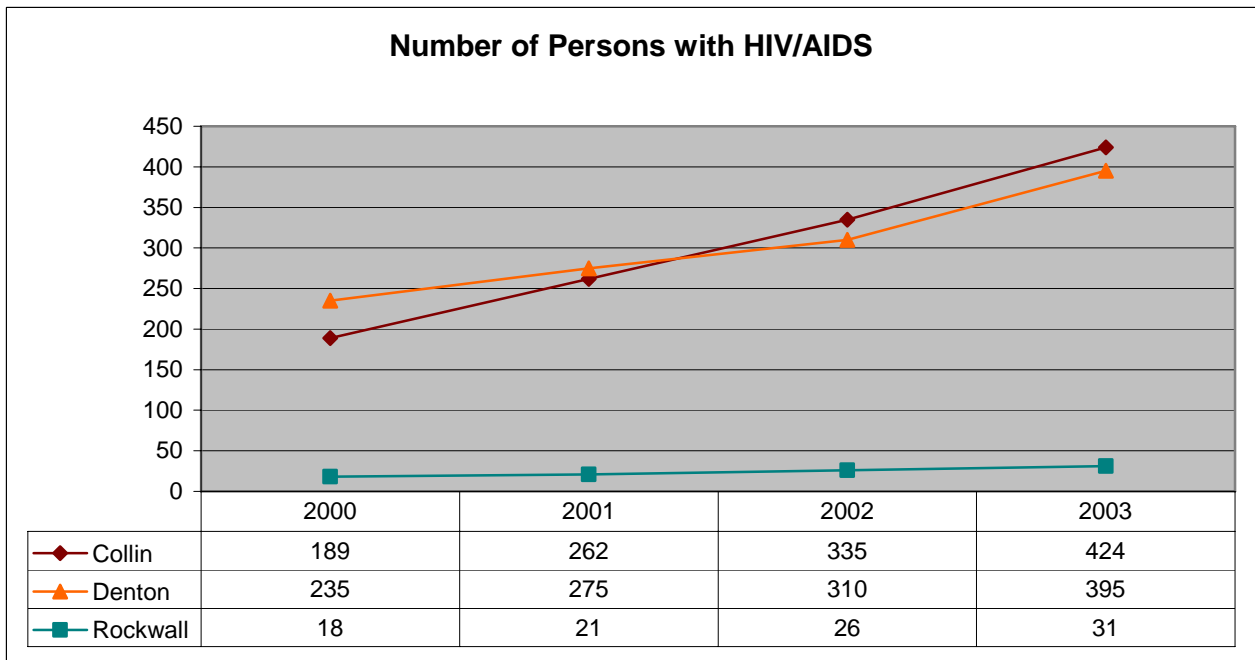
Source: Texas Department of State Health Services

Chronic Illness - Supporting Data

Persons with AIDS



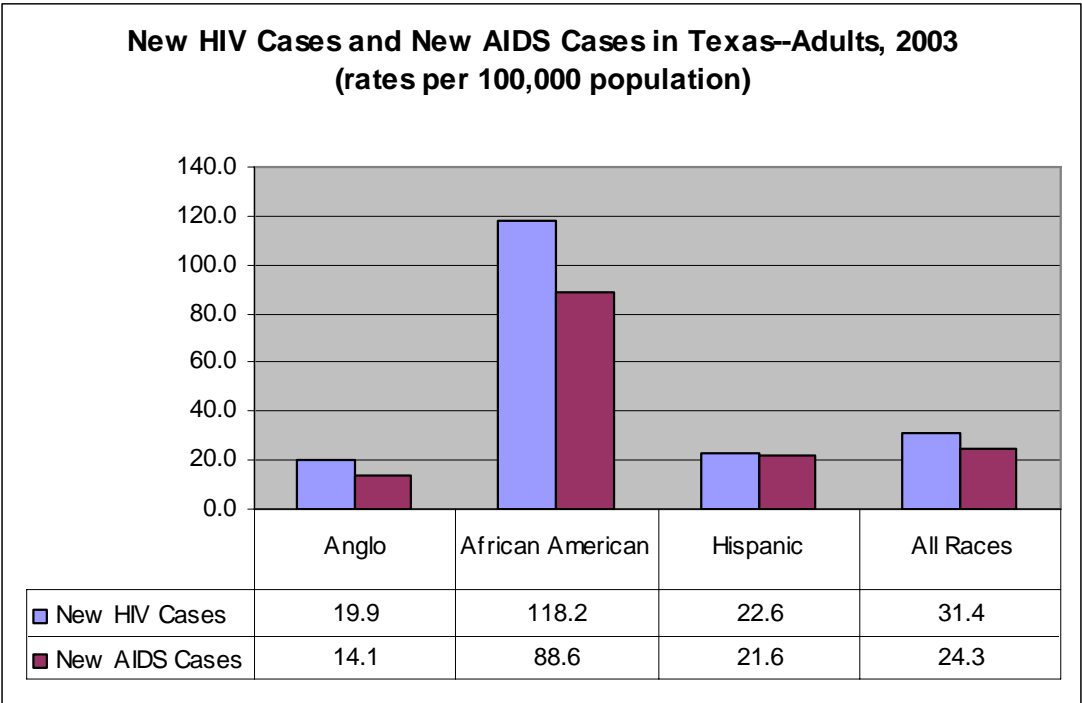
Source: Texas Department of State Health Services



Source: Texas Department of State Health Services

Chronic Illness - Supporting Data

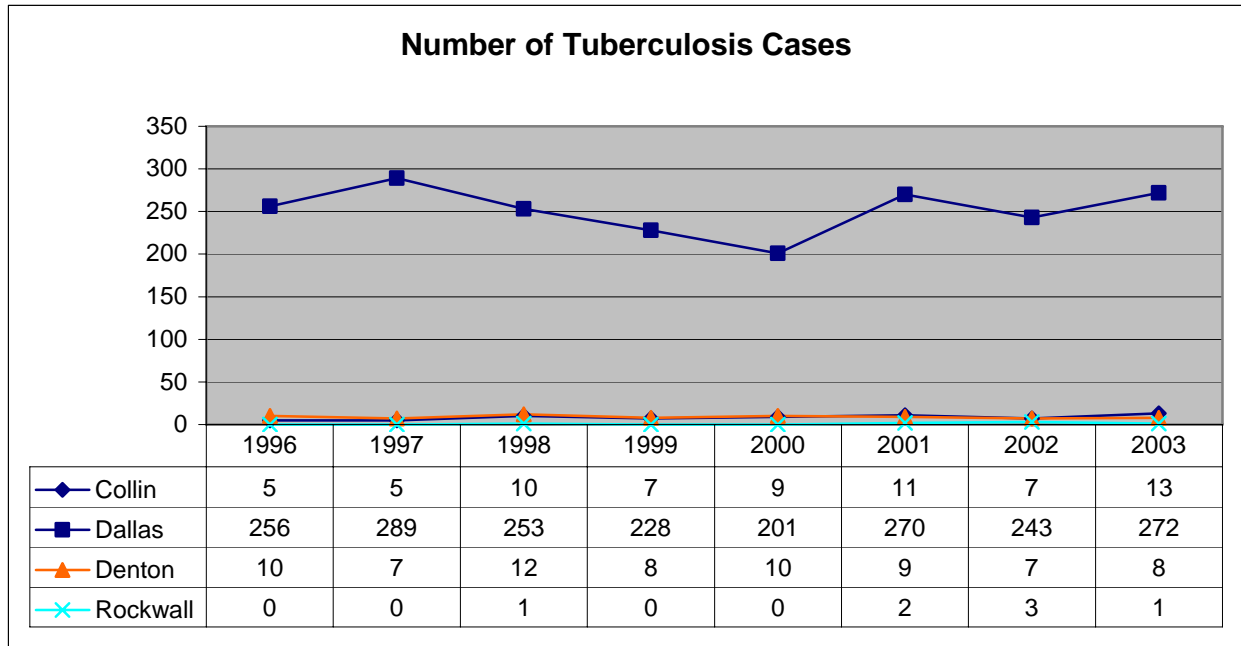
New HIV and AIDS Cases



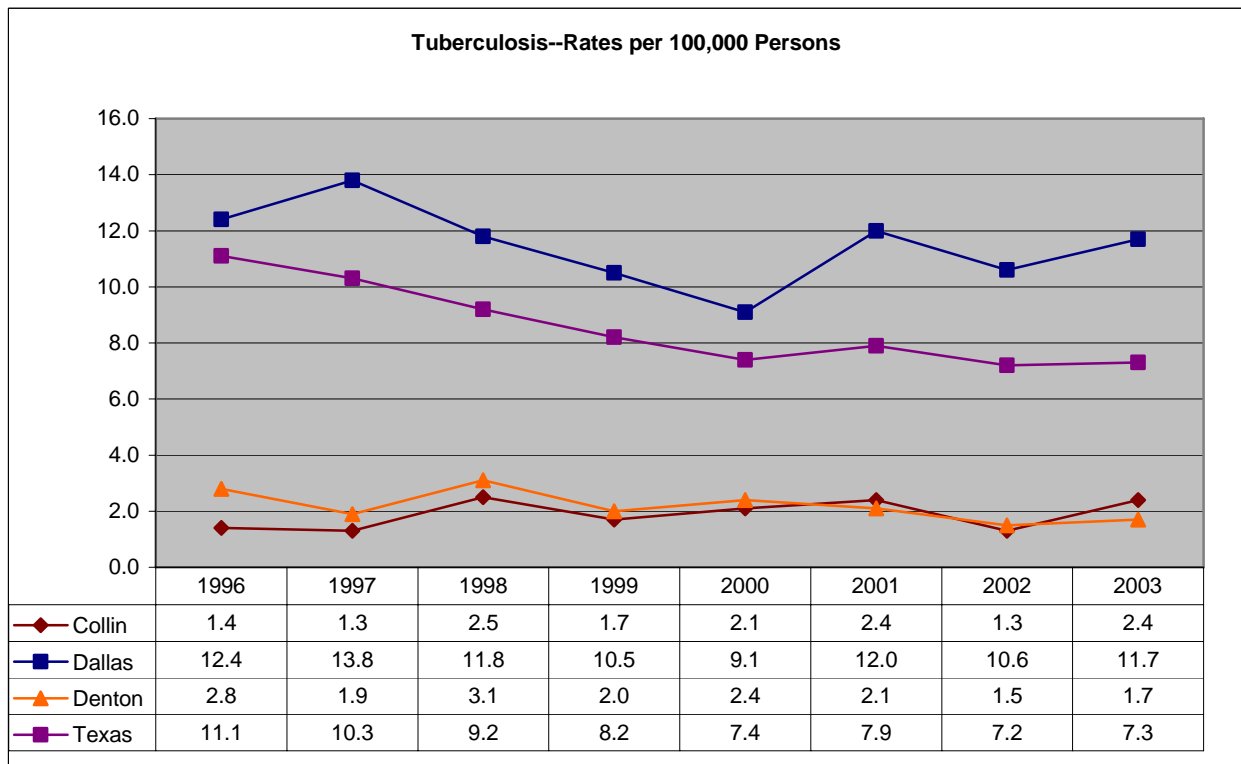
Source: Texas Department of State Health Services

Chronic Illness - Supporting Data

Tuberculosis



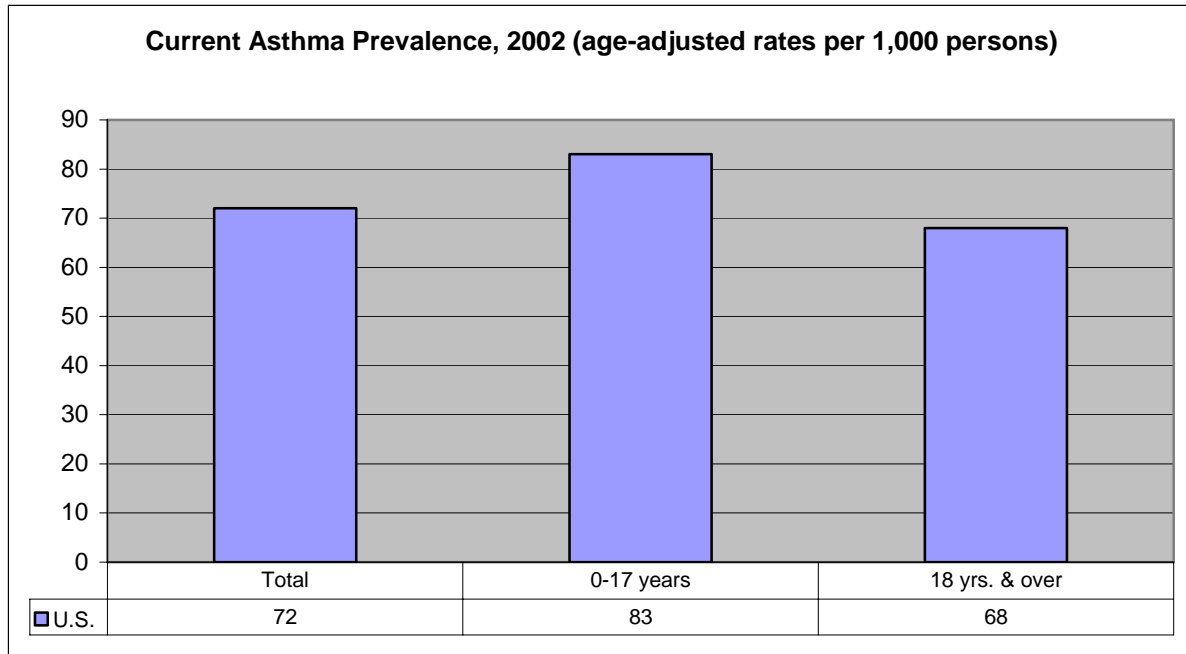
Source: Texas Department of State Health Services



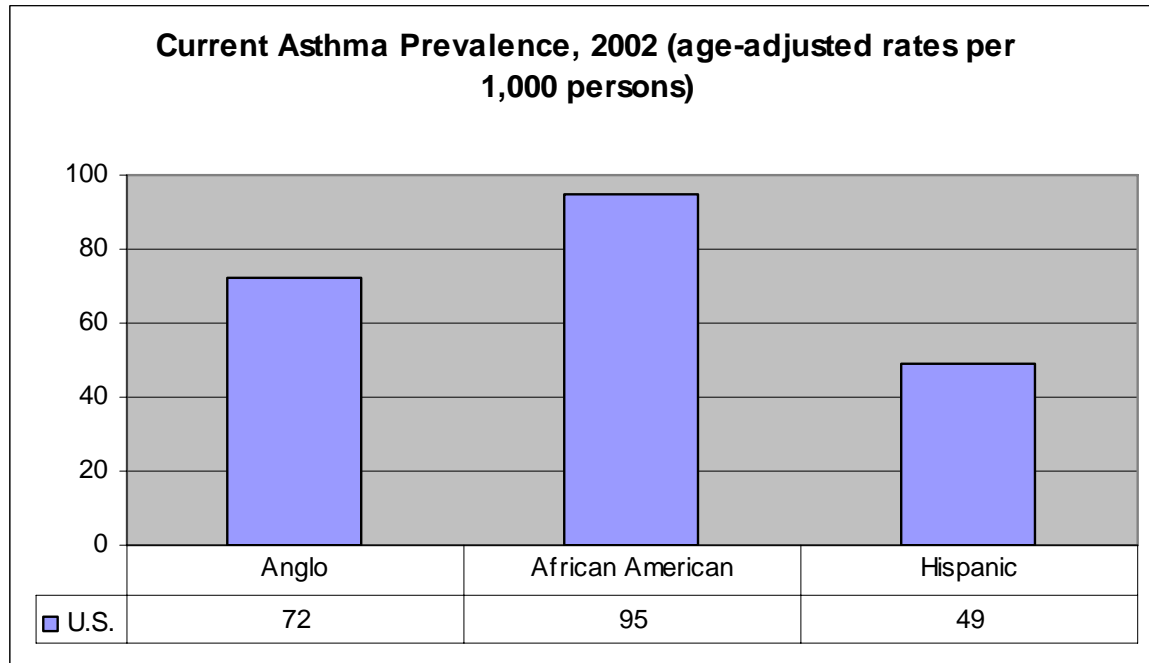
Source: Texas Department of State Health Services

Chronic Illness - Supporting Data

Prevalence of Asthma














Source: National Center for Health Statistics, Asthma Prevalence, Health Care Use and Mortality, 2002








Source: National Center for Health Statistics, Asthma Prevalence, Health Care Use and Mortality, 2002

HEALTH DISABILITIES

INDICATOR	SUMMARY	TREND	CONDITION
Low Weight Births as a Percent of All Births*	Low weight births as a percent of all births in the UWMD four county service region increased from 7.1 in 1996 to 7.7 in 2003.	 Worsening	 Concerned
Very Low-weight Births as a Percent of All Births*	Very low weight births as a percent of all births in the UWMD four county service region increased from 1.2 in 1996 to 1.4 in 2003.	 Same or Mixed	 Concerned
Percent of Persons with and Without a Disability	Based on 2000 Census data, 17% of people ages five years and over in the UWMD four county service region had some type of disability.	N/A	 Concerned
Percent of Persons with a Disability by Race-Ethnicity	Disability rates in the U.S. were higher among African Americans and Hispanics than among Anglos and Asians.	 Same or Mixed	 Concerned
Number of Persons with a Disability by Type of Disability	In the UWMD four county service region, more than 100,000 people had a mental disability, and about 164,000 had a physical disability (Census 2000).	N/A	 Concerned
Employment by disability status	In the UWMD four county service region, about 37% of persons 21–64 years of age who had a disability were not employed (Census 2000).	N/A	 Concerned
Estimated Number of Persons with Selected Conditions	Prevalence rates from the Centers for Disease Control and Prevention indicate that arthritis and deafness/hearing impairments are two of the most frequent causes of disabilities in the U.S.	 Same or Mixed	 Concerned

HEALTH DISABILITIES

INDICATOR	SUMMARY	TREND	CONDITION
Estimated number of Persons with Mental Retardation	In 2005, an estimated 96,000 people in the UWMD four county service region have some degree of mental retardation. It is estimated that 15% of these have moderate to severe retardation.	N/A	 Concerned
Number of People Waiting for Mental Retardation Services*	The number of people waiting for services increased each year from 2001 to 2004 (from 2,816 in August 2001 to 4,459 in November 2004).	 Worsening	 Critical
Number of Supplemental Security Income (SSI) Recipients: Blind & Disabled Category	The number of low income people with disabilities who receive SSI benefits in the UWMD four county service region increased steadily—from 28,245 in 2000 to 36,594 in 2004.	 Worsening	 Concerned

*Low-weight (less than 5.5 pounds) and very-low weight births (less than 3 pounds, 5 ounces) are reported in this section because studies show that many of these children will have disabilities in the future.

**Services include: employment services, respite services, physical therapy, case management, residential services, individual and family support, day habilitation services, etc.

Disabilities - North Texas Overview

The Census Bureau reports that there are nearly 500,000 persons in the UWMD four county service region with one or more disabilities. This represents about 17% of the total population.

There are many types of disabilities, and many disabling conditions. The Disabilities section contains data on both types and conditions. The U.S. Bureau of the Census provides counts of disabilities of the following types:

- Sensory disability (the following long lasting conditions: blindness, deafness, or a severe vision or hearing impairment)
- Physical disability (a long lasting condition that substantially limits one or more basic physical activities, such as walking, climbing stairs, reaching, lifting, or carrying)
- Mental disability (a condition lasting six months or more that makes it difficult to learn, remember, or concentrate)
- Self-Care disability (a condition lasting six months or more that makes it difficult to dress, bathe, or get around inside the home)
- Go-Outside-the-Home disability (a condition lasting six months or more that makes it difficult to go outside the home alone to shop or visit a doctor's office)
- Employment disability (a condition lasting six months or more that makes it difficult to work at a job or business)

It should be noted that the same person may have more than one type of disability.

The CDC defines disability as “a general term that refers to any long- or short-term reduction of a person's activity as a result of an acute or chronic condition.” The CDC provides data on a variety of disabling conditions. Included among these conditions are:

- Arthritis
- Deafness/hearing impairments
- Blindness/vision impairments
- Diabetes
- Speech impairments
- Mental Retardation
- Epilepsy
- Cerebral palsy

Again, the same person may have more than one disabling condition.

The following terms are used to describe the severity of mental retardation:

<u>Degree of Severity</u>	<u>IQ levels (to be used as guides)</u>
Mild	50-55 to approx. 70
Moderate	35-40 to 50-55
Severe	20-25 to 35-40
Profound	Below 20 or 25

Source: Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition, Text Revision, 2000, American Psychiatric Association.

Low-weight (less than 5.5 pounds) and very-low weight births (less than 3 pounds, 5 ounces) are reported in this section because studies show that many of these children may have disabilities in the future.

Data relevant to disabilities may also be found in the Chronic Illness and the Physical Health & Wellness sections.

Regional Trends

- Low weight births as a percent of all births in the UWMD four county service region increased from 7.1 in 1996 to 7.7 in 2003.
 - Very low weight births as a percent of all births in the UWMD four county service region increased slightly from 1.2 in 1996 to 1.4 in 2003.
 - The number of low-weight and very-low weight births continued to increase—from 3,589 in 1996 to 4,624 in 2002. Many of these children may have disabilities as they mature.
 - The following disabilities were reported for persons five years and older in the UWMD four county service region in the 2000 Census:
 - Sensory disability: 76,884
 - Physical disability: 163,995
 - Mental disability: 101,031
 - Self-Care disability: 57,859
 - Go-Outside-the-Home disability: 194,938
 - Employment disability 257,762
- Note: The same person may have more than one of the disabilities listed above.
- Based on prevalence data in the U.S., it is estimated that there are, in the UWMD four county service region:
 - 432,775 people with arthritis
 - 313,623 people with deafness or hearing impairments
 - 111,072 people with blindness or visual impairments
 - 97,865 people with diabetes
 - 37,250 people with speech impairments
 - 21,334 people with mental retardation
 - 16,932 people with epilepsy
 - 3,386 people with cerebral palsy
 - In the 2000 Census, it was reported that about 37% of persons from 21 to 64 years who had a disability were not employed.
 - In the U.S. Disability rates are higher among African Americans and Hispanics than among Anglos and Asians.
 - Disability rates increase as the age of the population increases. As the number of people 65 years and over increases, the number and percent of the population with disabilities will also increase.
 - The number of people waiting for mental retardation services increased each year between 2001 and 2004. The number was 4,459 in 2004, compared to 2,816 in 2001—a 58% increase.

- The number of low-income people with disabilities who qualify for Supplemental Security Income (SSI)—Blind and Disabled Category, increased from 28,245 in 2000 to 36,594 in 2004.

Disabilities

Collin County

- Low-weight births as a percent of all births increased from 6 % in 1994 to 7.8% in 2003.
- Very low-weight births as a percent of all births also increased—from .7% in 1994 to 1.4% in 2003.
- Reports from the 2000 Census indicate that 51,910 people had a disability (11.6%).
- 29% of disabled persons in Collin County were not employed.
- According to the Texas Department of Aging and Disability Services, there were 773 people waiting for mental retardation services in November 2004.

Dallas County

- Low weight and very low weight births as a percent of all births remained relatively stable from 1994 through 2003.
- Reports from the 2000 Census indicate that 392,311 people had a disability (19.5%).
- Disability rates, based on data from the 2000 Census, are higher in Dallas County than in other counties in the region.
- 39% of disabled persons in Dallas County were not employed--a much higher percent than in the other counties.
- According to the Texas Department of Aging and Disability Services, there were 2,301 people waiting for mental retardation services in November 2004.

Disabilities

Denton County

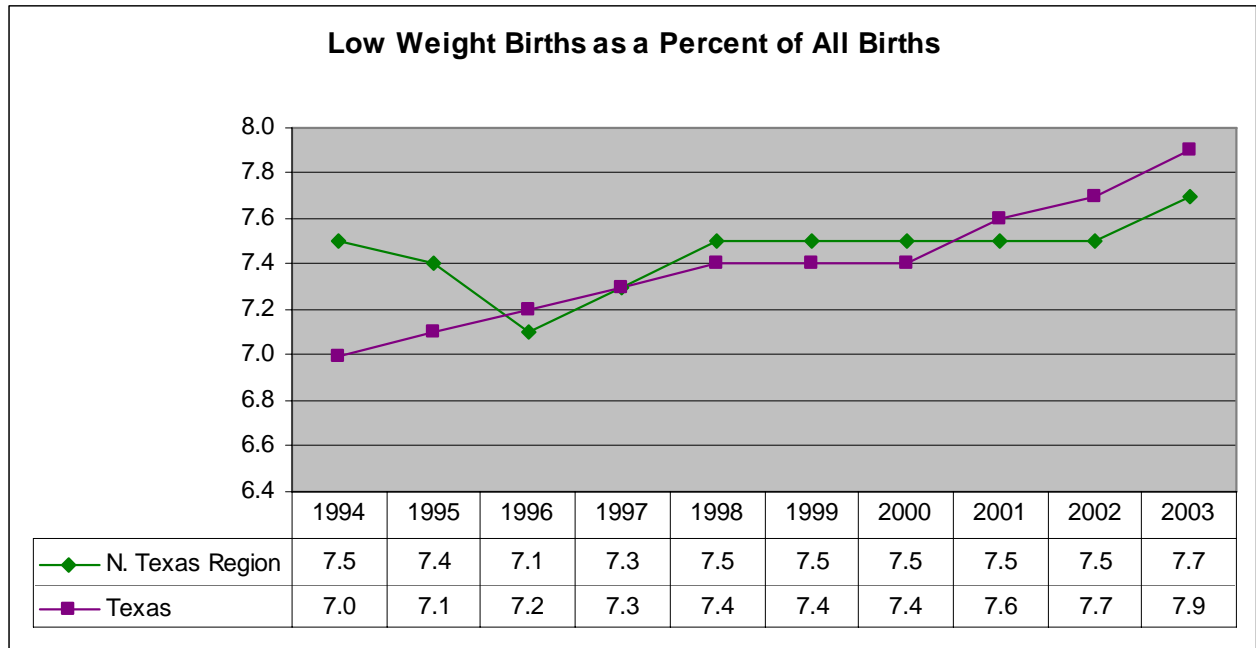
- Low-weight births as a percent of all births increased from a low of 5.2% in 1996 to 6.9% in 2003.
- Very low-weight births as a percent of all births increased from a low of .8% in 1996 to 1.3% in 2003.
- Reports from the 2000 Census indicate that 47,873 people had a disability (12.1%).
- 30% of disabled persons in Denton County were not employed.

Rockwall County

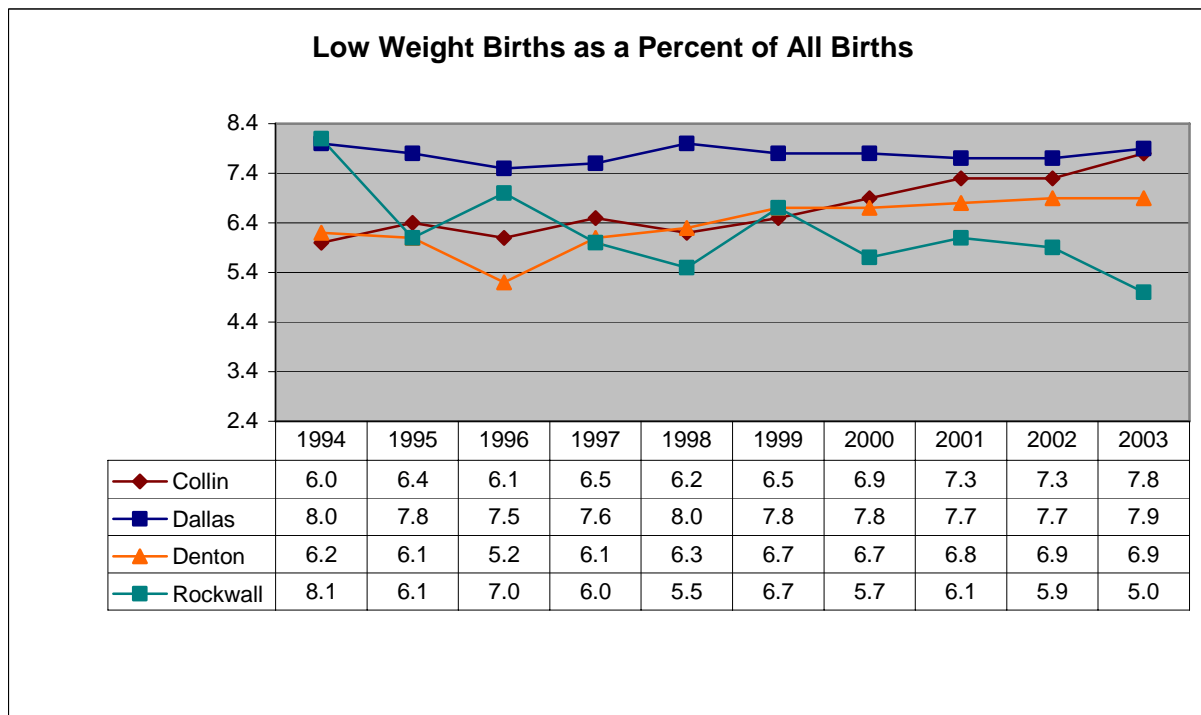
- Low weight births as a percent of all births decreased from a high of 8.1% in 1994 to 5 % in 2003.
- The number of very low-weight births remained stable from 1994 to 2002.
- Reports from the 2000 Census indicate that 5,642 people had a disability (14.3%).
- 26% of disabled persons in Rockwall County were not employed.

Disabilities - Supporting Data

Low Birth Weight Births



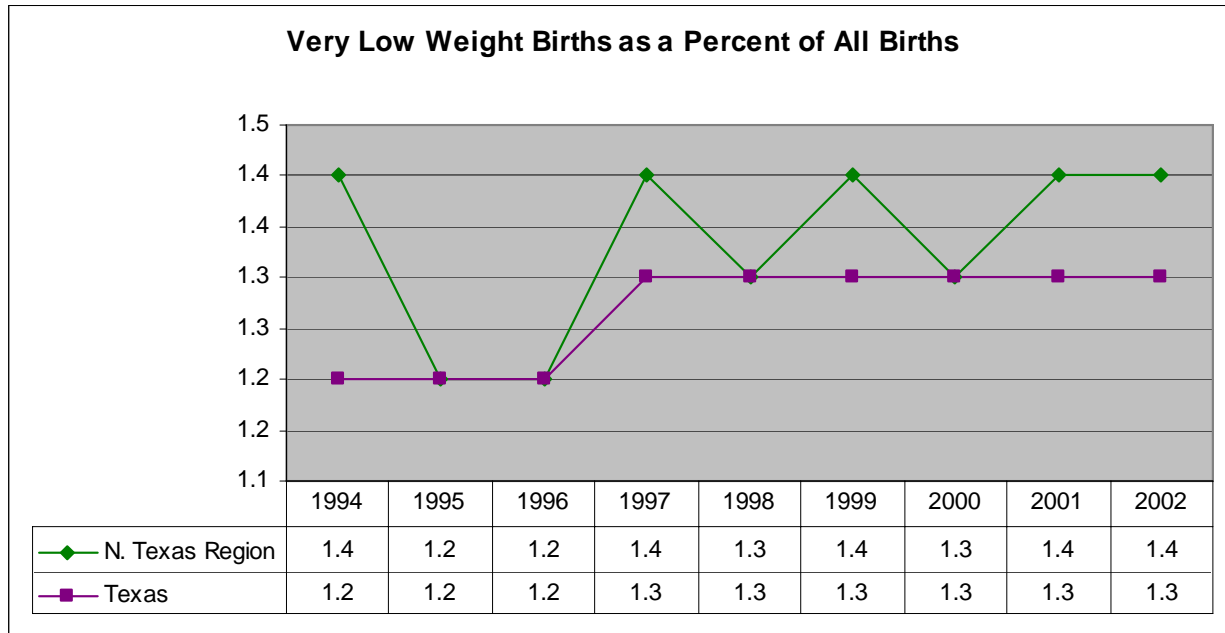
Source: Texas Department of State Health Services
 Low Birth Weight = birth weight of less than 5.5 pounds



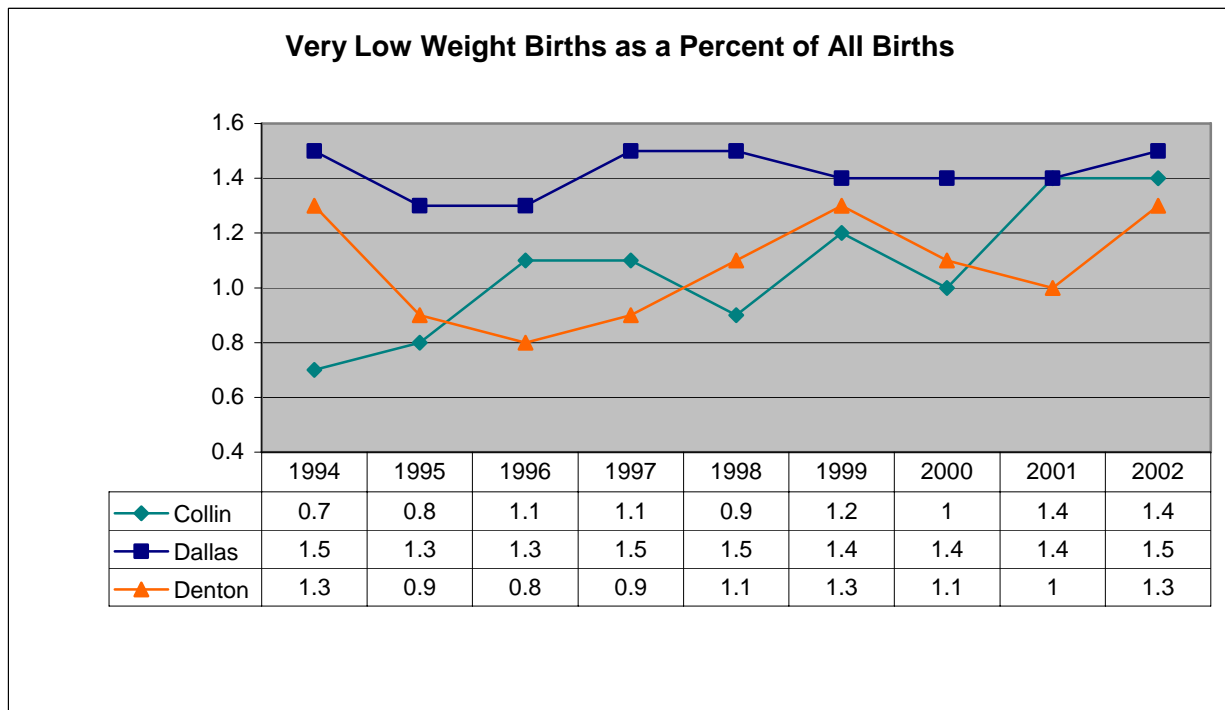
Source: Texas Department of State Health Services
 Low Birth Weight = birth weight of less than 5.5 pounds

Disabilities - Supporting Data

Very Low Birth Weight Births



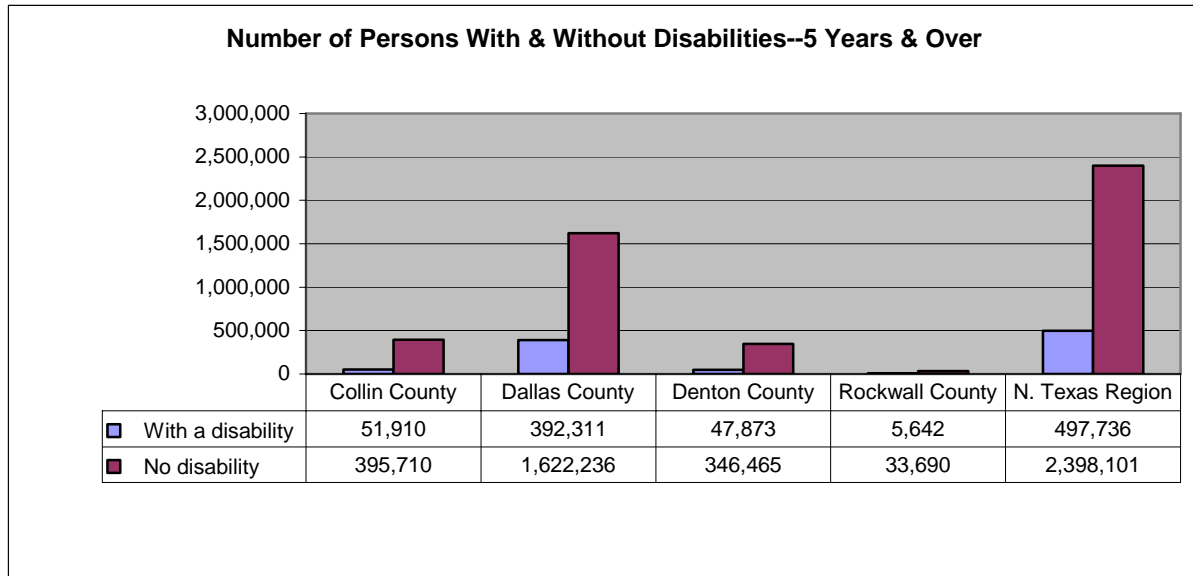
Source: Texas Department of State Health Services
 Very Low Birth Weight = birth weight of less than 3 pounds, 5 ounces



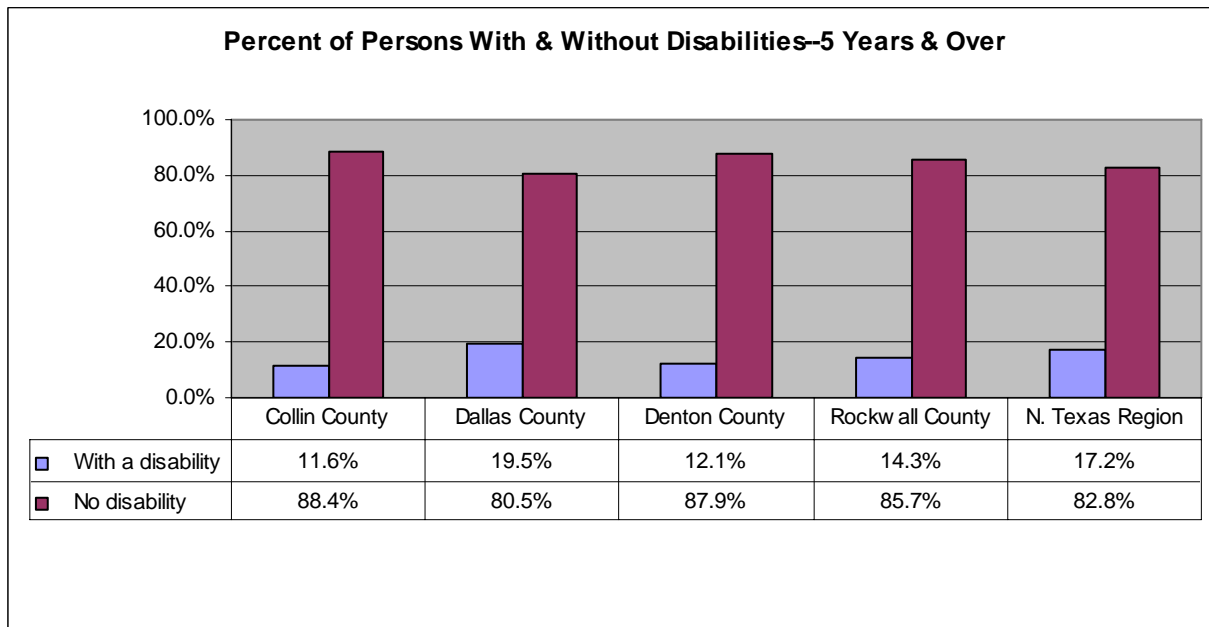
Source: Texas Department of State Health Services
 Very Low Birth Weight = birth weight of less than 3 pounds, 5 ounces

Disabilities - Supporting Data

Ages 5 & Over With Disabilities



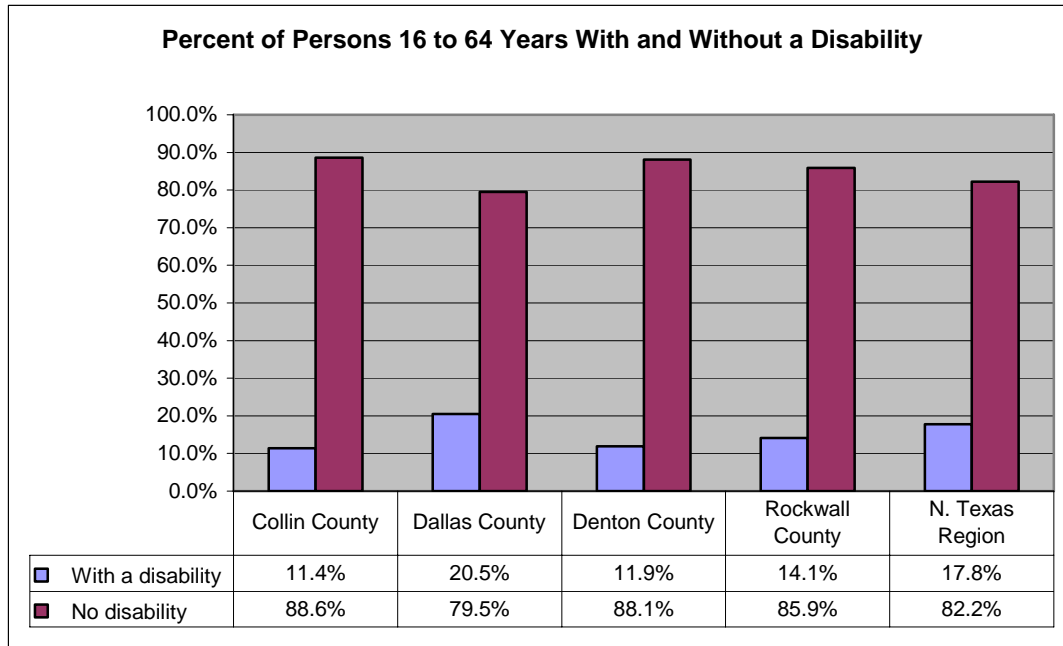
Source: U.S. Census Bureau, Census 2000



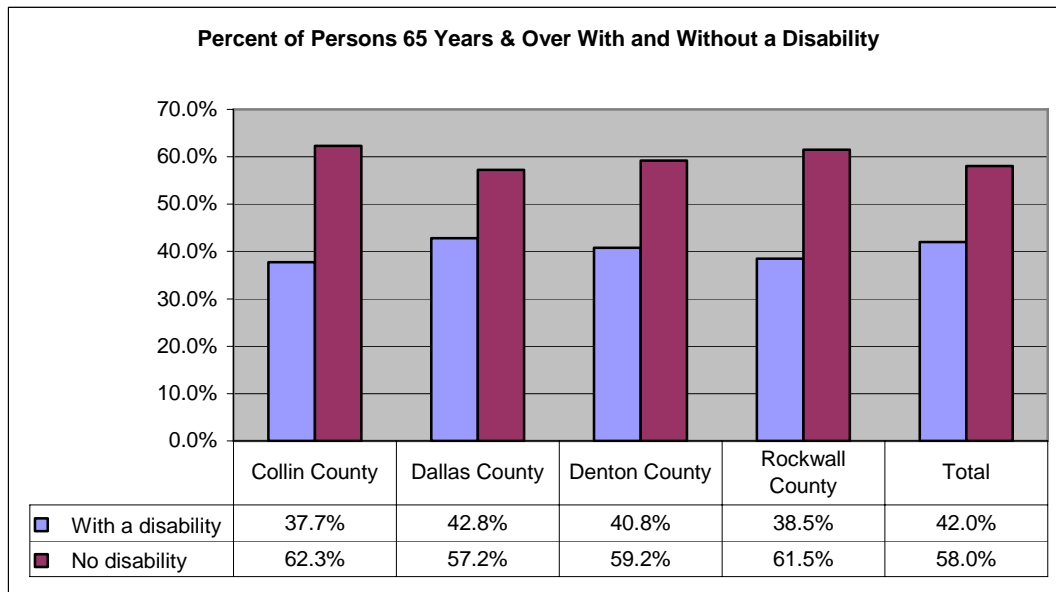
Source: U.S. Census Bureau, Census 2000

Disabilities - Supporting Data

Ages 16 to 64 With Disabilities



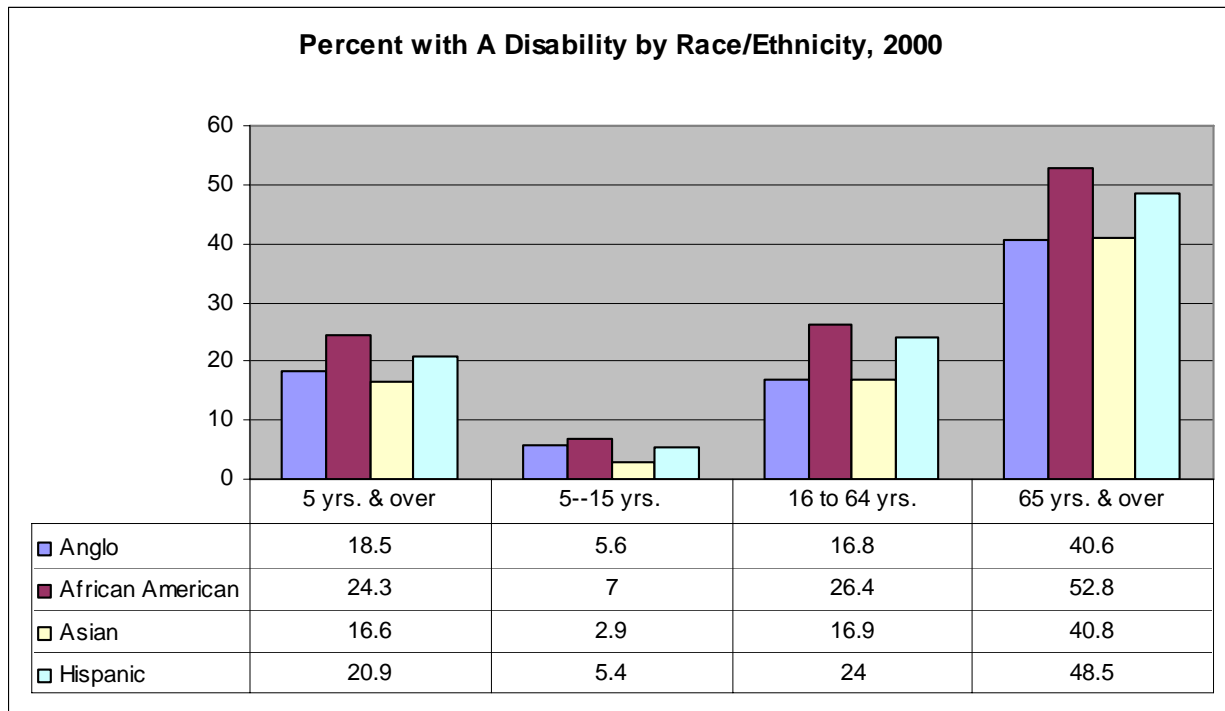
Source: U.S. Census Bureau, Census 2000



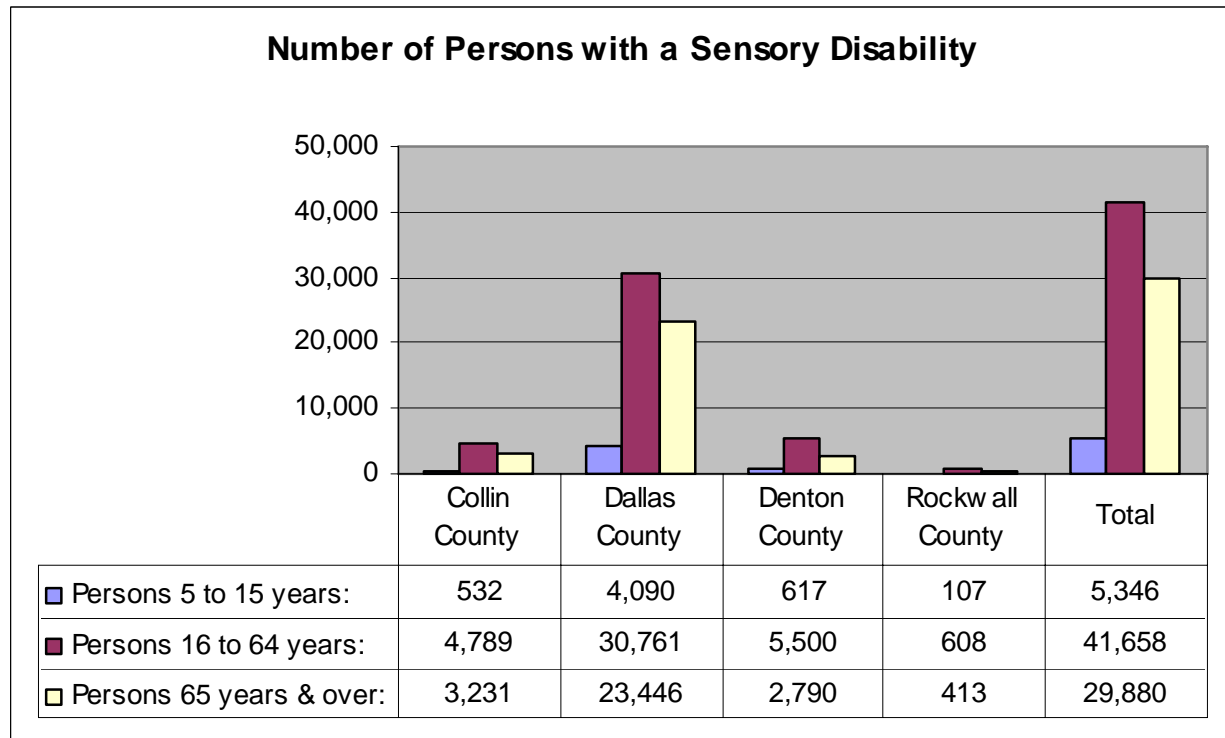
Source: U.S. Census Bureau, Census 2000

Disabilities - Supporting Data

Disabilities by Race/Ethnicity



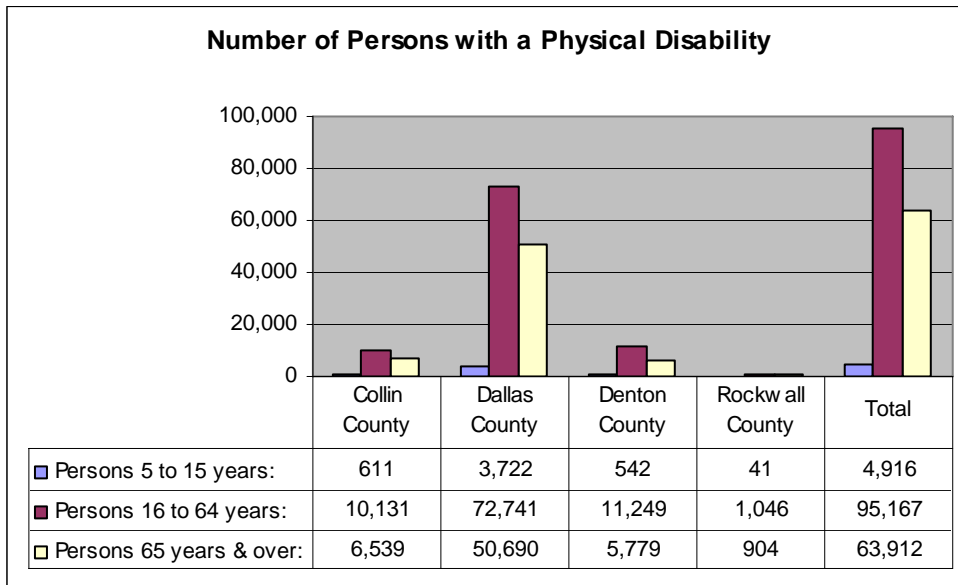
Source: U.S. Census Bureau; Disability Status 2000, March 2003



Source: U.S. Census Bureau, Census 2000

Disabilities - Supporting Data

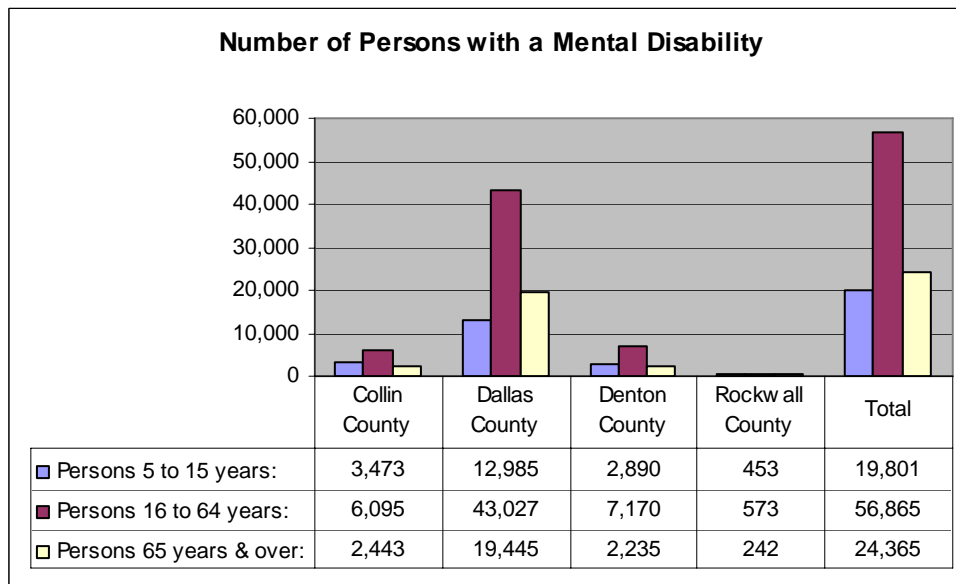
Persons with a Physical Disability



Error!

Source: U.S. Census Bureau, Census 2000

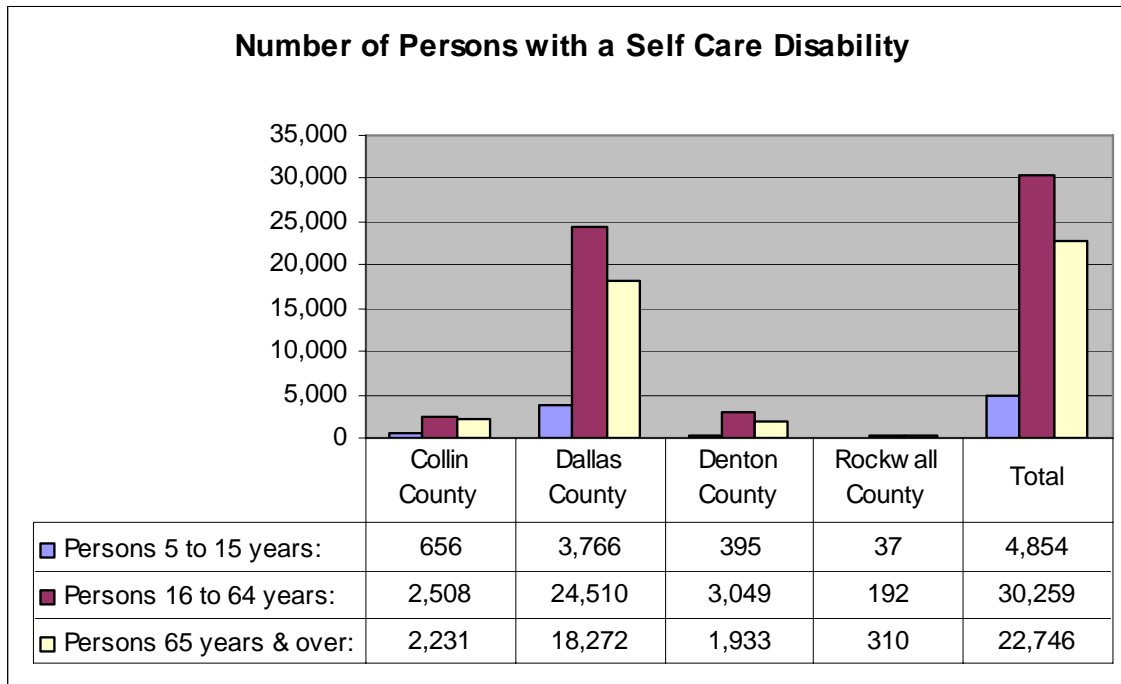
Persons with a Mental Disability



Source: U.S. Census Bureau, Census 2000

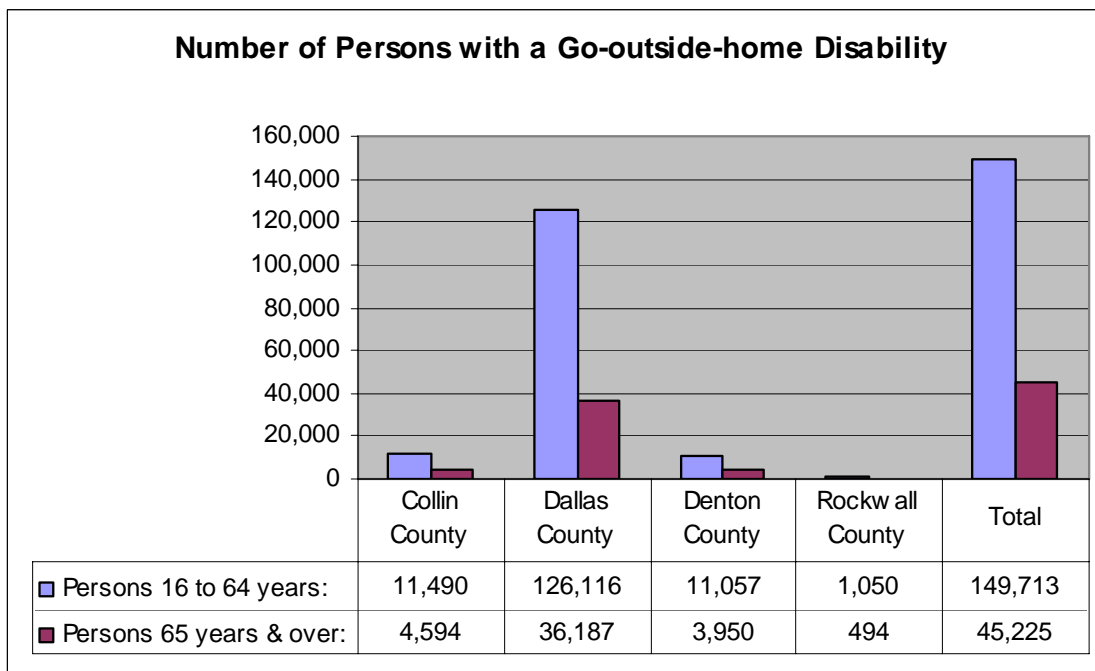
Disabilities - Supporting Data

Persons with a Self Care Disability



Source: U.S. Census Bureau, Census 2000

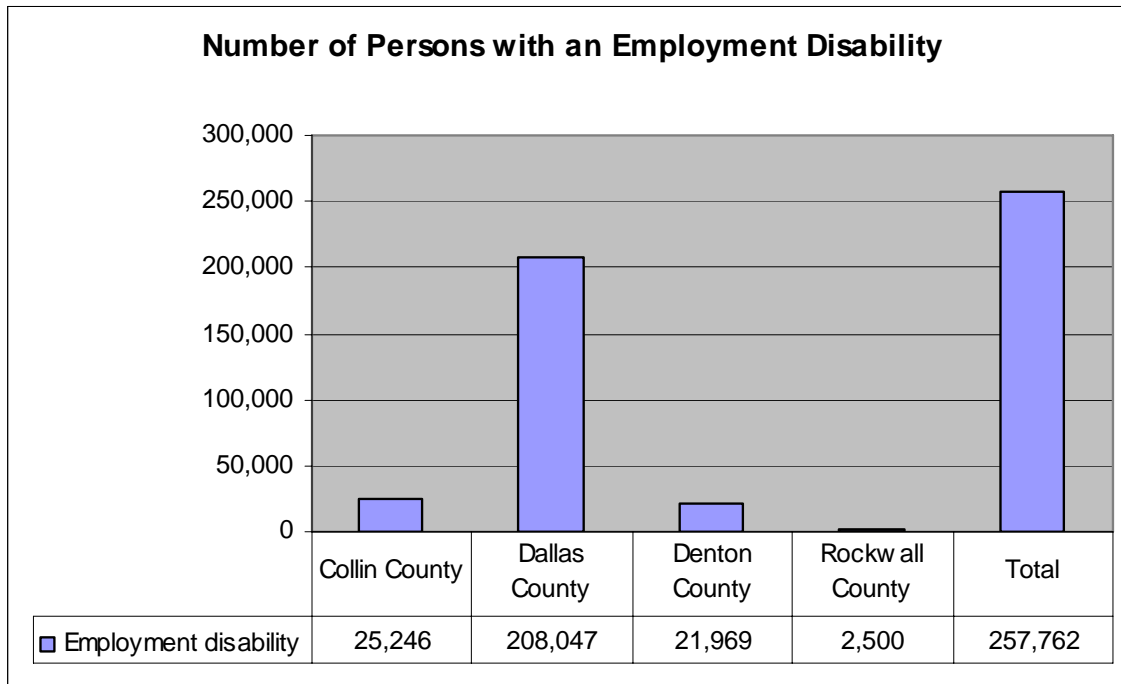
Persons with a Go Outside of the Home Disability



Source: U.S. Census Bureau, Census 2000

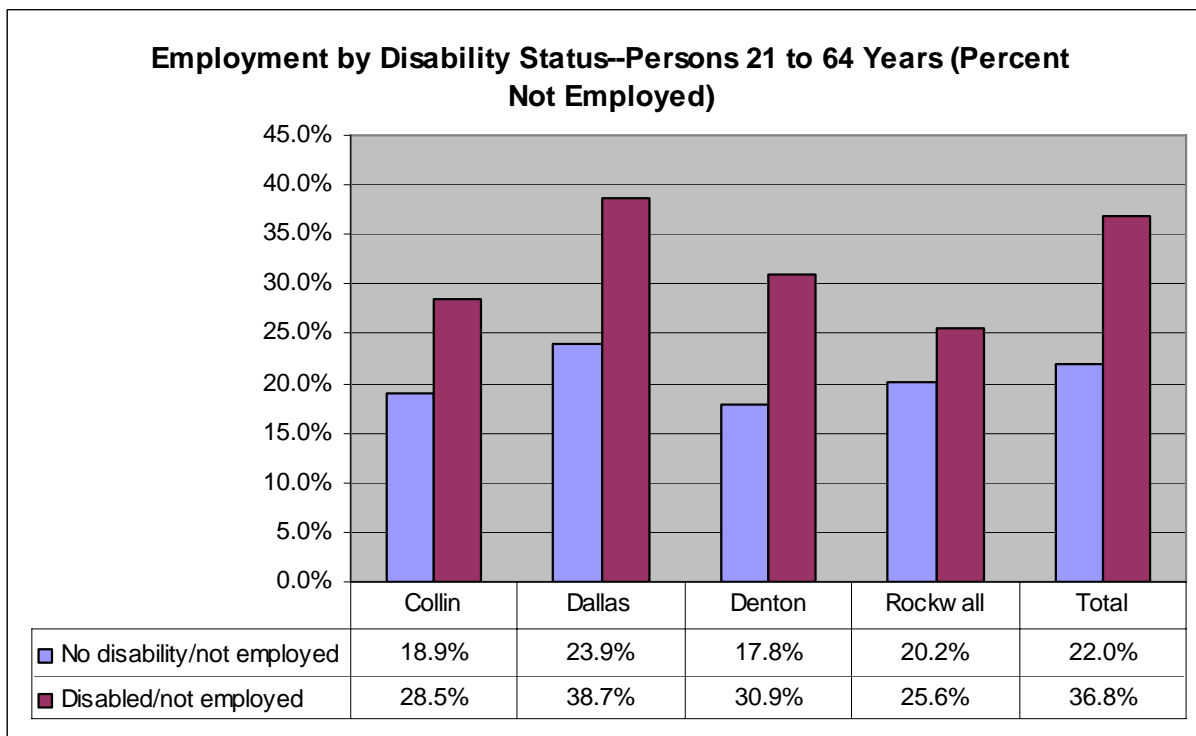
Disabilities - Supporting Data

Persons with an Employment Disability



Source: U.S. Census Bureau, Census 2000

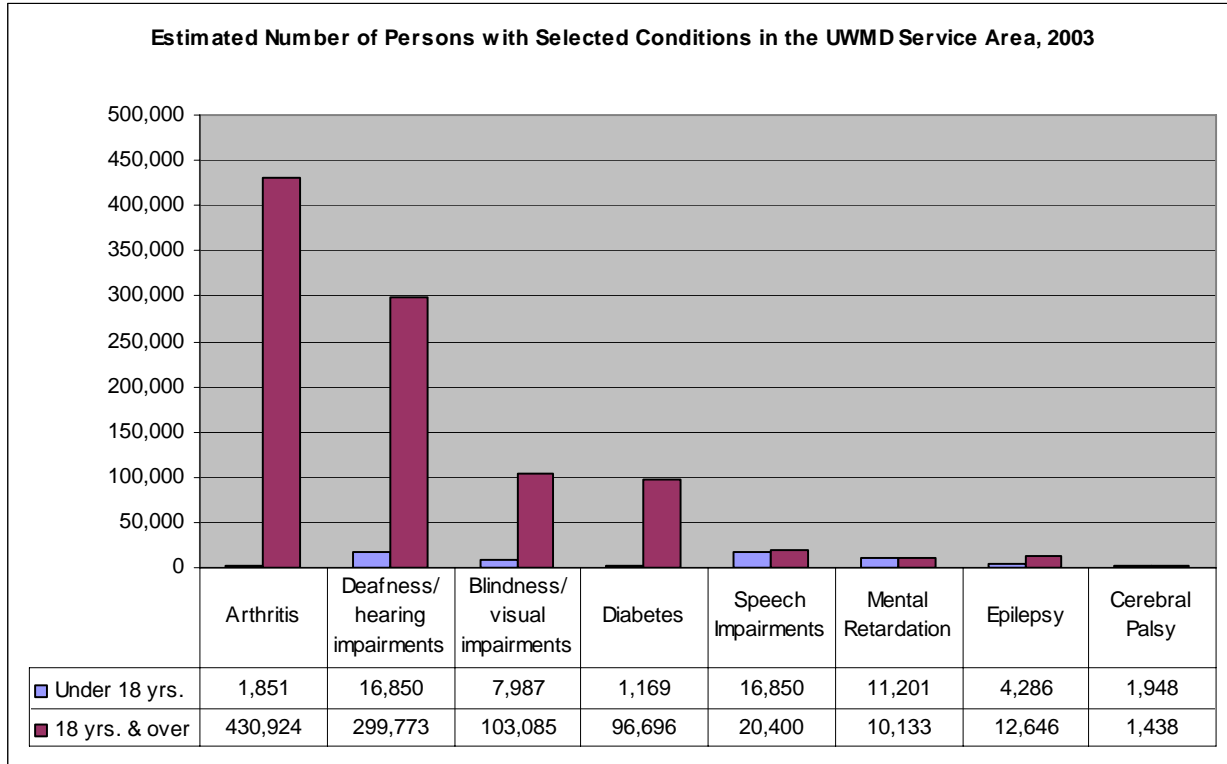
Employment by Disability Status



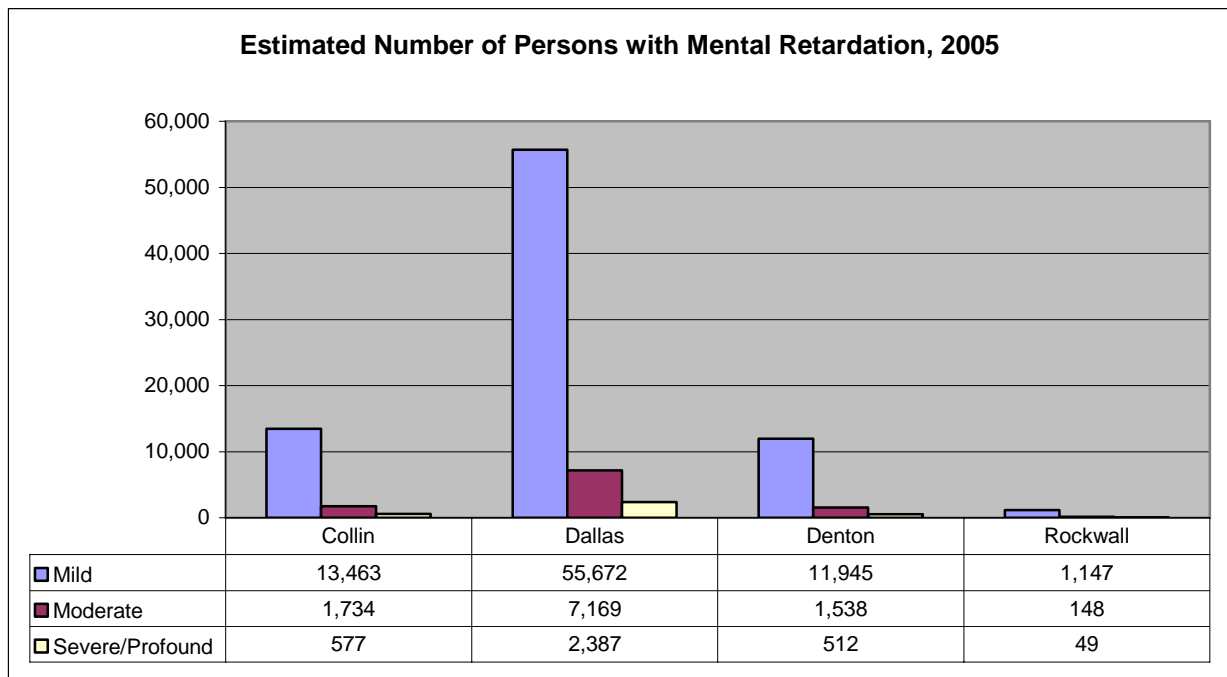
Source: U.S. Census Bureau, Census 2000

Disabilities - Supporting Data

Selected Disability Conditions



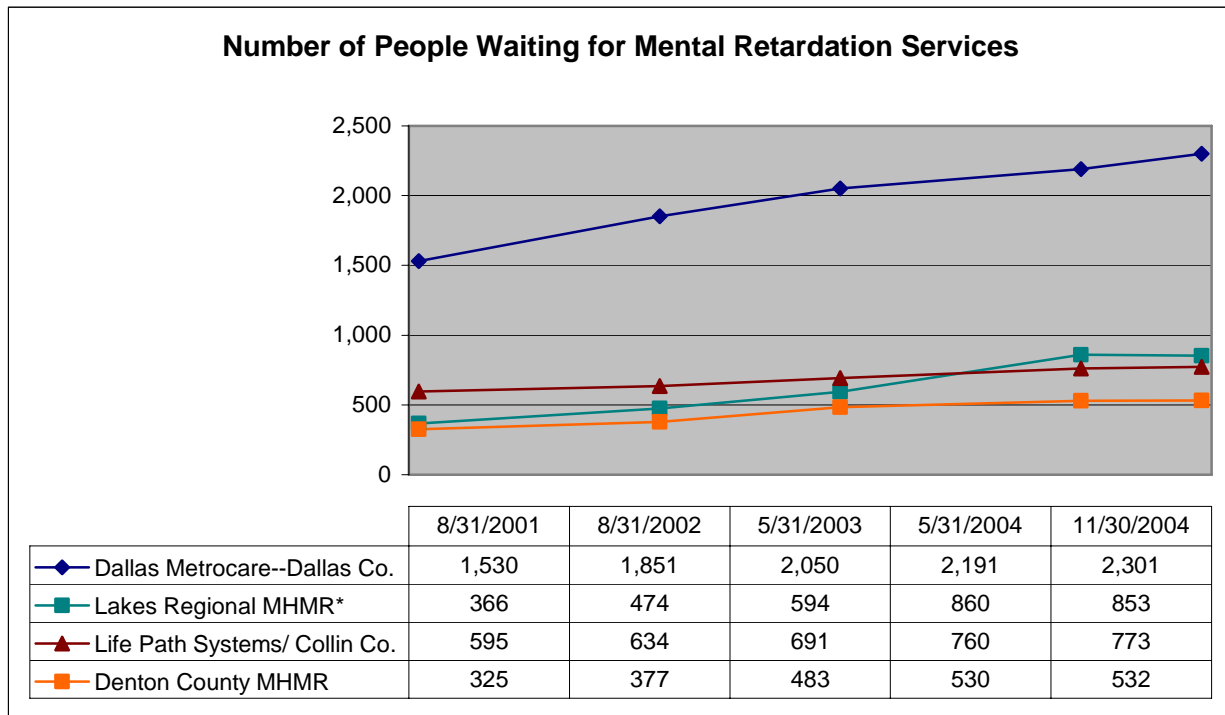
Source: Estimates based on prevalence rates from Centers for Disease Control, Prevalence of Selected Chronic Conditions, U.S., 1990-92.



Source: Texas Department of State Health Services

Disabilities - Supporting Data

Number of People Waiting for Mental Retardation Services



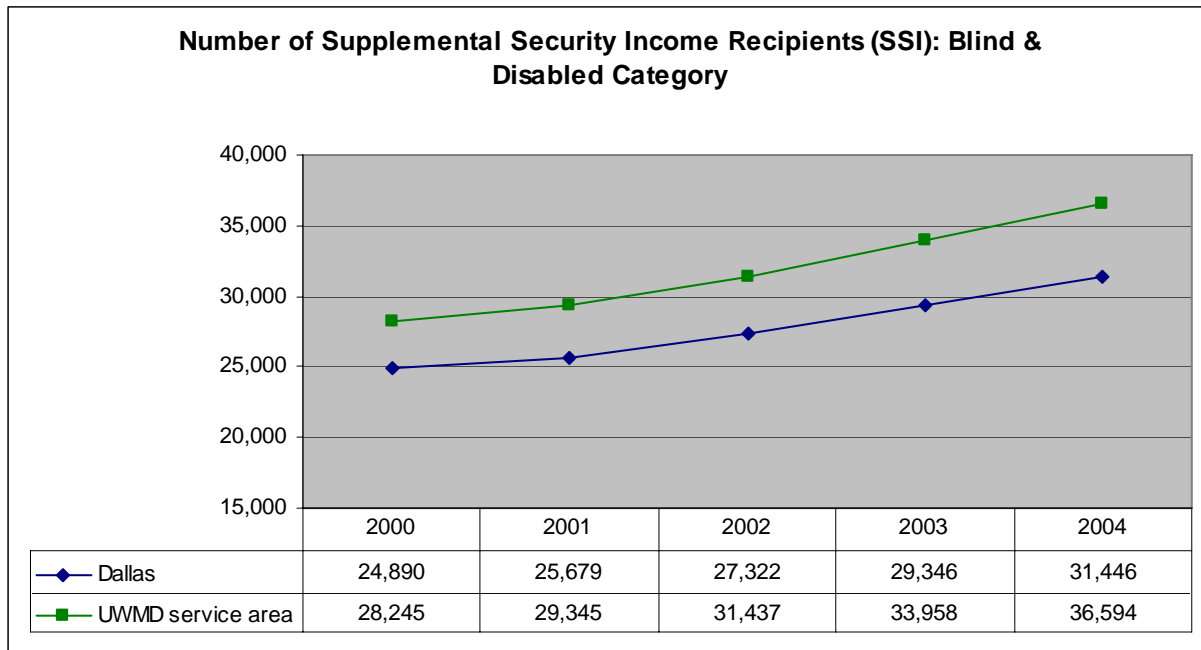
Source: Texas Department of Aging and Disability Services

*Includes Rockwall County

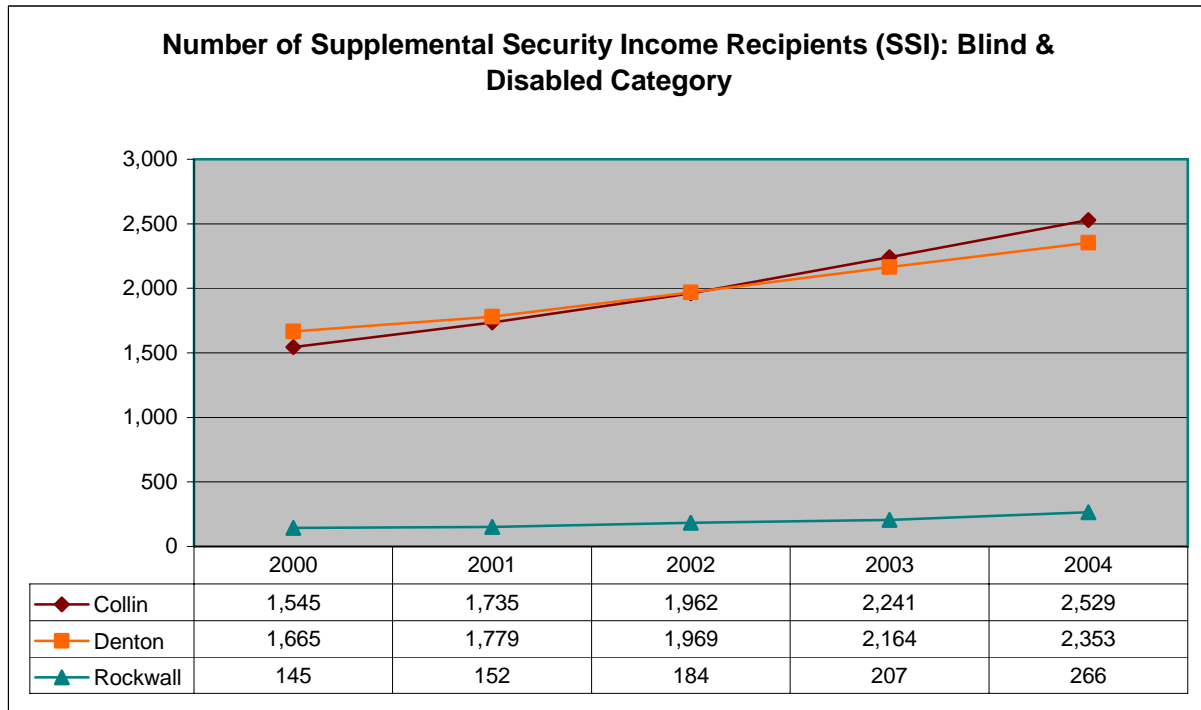
**Services include: employment services, respite services, physical therapy, case management, residential services, individual and family support, day habilitation services, etc.

Disabilities - Supporting Data

Supplemental Security Income (SSI) Recipients













Source: Social Security Administration



Source: Social Security Administration





HEALTH

MENTAL HEALTH AND COUNSELING

INDICATOR	SUMMARY	TREND	CONDITION
Estimated number of adults with diagnosable mental illness	In a 1999 report by the U.S. Surgeon General, it is estimated that, during a one-year period, 20% of adults in the U.S. have a diagnosable mental illness.	N/A	 Concerned
Estimated number of adults with serious mental illness	The Surgeon General estimates that 5.4% of adults in the U.S. have a serious mental illness. This rate translates to more than 138,000 adults in the UWMD four county service region in 2005.	N/A	 Concerned
Estimated number of children with a diagnosable mental illness	The Texas Department of State Health Services estimates that about 12% of children and adolescents in Texas have a mental disorder.	N/A	 Concerned
Estimated number of children with a serious mental or emotional disorder	The Surgeon General estimates that 7% of children in the U.S. have a serious mental or emotional disorder. This rate translates to more than 68,000 children in the UWMD four county service region in 2005.	N/A	 Concerned
Estimated number of Persons with Mental Illness by Type	Estimates from The Texas Department of State Health Services indicate that in the UWMD four county service region, phobias are the most common type of mental illness followed by depression.	 Same or Mixed	 Concerned
Suicide Rate	The suicide rate in the UWMD four county service region declined from 11.8 in 1995 to 8.6 in 2000 (rates per 100,000 population). Since 2000, the suicide rate has remained constant.	 Improving	 Concerned
Number and rate of suicides (ages 15-24)	In 2002, the suicide rate for the UWMD four county service region (6.9) was lower than that of the State rate (9.6). (Rates per 100,000 population)	 Same or Mixed	 Concerned

HEALTH

MENTAL HEALTH AND COUNSELING

INDICATOR	SUMMARY	TREND	CONDITION
Suicide rate by race-ethnicity	The suicide rate is much higher among Anglos (13.6) than among African Americans (4.7) and Hispanics (4.6). (Rates per 100,000 population)	N/A	 Concerned
Number of persons served through NorthSTAR (monthly average)*	The number of persons served through NorthSTAR increased from 9,795 in State Fiscal Year (SFY) 2000 to 17,850 in SFY 2004. During SFY 2004, an estimated 247,627 people were eligible for services, but the number served was only 17,850 (monthly average).**	 Worsening	 Concerned
Types of services provided by NorthSTAR* (chemical dependency, mental health, and dual diagnosis)	During SFY 2004, 77% of NorthSTAR clients received mental health services only, 7% received chemical dependency services only, and 16% received both mental health and chemical dependency services.*	N/A	 Concerned

*The NorthSTAR service area includes Collin, Dallas, Ellis, Hunt, Kaufman, Navarro, and Rockwall Counties.

**The estimated number of persons eligible was calculated by taking 20% of persons in the service area who meet the income eligibility requirements. (The Texas Department of State Health Services estimates that about 20% of the adult population has some form of mental illness during a one-year period.)

Note: While NorthSTAR data are indicators for mental health services, these data are dependent on funding levels and eligibility criteria.

Mental Health and Counseling - North Texas Overview

The Texas Department of State Health Services provides estimates for the number of adults and children with a mental illness. The prevalence rates for mental illness used in developing the estimates are 19.6% for adults, and 11.8% for children.

For adults, estimates are provided for the following types of disorders. (The descriptions are adapted from the Diagnostic and Statistical Manual of Mental Disorders.)

- Schizophrenia: Characterized by chronic and usually serious mental disorder affecting a variety of aspects of behavior, thinking, and emotion.
- Bipolar Disorder: Characterized by dramatic mood swings or episodes of Mania, Hypomania, or Major Depression.
- Major Depression: Characterized by persistent and pervasive depressed mood and/or loss of interest or pleasure.
- Anxiety: Characterized by excessive and hard to control anxiety occurring persistently.
- Lifetime Dysthymia: Characterized by emotional depression that persists for years, usually with no more than moderate intensity.
- Phobia: Characterized by avoidance of a situation out of fear or out of anticipation that anxiety would accompany exposure.

For more detailed descriptions of the disorders listed above, see the Diagnostic and Statistical Manual of Mental Disorders-IV-TR (Text Revision), fourth edition, 2000, American Psychiatric Association.

The Office of the U.S. Surgeon General estimates that one in five Americans have a diagnosable mental illness during a given year. A sub-population of 5.4 % of adults is thought to have a serious mental illness--an illness that interferes with social functioning. About 7% of children are thought to have a serious emotional disorder--a disorder that involves severe functional limitations.

In addition, the Surgeon General's report indicates that approximately 3% of the adult population has both a mental illness and an addictive disorder. (Mental Health: A Report of the Surgeon General, 1999.) Material related to addiction may be found in the Substance Abuse section of the Community Assessment.

Another mental health indicator is the number of persons with mental illness and/or substance abuse disorders served through NorthSTAR. NorthSTAR is a public behavioral health care insurance program that funds mental health and/or substance abuse treatment for low-income clients. The NorthSTAR service area includes Collin, Dallas, Ellis, Hunt, Kaufman, Navarro, and Rockwall Counties. It should be noted that data from NorthSTAR may reflect need in the community to some extent. However, this data is also affected by changes in funding levels and eligibility criteria.

Regional Trends

- The Texas Department of State Health Services estimates that about 20% of the adult population has some form of mental illness during a one year period. This prevalence rate translates to 500,000 adults in the UWMD four county service region in 2005.
- The Office of the U.S. Surgeon General estimates that 5.4% of adults have a serious mental illness. This rate translates to more than 138,000 people in the UWMD four county service region.
- The Texas Department of State Health Services estimates that about 12% of children under 18 years of age have some form of mental illness. This prevalence rate translates to more than 114,000 in the UWMD four county service region.
- The Office of the U.S. Surgeon General estimates that about 7% of children (ages 9 to 17) have a serious mental or emotional disorder. This rate translates to more than 68,000 in the UWMD four county service region.
- While the number of suicides in the region has increased slightly, age-adjusted suicide rates have remained stable.
- Suicide rates are much higher among Anglos than among African Americans and Hispanics. (13.6 for Anglos compared to 4.7 for African Americans, and 4.6 for Hispanics / rates per 100,000 persons)
- The number of children and adults served by NorthSTAR in Collin, Dallas, and Rockwall counties increased during the past 4 years—from 2,006 in 2000 to 3,377 in 2003 (monthly average).*
- The number of adults served by NorthSTAR in Collin, Dallas, and Rockwall counties increased during the past 4 years—from 6,932 in 2000 to 11,108 in 2003 (monthly average).*
- For the State Fiscal Year 2004 (SFY 2004), an estimated 247,627 people were eligible for NorthSTAR services, but only 17,850 people were served (monthly average).*
- While NorthSTAR data are indicators for mental health services, these data are dependent on funding levels and eligibility criteria.

Mental Health and Counseling

Collin County

- An estimated 81,800 adults suffered from a diagnosable mental illness in 2005, and 22,500 suffered from a serious mental illness.
- In 2005, an estimated 19,000 children (18 years and under) suffered from a diagnosable mental illness, and around 11,000 suffered from a serious mental or emotional disorder.
- The number of suicides peaked at 46 in 1999, and declined slightly since then.
- The number of adults receiving mental health services from NorthSTAR increased from 580 in 2000 to 1,079 in 2003 (monthly average).
- The number of children receiving mental health services from NorthSTAR increased from 150 in 2000 to 278 in 2003 (monthly average).

Dallas County

- An estimated 338,000 adults suffered from a diagnosable mental illness in 2005, and around 93,000 suffered from a serious mental illness.
- In 2005, an estimated 78,000 children (18 years and under) suffered from a diagnosable mental illness, and more than 46,000 suffered from a serious mental or emotional disorder.
- The number of suicides decreased in 2000, but increased in 2001 and has remained stable since that year.
- The number of adults receiving mental health services from NorthSTAR increased from 6,295 in 2000 to 9,929 in 2003 (monthly average).
- The number of children receiving mental health services from NorthSTAR increased from 1,832 in 2000 to 2,276 in 2003 (monthly average).

Mental Health and Counseling

Denton County

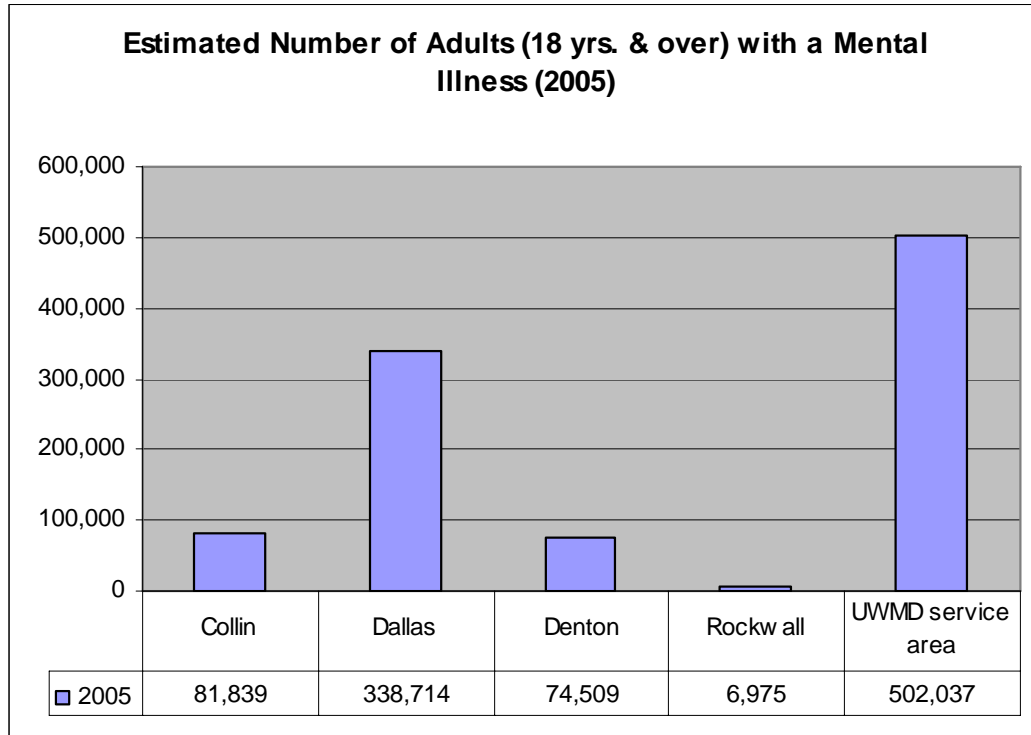
- In 2005, an estimated 74,000 adults suffered from a diagnosable mental illness, and more than 20,000 suffered from a serious mental illness.
- It is estimated that more than 15,500 children suffered from a diagnosable mental illness, and more than 9,000 suffered from a serious mental or emotional disorder.
- The number of suicides increased sharply—from 28 in 2001 to 46 in 2002, and remained relatively high (42 in 2003).

Rockwall County

- In 2005, an estimated 6,900 adults suffered from a diagnosable mental illness, and an estimated 1,900 suffered from a serious mental illness.
- An estimated 1,600 children suffered from a diagnosable mental illness, and more than 900 suffered from a serious mental or emotional disorder.
- The number of suicides ranged from 1 to 9 per year during the past nine years.
- The number of adults receiving mental health services from NorthSTAR increased from 58 in 2000 to 101 in 2003 (monthly average).
- The number of children receiving mental health services from NorthSTAR increased from 23 in 2000 to 46 in 2003 (monthly average).

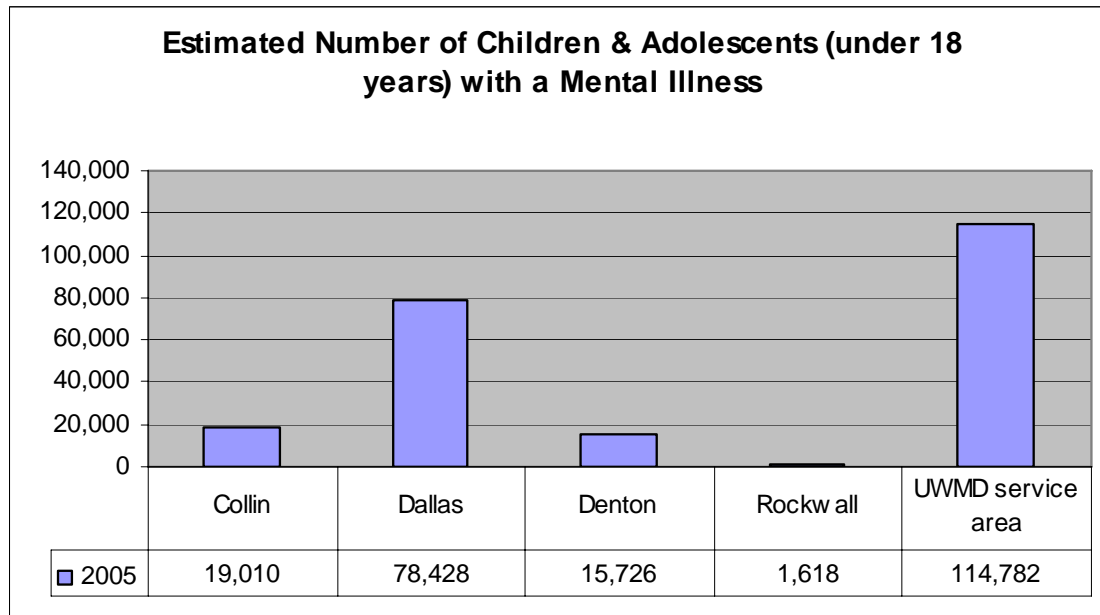
Mental Health and Counseling - Supporting Data

Estimated Number of Adults with a Mental Illness



Source: Texas Department of State Health Services

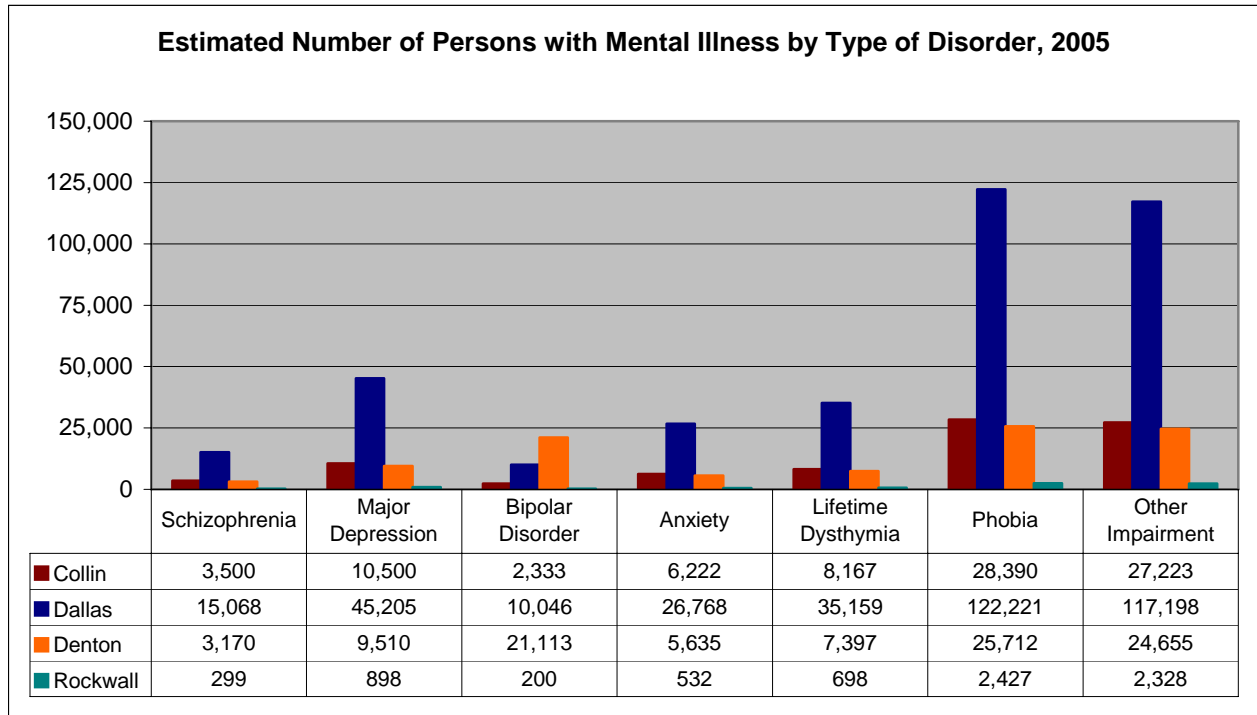
Estimated Number of Children with a Mental Illness



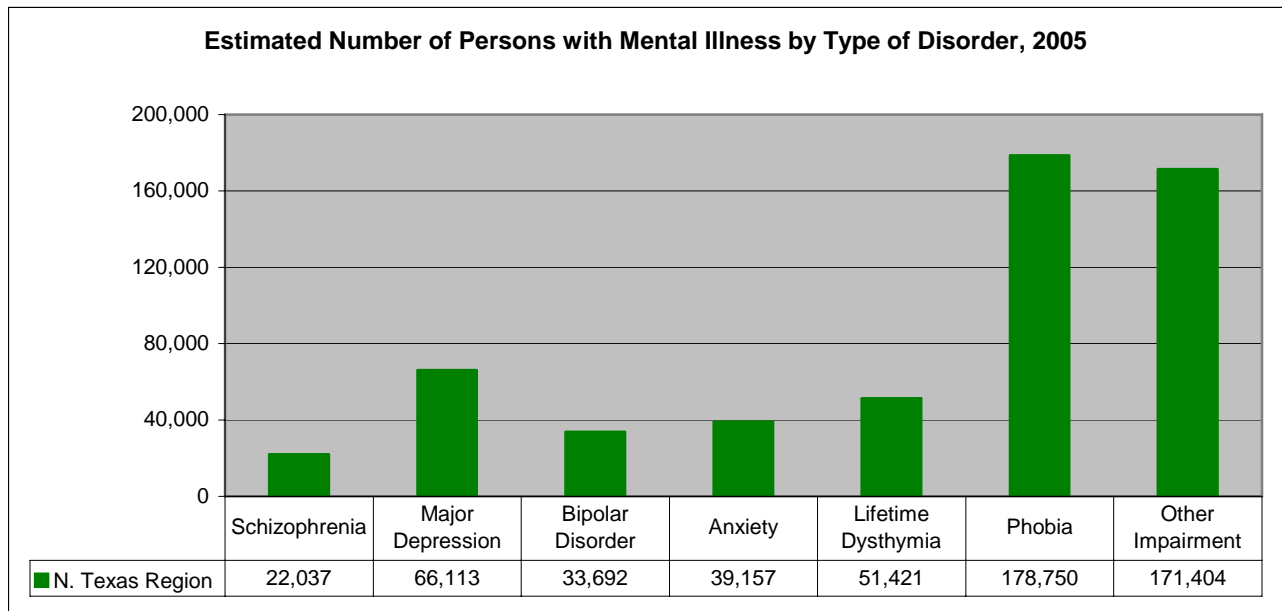
Source: Texas Department of State Health Services

Mental Health and Counseling - Supporting Data

Estimated Number of Persons with Mental Illness by Type of Disorder



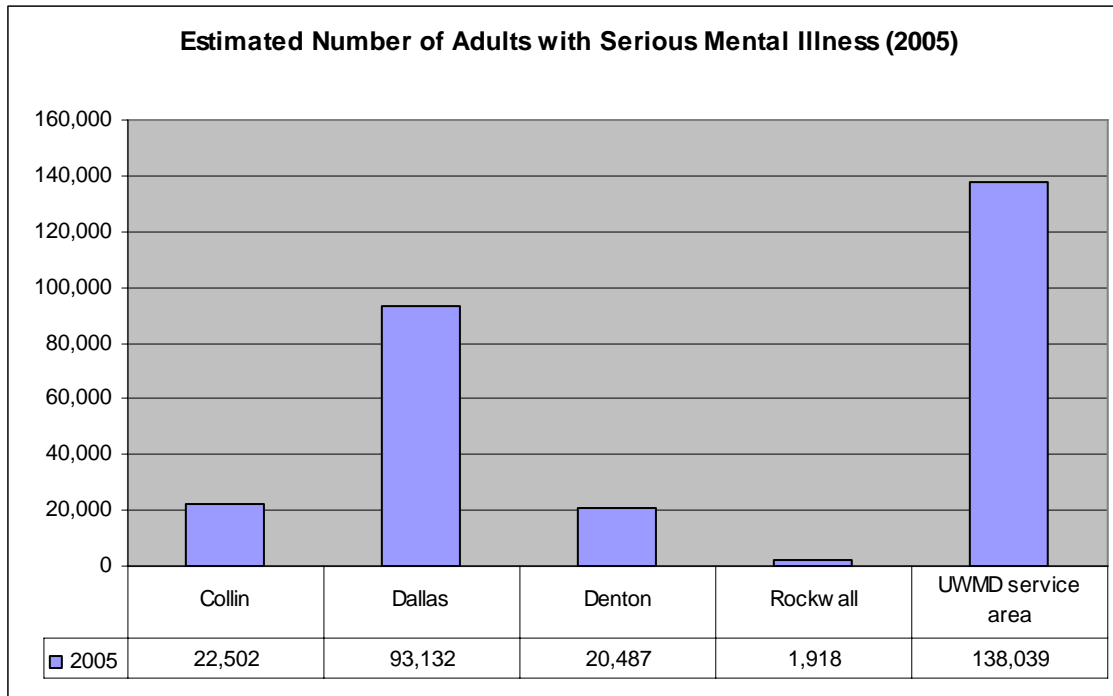
Source: Texas Department of State Health Services



Source: Texas Department of State Health Services

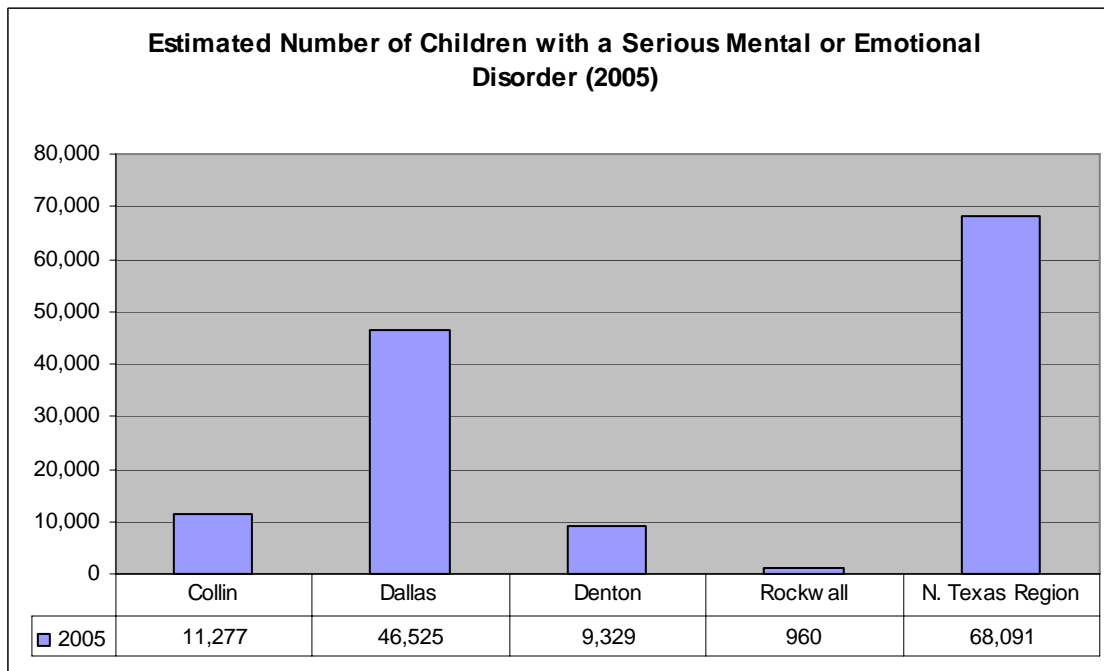
Mental Health and Counseling - Supporting Data

Estimated Number of Adults with Serious Mental Illness



Source: Estimates based on prevalence rates from Mental Health: A report of The Surgeon General, 1999

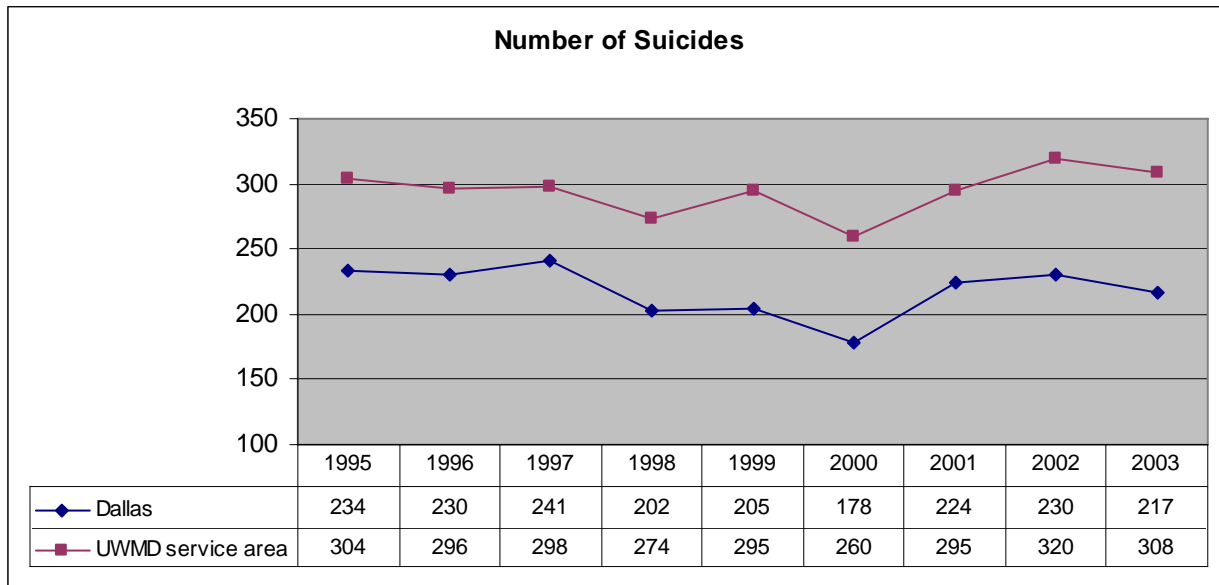
Estimated Number of Children with Serious Mental Illness



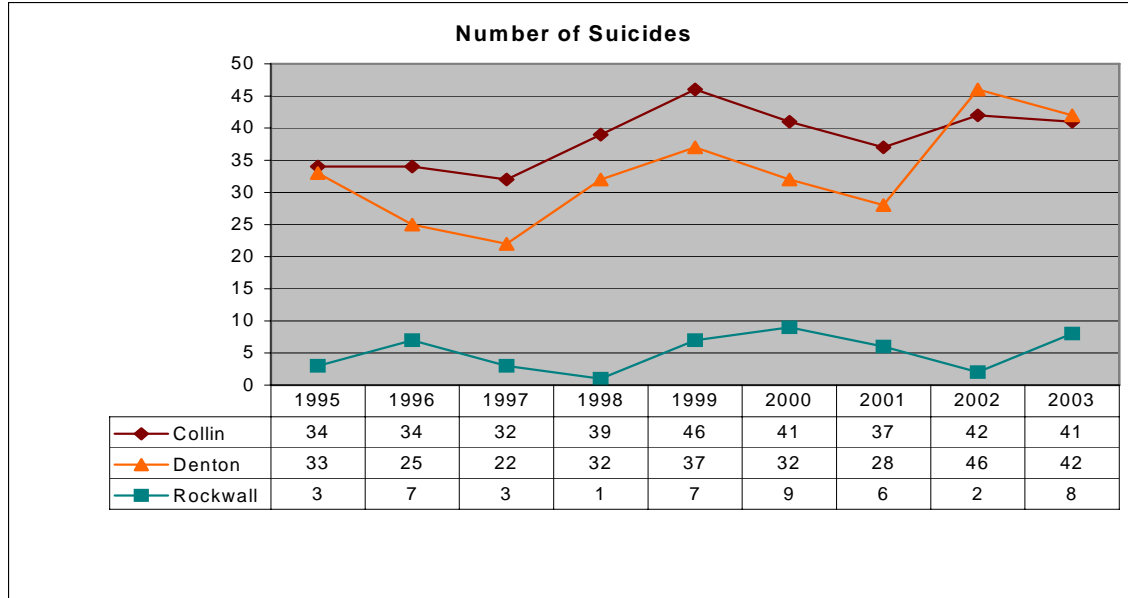
Source: Estimates based on prevalence rates from Mental Health: A report of The Surgeon General, 1999

Mental Health and Counseling - Supporting Data

Suicides



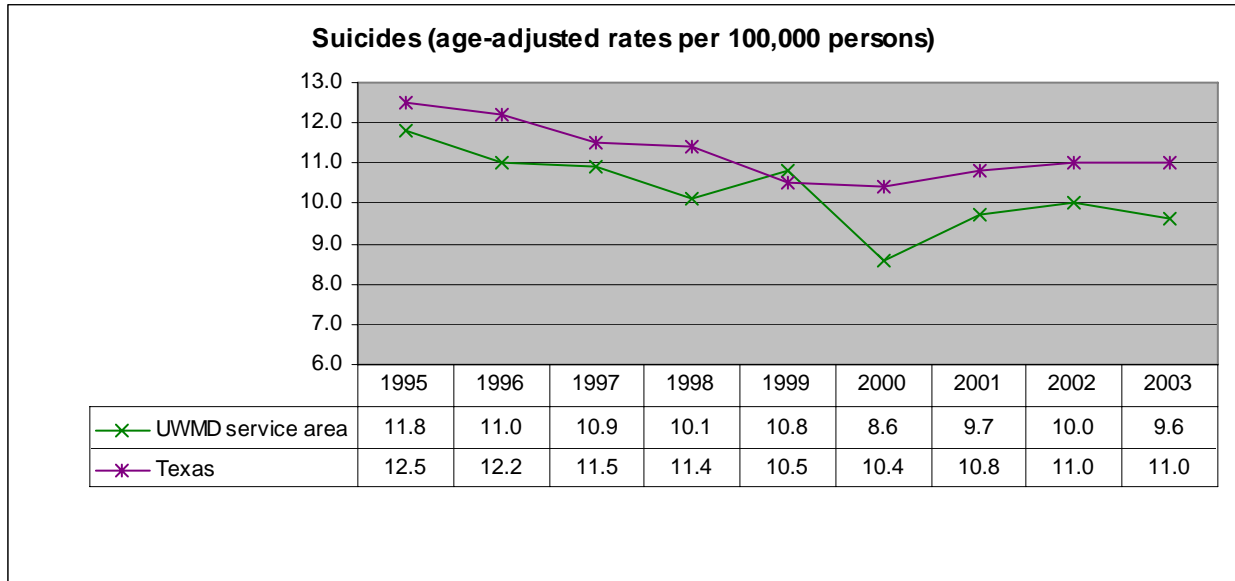
Source: Texas Department of State Health Services



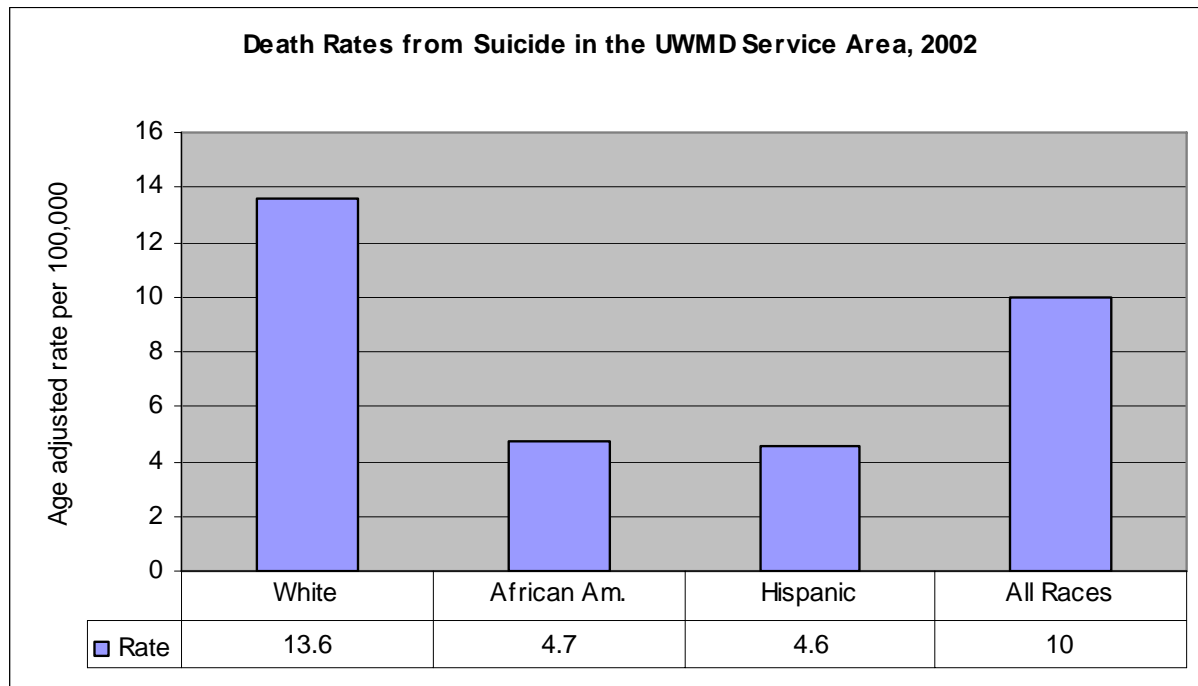
Source: Texas Department of State Health Services

Mental Health and Counseling - Supporting Data

Suicides



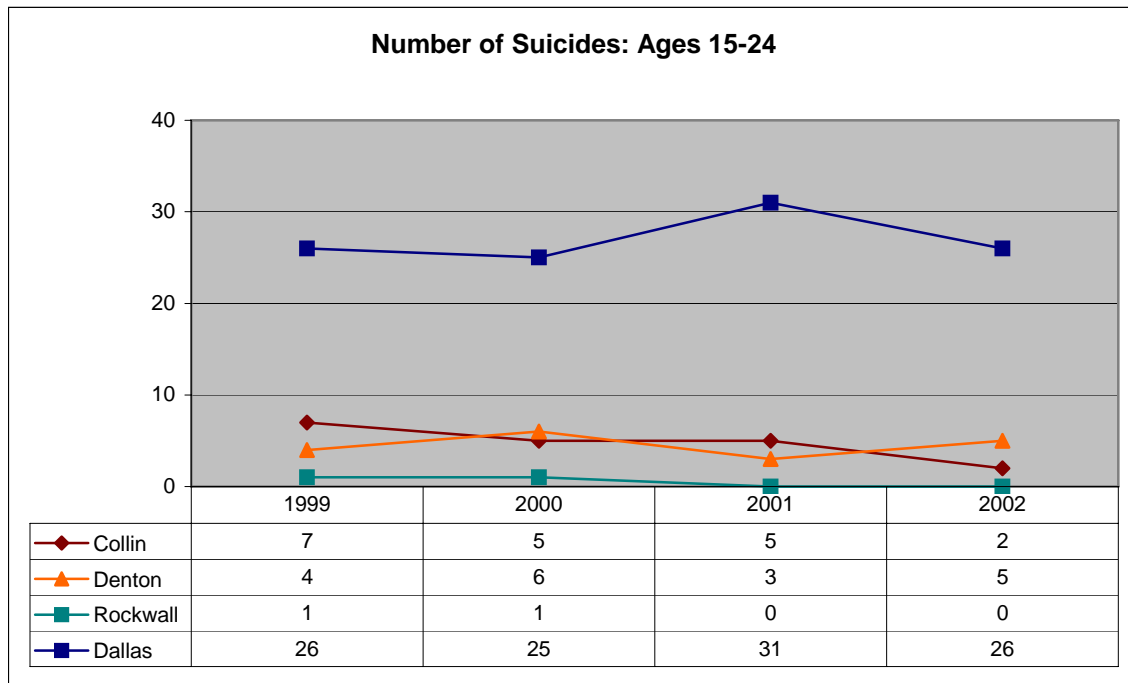
Source: Texas Department of State Health Services



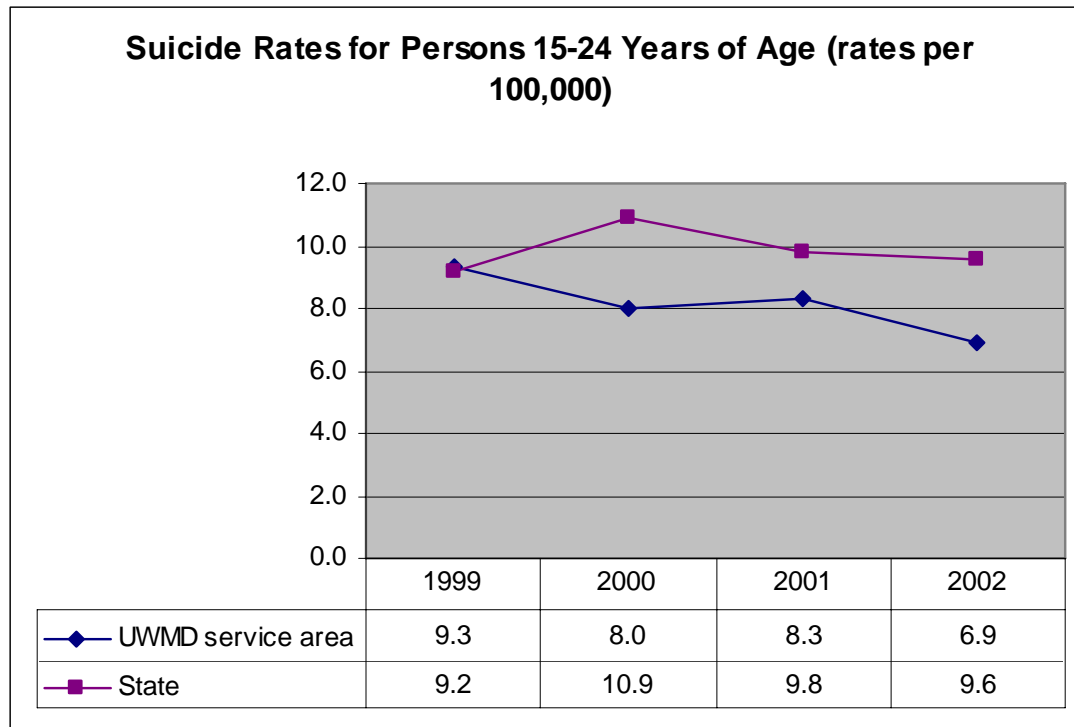
Source: Texas Department of State Health Services

Mental Health and Counseling - Supporting Data

Suicides



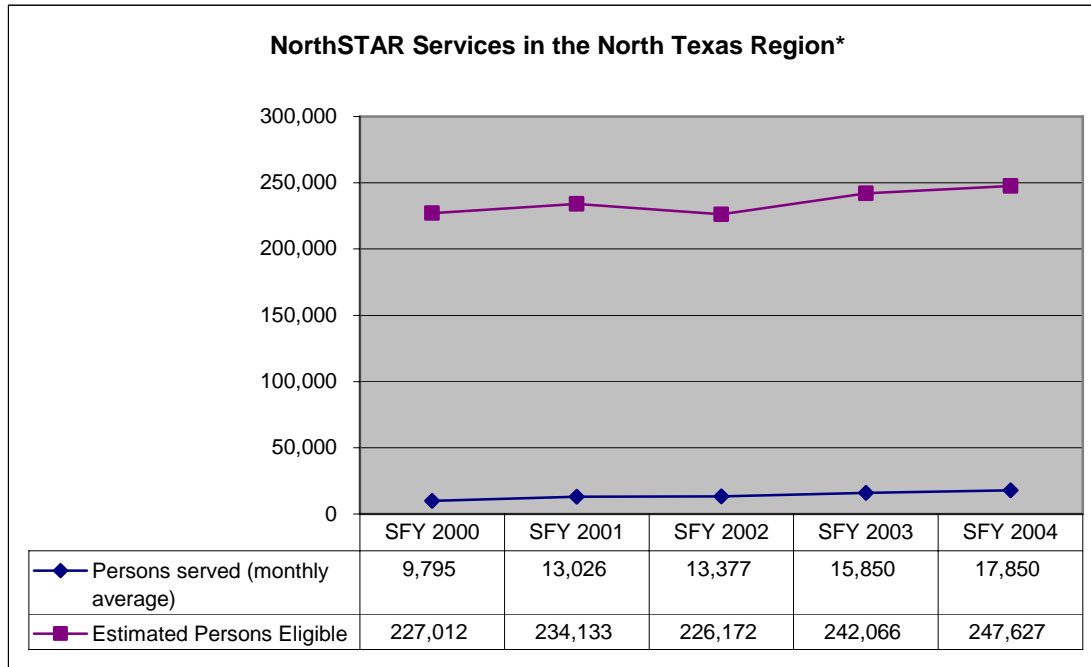
Source: Texas Department of State Health Services



Source: Texas Department of State Health Services

Mental Health and Counseling - Supporting Data

North STAR Services

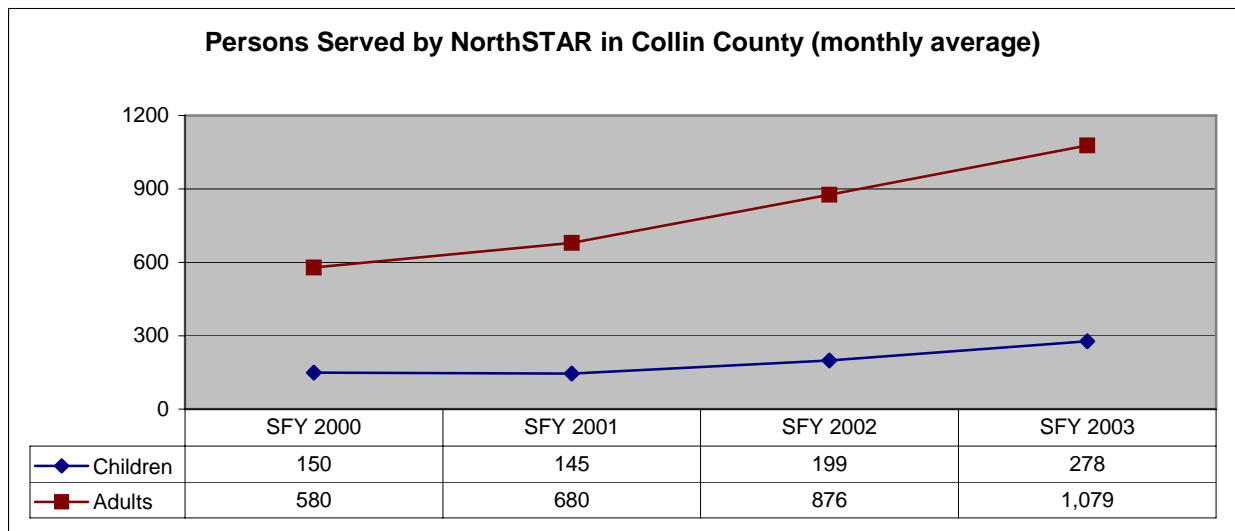


Source: NorthSTAR (charts above)

SFY: State Fiscal Year (September 1—August 31)

*NorthSTAR service area includes Collin, Dallas, Ellis, Hunt, Kaufman, Navarro, and Rockwall Counties.

**The estimated number of persons eligible is calculated by taking 20% of the persons who meet the income eligibility requirements in the service area. (The Texas Department of State Health Services estimates that about 20% of the adult population has some form of mental illness over a one year period.)

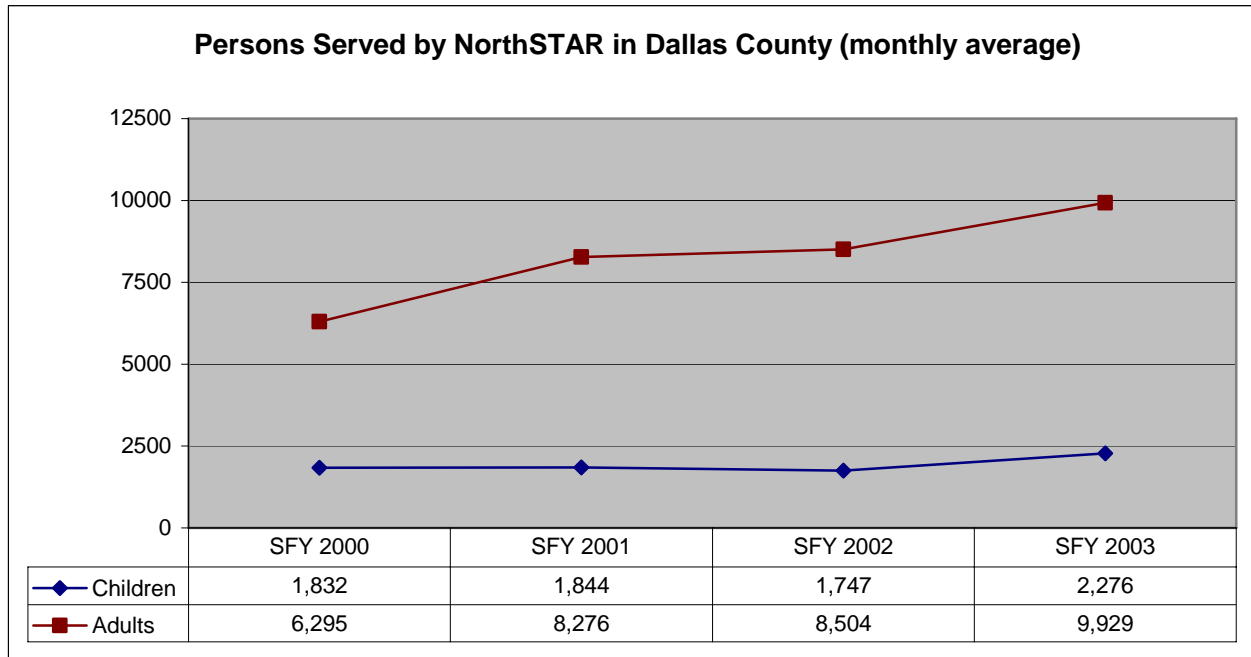


Source: NorthSTAR (charts above)

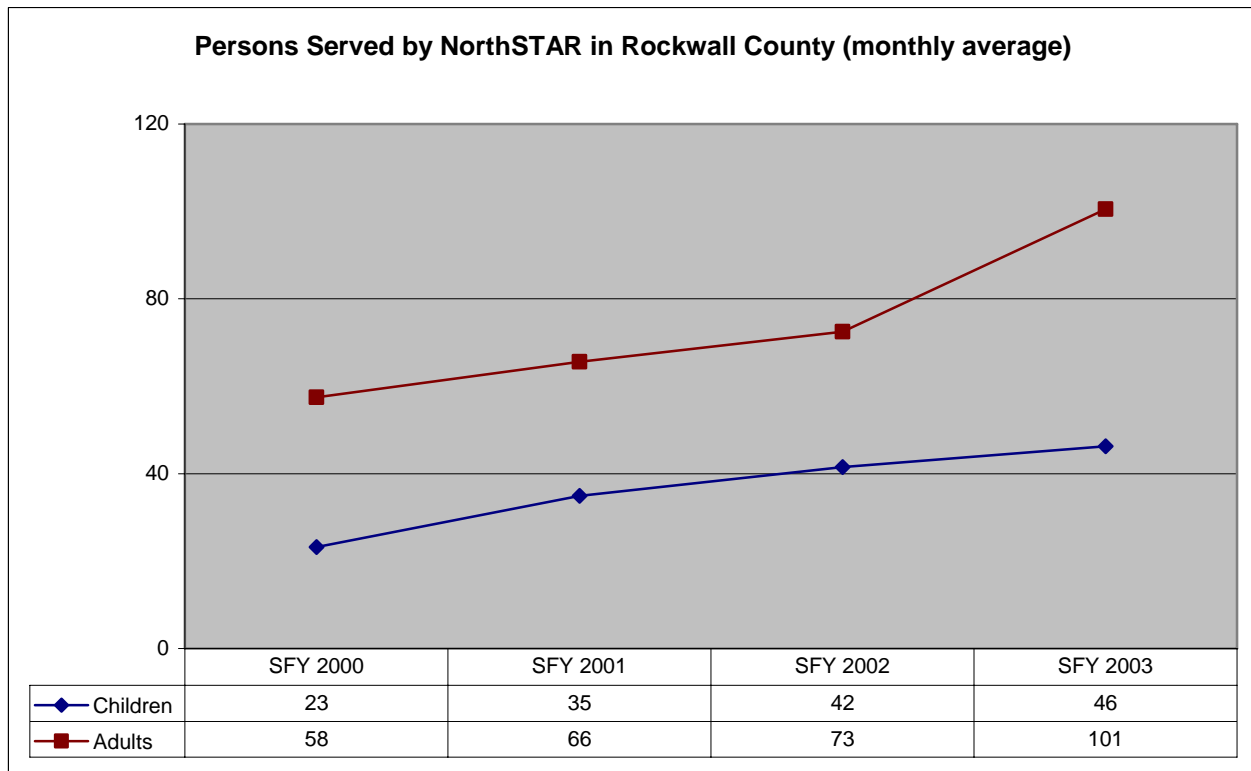
SFY: State Fiscal Year (September 1—August 31)

Mental Health and Counseling - Supporting Data

North STAR Services



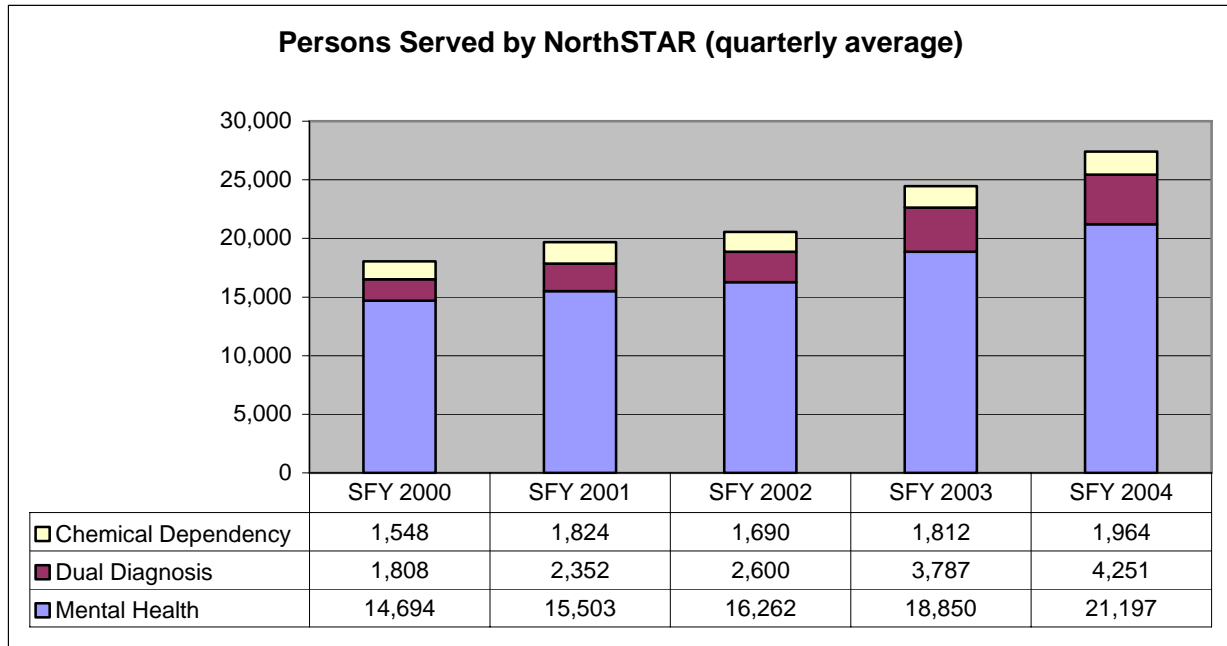
Source: NorthSTAR
 SFY: State Fiscal Year (September 1—August 31)



Source: NorthSTAR
 SFY: State Fiscal Year (September 1—August 31)







Mental Health and Counseling - Supporting Data

North STAR Services








Source: NorthSTAR
 SFY: State Fiscal Year (September 1—August 31)

HEALTH SUBSTANCE ABUSE

INDICATOR	SUMMARY	TREND	CONDITION
Number of adults with alcohol and/or drug addiction	In 2003, an estimated 144,000 or 9% of adults in the UWMD four county service region suffered from drug and/or alcohol addiction. An estimated 72,000 suffered from both addiction and mental illness.	N/A	 Concerned
Number of substance abuse related deaths	The number of substance abuse related deaths in the UWMD four county service region has increased each year since 1999—from 1,570 deaths in 1999 to 1,909 deaths in 2002.	↓ Worsening	 Concerned
Number of alcohol and drug related deaths (ages 18 years and under)	The number of alcohol and drug related deaths among children and adolescents in the UWMD four county service region reached a low point in 1999 at 35 deaths. The average number of deaths during the past three years is 47.	↔ Same or Mixed	 Concerned
Number of alcohol and drug related deaths (ages 18 years and over)	The number of adult deaths has increased each year in the UWMD four county service region since 1999. In 2002 there were 1,909 deaths, compared to 1,570 in 1999.	↓ Worsening	 Concerned
Number of drug offense arrests	The number of arrests declined in the UWMD four county service region from 1998 through 2002, and increased from 10,848 in 2002 to 12,343 in 2003.	↔ Same or Mixed	 Concerned
Number of DWI (driving while intoxicated) arrests	The number of DWI arrests in the UWMD four county service region declined from 1996 to 2002. However, there was an increase from 10,505 in 2002 to 11,356 in 2003.	↔ Same or Mixed	 Concerned

HEALTH SUBSTANCE ABUSE

INDICATOR	SUMMARY	TREND	CONDITION
Number of elementary school students using alcohol, tobacco, inhalants, and marijuana (Grades 4-6) in Texas	For grades 4-6, the use of marijuana has remained fairly consistent, while the use of alcohol and tobacco declined. The use of inhalants has fluctuated since 1990, increasing from 1994 to 1998, and decreasing in 2000 and 2002.	 Improving	 Concerned
Number of middle & high school students using alcohol, tobacco, inhalants, and marijuana (Grades 7-12) in Texas.	For grades 7-12, the use of alcohol has declined, and the use of tobacco has decreased from 1998 through 2002. The use of illicit drugs increased from 1992 to 1996, and remained stable through 2002.	 Same or Mixed	 Concerned
Percent of alcohol consumption among pregnant women.	Among pregnant women, 10.1% reported consuming alcohol while 1.9% reported frequent use (defined as seven or more drinks per week), and 1.9% reported binge drinking (defined as five or more drinks on one occasion).	N/A	 Concerned

Substance Abuse - North Texas Overview

Estimates of the number of adults with alcohol and/or other drug addiction are based on prevalence rates from the Office of the Surgeon General.

Supporting data provided by the Texas Department of State Health Services includes:

- All substance abuse-related deaths
- Drug-related deaths
- Alcohol-related deaths
- Drug offense arrests
- DWI arrests
- The prevalence of substance use among elementary school students
- The prevalence of substance use among middle and high school students
- The percent of women using alcohol/drugs during pregnancy

In the 1999 report, *Mental Health: A Report of the Surgeon General*, it was estimated that approximately 9% have an addictive disorder and one third of this population also have a mental health disorder. (Material related to substance abuse may also be found in the Mental Health section of the Community Assessment.)

Note: In the past, the substance abuse data listed above was obtained from the Texas Commission on Alcohol and Drug Abuse (TCADA). In September, 2004, the Texas Department of State Health Services was created, bringing together the Texas Commission on Alcohol and Drug Abuse, the Texas Department of Health, the mental health services of the Texas Department of Mental Health and Mental Retardation, and the Texas Health Care Information Council.

Regional Trends

- In 2003, an estimated 144,700 adults in the UWMD four county service region were drug and/or alcohol addicted.
- In the UWMD four county service region, the number of substance abuse-related deaths increased for each of the past three years, to more than 1,900 deaths in 2002.
- In the UWMD four county service region, a large majority of substance-related deaths were caused by alcohol. In 2002, youth alcohol related deaths accounted for 41 deaths while adult alcohol related deaths accounted for 1,381 deaths.
- The number of drug offense arrests decreased in the UWMD four county service region from 1998 through 2002, and then increased in 2003.
- The number of DWI arrests in the UWMD four county service region decreased from 1996 through 2002, but then increased in 2003.
- Rates of reported substance use among Texas elementary students (grades 4-6) decreased slightly from 1990 through 2002.
- Rates of reported alcohol use among Texas students (grades 7-12) decreased from 1990 to 2002; rates of other illicit drug use increased.

- In 2002, 10.1% of pregnant women in the United States reported the use of alcohol during pregnancy. In addition, of all women who might become pregnant, 54.9% reported the use of alcohol.
- Approximately 5.1% of the adult Texas population met the criteria for being dependent on alcohol (The National Household Survey on Drug Abuse, 2001).
- In 2001, The National Household Survey on Drug Abuse reported that 1.9 percent of Texans ages 12 and above has used cocaine in the past year.
- According to the Texas Commission on Alcohol and Drug Abuse, the total impact of alcohol and drug abuse cost the state's economy an estimated \$25.9 billion in 2000. Direct and indirect costs of substance abuse include reduced and lost productivity, crime, premature death, law enforcement, health care, property damage, motor vehicle accidents, and social welfare administration.
- Costs related to drug and alcohol related illnesses among drug-exposed infants, such as fetal alcohol syndrome, cost Texas \$405 million in 2000 (Texas Department of State Health Services/Substance Abuse Services).

Substance Abuse

Collin County

- In 2003, there were an estimated 25,000 people addicted to alcohol and/or drugs. Of these people, approximately 12,000 had both an addiction and a mental disorder.
- The number of substance abuse deaths increased from 128 in 1999 to 185 in 2002.
- The number of drug offense arrests increased sharply--from 1,018 in 2002 to 1,441 in 2003
- The number of DWI arrests has increased steadily since 1997--from 625 in 1997 to 1,425 in 2002.

Dallas County

- In 2003, there were an estimated 95,000 people addicted to alcohol and/or drugs. Of these people, approximately 47,000 had both an addiction and a mental disorder.
- Since 1996, Dallas County has the highest rate of deaths from substance abuse among the four counties in the UWMD four county service region.
- The number of drug offense arrests declined from 1998 through 2002, but increased from 8,373 in 2002 to 9,202 in 2003.
- The number of DWI arrests decreased between 1996 and 2002, but increased from 7,594 in 2002 to 8,204 in 2003.

Substance Abuse

Denton County

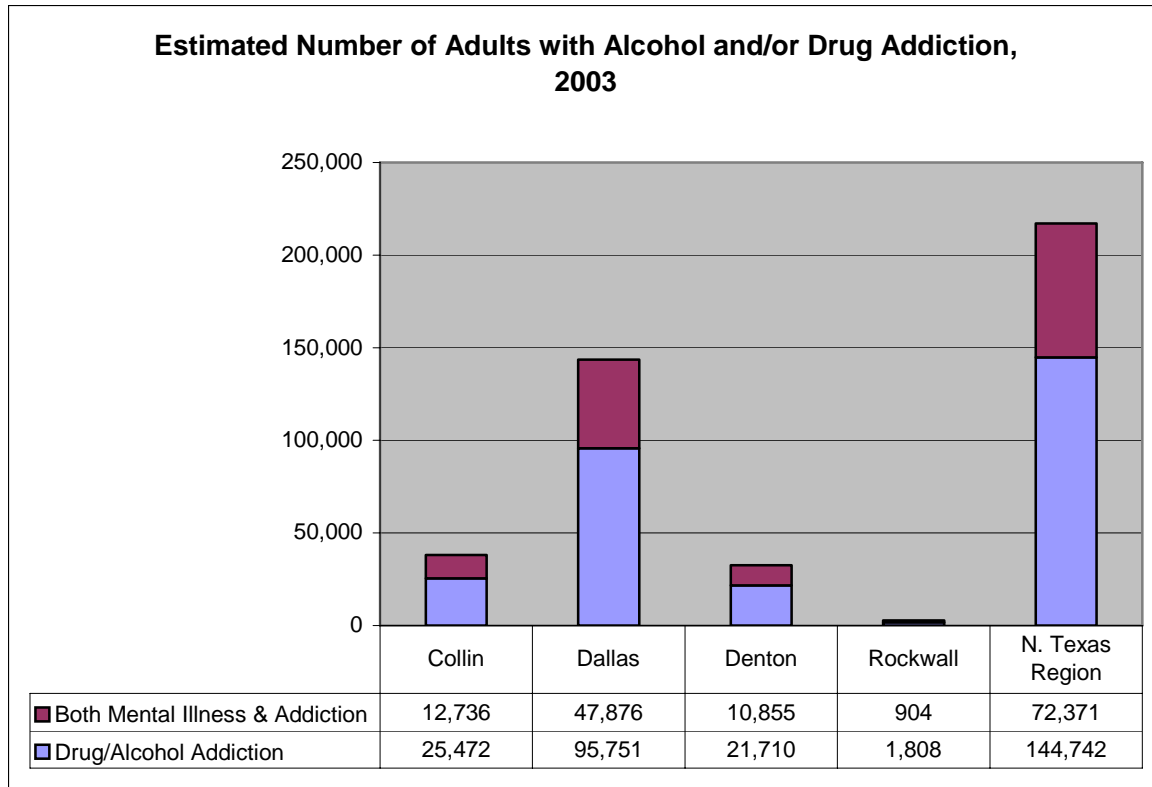
- In 2003, there were an estimated 21,700 people addicted to alcohol and/or drugs, and nearly 10,800 with both addiction and a mental disorder.
- The number of substance abuse deaths increased each year between 1997 and 2002.
- The number of drug offense arrests fluctuated between 800 and 1,300 from 1996 through 2002. There were 1,241 arrests in 2002.
- The number of DWI arrests fluctuated between 1,200 and 1,600 from 1996 through 2002. There were 1,335 arrests in 2002.

Rockwall County

- In 2003, there were an estimated 1,800 people addicted to alcohol and/or drugs, and more than 900 with both addiction and a mental disorder.
- Substance abuse deaths in Rockwall County were stable between 1996 and 2002. There was a relatively large increase from 20 deaths in 2002 to 30 in 2003.
- In 2003, Rockwall County had one of the highest rates of substance abuse deaths in the UWMD four county service region.
- The number of drug offense arrests reached a low of 302 in 2000, but climbed to 459 in 2003.
- The number of DWI arrests reached a high of 513 in 1999, and trended downward to 320 in 2001. The number stood at 392 in 2003.

Substance Abuse - Supporting Data

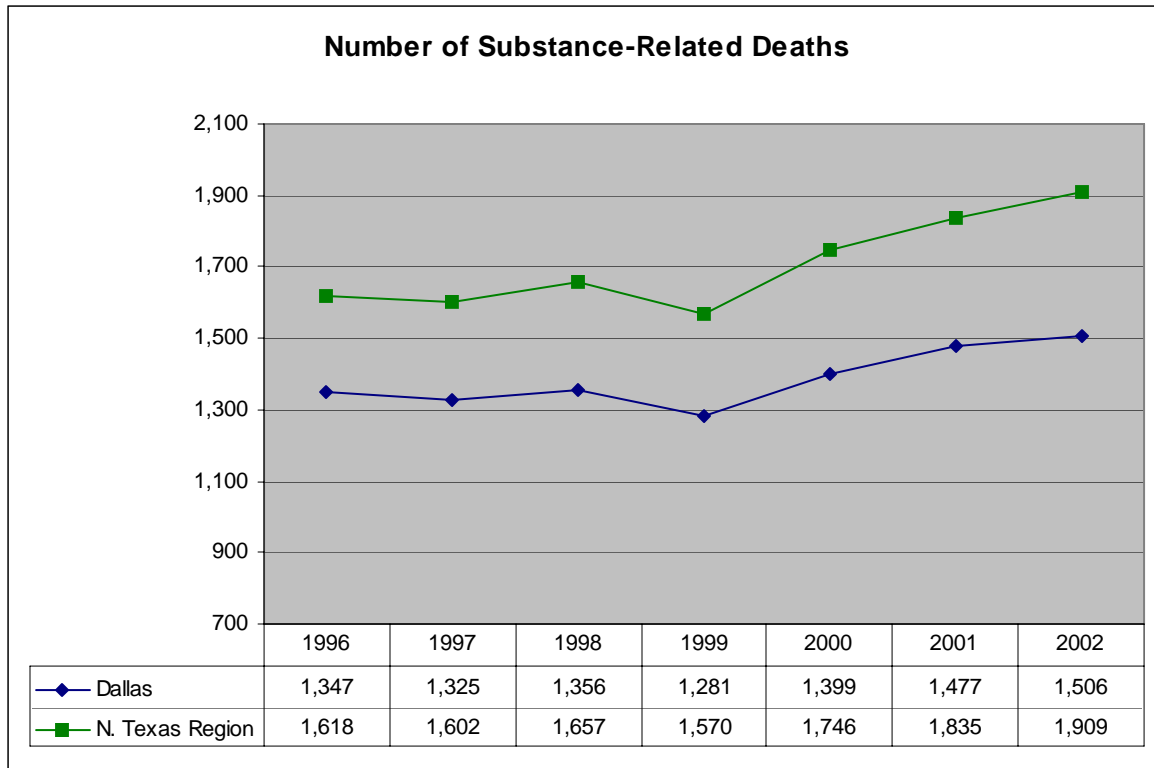
Estimated Number of Adults with Alcohol and/or Drug Addiction



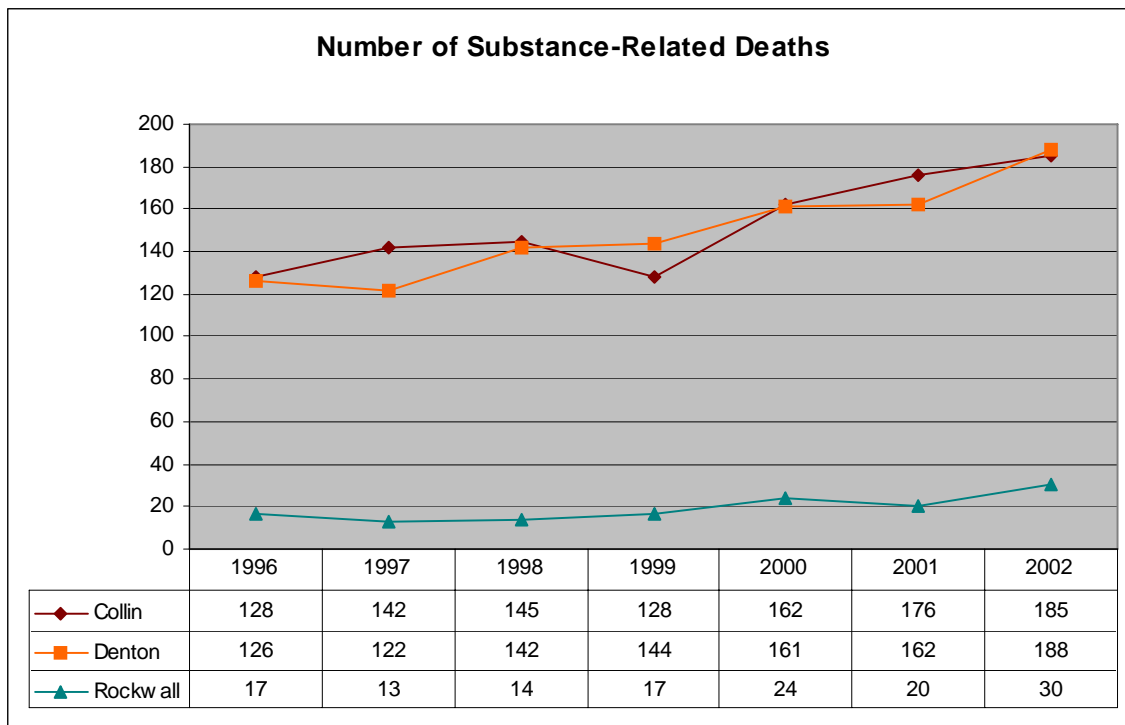
Source: Estimates based on prevalence rates from Office of the Surgeon General; Mental Health: A Report of the Surgeon General, 1999

Substance Abuse - Supporting Data

Substance Abuse Related Deaths

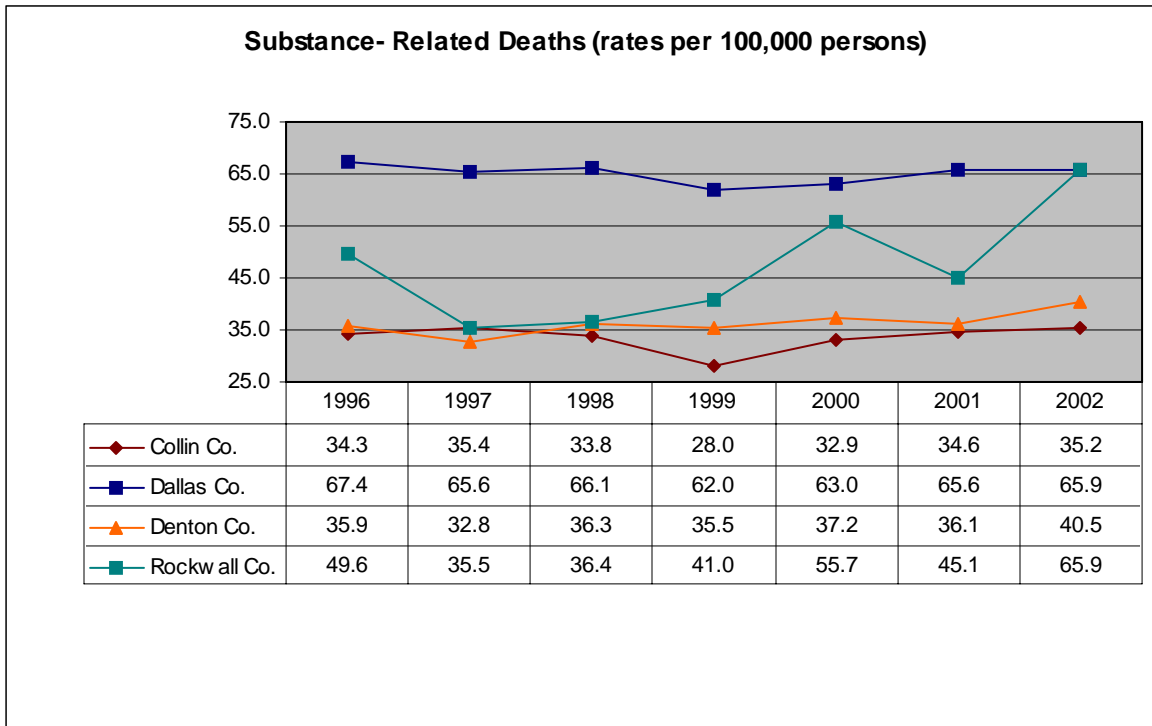


Source: Texas Department of State Health Services



Source: Texas Department of State Health Services

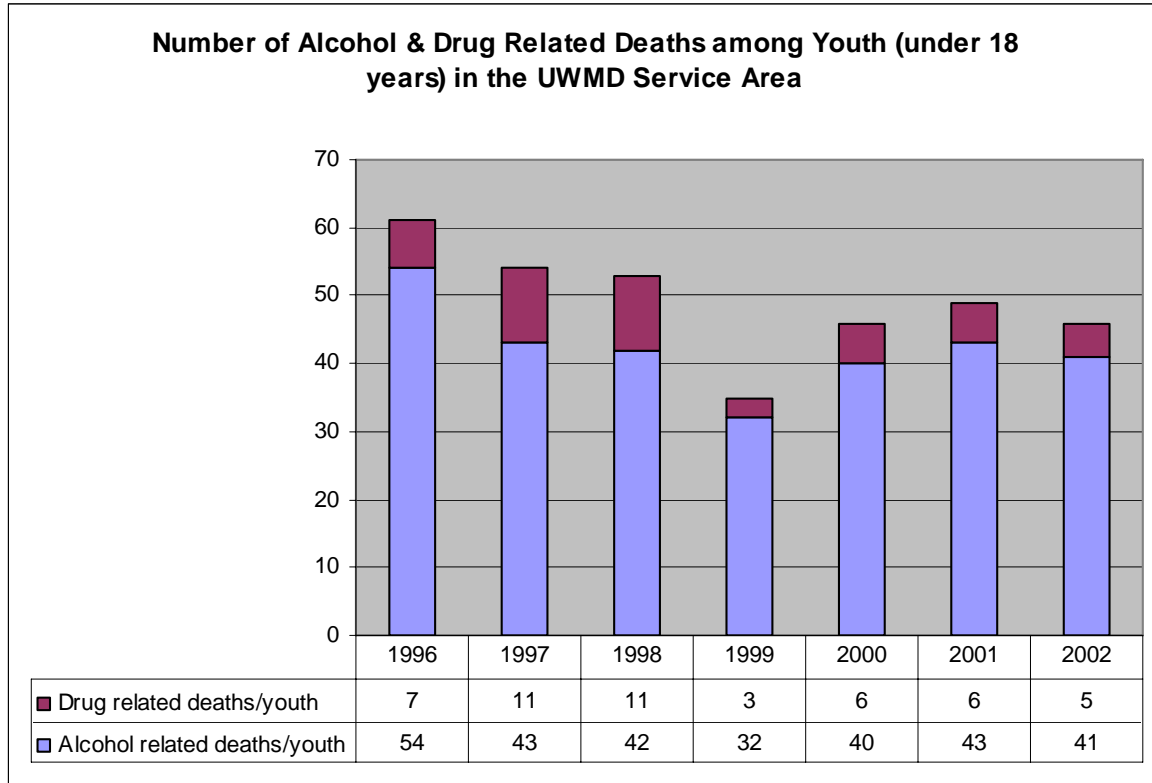
Substance Abuse - Supporting Data



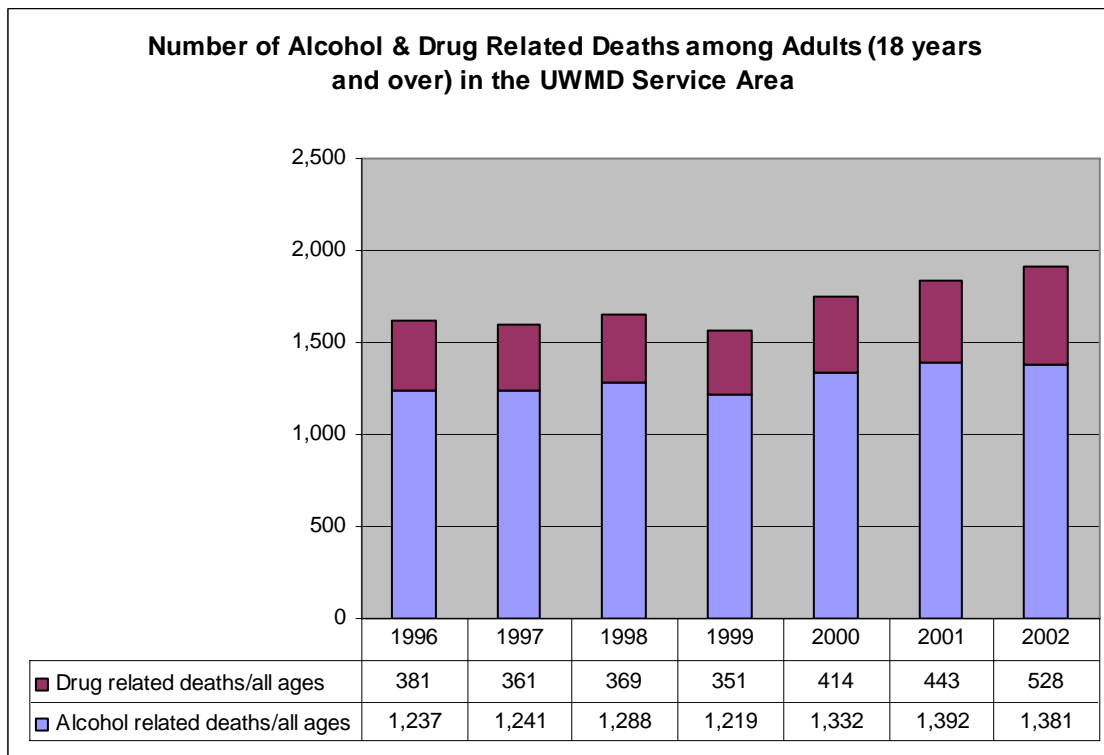
Source: Texas Department of State Health Services

Substance Abuse - Supporting Data

Alcohol and Drug Related Deaths



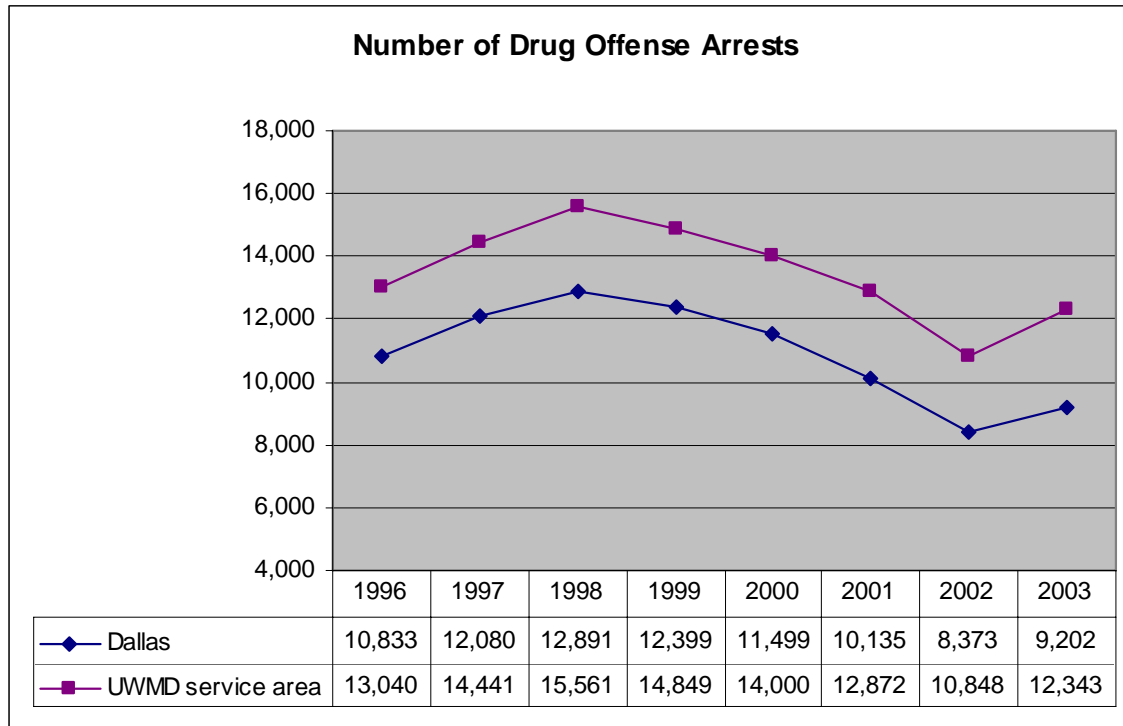
Source: Texas Department of State Health Services, Substance Abuse Services



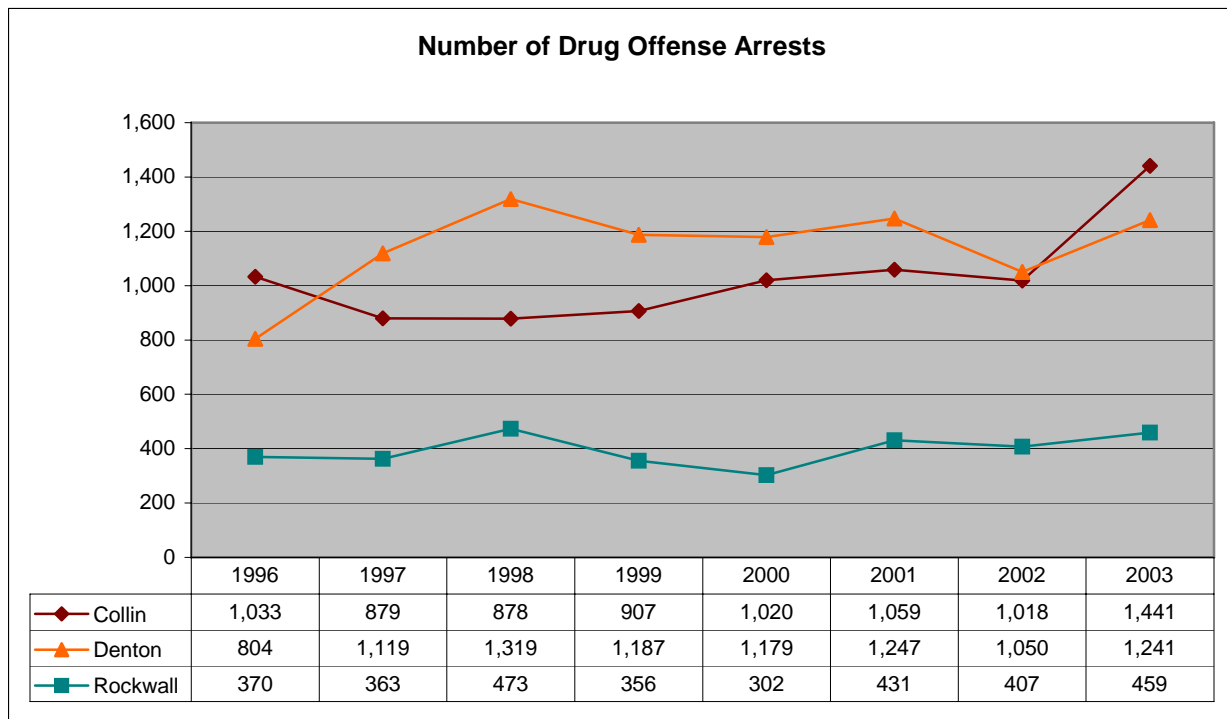
Source: Texas Department of State Health Services, Substance Abuse Services

Substance Abuse - Supporting Data

Drug Offense Arrests



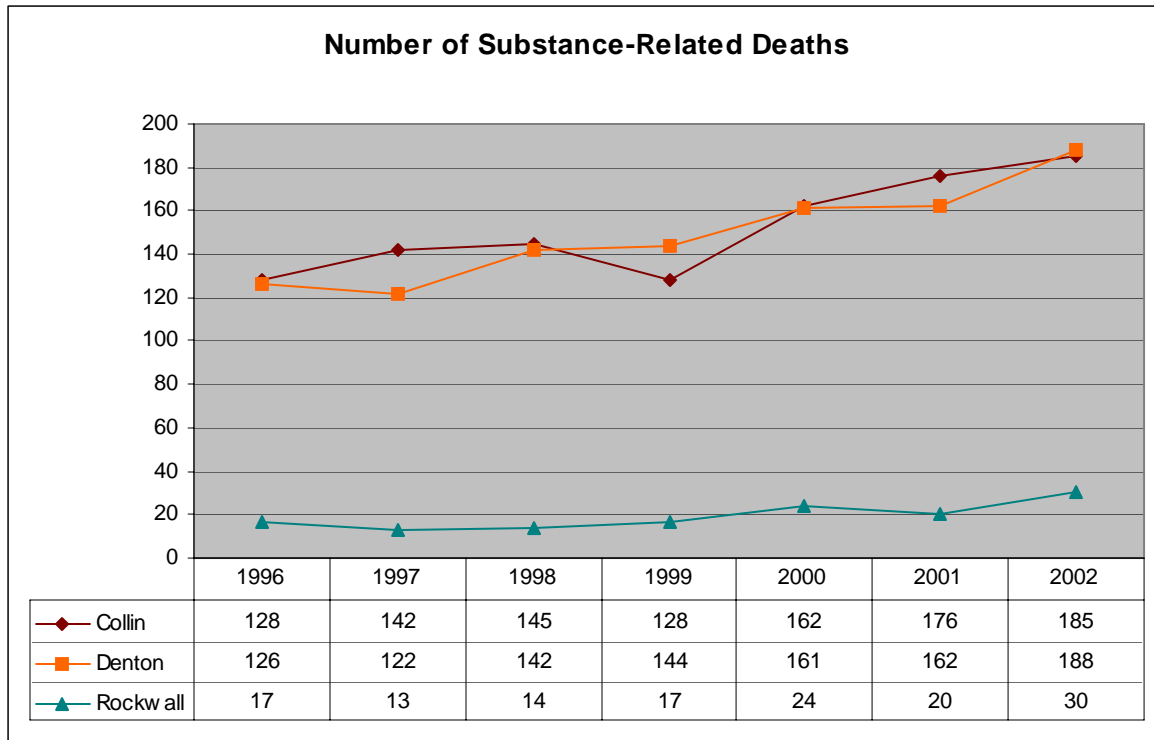
Source: Texas Department of State Health Services, Substance Abuse Services



Source: Texas Department of State Health Services, Substance Abuse Services

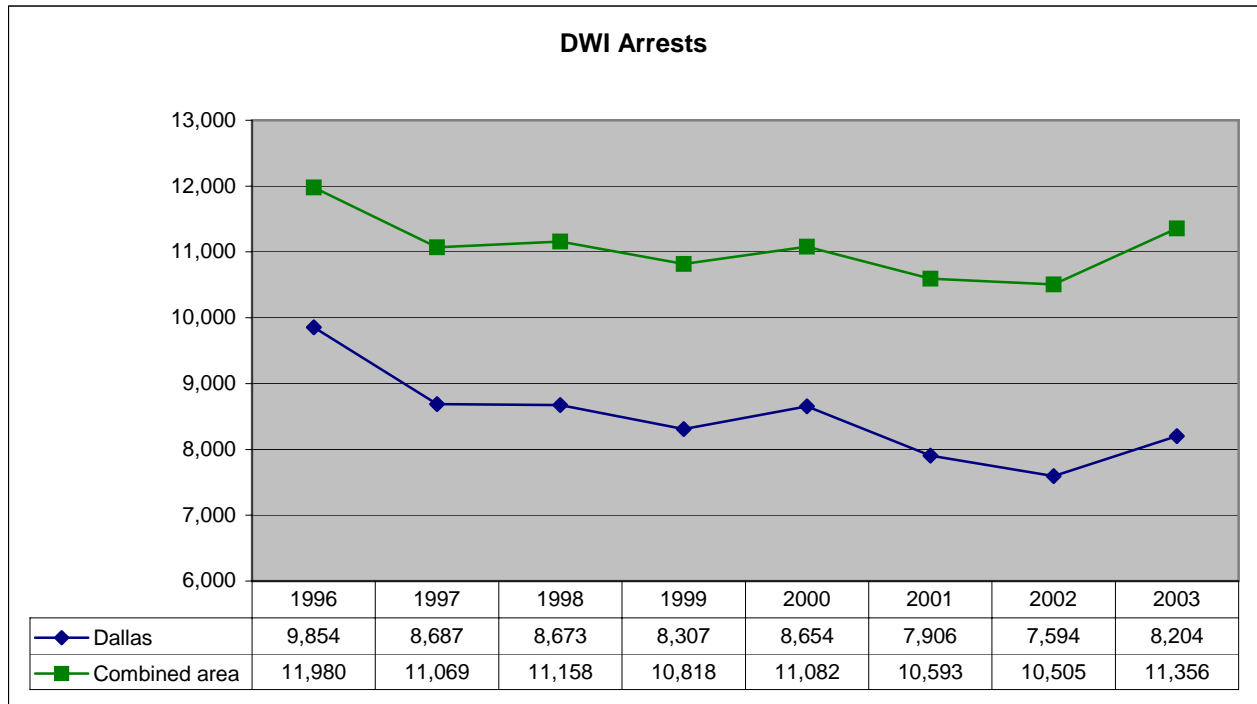
Substance Abuse - Supporting Data

Substance-Related Deaths



Source: Texas Department of State Health Services

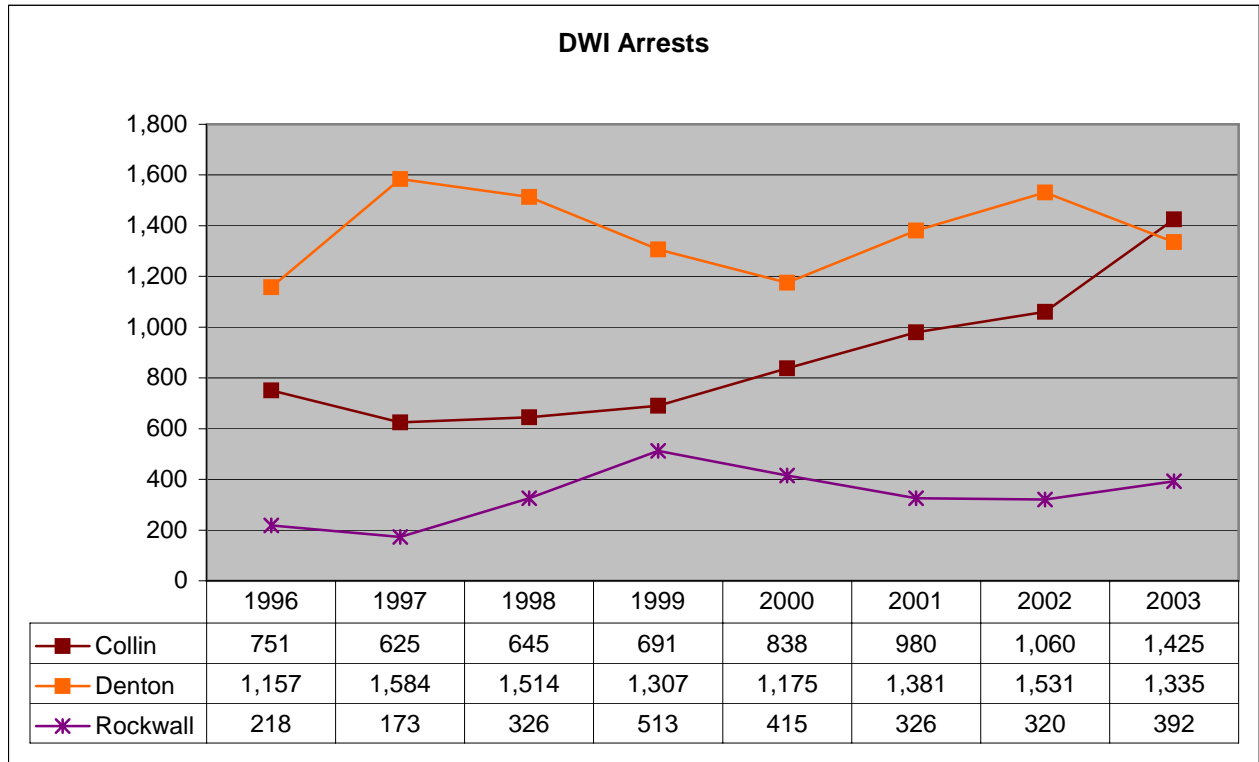
Driving While Intoxicated (DWI) Arrests



Source: Texas Department of State Health Services

Substance Abuse - Supporting Data

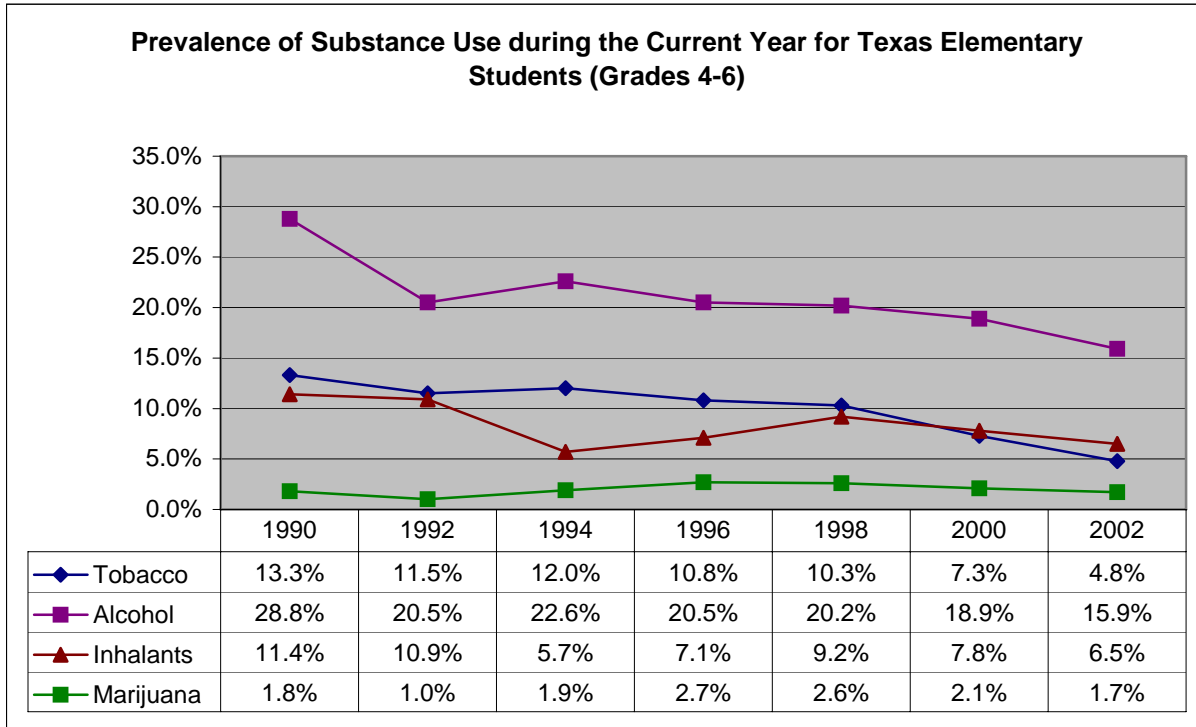
Driving While Intoxicated (DWI) Arrests



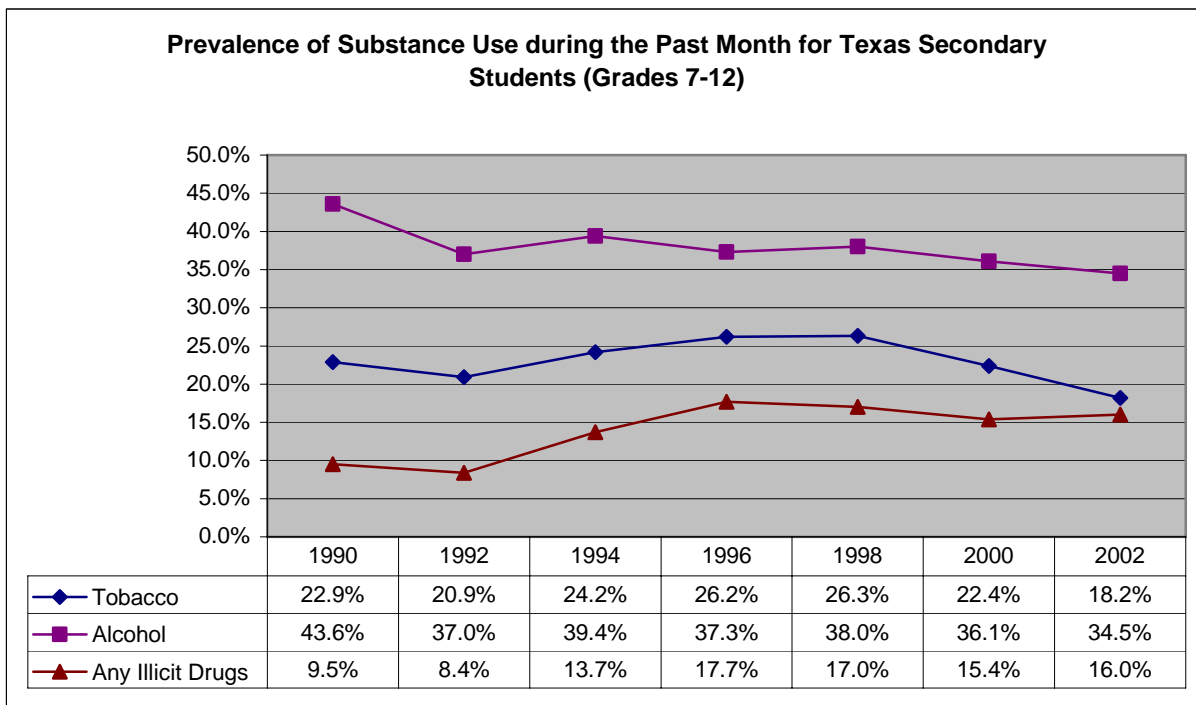
Source: Texas Department of State Health Services, Substance Abuse Services

Substance Abuse - Supporting Data

Substance Abuse Among Youth



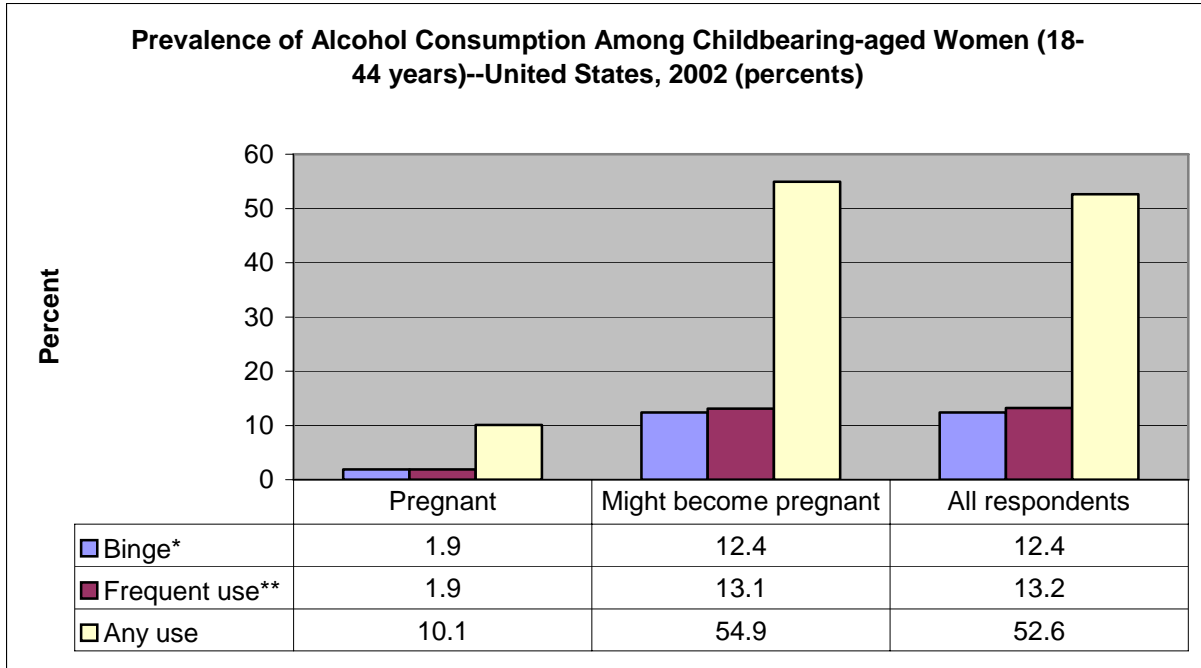
Source: Texas School Survey of Substance Abuse Among Students, 2002



Source: Texas School Survey of Substance Abuse Among Students, 2002

Substance Abuse - Supporting Data

Substance Abuse Among Youth



Source: Center for Disease Control and Prevention