

Estimated Diabetes Prevalence Among New Mexico Adults, 2004¹

	2004 Adult Population ²	Number of Adults with Diabetes	Percentage of Adults with Diabetes
State³	1,426,028	131,195	9.2%
Bernalillo	454,039	43,758	9.6%
Catron	2,990	267	8.9%
Chaves	44,847	4,227	9.4%
Cibola	20,531	2,397	11.7%
Colfax	11,051	1,047	9.5%
Curry	32,327	2,989	9.2%
De Baca	1,812	166	9.2%
Dona Ana	134,593	13,192	9.8%
Eddy	38,000	3,545	9.3%
Grant	23,889	2,267	9.5%
Guadalupe	3,700	375	10.1%
Harding	663	62	9.4%
Hidalgo	4,259	406	9.5%
Lea	40,838	3,831	9.4%
Lincoln	16,494	1,502	9.1%
Los Alamos	14,672	1,298	8.8%
Luna	18,823	1,810	9.6%
McKinley	49,684	6,843	13.8%
Mora	4,164	420	10.1%
Otero	45,904	4,353	9.5%
Quay	7,813	724	9.3%
Rio Arriba	30,704	3,293	10.7%
Roosevelt	13,457	1,241	9.2%
Sandoval	75,220	7,590	10.1%
San Juan	87,316	9,972	11.4%
San Miguel	23,047	2,329	10.1%
Santa Fe	108,762	10,465	9.6%
Sierra	11,129	1,010	9.1%
Socorro	13,680	1,375	10.1%
Taos	24,584	2,449	10.0%
Torrance	13,024	1,219	9.4%
Union	3,201	294	9.2%
Valencia	50,810	4,959	9.8%

¹**County estimate methodology:** The Behavioral Risk Factor Surveillance System (BRFSS), a telephone survey of adults' (age 18 and over) health in New Mexico, was utilized to generate the majority of racial/ethnic-specific diagnosed diabetes prevalence rates for the entire state. County populations by racial/ethnic group were obtained from the University of New Mexico Bureau of Business and Economic Research (BBER), 2004. The BRFSS rates for 2004 were applied to these groups, generating an estimate of the number of non-Hispanic Whites, Hispanics and Others (Asian/Pacific Islanders, non-Hispanic Blacks, and other) with diagnosed diabetes. The numbers were then combined to yield a total estimate of adults in each county with diagnosed diabetes. For those with undiagnosed diabetes, estimates by racial/ethnic group from NHANES III (National Health and Nutrition Examination Survey) were obtained from Harris, MI et al. (1998) and applied to the county populations. The estimated numbers of adults with diagnosed and undiagnosed diabetes were combined for the final estimate. A slightly different methodology was utilized for American Indians. Because of telephone coverage and sample size issues, BRFSS results in imprecise diabetes prevalence estimates in American Indians. Therefore, data from the 2003 Albuquerque Area Indian Health Service Diabetes Audits were aggregated and used to estimate the overall diabetes prevalence (15.5%). This rate was then applied to the American Indian/Alaska Native population in each county.

²**County populations** (from BBER) have been rounded, therefore adding up county populations will not yield the State total population.

³**State estimates methodology:** The BRFSS (2004) was utilized to generate an overall estimate of diagnosed diabetes among New Mexican adults. That is, in 2004, an estimated 6.5% of New Mexican adults indicated they had been diagnosed with diabetes. An estimate for undiagnosed diabetes (from NHANES III data) was obtained from Harris, MI et al. (1998). The estimated number of adults with diagnosed and undiagnosed diabetes were combined for the final estimate and applied to BBER's intercensal state population estimate. Note: adding up the county estimates will not result in the state estimate. However, this difference is small (8%). For the state estimate, there was no initial stratification by race/ethnicity--it was a calculation of those with diabetes (all races) divided by those responding to the question with subsequent "weighting" of results based on New Mexico's race/ethnicity distribution, age, and other factors.