



HEALTH

HEALTH

One of the biggest issues facing our country today is health care. The health care debate is intensely political and uniquely personal. Health is definitely a "women's issue" as women are effected by many health problems as well as often being primary health care providers for friends and families. Women are active on all levels of the issue from providing care, raising funds for specific diseases, and participating in policy debates on how and to whom health care should be provided to the nation. Questions of access to health care, the large number of uninsured people, and prescription drug benefits are debated daily on the front pages of newspapers and in living rooms and boardrooms across the county. Women's bodies become highly politicized battlegrounds in the abortion debate. Assessing and reducing one's health risks in the areas of smoking, obesity, and safe sex are receiving increased attention. Clearly, women's health is a vital issue for examination and action.

ABORTION

Abortion remains one of the most controversial issues of our day. Over the last two years across the state of Texas the number of abortions has remained relatively stable. In 2001, 16.8% of all reported pregnancies among Texas women resulted in induced abortions compared to 16.7% in 2000.

In Harris County in 2001, 18,656 women underwent abortions. Since the first Status of Women and Girls in Greater Houston report, reporting data from 1995, the number of abortions in Harris County decreased by 15.4%. Of those women having abortions in Harris County in 2001, 75.2% were single. Of abortions performed in Harris County, 87.6% were

AGE Women having abortions in Harris County, 2001 ¹	
11 Years or less	2
12-13 years old	23
14-15 years old	132
16-17 years old	519
18-19 years old	1573
20-24 years old	6073
25-29 years old	4972
30-34 years old	3073
35-39 years old	1558
40 years and over years old	529
Not Stated	202

PREVIOUS LIVE BIRTHS Women having abortions in Harris County, 2001 ¹	
NONE	15370
ONE	1504
TWO	1117
THREE	443
FOUR	130
FIVE OR MORE	84
NOT STATED	8

conducted within the first trimester of pregnancy, that is, during the first 12 weeks of pregnancy. Of those women having an abortion, 82.4% had never given birth previously and 52.2% had never had a prior abortion. In 2000, there were 65 abortion providers in Texas, 93% of counties had no abortion provider, and 32% of Texas women live in these counties.³

A glimpse into Harris County residents' opinions on abortion is provided in the annual Houston Area Survey conducted by Dr. Stephen Klineberg of Rice University. "In the 2001 survey, 57% of the respondents said

RACE Women having abortions in Harris County, 2001 ¹	
Asian	951
Hispanic	6148
White	4875
Black	5668
Native American	18
Other	77
Not Stated	919

they personally believed that abortion was morally wrong. At the same time, 63% were opposed to 'a law that would make it more difficult for a woman to obtain an abortion.' A comparable question was asked on seven different occasions between 1988 and 2002. By averages of 56% in agreement and 40% opposed, the survey respondents have consistently endorsed over the years the strong assertion that 'it should be legal for a woman to obtain an abortion if she wants to have one for any reason.'⁴

The Institute for Women's Policy Research (IWPR) compiles The Status of Women in the States (2002-2003) reports to inform citizens about the progress of women in their particular state, relative to women in other states. The scores are stated in report card form in order for readers to easily interpret the state rankings. On the reproductive rights index, Texas was ranked 26 out of 50 states and assigned a grade of C.⁵ This indicator is

calculated using a variety of factors, including whether the state has parental consent or notification, a waiting period, and public funding for abortion; the percent of women living in counties with abortion providers; contraceptive coverage, pro-choice government, if fertility treatments are covered by insurance,

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MARITAL STATUS Women having abortions in Harris County, 2001 ¹	
Married	4260
Single	14034
Not Stated	362

increments), and requires that abortions after 16 weeks be performed at ambulatory surgical centers. In 2001 in Harris County, 576 abortions were performed after 16 weeks and only 8 occurred in ambulatory surgical centers.¹

whether second parent adoptions are permitted, and whether sex education is mandated. Texas's ranking may decrease with the next report as the 2003 Texas Legislature passed, and Governor Perry signed, "The Women's Right to Know Act," which establishes a 24-hour waiting period before women can have an abortion, mandates women undergoing the procedure to learn about fetal growth and development (including color photographs in 2-week gestational

PREVIOUS ABORTIONS Women having abortions in Harris County, 2001 ¹	
NONE	9734
ONE	5667
TWO	2073
THREE	670
FOUR	254
FIVE OR MORE	213
NOT STATED	45

Race/Ethnicity	Percent Having Abortions in Harris County in 200 ¹	Percent of Population by Ethnicity in Harris County in Census 2000 ²
Anglo/White	26.1%	42.0%
Asian	5.1%	5.0%
Black/African American	30.4%	18.2%
Latina/Hispanic	33.0%	33.0%
Other Races and Race Not Stated	5.4%	-----
Total	100%	-----



Data Sources:

- 1 Resident Induced Terminations of Pregnancy for Harris County, 2001, Texas Department of Health.
- 2 U.S. Department of Commerce, Bureau of the Census, Census 2000, SF-3.
- 3 The Allan Guttmacher Institute, State Facts about Abortion: Texas.
- 4 Klineberg, S.L. (2002). Houston's Economic and Demographic Transformations: Findings from the expanded 2002 survey of Houston's ethnic communities. Rice: Houston Area Survey (1982-2002). Rice University, Department of Sociology, Houston, TX: page 20.
- 5 The Status of Women in the States.(2002-03) (4th Ed.). Institute for Women's Policy Research, Washington, DC.

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DRUG/ALCOHOL ABUSE - GIRLS

Juvenile Arrests in Drug Offences, 17 years and younger, Harris County, 2002 ¹	Males	Females
Driving Under the Influence	82	12
Drunkenness	560	80
Drug Abuse Violations		
Possession	2,134	332
Sale/Manufacturing	50	11

during the prior school year and 74% reported using some type of substance during their lifetime.³ Seven percent of all secondary students were

As with the crime data, in each category of drug arrests for juveniles in Harris County the number of boys arrested greatly exceeded the number of girls. Boys comprised 86.4% of all arrests on drug abuse violations compared to 13.6% of girls.

considered heavy drug users, those who used illicit drugs on a daily or weekly basis, as compared to three percent in 1992. Although high enough to warrant concern, use of tobacco and alcohol by secondary students has decreased over the years, while the use of Ecstasy increased sharply in 2002.

To gain a better idea of young girls' drug use, we turn to state surveys of school-aged children in Texas. Since drug use seems to begin earlier than ever, statewide surveys have begun to include older elementary school students. The 2002 survey found that about 20 percent of fourth, fifth, and sixth graders had used tobacco, alcohol, inhalants, and/or marijuana during the past school year.² However, since 1990 substance use among this age group has steadily declined.

The secondary school report also examined gender differences. Girls (71.3%) reported slightly higher rates

Drug Possession Resulting in Arrests for Girls, Harris county, 2002 ¹	Percentage
Marijuana	56.3%
Barbiturates and Benzedrine	19.3%
Opium or Cocaine and their derivatives, morphine, heroin, and codeine	14.2%
Synthetic narcotics, such as Demerol and methadones	10.2%

The report examined gender differences. The researchers found that in all categories substance use by boys exceeded use by girls. Since the survey is conducted annually, trends can be observed. Two disturbing trends with regard to girls were documented. First, as elementary students get older, girls increase their substance use at a faster rate than boys. Second, the gap between boys' and girls' use of alcohol and marijuana is narrowing over time.

of lifetime alcohol use than boys (70.6%), although boys were more likely to be current drinkers. Boys were almost two times more likely than girls to have used steroids or hallucinogens in their lifetime, while girls exceeded boys in reporting lifetime and current use of uppers, Ecstasy, and heroin. While boys had a higher prevalence for the use of most illicit drugs than girls, drug use among girls increased faster than use by boys from 1992 to 2002.

The surveys also include students in grades seven through twelve. The 2002 survey found that 53% of Texas secondary students used tobacco, alcohol, inhalants, steroids, or illicit drugs

Gender Differences in Drug Use, Grades 4-6, Texas, 2002 ²	Boys	Girls
Tobacco use within the year	5.6%	3.9%
Alcohol use within the year	17.4%	14.5%
Inhalant use within the year	7.4%	5.6%
Marijuana use within the year	2.2%	1.3%

Data Sources:

1 DPS Crime Data, Age, Sex, Race and Ethnicity of Persons Arrested 17 years of age and under, beginning January 2002 and ending December 2002 for Harris County.

2 Liu, Liang. (2002). Texas School Survey of Substance Use Among Students: Grades 4-6, 2002. Texas Commission on Alcohol and Drug Abuse. Austin, TX.

3 Liu, L. Y. (2002). Texas School Survey of Substance Use Among Students: Grades 7-12, 2002. Texas Commission on Alcohol and Drug Abuse. Austin, TX.

DRUG/ALCOHOL USE – WOMEN

Drug and Alcohol Arrests by Gender, 18 years and older, Harris County, 2002 ¹	Males	Females
Sale and Manufacturing	95	15
Possession	14,319	2,945
Driving under the Influence	7,774	1,287
Drunkenness	20,121	2,346
Liquor Laws	1,883	191

The number of adult arrests for drug abuse violations in Harris County in 2002 was 17,374, 83% (14,414) were men and 17% (2,960) were women. (NOTE: These numbers represent drug arrests, which does not include the classification of alcohol as a drug). Less than one in six drug abuse arrests involved women. In descending order, the drugs most frequently associated with arrests for women were opium or cocaine and their derivatives, morphine, heroin, and codeine (58.1%); marijuana (20.2%); dangerous non-narcotic drugs such as barbiturates and Benzedrine (19.2%); and synthetic narcotics that can cause addiction like Demerol and methadone.

Another glimpse into the drug use/abuse patterns of women in Harris County is gained by looking at the characteristics of women who obtained treatment for substance abuse problems in Harris County, although the data include only those treatment facilities funded by the Texas Commission on Alcohol and Drug Abuse (TCADA). One-third of the admissions to TCADA-funded facilities in Harris County were women. According to these data, 3,295 women were admitted into treatment facilities funded by the TCADA in 2002. This number represents a 13% decrease since the 1995 data presented in the first edition of this report published in 1997. The decrease in treatment numbers is perplexing since the number of arrests for women on drug violations over this same time

Primary Drug by Gender in TCADA-Funded Facilities in Harris County, 2002 ²	Men	Women
Alcohol	2,480	902
Amphetamines/Methamphetamines	57	71
Barbiturates	9	5
Cocaine (powder)	364	259
Crack	1,699	1,069
Ecstasy	28	15
Hallucinogens	17	6
Heroin	528	194
Inhalants	24	9
Marijuana	1,277	429
Methadone (non-prescribed)	6	6
Other opiates	246	227
Other Sedatives	20	26
Other	14	11
Over-the-counter drugs	6	3
PCP	61	39
Rohypnol	1	1
Tranquilizers	17	23

period increased by 58.5%. Of those women admitted for treatment, 43.6% were Black, 39.6% were Anglo, 15.4% were Hispanic, 0.5% were American Indian or Alaskan, 0.4% were Asian, and another 0.5% were defined as another race/ethnicity. A surprising finding, perhaps, is the age of the women who were admitted for treatment. The highest percentages of women fell in the 40 to 44 year range (19.9%) followed by the 35 to 39 year range (17.5%). These figures indicate clearly that drug use is not merely about teenage experimentation, but rather life-

Age of Women Upon Admission for Drug/Alcohol Treatment to a TCADA-Funded Facility in Harris County, 2002 ²	Numbers
Under 20 years	332
20 to 24 years	382
25 to 29 years	385
30 to 34 years	464
35 to 39 years	577
40 to 44 years	655
45 to 49 years	335
50 to 54 years	110
55 to 59 years	36
60 to 64 years	16
65 to 69 years	2
70 years and older	1

long use and addiction. Although no data are available, it can be surmised that many of these women are also mothers. And while the effect of their drug use on their children and the caregivers of their children is not documented here, it should be acknowledged.

For those women admitted for treatment in TCADA-funded facilities in Harris County, cocaine in both powder and crack form is the number one primary drug used (40.3%) followed by alcohol (21.4%), and marijuana (13%). Together, these three drugs account for 80% of primary drug use. Crack cocaine is the primary illicit drug abused by adult clients admitted to publicly-funded treatment programs throughout Texas.³ Reports on drug use note that an ounce of crack cocaine costs \$375-\$900 in Houston while an ounce of powder cocaine costs \$450-\$800.³ Across the state the number of African American admissions for crack cocaine has declined while admissions for Anglos and Hispanics are on the rise. Additionally, the study found that powder cocaine inhalers tend to be Hispanic while Anglos tend to be injectors.³

Data Sources:

1 Age, Sex, Race, and Ethnicity of Persons Arrested 18 years of Age and Over, 2002, Harris County, Prepared by Statistician Lori Kirk, Uniform Crime Reporting, Department of Public Safety, Austin, TX.

2 Characteristics of Women Admitted to Texas Commission on Alcohol and Drug Abuse-funded Facilities in Harris County in 2002. Austin, TX.

3 Substance Abuse Trends in Texas: December 2002. The Gulf Coast Addiction Technology Transfer Center, The Center for Social Work Research, The University of Texas at Austin, Austin, TX.

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HEALTH RISK FACTORS

Weight Classification Based on Body Mass Index, Females 18 years and older, Harris County, 2002 ¹	Percentage of Women who are Overweight (BMI between 25 and 30)	Percentage of Women who are Obese (BMI greater than 30)	Percentage of women who are Overweight and Obese (BMI greater than 25)
Females	30%	21%	52%

Although there are many health statistics that can be reported for both the state of Texas and our local area, many of them concern current health problems rather than health risks. Data on health problems, like the incidence of cancer, are often easier to obtain than data on health risks and actual behaviors. To correct this problem and assist in planning better prevention strategies as well as treatment programs, in 1984 the Centers for Disease Control and Prevention (CDC) developed the Behavior Risk Factor Surveillance System (BRFSS). This telephone survey was developed and conducted to monitor state-level prevalence of the major behavioral risks among adults associated with premature disease and death on a state level. Rather than collecting information on attitudes or knowledge, the survey asks specifically about behavior. A special compilation of the data was prepared for this report and the numbers include the responses for women (age 18 and older) in Harris County and the Houston-Baytown-Sugar Land Metropolitan Statistical Area. Several of the indicators at the state level were reported in order to examine differences among women of diverse races/ethnicities.

Have you ever had a mammogram? Texas, 2000, Women's Health ²	Percent Responding "No"
White	34.3%
Black	42.6%
Hispanic	50.3%
Other	49.8%

Have you ever had a pap smear? Texas, 2000, Women's Health ²	Percent Responding "No"
White	3.8%
Black	7.5%
Hispanic	12.5%
Other	17.8%

Current Smoking, Harris County, 2002 ¹	Percent
Females	19%

Weight Control: Are you now trying to lose weight? Harris County, 2002 ¹	Percent Responding "Yes"
Female	52%

Alcohol Consumption: Acute Alcohol Use, (5 or more drinks on one or more occasions) Harris County, 2002 ¹	Percent
Female	7%

Have Participated in Physical Activity during past month ¹	Percent Responding "Yes"
Females	67%

Could not get Medical Care, Females, Harris County, 2002 ¹	Percent
Female	13%

No Health Insurance Texas Harris, Females, 2002 ¹	Percent
Female	34%

Data Sources:

¹ Selected Health Risk Factors for Harris County and Texas, BRFSS 2002, Women Ages 18 and Older, Prepared by the Community Assessment Team, Center for Health Statistics, Texas Department of Health, 9/29/03.

² CDC, National Center for Chronic Disease Prevention & Health Promotion, Behavioral Risk Factor Surveillance System, Texas, 2001.

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HIV/AIDS

Nearly one-third (32.4%) of new HIV cases reported in Harris County was among women, with two-thirds (67.6%) of cases reported among men. Three-quarters (75.1%) of the cases reported among women were

primary partners. Of the respondents, 14% traded sex for drugs or money and of those only four stated they had used a condom during their last sexual experience. In the survey, 35% of women reported that they did not always

Race/Ethnicity of Females with new HIV Cases Reported in Harris County, 2002 ¹	Number	Percentage
White	48	12.2%
African American	295	75.1%
Hispanic	46	11.7%
Asian-Pacific Islander	4	1.0%
American Indian, Alaskan, plus Not Specified	0	0%
Total	393	100%

have the power to control their sexual experience if their partners refused to use a barrier. Women with less education and those who were unemployed reported a higher number of risk behaviors. The study cited other research conducted in Houston that found African American women were often

reported in African American women. Although a diagnosis of HIV can occur across a women's life span, the decades of the twenties and thirties are times when women are especially at risk. The majority (54.5%) of female HIV cases were acquired through heterosexual contact in contrast to the majority of male cases (58.9%), which were acquired through male-to-male contact.

unaware of their HIV exposure risk and had used risk reduction practices based on inaccurate information. The study recommends prevention trainings that address empowerment issues as well as risk reduction and knowledge components.

The Houston area comprised nearly one-third of the total number of AIDS cases in the state of Texas.² Although the total number of cases in the Houston metropolitan area has dropped steadily since 1996, the proportion of cases within the African American and Hispanic communities has continued to rise. The proportion of male-to-male transmission has also steadily decreased while the proportion of heterosexual transmission has increased.

A survey was also conducted with another special population: lesbian women.⁴

The majority of women participating in the study had only one sexual partner in the preceding three months and most considered their partner a primary partner. Eighteen percent of the women reported having sex with a male in

Mode of Exposure, Female HIV, Harris County, 2002 ¹	Number of Women	Percentage of Women
Injection Drug Use	61	15.5%
Heterosexual Contact	214	54.5%
Not Classified	111	28.2%
Pediatric Parent at Risk	6	1.5%
Pediatric Other Undetermined	1	0.3%

A survey was conducted with a convenience sample of African American women to assess their risk factors for acquiring HIV, and findings shed important light on issues of education and prevention.³ The study found that a substantial number of respondents (60%) never or inconsistently used a condom with both primary and non-

the past twelve months and 30 percent reported drug use, two or more substances, within the preceding three months. The strongest predictors of increased risk for acquiring HIV infection were sex with males and the greater number of drugs used. The researchers conclude that it is important to assess sexual behavior rather than make assumptions about behavior based on self-reported sexual identity.

Age of HIV diagnosis, Females in Harris County, 2002 ²	Number of Women
0-12	7
13-19	43
20-24	76
25-29	81
30-34	73
35-39	40
40-44	31
45-59	27
50-54	8
55+	7

A study by University of Houston Professor Faith Foreman revealed patterns of "condom negotiation" among women.⁵ She found a "sexual hierarchy" guides women's safe-sex practices. In long-term relationships or with someone with whom they desired a long-term relationship, women were reluctant to raise the issues of condoms because such discussions were seen as introducing an element of distrust and distance to the relationship. On the other

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hand, women were more likely to negotiate condom use with casual partners. Dr. Foreman noted that women often make dangerous compromises, which she attributed to women's socialization as "people pleasers" and their conditioning to make romantic relationships a priority.

Cumulative Cases In Harris County ¹	HIV	AIDS
Males	2,770 (64.7%)	17,367 (86.2%)
Females	1,509 (35.3%)	2,772 (13.8%)
Total	4,279 (100%)	20,139 (100%)

Data Sources:

1 Harris County, HIV/AIDS Statistics, Texas Department of Health, compiled by John Osborn, HIV Services Epidemiologist.

2 Houston Area 2002 Epidemiological Profile, Texas Department of Health, Austin, TX.

3 HIV/STD Needs Assessment for African American Women. Joint project of The Lesbian Women Health Initiative and the Office of Community Projects, Graduate School of Social Work, University of Houston. January, 2003. Houston, TX.

4 HIV/STD Needs Assessment for Women Who Have Sex with Women. Joint project of The Lesbian Women Health Initiative and the Office of Community Projects, Graduate School of Social Work, University of Houston. January, 2003. Houston, TX.

5 Hopper, L. (December 2, 2003). More black women now HIV-positive. Houston Chronicle, pp. 23A, 30A.

ILLNESS AND DEATH

Suicide Deaths, 2001 ⁴	Male	Female
Houston City	378	98
Harris County	510	144

The Institute for Women's Policy Research (IWPR) compiles a report that ranks the states with four indices in order to both document and compare women's progress across the county.⁵ On the "Health and Well-Being" indicator, Texas ranked 37 out of 50 states, earning a C-. The indicator is composed of a variety of indices including heart, lung, and breast cancer mortality rates; incidence of diabetes, chlamydia, and AIDS; and mental health self-reports by women, suicide mortality, and limits on daily activities.

Heart disease is the most common cause of death among men and women across the state of Texas, with cancer being the second leading cause of death among Texans.⁶ The Texas Cancer Mortality report finds a decline in total cancer mortality rates, although some particular sites showed increasing mortality rates. In Harris County, from 1996 to 2000, there were 10,569 female deaths due to cancer.

There are racial/ethnic and gender differences in cancer deaths.⁶ While lung cancer mortality in males is decreasing, female lung cancer is significantly increasing. Males generally have a higher mortality rates for all cancer types common to both genders. African American

females have a 1.4 times higher mortality rate for breast cancer compared to non-Hispanic white females. Hispanic females have a significantly lower total cancer mortality rates compared with non-Hispanic white females, except for stomach, liver, and cervical cancers.

Female Cancer Deaths by Top Ten Sites, Harris County, 2001 ³	Numbers
Lung and Bronchus	530
Breast	398
Colon and Rectum	205
Pancreas	129
Ovary	94
Leukemia	89
Non-Hodgkin Lymphoma	77
Cervix/Uterus	64
Brain and other Nervous System	55
Multiple Myeloma	53

Five Leading Causes of Death by Age of Females in Texas, 2001 ²	Age Group			
	Ages 1-14	Ages 25-34	Ages 55-64	75+
First	Accidents	Accidents	Cancer	Heart Disease
Second	Cancer	Cancer	Heart Disease	Cancer
Third	Homicide	Heart Disease	Diabetes	Stroke
Fourth	Congenital Anomalies	Homicide	Chronic Respiratory Disease	Chronic Respiratory Disease
Fifth	Heart Disease	Suicide	Stroke	Alzheimer's

Data Sources:

1 Selected Health Risk Factors for Harris County and Texas, BRFSS 2002, Women Ages 18 and Older, Prepared by the Community Assessment Team, Center for Health Statistics, Texas Department of Health, 9/29/03.

2 Texas Vital Statistics, 2001. Texas Department of Health, Statistical Services Division, Bureau of Vital Statistics, Austin, TX.

3 Female Cancer Deaths by Top Ten Sites, Harris County, Texas, 2001, Bureau of Vital Statistics, Department of Health, Austin, TX.

4 Bureau of Vital Statistics, Texas Health Department, Austin, TX. Note: City of Houston is located in three different counties.

5 The Status of Women in the States.(2002-03) (4th Ed.). Institute for Women's Policy Research, Washington, DC.

6 Texas Cancer Mortality, Statistics 2000. Texas Department of Health, Texas Cancer Registry, March 2003.

General Health is Fair or Poor, Females, Harris County, 2002 ¹	Percent
Females	21%

Are Diabetic, Females, Harris County, 2002 ¹	Percent
Females	6%

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MENTAL HEALTH

Almost half a million adults in Harris County have some type of mental illness. The most common mental illness is a phobia and the least common is schizophrenia. State law requires that priority populations for adults with mental illness be identified and that state dollars be used only for services provided to persons within the priority populations. Adults identified are those with severe and persistent mental illnesses such as schizophrenia, major depression, bipolar disorder, and other severely disabling mental disorders that require crisis resolution or ongoing and long-term support and treatment.¹

Texas ranks 42nd among states in per capita expenditures for mental health services, and 42nd in the nation in per capita mental retardation expenditures.⁴ There are an estimated 15,800 people in Harris County with IQ scores of 70 or below with adaptive behavior delays who are classified as mentally retarded. The Mental Retardation Division of MHMRA serves more than 6,500 clients.

The Mental Health Association of Houston has identified three critical issues in the mental health arena today: stigma, lack of accessibility to services due to discriminatory practices in insurance coverage, and housing shortages for adults with mental illness⁵. Additionally, one of the Association's priority initiatives is postpartum depression. Due

Estimated Adults with Mental Illness, Harris County, 2001-2005 Priority Population Data ¹	Numbers
Schizophrenia	22,149
Major Depression	66,448
Bipolar Disorder	14,766
Anxiety	39,377
Lifetime Dysthymia (Chronically Depressed Mood)	51,682
Phobia	179,656
Other Impairment	172,273
Total	483,335

to the extensive and worldwide media coverage of Andrea Yates, the Clear Lake woman who drowned her five young children in the bathtub, attention has increasingly focused on this illness in particular, as well as mental illness in general. According to the Association, 80% of all women will suffer from the "baby blues," one in ten will experience postpartum depression, and one to three in 500 - 1,000 women will experience postpartum psychosis.⁵

2001-2005 Mental Retardation Priority Population Data for Harris County²

	Mild	Moderate	Severe/Profound	Total
Total Population with Mental Retardation	84,319	10,857	3,616	98,792
Total TDMHMR Priority Population	8,432	2,714	3,616	14,759

Harris County Population Who Accessed Mental Health Services from Harris County MHMR Center in 2003³

Primary Diagnosis	Female Number	Female Percent	Male Number	Male Percent
Bipolar	2,263	21.3%	1,560	12.1%
Major Depression	3,131	29.4%	1,787	13.8%
Schizophrenia	2,045	19.2%	2,839	22.0%
Mental Retardation	938	8.8%	1,290	10.0%
Other	2,240	21.0%	5,391	41.8%
Total	10,617	100%	12,867	100%

Data Sources:

1 2001-2005 Adult Mental Health Prevalence/Priority Population Data, February 2003, Texas Department of Mental Health and Mental Retardation. Austin, TX.

2 2001-2005 Mental Retardation Prevalence/Priority Population Data, February 2003, Texas Department of Mental Health and Mental Retardation. Austin, TX.

3 Harris County MHMR Center FY 2003 Population Served. Note: This data should not be considered representative of the prevalence of a specific diagnosis for a gender group and the numbers for mental retardation do not reflect the total number of individuals with mental retardation served by Harris County MHMR center, but rather those persons with the diagnosis of mental retardation who accessed mental health services.

4 Frequently Asked Questions. Texas Department of Mental Health and Mental Retardation.

<http://www.mhmr.state.tx.us/frequentlyaskedquestions/prioritypopulation.html>.

5 The Mental Health Association of Greater Houston, www.mhahouston.org.

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PREGNANCY

Almost 174 babies are born each day in Harris County. Of those babies, one half are born to Latina mothers. Looking at trends over time in Harris County the good news is that both the infant mortality rate and teen-age pregnancy rate are decreasing. Unfortunately, the percentage of low birth weight babies has very slightly increased and almost half of all unmarried mothers did not complete high school.

In several categories presented, the statistics under consideration vary greatly by the race or ethnicity of the mother. For instance, women of color are more likely to be teen mothers and have low birth weight babies, and they are less likely to have early prenatal care. Clearly, pregnancy and pre-natal services for women should take race/ethnicity into account to more appropriately target intervention efforts.

Harris County Vital Statistics, 2001 ¹	Number of Births in Harris County, 2001	Percentage of Births, Harris County, 2001
White Males	9,053	14.3%
White Females	8,564	13.5%
Black Males	5,772	9.1%
Black Females	5,423	8.6%
Latinos	15,891	25.1%
Latinas	15,267	24.1%
Other Males	1,774	2.8%
Other Females	1,667	2.6%
Total	63,411	100%

Harris County Vital Statistics, 2001 ¹	Number of Births in Harris County, 2001	Percentage of Births, Harris County, 2001
Total Males	32,490	51.2%
Total Females	30,921	48.8%
Total	63,411	100%

Low Birth Weight (<2500 grams) Infants, Harris County, 2001 ¹	Number	Percent
Total Number	4,743	7.5% of all births in the county
White	1,469	7.0% of all white births
Black	1,398	12.5% of all black births
Hispanic	1,876	6.0% of all Hispanic births

Births to Mothers 17 years of age and younger, 2001, Harris County ¹	Number	Percent
Total	2,977	4.7% (of total births in the county)
White	406	1.9% (of all white births)
Black	696	6.2% (of all black births)
Hispanic	1,875	6.0% (of all Hispanic births)

Onset of Prenatal Care within First Trimester, Harris County, 2001 ¹	Number	Percentage
Total	49,366	81.0%
White	18,189	89.4%
Black	8,406	78.7%
Hispanic	22,771	76.2%

Educational Status of Unmarried Mothers in Harris County, 2001 ¹	Number	Percent
Less than 12 years of education	9,587	47.6%
12 years or more of education	9,883	49.0%
Unknown Educational Level	688	3.4%
Total	20,158	100%

Unmarried Mothers, Harris County, 2001 ¹	Numbers	Percent
Total Unmarried Mothers	20,158	31.8% of all live births in Harris County

Trends In Harris County ¹	1995	2001	Percent Change
Infant Mortality Rate	6.3	5.4%	-0.9%
Teenage Pregnancy	6.1%	4.7%	-1.4%
Low Birth Weight	7.3%	7.5%	+0.2%
Onset of Prenatal Care in the First Trimester	81.1%	81.0%	-0.1%

Data Sources:

1 Texas Vital Statistics, 2001. Texas Department of Health, Bureau of Vital Statistics, Austin, TX.

HEALTH

STRESS

The United Way conducts an annual survey, the Community Assessment, that addresses community concerns in order to shape funding priorities. The study randomly surveyed 1500 people in four counties: Harris, Fort Bend, Montgomery, and Waller. Female respondents accounted for 55% of the sample.

for women. Job/financial and families are the top two sources of stress identified by respondents, and balancing the two creates many unique problems for women. Economic journalist Ann Crittenden posits that although women have been liberated, mothers have not.² Women face unique challenges in this society that

Levels of Stress, Survey Respondents, Four County Area, 2003 ¹	Percentage
Mild	28%
Moderate	48%
Severe	24%

As in the two previous years, the 2003 survey found that the highest rated problem among individual concerns was stress and anxiety as noted by 46.8% of respondents. The survey asked specifically about stress levels and more than 70% of the respondents who reported experiencing stress said they suffered from moderate or severe stress. Mild stress was defined as normal stress of job, traffic, and family life. Moderate stress was defined as high periods of stress for long periods of time, and severe stress was categorized as greatly interfering with daily activities.

Although the numbers are not broken down by gender, with women being the majority of survey respondents, it is safe to suggest that stress is a problem

purports to value mothers, but actually exploits the labor of mothers. The conflict for women faced with being both employees and mothers is increasingly difficult, as women have achieved a modicum of equality outside the home, but less inside the home. Another recent book entitled "The Two-Income Trap" by a Harvard law professor and her daughter, who has an MBA from the Wharton School, discusses the difficulties of dual income families and how a sudden illness or job loss quickly pushes families into bankruptcy.³ The authors note that having a child is the single best predictor that a woman will end up in financial collapse and that this year more children will live through their parents' bankruptcy than their parents' divorce.

Sources of Stress, Survey Respondents, Four County Area, 2003 ¹	Percent
Job/Financial	79.5
Family (kids, marriage, divorce)	49.7
Health	19.6
Overworked/Does too much/ Stays too busy	13.5
Other	12.3
School	5.0
Death	5.0
Mental Health Issues	3.9
Traffic	3.3
Elder Care	2.6

Data Sources:

1 2003 Community Assessment, United Way of the Texas Gulf Coast.

2 Crittenden, A. (2001). *The Price of Motherhood: Why the Most Important Job in the World is the Least Valued*. New York: Henry Holt and Company.

3 Warren, E., & Tyagi, A.W. (2003). *The Two-Income Trap: Why Middle Class Mothers and Fathers are Going Broke*. New York: Basic Books.