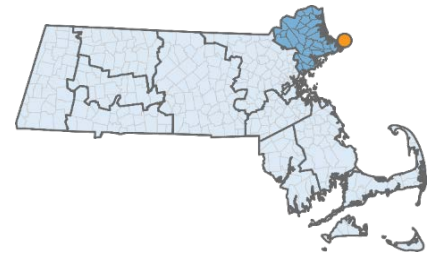


Rockport (Essex)

Rockport is a town located on Cape Ann with 2,065 residents aged 65 or older. The transit score suggests that there is good transit (5/10). Compared to state averages, older residents have lower rates of hip fracture, tooth loss, obesity, high cholesterol, schizophrenia and other psychotic disorders, tobacco use disorders, Alzheimer's disease, diabetes, chronic obstructive pulmonary disease, asthma, hypertension, heart attack, ischemic heart disease, congestive heart failure, arthritis, anemia, chronic kidney disease, epilepsy, glaucoma, visual and mobility impairments, and ulcers. However, they have a higher rate of migraine and chronic headaches. Health promotion behavior includes a greater level of physical exercise. Community resources to promote healthy aging include a Council on Aging and a Parks and Recreation department. Rockport has been designated an Age-Friendly Community and is emerging in its efforts to become Dementia-Friendly as well.



POPULATION CHARACTERISTICS	BETTER / WORSE STATE RATE¹	COMMUNITY ESTIMATE	STATE ESTIMATE
Total population all ages		7,167	6,742,143
Population 60 years or older as % of total population		37.4%	21.2%
Total population 60 years or older		2,681	1,428,144
Population 65 years or older as % of total population		28.8%	15.1%
Total population 65 years or older		2,065	1,016,679
% 65-74 years		60.5%	55.3%
% 75-84 years		27.0%	29.4%
% 85 years or older		12.4%	15.2%
Gender (65+ population)			
% female		63.0%	57.2%
Race/Ethnicity (65+ population)			
% White		99.2%	90.0%
% African American		0.0%	4.3%
% Asian		0.0%	3.2%
% Other		0.8%	2.5%
% Hispanic/Latino		1.1%	3.8%
Marital Status (65+ population)			
% married		56.0%	52.5%
% divorced/separated		12.3%	14.0%
% widowed		27.5%	25.5%
% never married		4.2%	8.0%
Education (65+ population)			
% with less than high school education		3.7%	16.5%
% with high school or some college		49.5%	52.6%
% with college degree		46.8%	30.9%
% of 60+ LGBT (county)		2.8%	3.2%
% of 65+ population living alone		33.9%	30.2%
% of 65+ population who speak only English at home		96.8%	83.3%
% of 65+ population who are veterans of military service		10.8%	18.8%
Age-sex adjusted 1-year mortality rate		3.8%	4.2%

HEALTHY AGING INDICATORS	BETTER / WORSE STATE RATE¹	COMMUNITY ESTIMATE	STATE ESTIMATE
Geographic Migration (65+ population) in the past 12 months			
% moved within same county		2.2%	3.6%
% moved from different county in Massachusetts		0.5%	1.1%
% moved from different state		0.7%	0.8%
WELLNESS & PREVENTION			
% 60+ with any physical activity within last month	B	82.1%	73.3%
% 60+ met CDC guidelines for muscle-strengthening activity		34.4%	27.7%
% 60+ met CDC guidelines for aerobic physical activity		62.3%	56.8%
% 60+ met CDC guidelines for both types of physical activities		25.4%	20.8%
% 60+ getting recommended hours of sleep		66.5%	62.7%
% 60+ injured in a fall within last 12 months		9.6%	10.6%
% 65+ had hip fracture	B	2.9%	3.7%
% 60+ with self-reported fair or poor health status		15.1%	18.0%
% 60+ with 15+ physically unhealthy days last month		11.8%	12.7%
% 60+ with physical exam/check-up in past year		89.0%	89.3%
% 60+ met CDC preventive health screening goals		37.4%	35.0%
% 60+ flu shot past year		62.1%	60.8%
% 65+ with pneumonia vaccine		67.7%	72.0%
% 60+ with shingles vaccine		41.0%	39.7%
% 60+ with cholesterol screening		94.3%	95.7%
% 60+ women with a mammogram within last 2 years		88.7%	84.8%
% 60+ with colorectal cancer screening		64.1%	63.3%
% 60+ with HIV test		14.5%	15.6%
% 60+ current smokers		6.8%	8.5%
% 60+ living in a home where smoking is not allowed		83.9%	84.7%
Oral Health			
% 60+ with loss of 6 or more teeth	B	23.6%	32.5%
% 60+ with annual dental exam		79.2%	77.5%
# of dentists per 100,000 persons (all ages)		70	84
NUTRITION/DIET			
% 60+ with 5 or more servings of fruit or vegetables per day		24.2%	21.5%
% 60+ self-reported obese		19.1%	23.1%
% 65+ clinically diagnosed obese	B	14.7%	19.0%
% 65+ with high cholesterol	B	67.9%	75.0%
% 60+ excessive drinking		11.5%	9.3%
% 65+ with poor supermarket access		60.6%	29.3%

HEALTHY AGING INDICATORS	BETTER / WORSE STATE RATE¹	COMMUNITY ESTIMATE	STATE ESTIMATE
BEHAVIORAL HEALTH			
% 60+ with 15+ days poor mental health last month		5.2%	7.0%
% 65+ with depression		29.2%	31.5%
% 65+ with anxiety disorders		25.6%	25.4%
% 65+ with bipolar disorders		4.2%	4.5%
% 65+ with post-traumatic stress disorder		1.8%	1.8%
% 65+ with schizophrenia & other psychotic disorders	B	5.1%	5.9%
% 65+ with personality disorders		1.3%	1.4%
# opioid deaths (all ages)		2	1,873
% 65+ with substance use disorders (drug use +/- alcohol abuse)		6.5%	6.6%
% 65+ with tobacco use disorders	B	7.7%	10.2%
CHRONIC DISEASE			
% 65+ with Alzheimer's disease or related dementias	B	9.8%	13.6%
% 65+ with diabetes	B	21.9%	31.7%
% 65+ with stroke		11.5%	12.0%
% 65+ with chronic obstructive pulmonary disease	B	15.7%	21.5%
% 65+ with asthma	B	11.8%	15.0%
% 65+ with hypertension	B	72.0%	76.2%
% 65+ ever had a heart attack	B	3.4%	4.6%
% 65+ with ischemic heart disease	B	32.6%	40.2%
% 65+ with congestive heart failure	B	15.2%	22.4%
% 65+ with atrial fibrillation		14.4%	15.9%
% 65+ with peripheral vascular disease		19.9%	19.4%
% 65+ with osteoarthritis/rheumatoid arthritis	B	48.2%	52.4%
% 65+ with osteoporosis		20.4%	20.7%
% 65+ with leukemias and lymphomas		2.5%	2.3%
% 65+ with lung cancer		1.9%	2.1%
% 65+ with colon cancer		2.8%	2.9%
% 65+ women with breast cancer		9.2%	10.9%
% 65+ women with endometrial cancer		1.9%	1.9%
% 65+ men with prostate cancer		14.0%	13.8%
% 65+ with benign prostatic hyperplasia		39.5%	40.9%
% 65+ with HIV/AIDS		0.1%	0.2%
% 65+ with hypothyroidism		21.5%	21.1%
% 65+ with anemia	B	38.4%	46.6%
% 65+ with chronic kidney disease	B	21.7%	27.3%
% 65+ with liver diseases		8.5%	8.6%
% 65+ with fibromyalgia, chronic pain and fatigue		18.2%	19.8%

HEALTHY AGING INDICATORS	BETTER / WORSE STATE RATE¹	COMMUNITY ESTIMATE	STATE ESTIMATE
% 65+ with migraine and other chronic headache	W	5.4%	4.6%
% 65+ with epilepsy	B	2.3%	2.9%
% 65+ with traumatic brain injury		1.5%	1.5%
% 65+ with autism spectrum disorders	*	0.0%	0.1%
% 65+ with glaucoma	B	21.9%	25.7%
% 65+ with cataract		67.4%	65.4%
% 65+ with pressure ulcer or chronic ulcer	B	6.7%	8.5%
% 65+ with 4+ (out of 15) chronic conditions	B	52.0%	60.7%
% 65+ with 0 chronic conditions	B	9.2%	7.3%
LIVING WITH DISABILITY			
% 65+ with self-reported hearing difficulty		9.1%	14.2%
% 65+ with clinical diagnosis of deafness or hearing impairment		16.5%	16.1%
% 65+ with self-reported vision difficulty		4.5%	5.8%
% 65+ with clinical diagnosis of blindness or visual impairment	B	1.1%	1.5%
% 65+ with self-reported cognition difficulty		5.8%	8.3%
% 65+ with self-reported ambulatory difficulty		13.0%	20.2%
% 65+ with clinical diagnosis of mobility impairments	B	3.2%	3.9%
% 65+ with self-reported self-care difficulty		5.7%	7.9%
% 65+ with self-reported independent living difficulty		14.3%	14.3%
ACCESS TO CARE			
Medicare (65+ population)			
% Medicare managed care enrollees	*	19.4%	23.1%
% dually eligible for Medicare and Medicaid	*	9.3%	16.7%
% 60+ with a regular doctor		97.6%	96.4%
% 60+ who did not see doctor when needed due to cost		3.2%	4.1%
# of primary care providers within 5 miles		79	10,333
# of hospitals within 5 miles		0	66
# of nursing homes within 5 miles		3	399
# of home health agencies		11	299
# of community health centers		0	116
# of adult day health centers		0	131
# of memory cafes		0	95
# of dementia-related support groups		0	136
SERVICE UTILIZATION			
Physician visits per year		8.1	7.8
Emergency room visits/1000 persons 65+ years per year	*	505	639

HEALTHY AGING INDICATORS	BETTER / WORSE STATE RATE¹	COMMUNITY ESTIMATE	STATE ESTIMATE
Part D monthly prescription fills per person per year	*	41.7	52.4
Home health visits per year	*	2.5	4.0
Durable medical equipment claims per year	*	1.3	1.9
Inpatient hospital stays/1000 persons 65+ years per year	*	247	294
Medicare inpatient hospital readmissions (as % of admissions)		14.5%	17.9%
# skilled nursing facility stays/1000 persons 65+ years per year	*	85	106
# skilled nursing home Medicare beds/1000 persons 65+ years		37	43
% 65+ getting Medicaid long term services and supports	*	3.6%	4.9%
COMMUNITY VARIABLES & CIVIC ENGAGEMENT			
Age-friendly efforts in community		Yes	Yes
Air pollution: annual # of unhealthy days for 65+ (county)		3	N/A
Open space in community		7.6%	18.0%
Walkability score of community (0-100)		77	N/A
% of grandparents raising grandchildren		0.3%	0.8%
% of grandparents who live with grandchildren		2.4%	2.9%
# of assisted living sites		0	238
% of vacant homes in community		24.0%	9.8%
# of universities and community colleges		0	163
# of public libraries		1	470
# of YMCAs		0	83
% in county with access to broadband (all ages)		99.0%	97.0%
% 60+ who used Internet in last month		74.7%	71.3%
Voter participation rate in 2016 presidential election (age 18+)		83.4%	71.3%
SAFETY & TRANSPORTATION			
Violent crime rate /100,000 persons		97	396
Homicide rate /100,000 persons (county)		2	2
# firearm fatalities (county)		114	1,126
Property crime rate /100,000 persons		185	1,825
% of licensed drivers who are age 61+		48.9%	28.7%
% 65+ who own a motor vehicle		88.5%	82.4%
% 60+ who always drive wearing a seatbelt		87.6%	86.3%
# of fatal crashes involving adult age 60+/town		0	529
# of fatal crashes involving adult age 60+/county		49	529
Total # of all crashes involving adult age 60+/town		46	132,351
# of senior transportation providers		2	324
# of medical transportation services for older people		3	268
# of nonmedical transportation services for older people		6	252
Summary transportation performance score		4.8	N/A

HEALTHY AGING INDICATORS	BETTER / WORSE STATE RATE ¹	COMMUNITY ESTIMATE	STATE ESTIMATE
ECONOMIC & HOUSING VARIABLES			
% 65+ with income below the poverty line past year		5.2%	8.7%
% 60+ receiving food stamps past year		8.3%	12.3%
% 65+ employed past year		33.3%	24.3%
Household income (65+ householder)			
% households with annual income < \$20,000		19.6%	23.6%
% households with annual income \$20,000-\$49,999		27.6%	32.5%
% households with annual income > \$50,000		52.8%	43.9%
% 60+ own home		77.0%	72.7%
% 60+ have mortgage on home		38.5%	34.1%
% 65+ households spend >35% of income on housing (renter)		4.5%	11.6%
% 65+ households spend >35% of income on housing (owner)		23.4%	20.4%
COST OF LIVING	\$ COUNTY ESTIMATE	\$ STATE ESTIMATE	RATIO (COUNTY/STATE)
Elder Economic Security Standard Index			
Single, homeowner without mortgage, good health	\$25,680	\$24,636	1.04
Single, renter, good health	\$29,748	\$28,248	1.05
Couple, homeowner without mortgage, good health	\$37,680	\$36,168	1.04
Couple, renter, good health	\$41,748	\$39,780	1.05

TECHNICAL NOTES

*See our technical report (online at <http://mahealthyagingcollaborative.org/data-report/explore-the-profiles/data-sources-and-methods/#technical>) for comprehensive information on data sources, measures, methodology, and margin of errors.

For most indicators the reported community and state values are both estimates derived from sample data. Thus, it is possible that some of the differences between state and community estimates may be due to chance associated with population sampling. We use the terms “better” and “worse” to highlight differences between community and state estimates that we are confident are not due to chance. “Better” is used where a higher/lower value has positive implications for the health of older residents. “Worse” is used where a higher/lower score has negative implications for the health of older people, and when the implication is unclear we use an *.

General Notes

We balance two goals. First, we aim to report data at very local levels because we believe change is often locally driven. Second, we vowed to protect the privacy of the people providing the information reported. Thus, given the constraints of the data analyzed we used a hierarchical approach to reporting. When possible we report estimates for 379 geographic units (i.e., every Massachusetts city/town and 16 Boston neighborhoods, 6 Worcester neighborhoods, and 6 Springfield neighborhoods). For example, the population characteristics and information from the US Census were reported for all 379 units. For other data (i.e., highly prevalent chronic disease, health services utilization) we could report for 310 geographic units. For less prevalent conditions we report for 201 geographic units. For the BRFSS data we report for 41 geographic units, and for the lowest prevalence conditions (e.g., HIV) we report for 18 geographic units. The same estimate is reported for all cities/towns within aggregated geographic areas. Maps of the different geographic groupings and the rationale behind the groupings are in the Technical Report.

Data Sources. The Technical Report describes the all of the data sources for the report, but three to note are: (1) the American Community Survey (2012-2016); (2) Centers for Medicare and Medicaid Services Master Beneficiary Summary File (2014-2015); and (3) The Behavioral Risk Factor Surveillance System (2010-2015).

Healthy Aging Data Report Team. Many people contributed to this research. The 2018 research team: Beth Dugan PhD, Frank Porell PhD, Nina Silverstein PhD, Chae Man Lee PhD, Shuang Shuang Wang PhD, Bon Kim, Natalie Pitheckoff, Haowei Wang, Sae Hwang Han, Richard Chunga, & Shiva Prasad from the Gerontology Institute in the McCormack Graduate School of Policy and Global Studies at the University of Massachusetts Boston. The Tufts Health Plan Foundation supported the research and provided important guidance. We thank our Advisory Committee members for contributing ideas and advice on how to make the Data Report best address the needs of Massachusetts. We thank our colleagues at JSI for their continued partnership. Questions or suggestions? Beth.dugan@umb.edu