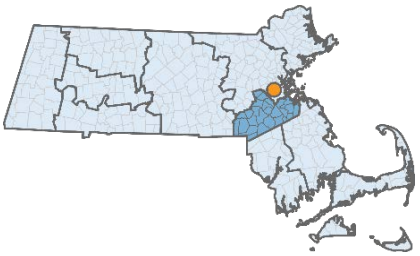
Brookline (Norfolk)

Brookline is a town bordering Boston with 9,023 residents aged 65 or older. The transit score indicates excellent transit (9/10). Older residents are more likely than state averages to do physical activity, get flu/shingles vaccines, and have lower rates of smoking, tooth loss, obesity, high cholesterol, substance/tobacco use disorders, diabetes, stroke, COPD, asthma, hypertension, heart attack, ischemic heart disease, congestive heart failure, atrial fibrillation, peripheral vascular disease, colon cancer, chronic kidney disease, liver diseases, ulcers, and mobility impairment. However, they have higher rates of hip fracture, depression, bipolar and personality disorders, osteoporosis, leukemias/lymphomas, breast cancer, prostate cancer, benign prostatic hyperplasia, hypothyroidism, glaucoma, cataract, hearing/visual impairments, and traumatic brain injury. Community resources include a memory cafe, Council on Aging, Parks and Recreation department, and lifelong learning. Brookline is an Age-Friendly and active Dementia-Friendly Community.



POPULATION CHARACTERISTICS	BETTER / WORSE STATE RATE[1]	COMMUNITY ESTIMATE	STATE ESTIMATE
Total population all ages		59,180	6,742,143
Population 60 years or older as % of total population		20.5%	21.2%
Total population 60 years or older		12,124	1,428,144
Population 65 years or older as % of total population		15.2%	15.1%
Total population 65 years or older		9,023	1,016,679
% 65-74 years		62.1%	55.3%
% 75-84 years		23.1%	29.4%
% 85 years or older		14.8%	15.2%
Gender (65+ population)			
% female		58.8%	57.2%
Race/Ethnicity (65+ population)			
% White		87.1%	90.0%
% African American		3.0%	4.3%
% Asian		9.0%	3.2%
% Other		0.8%	2.5%
% Hispanic/Latino		3.0%	3.8%
Marital Status (65+ population)			
% married		52.0%	52.5%
% divorced/separated		15.2%	14.0%
% widowed		19.2%	25.5%
% never married		13.5%	8.0%
Education (65+ population)			
% with less than high school education		5.6%	16.5%
% with high school or some college		26.3%	52.6%
% with college degree		68.2%	30.9%
% of 60+ LGBT (county)		2.7%	3.2%
% of 65+ population living alone		34.4%	30.2%
% of 65+ population who speak only English at home		74.5%	83.3%
% of 65+ population who are veterans of military service		9.4%	18.8%
Age-sex adjusted 1-year mortality rate	B	3.3%	4.2%

HEALTHY AGING INDICATORS	BETTER / WORSE STATE RATE[1]	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		1.1%	1.1%
% moved from different state		1.4%	0.8%
WELLNESS & PREVENTION			
% 60+ with any physical activity within last month	B	88.3%	73.3%
% 60+ met CDC guidelines for muscle-strengthening activity	B	39.4%	27.7%
% 60+ met CDC guidelines for aerobic physical activity	B	66.6%	56.8%
% 60+ met CDC guidelines for both types of physical activities	B	31.4%	20.8%
% 60+ getting recommended hours of sleep		64.1%	62.7%
% 60+ injured in a fall within last 12 months		9.1%	10.6%
% 65+ had hip fracture	W	4.3%	3.7%
% 60+ with self-reported fair or poor health status	B	9.9%	18.0%
% 60+ with 15+ physically unhealthy days last month	B	6.9%	12.7%
% 60+ with physical exam/check-up in past year		88.0%	89.3%
% 60+ met CDC preventive health screening goals		38.4%	35.0%
% 60+ flu shot past year	B	71.1%	60.8%
% 65+ with pneumonia vaccine		78.6%	72.0%
% 60+ with shingles vaccine	B	55.7%	39.7%
% 60+ with cholesterol screening		97.2%	95.7%
% 60+ women with a mammogram within last 2 years		82.6%	84.8%
% 60+ with colorectal cancer screening		67.5%	63.3%
% 60+ with HIV test		17.9%	15.6%
% 60+ current smokers	B	1.6%	8.5%
% 60+ living in a home where smoking is not allowed		85.5%	84.7%
Oral Health			
% 60+ with loss of 6 or more teeth	B	14.6%	32.5%
% 60+ with annual dental exam	B	89.1%	77.5%
# of dentists per 100,000 persons (all ages)		248	84
NUTRITION/DIET			
% 60+ with 5 or more servings of fruit or vegetables per day		27.2%	21.5%
% 60+ self-reported obese	B	11.3%	23.1%
% 65+ clinically diagnosed obese	B	12.4%	19.0%
% 65+ with high cholesterol	B	68.1%	75.0%
% 60+ excessive drinking		9.7%	9.3%
% 65+ with poor supermarket access		4.3%	29.3%

HEALTHY AGING INDICATORS	BETTER / WORSE STATE RATE[1]	COMMUNITY ESTIMATE	STATE ESTIMATE
BEHAVIORAL HEALTH			
% 60+ with 15+ days poor mental health last month		5.8%	7.0%
% 65+ with depression	W	35.2%	31.5%
% 65+ with anxiety disorders		26.0%	25.4%
% 65+ with bipolar disorders	W	5.3%	4.5%
% 65+ with post-traumatic stress disorder		2.0%	1.8%
% 65+ with schizophrenia & other psychotic disorders		5.4%	5.9%
% 65+ with personality disorders	W	2.5%	1.4%
# opioid deaths (all ages)		6	1,873
% 65+ with substance use disorders (drug use +/or alcohol abuse)	B	4.7%	6.6%
% 65+ with tobacco use disorders	B	5.0%	10.2%
CHRONIC DISEASE			
% 65+ with Alzheimer's disease or related dementias		14.2%	13.6%
% 65+ with diabetes	B	25.1%	31.7%
% 65+ with stroke	B	10.0%	12.0%
% 65+ with chronic obstructive pulmonary disease	B	13.2%	21.5%
% 65+ with asthma	B	11.2%	15.0%
% 65+ with hypertension	B	67.6%	76.2%
% 65+ ever had a heart attack	B	3.0%	4.6%
% 65+ with ischemic heart disease	B	38.6%	40.2%
% 65+ with congestive heart failure	B	19.3%	22.4%
% 65+ with atrial fibrillation	B	14.4%	15.9%
% 65+ with peripheral vascular disease	B	15.0%	19.4%
% 65+ with osteoarthritis/rheumatoid arthritis		53.4%	52.4%
% 65+ with osteoporosis	W	24.9%	20.7%
% 65+ with leukemias and lymphomas	W	3.8%	2.3%
% 65+ with lung cancer		1.8%	2.1%
% 65+ with colon cancer	B	2.4%	2.9%
% 65+ women with breast cancer	W	13.4%	10.9%
% 65+ women with endometrial cancer		2.0%	1.9%
% 65+ men with prostate cancer	W	15.9%	13.8%
% 65+ with benign prostatic hyperplasia	W	44.7%	40.9%
% 65+ with HIV/AIDS	*	0.1%	0.2%
% 65+ with hypothyroidism	W	23.2%	21.1%
% 65+ with anemia		46.7%	46.6%
% 65+ with chronic kidney disease	B	22.6%	27.3%
% 65+ with liver diseases	B	7.2%	8.6%
% 65+ with fibromyalgia, chronic pain and fatigue		19.6%	19.8%

HEALTHY AGING INDICATORS	BETTER / WORSE STATE RATE[1]	COMMUNITY ESTIMATE	STATE ESTIMATE
% 65+ with migraine and other chronic headache		5.2%	4.6%
% 65+ with epilepsy		2.9%	2.9%
% 65+ with traumatic brain injury	W	2.2%	1.5%
% 65+ with autism spectrum disorders		0.1%	0.1%
% 65+ with glaucoma	W	30.2%	25.7%
% 65+ with cataract	W	68.6%	65.4%
% 65+ with pressure ulcer or chronic ulcer	B	7.8%	8.5%
% 65+ with 4+ (out of 15) chronic conditions	B	55.2%	60.7%
% 65+ with 0 chronic conditions	B	9.6%	7.3%
LIVING WITH DISABILITY			
% 65+ with self-reported hearing difficulty		11.1%	14.2%
% 65+ with clinical diagnosis of deafness or hearing impairment	W	20.5%	16.1%
% 65+ with self-reported vision difficulty		3.5%	5.8%
% 65+ with clinical diagnosis of blindness or visual impairment	W	1.8%	1.5%
% 65+ with self-reported cognition difficulty		6.3%	8.3%
% 65+ with self-reported ambulatory difficulty		14.7%	20.2%
% 65+ with clinical diagnosis of mobility impairments	B	3.3%	3.9%
% 65+ with self-reported self-care difficulty		6.6%	7.9%
% 65+ with self-reported independent living difficulty		12.5%	14.3%
ACCESS TO CARE			
Medicare (65+ population)			
% Medicare managed care enrollees	*	14.4%	23.1%
% dually eligible for Medicare and Medicaid	*	11.5%	16.7%
% 60+ with a regular doctor		98.0%	96.4%
% 60+ who did not see doctor when needed due to cost	B	1.4%	4.1%
# of primary care providers within 5 miles		482	10,333
# of hospitals within 5 miles		14	66
# of nursing homes within 5 miles		18	399
# of home health agencies		55	299
# of community health centers		0	116
# of adult day health centers		0	131
# of memory cafes		1	95
# of dementia-related support groups		1	136
SERVICE UTILIZATION			
Physician visits per year	*	9.0	7.8
Emergency room visits/1000 persons 65+ years per year	*	472	639

HEALTHY AGING INDICATORS	BETTER / WORSE STATE RATE[1]	COMMUNITY ESTIMATE	STATE ESTIMATE
Part D monthly prescription fills per person per year	*	48.4	52.4
Home health visits per year		4.1	4.0
Durable medical equipment claims per year	*	1.4	1.9
Inpatient hospital stays/1000 persons 65+ years per year	*	229	294
Medicare inpatient hospital readmissions (as % of admissions)		16.0%	17.9%
# skilled nursing facility stays/1000 persons 65+ years per year	*	84	106
# skilled nursing home Medicare beds/1000 persons 65+ years		30	43
% 65+ getting Medicaid long term services and supports	*	3.1%	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		9.7%	18.0%
Walkability score of community (0-100)		78	N/A
% of grandparents raising grandchildren		0.0%	0.8%
% of grandparents who live with grandchildren		1.0%	2.9%
# of assisted living sites		2	238
% of vacant homes in community		6.5%	9.8%
# of universities and community colleges		4	163
# of public libraries		3	470
# of YMCAs		0	83
% in county with access to broadband (all ages)		98.0%	97.0%
% 60+ who used Internet in last month	*	88.4%	71.3%
Voter participation rate in 2016 presidential election (age 18+)		72.0%	71.3%
SAFETY & TRANSPORTATION			
Violent crime rate /100,000 persons		233	396
Homicide rate /100,000 persons (county)		1	2
# firearm fatalities (county)		80	1,126
Property crime rate /100,000 persons		1,259	1,825
% of licensed drivers who are age 61+		25.5%	28.7%
% 65+ who own a motor vehicle		73.9%	82.4%
% 60+ who always drive wearing a seatbelt		89.0%	86.3%
# of fatal crashes involving adult age 60+/town		2	529
# of fatal crashes involving adult age 60+/county		58	529
Total # of all crashes involving adult age 60+/town		337	132,351
# of senior transportation providers		11	324
# of medical transportation services for older people		16	268
# of nonmedical transportation services for older people		49	252
Summary transportation performance score		9.3	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		8.0%	8.7%
% 60+ receiving food stamps past year		8.3%	12.3%
% 65+ employed past year		41.2%	24.3%
Household income (65+ householder)			
% households with annual income < $20,000		18.3%	23.6%
% households with annual income $20,000-$49,999		21.1%	32.5%
% households with annual income > $50,000		60.5%	43.9%
% 60+ own home		64.7%	72.7%
% 60+ have mortgage on home		28.0%	34.1%
% 65+ households spend >35% of income on housing (renter)		16.7%	11.6%
% 65+ households spend >35% of income on housing (owner)		16.0%	20.4%

COST OF LIVING	$ COUNTY ESTIMATE	$ STATE ESTIMATE	RATIO (COUNTY/STATE)
Elder Economic Security Standard Index			
Single, homeowner without mortgage, good health	$26,616	$24,636	1.08
Single, renter, good health	$31,320	$28,248	1.11
Couple, homeowner without mortgage, good health	$38,616	$36,168	1.07
Couple, renter, good health	$43,320	$39,780	1.09

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 Prisad 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