

RHODE ISLAND HEALTHY AGING COMMUNITY DATA PROFILE

Warwick (Kent)

HEALTHY AGING INDICATORS	BETTER / WORSE STATE RATE ¹	COMMUNITY ESTIMATE ³	MARGIN OF ERROR ²	STATE ESTIMATE	MARGIN OF ERROR ²
POPULATION CHARACTERISTICS					
% of 60+ LGBT		1.9%	(0.9% - 2.8%)	2.0%	(1.6% - 2.4%)
Age-sex adjusted 1-year mortality rate		5.1%	(4.7% - 5.5%)	4.8%	(4.6% - 4.9%)
% 60+ lived at same address 25 years or more		48.3%	(44.2% - 52.5%)	48.1%	(46.8% - 49.5%)
WELLNESS and PREVENTION					
% any physical activity within last month		66.9%	(63.1% - 70.7%)	70.0%	(68.8% - 71.2%)
% injured by a fall within last year		7.1%	(4.0% - 10.2%)	10.0%	(8.7% - 11.3%)
% ever had a hip fracture		4.3%	(3.8% - 4.8%)	3.9%	(3.7% - 4.0%)
% with self-reported fair or poor health status		18.3%	(15.3% - 21.3%)	20.4%	(19.4% - 21.5%)
% with 15+ physically unhealthy days last month		13.6%	(10.9% - 16.3%)	13.9%	(13.0% - 14.8%)
% with physical exam/check-up in past year		93.1%	(91.0% - 95.1%)	91.9%	(91.2% - 92.6%)
% met CDC preventive health screening goals		38.6%	(34.1% - 43.2%)	39.5%	(38.0% - 41.1%)
% flu shot past year		60.6%	(56.7% - 64.6%)	59.1%	(57.8% - 60.4%)
% pneumonia vaccine		75.9%	(71.7% - 80.1%)	73.8%	(72.4% - 75.2%)
% shingles vaccine		28.7%	(24.2% - 33.1%)	30.3%	(28.7% - 31.8%)
% cholesterol screening		90.3%	(87.8% - 92.8%)	88.4%	(87.6% - 89.3%)
% mammogram within last 2 years (women)		80.3%	(76.2% - 84.4%)	81.8%	(80.4% - 83.1%)
% colorectal cancer screening		76.4%	(73.0% - 79.9%)	76.1%	(75.0% - 77.3%)
Oral Health					
% with complete tooth loss		35.9%	(32.1% - 39.7%)	32.4%	(31.2% - 33.6%)
% with annual dental exam	W	68.8%	(65.2% - 72.5%)	74.7%	(73.5% - 75.8%)
NUTRITION / DIET					
% with 5 or more servings of fruit or vegetables per day		20.0%	(16.8% - 23.2%)	23.0%	(21.9% - 24.1%)
% obese		26.8%	(23.2% - 30.3%)	25.4%	(24.2% - 26.5%)
% high cholesterol	W	80.0%	(79.0% - 81.0%)	78.0%	(77.7% - 78.3%)
% current smokers		10.4%	(8.0% - 12.9%)	8.9%	(8.2% - 9.7%)
% excessive drinking		7.7%	(5.6% - 9.8%)	8.9%	(8.1% - 9.6%)
MENTAL HEALTH					
% with 15+ days poor mental health last month		8.2%	(6.1% - 10.3%)	7.5%	(6.8% - 8.1%)
% 60+ talked with family or friends almost daily		76.6%	(73.1% - 80.0%)	75.3%	(74.1% - 76.5%)
% ever diagnosed with depression	W	32.3%	(31.1% - 33.4%)	30.0%	(29.7% - 30.3%)

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CHRONIC DISEASE					
% with Alzheimer's disease or related dementias		13.7%	(12.9% - 14.6%)	14.4%	(14.2% - 14.7%)
% with diabetes	W	37.9%	(36.6% - 39.1%)	35.7%	(35.4% - 36.1%)
% with stroke		13.4%	(12.6% - 14.3%)	12.5%	(12.2% - 12.7%)
% with chronic obstructive pulmonary disease	W	25.9%	(24.8% - 26.9%)	24.1%	(23.8% - 24.4%)
% with asthma	W	15.1%	(14.3% - 16.0%)	14.0%	(13.7% - 14.2%)
% with hypertension	W	80.6%	(79.7% - 81.6%)	79.0%	(78.8% - 79.3%)
% ever had a heart attack	W	6.4%	(5.8% - 7.0%)	5.4%	(5.3% - 5.6%)
% with ischemic heart disease	W	50.5%	(49.2% - 51.8%)	45.9%	(45.5% - 46.2%)
% with congestive heart failure	W	26.4%	(25.3% - 27.5%)	24.8%	(24.5% - 25.1%)
% with atrial fibrillation		15.3%	(14.4% - 16.1%)	15.2%	(15.0% - 15.5%)
% with osteoarthritis/rheumatoid arthritis	W	55.6%	(54.3% - 56.9%)	52.0%	(51.6% - 52.4%)
% with osteoporosis	W	22.8%	(21.8% - 23.8%)	21.0%	(20.7% - 21.3%)
% with glaucoma		25.9%	(24.8% - 26.9%)	26.6%	(26.2% - 26.9%)
% with cataract		67.4%	(66.3% - 68.6%)	67.9%	(67.6% - 68.2%)
% women with breast cancer		10.8%	(9.8% - 11.8%)	10.7%	(10.4% - 11.0%)
% with colon cancer		3.5%	(3.0% - 3.9%)	3.2%	(3.1% - 3.3%)
% men with prostate cancer		13.8%	(12.5% - 15.1%)	13.8%	(13.4% - 14.1%)
% with lung cancer	W	2.8%	(2.4% - 3.2%)	2.1%	(2.0% - 2.2%)
% with hypothyroidism	W	23.7%	(22.7% - 24.8%)	21.1%	(20.8% - 21.4%)
% with anemia	W	57.3%	(56.1% - 58.5%)	52.2%	(51.9% - 52.6%)
% with benign prostatic hyperplasia		38.5%	(36.7% - 40.3%)	40.3%	(39.8% - 40.8%)
% with chronic kidney disease	W	25.1%	(24.0% - 26.2%)	23.3%	(23.0% - 23.6%)
Summary chronic disease measures					
% with 4+ chronic conditions	W	67.7%	(66.6% - 68.9%)	63.9%	(63.6% - 64.3%)
% with 0 chronic conditions		7.9%	(7.2% - 8.5%)	8.4%	(8.2% - 8.6%)
ACCESS TO CARE					
% with a regular doctor		97.0%	(95.7% - 98.4%)	96.5%	(96.1% - 97.0%)
% did not see a doctor when needed due to cost		6.9%	(5.0% - 8.8%)	6.3%	(5.6% - 6.9%)
SERVICE UTILIZATION					
Physician visits per year	*	8.4	(8.2 - 8.6)	8.0	(7.9 - 8.0)
Emergency room visits/1000 persons 65+ years per year	*	683	(640 - 725)	628	(618 - 638)
Part D monthly prescription fills per person per year		54.5	(53.7 - 55.2)	54.2	(53.9 - 54.4)
Home health visits per year		3.7	(3.4 - 4.1)	3.7	(3.6 - 3.9)
Durable medical equipment claims per year		2.1	(1.9 - 2.2)	2.0	(1.9 - 2.0)
Inpatient hospital stays/1000 persons 65+ years per year		306	(287 - 325)	284	(279 - 289)
Inpatient hospital readmissions (as % of admissions)		16.0%	(14.1% - 17.8%)	16.9%	(16.3% - 17.5%)
Skilled nursing facility stays/1000 persons 65+ years per year		97	(87 - 107)	100	(97 - 103)
COMMUNITY VARIABLE & CIVIC ENGAGEMENT					
% 60+ who are satisfied with neighborhood		77.1%	(73.8% - 80.5%)	80.0%	(78.9% - 81.1%)
% 60+ who believe local service orgs understand needs		41.0%	(36.5% - 45.4%)	44.1%	(42.7% - 45.6%)
% 60+ who believe he/she can make a difference		50.2%	(46.0% - 54.4%)	51.6%	(50.2% - 53.0%)
% 60+ who believe working together can make a difference		77.2%	(73.6% - 80.8%)	81.0%	(79.9% - 82.1%)
% 60+ who volunteer at least once per month		19.0%	(15.7% - 22.4%)	22.8%	(21.6% - 23.9%)
% 60+ who attend community events at least once per month		41.1%	(36.9% - 45.3%)	44.2%	(42.8% - 45.6%)

Notes. ¹ Community-state differences that the margins of error do not overlap each other are noted B, W, w, or *.

² All community and state margins of error are 95% confidence intervals, except when a lower case b or w is noted in which case 90% confidence intervals are used.

³ C indicates that the community rate is censored due to inadequate sample size.