

RHODE ISLAND HEALTHY AGING COMMUNITY DATA PROFILE

Cranston (Providence)

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		2.1%	(1.3% - 2.9%)	2.0%	(1.6% - 2.4%)
Age-sex adjusted 1-year mortality rate		4.5%	(4.2% - 4.9%)	4.8%	(4.6% - 4.9%)
% 60+ lived at same address 25 years or more	*	57.3%	(53.1% - 61.5%)	48.1%	(47.0% - 49.3%)
WELLNESS and PREVENTION					
% any physical activity within last month		70.4%	(65.9% - 74.9%)	70.0%	(68.8% - 71.2%)
% injured by a fall within last year		7.2%	(3.6% - 10.7%)	10.0%	(8.7% - 11.3%)
% ever had a hip fracture		4.2%	(3.7% - 4.7%)	3.9%	(3.7% - 4.0%)
% with self-reported fair or poor health status		21.2%	(17.3% - 25.1%)	20.4%	(19.4% - 21.5%)
% with 15+ physically unhealthy days last month		13.5%	(10.2% - 16.9%)	13.9%	(13.0% - 14.8%)
% with physical exam/check-up in past year		93.6%	(90.9% - 96.3%)	91.9%	(91.2% - 92.6%)
% met CDC preventive health screening goals	B	47.4%	(41.4% - 53.3%)	39.5%	(38.0% - 41.1%)
% flu shot past year		59.0%	(54.0% - 64.0%)	59.1%	(57.8% - 60.4%)
% pneumonia vaccine		73.7%	(68.4% - 78.9%)	73.8%	(72.4% - 75.2%)
% shingles vaccine		30.0%	(23.6% - 36.4%)	30.3%	(28.7% - 31.8%)
% cholesterol screening		89.9%	(87.3% - 92.5%)	88.4%	(87.6% - 89.3%)
% mammogram within last 2 years (women)		85.2%	(81.3% - 89.2%)	81.8%	(80.4% - 83.1%)
% colorectal cancer screening		78.8%	(75.0% - 82.7%)	76.1%	(75.0% - 77.3%)
Oral Health					
% with complete tooth loss		32.9%	(28.5% - 37.3%)	32.4%	(31.2% - 33.6%)
% with annual dental exam		76.1%	(72.1% - 80.1%)	74.7%	(73.5% - 75.8%)
NUTRITION / DIET					
% with 5 or more servings of fruit or vegetables per day		21.8%	(18.0% - 25.6%)	23.0%	(21.9% - 24.1%)
% obese		26.2%	(21.8% - 30.5%)	25.4%	(24.2% - 26.5%)
% high cholesterol		78.9%	(77.9% - 80.0%)	78.0%	(77.7% - 78.3%)
% current smokers		7.7%	(5.2% - 10.2%)	8.9%	(8.2% - 9.7%)
% excessive drinking	B	5.0%	(2.9% - 7.0%)	8.9%	(8.1% - 9.6%)
MENTAL HEALTH					
% with 15+ days poor mental health last month		8.3%	(5.5% - 11.2%)	7.5%	(6.8% - 8.1%)
% 60+ talked with family or friends almost daily		78.1%	(73.5% - 82.7%)	75.3%	(74.1% - 76.5%)
% ever diagnosed with depression		30.9%	(29.7% - 32.0%)	30.0%	(29.7% - 30.3%)

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CHRONIC DISEASE					
% with Alzheimer's disease or related dementias		14.0%	(13.1% - 14.9%)	14.4%	(14.2% - 14.7%)
% with diabetes		36.9%	(35.6% - 38.3%)	35.7%	(35.4% - 36.1%)
% with stroke		12.1%	(11.2% - 12.9%)	12.5%	(12.2% - 12.7%)
% with chronic obstructive pulmonary disease		25.0%	(23.9% - 26.2%)	24.1%	(23.8% - 24.4%)
% with asthma		14.1%	(13.2% - 15.0%)	14.0%	(13.7% - 14.2%)
% with hypertension	W	80.4%	(79.4% - 81.4%)	79.0%	(78.8% - 79.3%)
% ever had a heart attack		5.0%	(4.5% - 5.6%)	5.4%	(5.3% - 5.6%)
% with ischemic heart disease		46.4%	(45.0% - 47.7%)	45.9%	(45.5% - 46.2%)
% with congestive heart failure	W	26.5%	(25.3% - 27.7%)	24.8%	(24.5% - 25.1%)
% with atrial fibrillation		14.1%	(13.2% - 15.0%)	15.2%	(15.0% - 15.5%)
% with osteoarthritis/rheumatoid arthritis		53.2%	(51.8% - 54.6%)	52.0%	(51.6% - 52.4%)
% with osteoporosis	W	22.4%	(21.4% - 23.5%)	21.0%	(20.7% - 21.3%)
% with glaucoma		26.9%	(25.7% - 28.0%)	26.6%	(26.2% - 26.9%)
% with cataract		67.0%	(65.8% - 68.3%)	67.9%	(67.6% - 68.2%)
% women with breast cancer		11.3%	(10.2% - 12.3%)	10.7%	(10.4% - 11.0%)
% with colon cancer		3.5%	(3.0% - 4.0%)	3.2%	(3.1% - 3.3%)
% men with prostate cancer		13.5%	(12.2% - 14.9%)	13.8%	(13.4% - 14.1%)
% with lung cancer		2.4%	(2.0% - 2.8%)	2.1%	(2.0% - 2.2%)
% with hypothyroidism		21.0%	(20.0% - 22.1%)	21.1%	(20.8% - 21.4%)
% with anemia	W	54.7%	(53.4% - 55.9%)	52.2%	(51.9% - 52.6%)
% with benign prostatic hyperplasia	W	43.0%	(41.0% - 45.0%)	40.3%	(39.8% - 40.8%)
% with chronic kidney disease	W	25.9%	(24.8% - 27.1%)	23.3%	(23.0% - 23.6%)
Summary chronic disease measures					
% with 4+ chronic conditions	W	66.3%	(65.1% - 67.6%)	63.9%	(63.6% - 64.3%)
% with 0 chronic conditions		8.1%	(7.4% - 8.9%)	8.4%	(8.2% - 8.6%)
ACCESS TO CARE					
% with a regular doctor		96.4%	(94.2% - 98.5%)	96.5%	(96.1% - 97.0%)
% did not see a doctor when needed due to cost		5.1%	(2.8% - 7.3%)	6.3%	(5.6% - 6.9%)
SERVICE UTILIZATION					
Physician visits per year	*	8.6	(8.4 - 8.9)	8.0	(7.9 - 8.0)
Emergency room visits/1000 persons 65+ years per year		627	(591 - 664)	628	(618 - 638)
Part D monthly prescription fills per person per year	*	52.6	(51.8 - 53.4)	54.2	(53.9 - 54.4)
Home health visits per year	*	4.6	(4.2 - 5.1)	3.7	(3.6 - 3.9)
Durable medical equipment claims per year		2.1	(2.0 - 2.3)	2.0	(1.9 - 2.0)
Inpatient hospital stays/1000 persons 65+ years per year		307	(286 - 328)	284	(279 - 289)
Inpatient hospital readmissions (as % of admissions)		17.7%	(15.5% - 20.0%)	16.9%	(16.3% - 17.5%)
Skilled nursing facility stays/1000 persons 65+ years per year		110	(98 - 122)	100	(97 - 103)
COMMUNITY VARIABLE & CIVIC ENGAGEMENT					
% 60+ who are satisfied with neighborhood		76.5%	(72.3% - 80.8%)	80.0%	(78.9% - 81.1%)
% 60+ who believe local service orgs understand needs	w	37.7%	(33.2% - 42.1%)	44.1%	(42.9% - 45.4%)
% 60+ who believe he/she can make a difference		47.6%	(42.4% - 52.9%)	51.6%	(50.2% - 53.0%)
% 60+ who believe working together can make a difference		79.1%	(75.0% - 83.1%)	81.0%	(79.9% - 82.1%)
% 60+ who volunteer at least once per month		20.0%	(15.8% - 24.1%)	22.8%	(21.6% - 23.9%)
% 60+ who attend community events at least once per month		39.3%	(34.1% - 44.4%)	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.