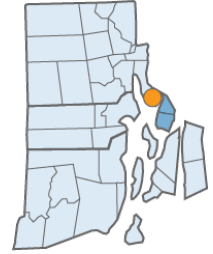


Barrington (Bristol)

Barrington is a suburban, residential town in Bristol County, with 16,310 residents. Approximately 16% of Barrington residents are age 65 or older and for most health indicators Barrington older adults are healthier than state averages. Age-friendly community resources include the Barrington Senior Center which offers social and recreational opportunities such as bingo, weekday lunches, nature trails and parks; personal enrichment classes including painting and AARP safe driving classes as well as health and wellbeing fitness and dance classes. Barrington's Bayside YMCA offers the Arthritis Foundation Y Aquatics Program for any adult managing issues of arthritis. East Bay Community Action agency's Senior Services program provides assessments for seniors needing home and community services and case management for those receiving state funded home care. Transportation is available through the senior center.



	COMMUNITY ESTIMATE	STATE ESTIMATE
POPULATION CHARACTERISTICS		
Total population all ages	16,310	1,052,567
Population 60 years or older as % of total population	21.5%	20.6%
Total population 60 years or older	3,501	217,066
Population 65 years or older as % of total population	15.5%	14.8%
Total population 65 years or older	2,528	155,558
% 65-74 years	48.1%	50.4%
% 75-84 years	34.7%	32.0%
% 85 years or older	17.2%	17.6%
Gender (65+ population)		
% female	57.4%	58.4%
Race/Ethnicity (65+ population)		
% White	98.0%	93.0%
% African American	0.0%	2.6%
% Asian	0.6%	1.3%
% Other	1.4%	3.2%
% Hispanic/Latino	0.3%	3.7%
Marital Status (65+ population)		
% married	56.1%	50.1%
% divorced/separated	9.9%	12.6%
% widowed	30.4%	30.8%
% never married	3.6%	6.4%
Education (65+ population)		
% with less than high school education	8.0%	26.8%
% with high school or some college	39.7%	50.7%
% with college degree	52.3%	22.5%
% of 60+ LGBT	1.2%	2.0%
% of 65+ population living alone	29.0%	30.4%
% of 65+ population who speak only English at home	91.7%	81.7%
% of 65+ population who are veterans of military service	19.8%	22.7%
Age-sex adjusted 1-year mortality rate	4.1%	4.8%

HEALTHY AGING INDICATORS	BETTER / WORSE STATE RATE¹	COMMUNITY ESTIMATE²	STATE ESTIMATE²
Geographic Migration (65+ population)			
% moved within same county		1.3%	3.5%
% moved from different county in Rhode Island		0.8%	0.8%
% moved from different state		0.5%	1.1%
% 60+ lived at same address 25 years or more		42.8%	48.1%
WELLNESS and PREVENTION			
% any physical activity within last month		72.5%	70.0%
% injured by a fall within last year		8.6%	10.0%
% ever had a hip fracture		4.2%	3.9%
% with self-reported fair or poor health status	B	13.7%	20.4%
% with 15+ physically unhealthy days last month		10.5%	13.9%
% with physical exam/check-up in past year		93.5%	91.9%
% met CDC preventive health screening goals		40.1%	39.5%
% flu shot past year		58.8%	59.1%
% pneumonia vaccine		77.8%	73.8%
% shingles vaccine		32.6%	30.3%
% cholesterol screening		87.9%	88.4%
% mammogram within last 2 years (women)		80.6%	81.8%
% colorectal cancer screening		78.2%	76.1%
Oral Health			
% with complete tooth loss	b	25.8%	32.4%
% with annual dental exam	B	81.4%	74.7%
# dentists per 100,000 persons (all ages)		49	58
NUTRITION/DIET			
% with 5 or more servings of fruit or vegetables per day		24.5%	23.0%
% obese		22.5%	25.4%
% high cholesterol		77.8%	78.0%
% current smokers	b	5.8%	8.9%
% excessive drinking		11.0%	8.9%
MENTAL HEALTH			
% with 15+ days poor mental health last month		5.4%	7.5%
% 60+ talked with family or friends almost daily		75.8%	75.3%
% ever diagnosed with depression	B	26.7%	30.0%
CHRONIC DISEASE			
% with Alzheimer's disease or related dementias		13.5%	14.4%
% with diabetes	B	29.2%	35.7%
% with stroke		11.8%	12.5%
% with chronic obstructive pulmonary disease	B	18.8%	24.1%
% with asthma		13.1%	14.0%

HEALTHY AGING INDICATORS	BETTER / WORSE STATE RATE¹	COMMUNITY ESTIMATE²	STATE ESTIMATE²
% with hypertension		76.5%	79.0%
% ever had a heart attack	B	3.7%	5.4%
% with ischemic heart disease	B	39.5%	45.9%
% with congestive heart failure	B	21.3%	24.8%
% with atrial fibrillation		15.4%	15.2%
% with osteoarthritis/rheumatoid arthritis		50.7%	52.0%
% with osteoporosis		22.2%	21.0%
% with glaucoma		28.0%	26.6%
% with cataract		69.9%	67.9%
% women with breast cancer		11.6%	10.7%
% with colon cancer		2.8%	3.2%
% men with prostate cancer		15.5%	13.8%
% with lung cancer	B	1.3%	2.1%
% with hypothyroidism		19.8%	21.1%
% with anemia		51.3%	52.2%
% with benign prostatic hyperplasia		41.3%	40.3%
% with chronic kidney disease		23.0%	23.3%
Summary chronic disease measures			
% with 4+ chronic conditions	B	58.7%	63.9%
% with 0 chronic conditions	W	6.0%	8.4%
LIVING WITH DISABILITY			
% 65+ with hearing difficulty		17.5%	13.8%
% 65+ with vision difficulty		6.4%	5.2%
% 65+ with cognition difficulty		8.9%	7.8%
% 65+ with ambulatory difficulty		17.1%	19.9%
% 65+ with self-care difficulty		8.4%	6.6%
% 65+ with independent living difficulty		14.2%	13.7%
ACCESS TO CARE			
Medicare (65+ population)			
% Medicare managed care enrollees		37.4%	39.4%
% dually eligible for Medicare and Medicaid	*	5.3%	14.6%
% with a regular doctor		C	96.5%
% did not see a doctor when needed due to cost	B	3.2%	6.3%
# of primary care providers (within 5 miles)		36	1,566
# of hospitals (within 5 miles)		0	11
# of nursing homes (within 5 miles)		5	84
# of home health agencies (in same town)		21	38

HEALTHY AGING INDICATORS	BETTER / WORSE STATE RATE¹	COMMUNITY ESTIMATE²	STATE ESTIMATE²
SERVICE UTILIZATION			
Physician visits per year		7.8	8.0
Emergency room visits/1000 persons 65+ years per year	*	420	628
Part D monthly prescription fills per person per year	*	48.0	54.2
Home health visits per year		3.4	3.7
Durable medical equipment claims per year	*	1.5	2.0
Inpatient hospital stays/1000 persons 65+ years per year	*	239	284
Inpatient hospital readmissions (as % of admissions)		14.0%	16.9%
Skilled nursing facility stays/1000 persons 65+ years per year		86	100
Total skilled nursing home Medicare beds/1000 persons 65+ years		0	52
% 65+ getting Medicaid long term services and supports		3.0%	6.2%
COMMUNITY VARIABLES & CIVIC ENGAGEMENT			
Air Pollution/Air Quality Index			
Annual # of unhealthy days for older adults		NA	NA
Walkability of Community			
Walkability score (0-100)		60	NA
% of vacant housing units in community		5.6%	11.3%
% 60+ who are satisfied with neighborhood	B	90.0%	80.0%
# of registered voters (age 18+)		13,929	725,309
Voter participation rate in 2012 presidential election (age 18+)		68.6%	61.5%
% 60+ who believe local service orgs understand needs	B	52.0%	44.1%
% 60+ who believe he/she can make a difference		52.6%	51.6%
% 60+ who believe working together can make a difference	B	87.4%	81.0%
% 60+ who volunteer at least once per month	b	28.3%	22.8%
% 60+ who attend community events (e.g., church, club) at least once per month		46.6%	44.2%
SAFETY AND TRANSPORTATION			
Violent crime rate / 100,000 persons		18	253
Property crime rate / 100,000 persons		1,314	2,394
# of motor vehicle fatalities involving adult age 60+/town		0	90
# of motor vehicle fatalities involving adult age 60+/county		5	90
# of alternative transportation programs by county		8	43
Municipal senior transportation available		Yes	NA
Volunteer driver programs available		TAPIN	NA

HEALTHY AGING INDICATORS

COMMUNITY
ESTIMATE²

STATE
ESTIMATE²

ECONOMIC AND FINANCIAL

Poverty (65+ Population)

% with income below the poverty level past year	1.7%	8.6%
% 60+ receiving food stamps past year	3.3%	11.9%
% 65+ working past year	18.5%	16.3%

Household income (65+ householder)

% households with annual income < \$20,000	9.6%	28.0%
% households with annual income \$20,000-49,999	35.0%	34.2%
% households with annual income ≥ \$50,000	55.4%	37.7%
% 60+ own home	55.5%	43.9%
% 60+ homeowners with mortgage	40.3%	45.3%

COST OF LIVING

\$ COUNTY
ESTIMATE

\$ STATE
ESTIMATE

RATIO OF COUNTY
TO STATE

Elder Economic Security Standard Index

Single, homeowner without mortgage, good health	\$ 23,256	\$ 22,188	1.05
Single, renter, good health	\$ 23,604	\$ 23,544	1.00
Couple, homeowner without mortgage, good health	\$ 33,420	\$ 32,352	1.03
Couple, renter, good health	\$ 33,768	\$ 33,708	1.00

TECHNICAL NOTES: Read our technical report for information on data sources and methodology at <http://healthyagingdatareports.org/ri/technicalreport>.

¹ For most indicators the community and state values are both statistical 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. When an upper case letter is used the 95% confidence intervals were used, the lowercase indicates a 90% confidence interval. When the implication for healthy aging is unclear we use an “.”

² “C” indicates that the community rate is censored due to inadequate sample size and “NA” indicates that the data were not available.

Other notes:

- We used a hierarchical approach to reporting estimates for every city/town in Rhode Island when data allow. In other cases, we could only report indicators for aggregated areas (e.g., cities and towns with similar demographic and socioeconomic population composition were combined for some indicators and counties were used for others). The same estimate is reported for all cities/towns within aggregated geographic areas.
- Total population estimates are from the 2010 Census and are reported for the 41 geographic units. Other population characteristic estimates are from the American Community Survey (ACS) (2009-2013) and are reported for 41 geographic units. Note that % may not add up to 100% due to rounding error.
- Mortality rate, specific chronic disease, access and utilization estimates are for beneficiaries 65 years or older in 2013 from the 2012 and 2013 Centers for Medicare and Medicaid Services (CMS) Master Beneficiary Summary File (MBSF).
- The 2009-2014 Behavioral Risk Factor Surveillance System (BRFSS) is the source for wellness, health behavior, and some prevention estimates. BRFSS indicators were estimated for persons 60 years or older for 14 aggregated geographic areas derived by combining cities and towns with similar population composition. The same rate is reported for all cities/towns within the same unit.
- Access to care data pertaining to the # of primary care providers, hospitals, nursing homes, and home health agencies were obtained from the following CMS websites: <http://www.medicare.gov/nursinghomecompare/search.html>, <http://www.medicare.gov/homehealthcompare/search.html>, <http://www.medicare.gov/hospitalcompare/search.html>, <http://www.medicare.gov/physiciancompare/results.html>. The dentist data come from the RI Department of Health (<http://www.health.ri.gov/find/oralhealthservices/>).
- Walkability Estimates were downloaded from <http://www.walkscore.com/> using the finder term “city/town name, Rhode Island.”
- Air pollution/air quality estimates are from the US Environmental Protection Agency reported for 3 RI counties for older adults with no specific health concerns (2015). The same rate is reported for cities/towns within the same county.
- 2012 voter participation data from the Rhode Island Board of Elections.
- Crime estimates are from 2013 FBI Uniform Crime Reports (<http://www.fbi.gov/stats-services/crimestats>).
- Data on fatal auto (driver, passenger) and pedestrian accidents for persons age 60+ is from the Fatal Accident Reporting System of the National Highway Traffic Safety Administration (2009-2013), reported at the town and county level.
- The housing, migration, and income indicators are from the ACS (2009-2013) and are reported for individual cities/towns.
- The 2016 Elder Economic Security Standard Index estimates were obtained from researchers at the University of Massachusetts Boston Center for Social and Demographic Research on Aging.
- Our research team: Elizabeth Dugan, Frank Porell and Nina Silverstein. Graduate Student researchers included: Chae Man Lee, Hyo Jung Lee, Bon Kim, and Krystal Kittle. We thank Amanda Cox from the [NYTimes.com](http://www.nytimes.com) for data visualizations; and Maureen Maigret for sharing data on municipal senior transportation and volunteer driver programs collected by Mensel & Maigret (April, 2016). Please send your questions, comments, or ideas to beth.dugan@umb.edu. Let us know how you are using the Data Report in your community!