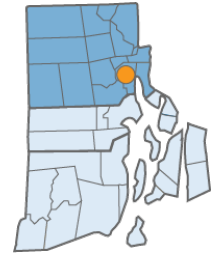


Providence Northeast (Providence)

We were able to subdivide Providence into two communities, the northeast and the rest of Providence. The Northeast neighborhood has a population of 28,387 of whom 12% are age 65 or older. With the exception of higher than state rates of and depression and osteoporosis, Providence NE older adults fare better or similar to state rates on most health indicators. Providence NE adults age 60 and older are more likely than state estimates to believe that local service organizations “understand their needs;” that he or she can “make a difference” in the community; and attend community events.



POPULATION CHARACTERISTICS	COMMUNITY ESTIMATE	STATE ESTIMATE
Total population all ages	28,387	1,052,567
Population 60 years or older as % of total population	16.9%	20.6%
Total population 60 years or older	4,877	217,066
Population 65 years or older as % of total population	11.7%	14.8%
Total population 65 years or older	3,395	155,558
% 65-74 years	49.0%	50.4%
% 75-84 years	28.0%	32.0%
% 85 years or older	23.0%	17.6%
Gender (65+ population)		
% female	56.8%	58.4%
Race/Ethnicity (65+ population)		
% White	87.6%	93.0%
% African American	7.6%	2.6%
% Asian	2.0%	1.3%
% Other	2.7%	3.2%
% Hispanic/Latino	2.3%	3.7%
Marital Status (65+ population)		
% married	53.7%	50.1%
% divorced/separated	13.4%	12.6%
% widowed	25.9%	30.8%
% never married	7.0%	6.4%
Education (65+ population)		
% with less than high school education	12.0%	26.8%
% with high school or some college	28.0%	50.7%
% with college degree	60.0%	22.5%
% of 60+ LGBT	3.0%	2.0%
% of 65+ population living alone	28.6%	30.4%
% of 65+ population who speak only English at home	82.6%	81.7%
% of 65+ population who are veterans of military service	16.1%	22.7%
Age-sex adjusted 1-year mortality rate	4.0%	4.8%

HEALTHY AGING INDICATORS	BETTER / WORSE STATE RATE¹	COMMUNITY ESTIMATE²	STATE ESTIMATE²
Geographic Migration (65+ population)			
% moved within same county		3.5%	3.5%
% moved from different county in Rhode Island		0.3%	0.8%
% moved from different state		1.0%	1.1%
% 60+ lived at same address 25 years or more		46.8%	48.1%
WELLNESS and PREVENTION			
% any physical activity within last month	B	88.4%	70.0%
% injured by a fall within last year		17.3%	10.0%
% ever had a hip fracture		4.1%	3.9%
% with self-reported fair or poor health status	B	8.6%	20.4%
% with 15+ physically unhealthy days last month	B	5.2%	13.9%
% with physical exam/check-up in past year		91.2%	91.9%
% met CDC preventive health screening goals	B	52.4%	39.5%
% flu shot past year	B	68.4%	59.1%
% pneumonia vaccine		78.4%	73.8%
% shingles vaccine	B	41.9%	30.3%
% cholesterol screening		84.7%	88.4%
% mammogram within last 2 years (women)	b	88.3%	81.8%
% colorectal cancer screening		81.0%	76.1%
Oral Health			
% with complete tooth loss	B	20.1%	32.4%
% with annual dental exam	B	89.2%	74.7%
# dentists per 100,000 persons (all ages)		134	58
NUTRITION/DIET			
% with 5 or more servings of fruit or vegetables per day	B	35.6%	23.0%
% obese	B	10.0%	25.4%
% high cholesterol	B	73.7%	78.0%
% current smokers	B	5.2%	8.9%
% excessive drinking		9.5%	8.9%
MENTAL HEALTH			
% with 15+ days poor mental health last month		C	7.5%
% 60+ talked with family or friends almost daily	w	67.0%	75.3%
% ever diagnosed with depression	W	33.2%	30.0%
CHRONIC DISEASE			
% with Alzheimer's disease or related dementias		14.8%	14.4%
% with diabetes	B	25.2%	35.7%
% with stroke		12.1%	12.5%
% with chronic obstructive pulmonary disease	B	16.5%	24.1%
% with asthma		13.4%	14.0%

HEALTHY AGING INDICATORS	BETTER / WORSE STATE RATE¹	COMMUNITY ESTIMATE²	STATE ESTIMATE²
% with hypertension	B	70.3%	79.0%
% ever had a heart attack	B	3.5%	5.4%
% with ischemic heart disease	B	39.0%	45.9%
% with congestive heart failure	B	18.1%	24.8%
% with atrial fibrillation		14.1%	15.2%
% with osteoarthritis/rheumatoid arthritis	B	48.6%	52.0%
% with osteoporosis	W	24.4%	21.0%
% with glaucoma		28.7%	26.6%
% with cataract		69.8%	67.9%
% women with breast cancer		12.7%	10.7%
% with colon cancer		3.1%	3.2%
% men with prostate cancer		15.1%	13.8%
% with lung cancer		2.0%	2.1%
% with hypothyroidism		19.9%	21.1%
% with anemia	B	48.0%	52.2%
% with benign prostatic hyperplasia		42.3%	40.3%
% with chronic kidney disease		21.7%	23.3%
Summary chronic disease measures			
% with 4+ chronic conditions	B	56.7%	63.9%
% with 0 chronic conditions		9.2%	8.4%
LIVING WITH DISABILITY			
% 65+ with hearing difficulty		13.8%	13.8%
% 65+ with vision difficulty		4.0%	5.2%
% 65+ with cognition difficulty		3.5%	7.8%
% 65+ with ambulatory difficulty		14.2%	19.9%
% 65+ with self-care difficulty		6.5%	6.6%
% 65+ with independent living difficulty		13.6%	13.7%
ACCESS TO CARE			
Medicare (65+ population)			
% Medicare managed care enrollees	*	26.5%	39.4%
% dually eligible for Medicare and Medicaid	*	7.8%	14.6%
% with a regular doctor		95.7%	96.5%
% did not see a doctor when needed due to cost		C	6.3%
# of primary care providers (within 5 miles)		234	1,566
# of hospitals (within 5 miles)		7	11
# of nursing homes (within 5 miles)		26	84
# of home health agencies (in same town)		20	38

HEALTHY AGING INDICATORS	BETTER / WORSE STATE RATE¹	COMMUNITY ESTIMATE²	STATE ESTIMATE²
SERVICE UTILIZATION			
Physician visits per year		8.1	8.0
Emergency room visits/1000 persons 65+ years per year	*	516	628
Part D monthly prescription fills per person per year	*	48.5	54.2
Home health visits per year		3.3	3.7
Durable medical equipment claims per year	*	1.6	2.0
Inpatient hospital stays/1000 persons 65+ years per year	*	202	284
Inpatient hospital readmissions (as % of admissions)		16.1%	16.9%
Skilled nursing facility stays/1000 persons 65+ years per year	*	75	100
Total skilled nursing home Medicare beds/1000 persons 65+ years		64	52
% 65+ getting Medicaid long term services and supports		3.8%	6.2%
COMMUNITY VARIABLES & CIVIC ENGAGEMENT			
Air Pollution/Air Quality Index			
Annual # of unhealthy days for older adults		1	NA
Walkability of Community			
Walkability score (0-100)		NA	NA
% of vacant housing units in community		9.9%	11.3%
% 60+ who are satisfied with neighborhood		83.0%	80.0%
# of registered voters (age 18+)		NA	725,309
Voter participation rate in 2012 presidential election (age 18+)		NA	61.5%
% 60+ who believe local service orgs understand needs	B	59.8%	44.1%
% 60+ who believe he/she can make a difference	B	62.2%	51.6%
% 60+ who believe working together can make a difference		83.9%	81.0%
% 60+ who volunteer at least once per month		28.6%	22.8%
% 60+ who attend community events (e.g., church, club) at least once per month	B	57.5%	44.2%
SAFETY AND TRANSPORTATION			
Violent crime rate / 100,000 persons		NA	253
Property crime rate / 100,000 persons		NA	2,394
# of motor vehicle fatalities involving adult age 60+/town		NA	90
# of motor vehicle fatalities involving adult age 60+/county		40	90
# of alternative transportation programs by county		26	43
Municipal senior transportation available		NA	NA
Volunteer driver programs available		NA	NA

HEALTHY AGING INDICATORS

COMMUNITY ESTIMATE²

STATE ESTIMATE²

ECONOMIC AND FINANCIAL

Poverty (65+ Population)

% with income below the poverty level past year	2.7%	8.6%
% 60+ receiving food stamps past year	3.9%	11.9%
% 65+ working past year	26.3%	16.3%
Household income (65+ householder)		
% households with annual income < \$20,000	12.3%	28.0%
% households with annual income \$20,000-49,999	23.5%	34.2%
% households with annual income ≥ \$50,000	61.6%	37.7%
% 60+ own home	48.1%	43.9%
% 60+ homeowners with mortgage	42.6%	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	\$21,732	\$22,188	0.98
Single, renter, good health	\$23,352	\$23,544	0.99
Couple, homeowner without mortgage, good health	\$31,896	\$32,352	0.99
Couple, renter, good health	\$33,516	\$33,708	0.99

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!