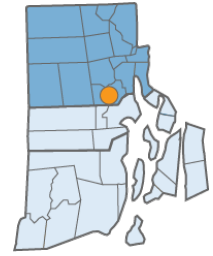


Cranston (Providence)

Cranston is a city in Providence County with 80,387 residents, and about 15% (12,029) are age 65 or older. While Cranston older adults fare better than state estimates by engaging in more preventive screening and less excessive drinking, they fare worse on several health indicators: hypertension, congestive heart failure, osteoporosis, anemia, benign prostatic hyperplasia, and chronic kidney disease. More than 66% are living with 4 or more chronic diseases. Age-friendly community resources include the library, YMCA, senior center, and Senior Services of Cranston. The senior center offers programs, such as health and wellness classes, bingo, painting, computer classes, RSVP, weekday meal program, and book club. The Transvan program offers seniors daily transportation throughout town for a monthly fee of \$25. Tri-Town Community Action agency provides case management for seniors receiving state-funded home and community services. Notably, significantly fewer adults age 60 and older in Cranston when compared to state estimates, believe that local service organizations understand their needs.



POPULATION CHARACTERISTICS	COMMUNITY ESTIMATE	STATE ESTIMATE
Total population all ages	80,387	1,052,567
Population 60 years or older as % of total population	20.8%	20.6%
Total population 60 years or older	16,759	217,066
Population 65 years or older as % of total population	14.9%	14.8%
Total population 65 years or older	12,029	155,558
% 65-74 years	47.7%	50.4%
% 75-84 years	33.1%	32.0%
% 85 years or older	19.3%	17.6%
Gender (65+ population)		
% female	59.5%	58.4%
Race/Ethnicity (65+ population)		
% White	94.0%	93.0%
% African American	1.3%	2.6%
% Asian	2.4%	1.3%
% Other	2.3%	3.2%
% Hispanic/Latino	4.3%	3.7%
Marital Status (65+ population)		
% married	50.5%	50.1%
% divorced/separated	12.7%	12.6%
% widowed	29.8%	30.8%
% never married	6.9%	6.4%
Education (65+ population)		
% with less than high school education	26.4%	26.8%
% with high school or some college	56.9%	50.7%
% with college degree	16.7%	22.5%
% of 60+ LGBT	2.1%	2.0%
% of 65+ population living alone	30.7%	30.4%
% of 65+ population who speak only English at home	82.0%	81.7%
% of 65+ population who are veterans of military service	22.4%	22.7%
Age-sex adjusted 1-year mortality rate	4.5%	4.8%

HEALTHY AGING INDICATORS	BETTER / WORSE STATE RATE¹	COMMUNITY ESTIMATE²	STATE ESTIMATE²
Geographic Migration (65+ population)			
% moved within same county		2.6%	3.5%
% moved from different county in Rhode Island		0.8%	0.8%
% moved from different state		0.1%	1.1%
% 60+ lived at same address 25 years or more	*	57.3%	48.1%
WELLNESS and PREVENTION			
% any physical activity within last month		70.4%	70.0%
% injured by a fall within last year		7.2%	10.0%
% ever had a hip fracture		4.2%	3.9%
% with self-reported fair or poor health status		21.2%	20.4%
% with 15+ physically unhealthy days last month		13.5%	13.9%
% with physical exam/check-up in past year		93.6%	91.9%
% met CDC preventive health screening goals	B	47.4%	39.5%
% flu shot past year		59.0%	59.1%
% pneumonia vaccine		73.7%	73.8%
% shingles vaccine		30.0%	30.3%
% cholesterol screening		89.9%	88.4%
% mammogram within last 2 years (women)		85.2%	81.8%
% colorectal cancer screening		78.8%	76.1%
Oral Health			
% with complete tooth loss		32.9%	32.4%
% with annual dental exam		76.1%	74.7%
# dentists per 100,000 persons (all ages)		73	58
NUTRITION/DIET			
% with 5 or more servings of fruit or vegetables per day		21.8%	23.0%
% obese		26.2%	25.4%
% high cholesterol		78.9%	78.0%
% current smokers		7.7%	8.9%
% excessive drinking	B	5.0%	8.9%
MENTAL HEALTH			
% with 15+ days poor mental health last month		8.3%	7.5%
% 60+ talked with family or friends almost daily		78.1%	75.3%
% ever diagnosed with depression		30.9%	30.0%
CHRONIC DISEASE			
% with Alzheimer's disease or related dementias		14.0%	14.4%
% with diabetes		36.9%	35.7%
% with stroke		12.1%	12.5%
% with chronic obstructive pulmonary disease		25.0%	24.1%
% with asthma		14.1%	14.0%

HEALTHY AGING INDICATORS	BETTER / WORSE STATE RATE¹	COMMUNITY ESTIMATE²	STATE ESTIMATE²
% with hypertension	W	80.4%	79.0%
% ever had a heart attack		5.0%	5.4%
% with ischemic heart disease		46.4%	45.9%
% with congestive heart failure	W	26.5%	24.8%
% with atrial fibrillation		14.1%	15.2%
% with osteoarthritis/rheumatoid arthritis		53.2%	52.0%
% with osteoporosis	W	22.4%	21.0%
% with glaucoma		26.9%	26.6%
% with cataract		67.0%	67.9%
% women with breast cancer		11.3%	10.7%
% with colon cancer		3.5%	3.2%
% men with prostate cancer		13.5%	13.8%
% with lung cancer		2.4%	2.1%
% with hypothyroidism		21.0%	21.1%
% with anemia	W	54.7%	52.2%
% with benign prostatic hyperplasia	W	43.0%	40.3%
% with chronic kidney disease	W	25.9%	23.3%
Summary chronic disease measures			
% with 4+ chronic conditions	W	66.3%	63.9%
% with 0 chronic conditions		8.1%	8.4%
LIVING WITH DISABILITY			
% 65+ with hearing difficulty		13.6%	13.8%
% 65+ with vision difficulty		5.5%	5.2%
% 65+ with cognition difficulty		6.0%	7.8%
% 65+ with ambulatory difficulty		20.2%	19.9%
% 65+ with self-care difficulty		6.7%	6.6%
% 65+ with independent living difficulty		12.2%	13.7%
ACCESS TO CARE			
Medicare (65+ population)			
% Medicare managed care enrollees	*	43.3%	39.4%
% dually eligible for Medicare and Medicaid	*	13.8%	14.6%
% with a regular doctor		96.4%	96.5%
% did not see a doctor when needed due to cost		5.1%	6.3%
# of primary care providers (within 5 miles)		380	1,566
# of hospitals (within 5 miles)		4	11
# of nursing homes (within 5 miles)		11	84
# of home health agencies (in same town)		25	38

HEALTHY AGING INDICATORS	BETTER / WORSE STATE RATE¹	COMMUNITY ESTIMATE²	STATE ESTIMATE²
SERVICE UTILIZATION			
Physician visits per year	*	8.6	8.0
Emergency room visits/1000 persons 65+ years per year		627	628
Part D monthly prescription fills per person per year	*	52.6	54.2
Home health visits per year	*	4.6	3.7
Durable medical equipment claims per year		2.1	2.0
Inpatient hospital stays/1000 persons 65+ years per year		307	284
Inpatient hospital readmissions (as % of admissions)		17.7%	16.9%
Skilled nursing facility stays/1000 persons 65+ years per year		110	100
Total skilled nursing home Medicare beds/1000 persons 65+ years		20	52
% 65+ getting Medicaid long term services and supports		5.5%	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)		83	NA
% of vacant housing units in community		6.7%	11.3%
% 60+ who are satisfied with neighborhood		76.5%	80.0%
# of registered voters (age 18+)		54,262	725,309
Voter participation rate in 2012 presidential election (age 18+)		64.4%	61.5%
% 60+ who believe local service orgs understand needs	w	37.7%	44.1%
% 60+ who believe he/she can make a difference		47.6%	51.6%
% 60+ who believe working together can make a difference		79.1%	81.0%
% 60+ who volunteer at least once per month		20.0%	22.8%
% 60+ who attend community events (e.g., church, club) at least once per month		39.3%	44.2%
SAFETY AND TRANSPORTATION			
Violent crime rate / 100,000 persons		187	253
Property crime rate / 100,000 persons		2,174	2,394
# of motor vehicle fatalities involving adult age 60+/town		5	90
# of motor vehicle fatalities involving adult age 60+/county		40	90
# of alternative transportation programs by county		26	43
Municipal senior transportation available		Yes	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	8.3%	8.6%
% 60+ receiving food stamps past year	11.3%	11.9%
% 65+ working past year	16.9%	16.3%

Household income (65+ householder)

% households with annual income < \$20,000	27.9%	28.0%
% households with annual income \$20,000-49,999	36.0%	34.2%
% households with annual income ≥ \$50,000	36.1%	37.7%
% 60+ own home	44.8%	43.9%
% 60+ homeowners with mortgage	40.9%	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!