

## Sabattus, Wales (Androscoggin)

The communities of Sabattus and Wales are located in Androscoggin County. Collectively, these areas are home to 1,172 residents aged 65 and older. Compared to state average rates, older residents fare better on some healthy aging indicators with lower rates of atrial fibrillation, cataract, hypertension, migraine, and prostate cancer. However, they have higher rates of heart attack and schizophrenia. Older residents in Androscoggin County varied in obtaining preventive health screenings: residents 18 and older got annual physical exams (78.3%) and annual dental exams (58.9%), while 47.4% of men and 33.9% of women 65 and older completed all CDC recommended vaccinations and cancer screenings.



POPULATION CHARACTERISTICS	Significantly different than state rate	Community estimate	State estimate
Total population (all ages)		6,935	1,366,949
Population 60 years or older as % of total population		26.2%	29.4%
Total population 60 years and older		1,820	402,170
Population 65 years or older as % of total population		16.9%	21.5%
Total population 65 years and older		1,172	293,488
% 65-74 years		59.1%	59.9%
% 75-84 years		34.8%	28.5%
% 85 years or older		6.1%	11.6%
% 65+ population who are female		57.3%	54.3%
% 85+ population who are female		63.4%	64.8%
Race and ethnicity of the population 65+			
% White		93.9%	96.6%
% African American		0.0%	0.3%
% Asian		0.0%	0.5%
% Other race(s)		6.1%	2.5%
% Hispanic		0.0%	0.7%
# 55+ who are Native American / Alaskan		1	1,794
Marital status of the population 65+			
% married		57.7%	57.0%
% divorced/separated	*	5.5%	16.9%
% widowed		32.9%	20.6%
% never married		3.9%	5.6%
Education of the population 65+			
% with less than high school education		15.3%	7.6%
% with high school or some college		69.3%	59.0%
% with college degree		11.9%	18.3%
% with graduate or professional degree	*	3.5%	15.1%
% 65+ population who speak only English at home	*	78.8%	92.7%
% 65+ population who are veterans of military service		21.0%	18.4%

POPULATION CHARACTERISTICS	Significantly different than state rate	Community estimate	State estimate
<b>HOUSING</b>			
% 65+ population who live alone		25.3%	28.3%
Average household size (all ages)		2.6	2.3
Median house value (all ages)	*	\$185,200	\$244,800
% 60+ own home	*	95.0%	80.4%
% 60+ homeowners who have mortgage		32.6%	40.6%
% 65+ households (renter) spend >35% of income on housing		9.8%	35.2%
% 65+ households (owner) spend >35% of income on housing		21.1%	20.4%
% grandparents who live with grandchildren		3.3%	1.8%
# of assisted living sites		0	21
<b>SOCIAL DETERMINANTS OF HEALTH</b>			
<b>COST OF LIVING</b>			
Elder Index			
Single, homeowner without mortgage, good health (County)	1.00	\$24,600	\$24,528
Single, renter, good health (County)	0.96	\$27,432	\$28,704
Couple, homeowner without mortgage, good health (County)	1.00	\$37,464	\$37,380
Couple, renter, good health (County)	0.97	\$40,296	\$41,556
<b>ECONOMIC</b>			
% 60+ receiving food stamps in past year		10.7%	10.8%
% 65+ employed in past year		18.9%	18.8%
% 65+ with income below the poverty line in past year		3.3%	9.0%
Median annual income for households with a householder age 65+		\$42,263	\$49,828
% 65+ households with annual income < \$20,000	*	2.6%	17.1%
% 65+ households with annual income \$20,000-\$49,999		57.7%	33.1%
% 65+ households with annual income \$50,000-\$99,999		32.9%	29.4%
% 65+ households with annual income \$100,000+	*	6.7%	20.4%
<b>WELLNESS</b>			
% 18+ with less than 7 hours sleep (County)		34.1%	NA
% 18+ without leisure-time physical activity (County)		31.9%	NA
% 18+ with fair or poor self-reported health status (County)		15.9%	NA
% 18+ with 14+ physically unhealthy days (County)		12.4%	NA
<b>COMMUNITY</b>			
Annual # unhealthy days due to air pollution for 65+ (County)		0	NA
AARP Age-Friendly Communities		Not yet	Yes
# of public universities and community colleges		0	42
# of public libraries		0	261
# of senior centers		0	27
# of Osher Lifelong Learning Institutes (OLLI)		0	1
% households with a smartphone (all ages)	*	88.8%	82.5%
% households with only a smartphone to access the Internet (all ages)		5.5%	6.4%
% households without a computer (all ages)		5.5%	7.1%
% households with access to Broadband (all ages)		82.8%	87.3%
% households without access to the Internet (all ages)		17.2%	12.3%

SOCIAL DETERMINANTS OF HEALTH	Significantly different than state rate	Community estimate	State estimate
<b>COMMUNITY</b>			
Voter participation rate in 2020 election (age 18+)		73.2%	74.1%
Homicide rate/100,000 persons (County)		NA	1.5
# firearm fatalities (all ages) (County)		58	770
# 65+ deaths by suicide (County)		16	290
Age-sex adjusted 1-year mortality rate		5.3%	4.2%
<b>TRANSPORTATION</b>			
% householders 65+ who own a motor vehicle		94.8%	91.0%
# fatal crashes involving adult age 60+ (County)		16	251
AllTransit Score		NA	0.51
<b>HEALTH OUTCOMES</b>			
<b>FALLS</b>			
% 65+ with hip fracture		2.1%	3.1%
<b>PREVENTION</b>			
% 18+ with physical exam/check-up in past year (County)		78.3%	NA
% mammography use among women age 50-74 Years (County)		70.7%	NA
% 50-75 with fecal occult blood test, sigmoidoscopy, or colonoscopy (County)		76.4%	NA
% 65+ men up to date on preventive services (County)		47.4%	NA
% 65+ women up to date on preventive services (County)		33.9%	NA
<b>NUTRITION &amp; DIET</b>			
% 18+ with obesity (County)		35.7%	NA
% 65+ with high cholesterol		66.8%	69.5%
% 18+ with cholesterol screening (County)		61.0%	NA
<b>ORAL HEALTH</b>			
% 18+ with annual dental exam (County)		58.9%	NA
# dentists per 100,000 persons (all ages) (County)		36.9	47.2
% 65+ with complete tooth loss (County)		15.8%	NA
<b>CHRONIC DISEASE</b>			
% 65+ with Alzheimer's disease or related dementias		8.2%	11.0%
% 65+ with anemia		34.5%	38.1%
% 65+ with asthma		9.5%	11.8%
% 65+ with atrial fibrillation	B	10.8%	14.3%
% 65+ with benign prostatic hyperplasia (men)		36.4%	35.2%
% 65+ with breast cancer (women)		10.4%	9.6%
% 65+ with cataract	B	50.6%	60.4%
% 65+ with chronic kidney disease		29.5%	29.4%
% 65+ with chronic obstructive pulmonary disease		25.2%	20.9%
% 65+ with colon cancer		2.2%	2.1%
% 65+ with congestive heart failure		16.3%	18.1%
% 65+ with diabetes		30.5%	26.2%
% 65+ with endometrial cancer (women)		2.0%	2.2%
% 65+ with fibromyalgia, chronic pain, and fatigue		32.1%	34.8%
% 65+ with glaucoma		20.2%	23.3%

HEALTH OUTCOMES	Significantly different than state rate	Community estimate	State estimate
<b>CHRONIC DISEASE</b>			
% 65+ ever had a heart attack	W	9.1%	6.1%
% 65+ with HIV/AIDS		0.29%	0.17%
% 65+ with hypertension	B	59.8%	67.1%
% 65+ with ischemic heart disease		35.9%	35.3%
% 65+ with liver disease		13.2%	10.2%
% 65+ with lung cancer		1.7%	1.8%
% 65+ with migraine and other chronic headache	B	3.7%	7.1%
% 65+ with osteoarthritis or rheumatoid arthritis		50.3%	51.5%
% 65+ with osteoporosis		15.6%	15.7%
% 65+ with peripheral vascular disease		15.6%	15.3%
% 65+ with pressure ulcer or chronic ulcer		5.7%	6.8%
% 65+ with prostate cancer (men)	B	6.6%	10.3%
% 65+ with stroke		9.8%	10.0%
% 65+ with 4+ (out of 15) chronic conditions		55.3%	55.5%
% 65+ with 0 chronic conditions	B	19.9%	12.4%
<b>BEHAVIORAL HEALTH</b>			
# drug overdose deaths (all ages) (County)		164	2,080
% 65+ with substance use disorder		9.7%	8.7%
% 18+ excessive drinking (County)		15.5%	NA
% 65+ with tobacco use disorder		12.5%	13.6%
% 18+ current smokers (County)		18.0%	NA
<b>MENTAL HEALTH</b>			
% 18+ with 14+ days poor mental health (County)		16.7%	NA
% 65+ with depression		33.8%	34.8%
% 65+ with anxiety disorder		31.8%	30.7%
% 65+ with post-traumatic stress disorder		3.5%	3.9%
% 65+ with schizophrenia & other psychotic disorder	W	5.2%	3.2%
<b>LIVING WITH DISABILITY</b>			
% 65+ with self-reported hearing difficulty		20.4%	15.5%
% 65+ with self-reported vision difficulty		2.9%	4.6%
% 65+ with self-reported cognition difficulty		6.5%	7.5%
% 65+ with self-reported ambulatory difficulty		24.3%	17.8%
% 65+ with self-reported self-care difficulty		2.3%	5.2%
% 65+ with self-reported independent living difficulty		10.8%	10.5%
<b>CAREGIVING</b>			
# of Alzheimer's support groups		0	11
% grandparents raising grandchildren		0.70%	0.55%

HEALTH OUTCOMES	Significantly different than state rate	Community estimate	State estimate
-----------------	---	-----------------------	-------------------

## ACCESS TO CARE

% 65+ dually eligible for Medicare and Medicaid	20.9%	18.7%
% 65+ Medicare managed care enrollees *	60.9%	50.3%
% 18-64 who lack health insurance (County)	8.6%	NA
# of primary care providers	0	2,199
# of hospitals	0	37
# of home health agencies	0	20
# of skilled nursing facilities	0	87
# of hospice agencies	0	14
# of community health centers	0	164
# of adult day health centers	0	33

SERVICE UTILIZATION	
1. How often do you use the service?	
2. How satisfied are you with the service?	
3. How likely are you to recommend the service to others?	
4. How much do you value the service?	
5. How often do you use the service?	
6. How satisfied are you with the service?	
7. How likely are you to recommend the service to others?	
8. How much do you value the service?	

# physician visits per year	4.8	4.7
# emergency room visits/1000 persons 65+ years annually	598.7	556.1
# Part D monthly prescription fills per person annually	51.8	49.8
# home health visits annually *	1.0	1.7
# durable medical equipment claims annually	1.7	2.0
# inpatient hospital stays/1000 persons 65+ years annually	159.9	169.8
% Medicare inpatient hospital readmissions (as % of admissions)	20.0%	14.3%
# skilled nursing facility stays/1000 persons 65+ years annually	38.1	43.3
# skilled nursing home Medicare beds/1000 persons 65+ years	0.0	20.0
% 65+ getting Medicaid long term services and supports *	1.1%	2.1%
% 65+ hospice users	3.0%	3.0%
% 65+ hospice users as % of decedents	44.8%	49.7%

## NOTES

## TECHNICAL NOTES

\*For more information on data sources, measures, and methodology used in the 2025 Maine Healthy Aging Data Report see our technical documentation at ([healthyagingdatareports.org](https://healthyagingdatareports.org)). For most indicators, the community and state values are 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. We balance two goals. First, we aim to report data at very local levels because we believe change is often locally driven. Second, we vowed to protect the privacy of the people providing the information reported. Thus, given the constraints of the data analyzed, we used a hierarchical approach to reporting.

### Data Sources:

- *Population Characteristics: The U.S. Census Bureau (American Community Survey (ACS)) 2018-2022.*
- *Housing: ACS, 2018-2022; Maine Home Care Association (MEHCA), 2023.*
- *Cost of Living: Center for Social and Demographic Research on Aging at the University of Massachusetts Boston, 2023.*
- *Economic: ACS, 2018-2022.*
- *Wellness: Centers for Disease Control and Prevention (CDC; Behavioral Risk Factor Surveillance Survey (BRFSS)), 2020-2021.*
- *Community: AARP, 2023; ACS, 2018-2022; CDC WONDER, 2016-2020; The CMS Master Beneficiary Summary File ABCD/Other (CMS), 2020-2021; NECHE, 2023; State of Maine, 2023; Maine State Library, 2023; Maine Secretary of State, 2023; OLLI, 2023; U.S. EPA Air Compare, 2023.*
- *Transportation: ACS, 2018-2022; AllTransit™, 2023; NHTSA, 2018-2022.*
- *Falls: CMS, 2020-2021.*
- *Prevention: BRFSS, 2020-2021.*
- *Nutrition/Diet: BRFSS, 2020-2021; CMS, 2020-2021.*
- *Oral Health: BRFSS, 2020-2021; HRSA, 2023.*
- *Chronic Disease: CMS, 2020-2021.*
- *Behavioral Health: BRFSS, 2020-2021; CDC WONDER 2016-2020; CMS, 2020-2021.*
- *Mental Health: BRFSS, 2020-2021; CMS, 2020-2021.*
- *Living with Disability: ACS, 2018-2022.*
- *Caregiving: ACS, 2018-2022; Alzheimer's Association, 2023.*
- *Access to Care: BRFSS, 2020-2021; CMS, 2020-2021; HRSA, 2023; Medicare.gov, 2023; Maine.gov, 2023.*
- *Service Utilization: CMS, 2020-2021.*

Healthy Aging Data Report Research Team (2025): Beth Dugan PhD, Nina Silverstein PhD, Chae Man Lee PhD, Taylor Jansen PhD, Yan-Jhu Su, Yan Lin, Shan Qu, Tiffany Tang & Qian Song PhD, from the Gerontology Institute at the University of Massachusetts Boston. The Point32Health Foundation supported the research and provided important guidance.

Suggested citation: Dugan E, Lee CM, Jansen T, Su YJ, Silverstein NM, & Song Q. (2025). The Maine 2025 Healthy Aging Data Report. Retrieved from [www.healthyagingdatareports.org](https://www.healthyagingdatareports.org)

Questions or Ideas? [Beth.dugan@umb.edu](mailto:Beth.dugan@umb.edu)



Point32Health  
Foundation

In partnership with



a Point32Health company