## Chilmark (Dukes)

Chilmark is a rural town located on Martha's Vineyard with 149 residents aged 65 and over. Chilmark is a car dependent town with a walkscore of only 42/100. Compared to state averages, older residents of Chilmark do better on several healthy aging indicators including: self-reported fair or poor health, Alzheimer's disease, diabetes, COPD, hypertension, heart attacks, ischemic heart disease, congestive heart failure, lung cancer, tooth loss, hospital stays, nursing home stays, prescription medication use, physical activity, annual dental exams, and obesity. However, older residents of Chilmark score worse on prostate cancer and osteoarthritis/rheumatoid arthritis. Community resources



to promote healthy aging include a Council on Aging, a recreation department, and it is a Mass in Motion community.

POPULATION COMPOSITION <sup>1</sup>	COMMUNITY ESTIMATE	STATE ESTIMATE
Total population all ages	866	6,547,629
Population 65 years or older as % of total population	18.6%	13.7%
Total population 65 years or older	149	891,303
% 65-74 years	49.0%	49.8%
% 75-84 years	47.0%	34.3%
% 85 years or older	4.0%	15.8%
Living Situation (65+ population)		
% living alone	30.2%	32.0%
Gender (65+ population)		
% female	57.0%	58.5%
Race/Ethnicity (65+ population)		
% White	100.0%	91.5%
% African American	0.0%	3.8%
% Asian	0.0%	2.7%
% Other	0.0%	2.1%
% Hispanic/Latino	0.0%	2.9%
Marital Status (65+ population)		
% married	64.4%	50.9%
% divorced/separated	11.4%	11.7%
% widowed	17.4%	30.2%
% never married	6.7%	7.3%
Education (65+ population)		
% with less than high school education	3.4%	20.4%
% with high school or some college	10.7%	54.5%
% with college degree	85.9%	25.1%
Medicare (65+ population)		
% Medicare managed care enrollees	1.0%	21.2%
% dually eligible for Medicare and Medicaid	3.7%	15.9%

HEALTHY AGING INDICATORS	BETTER / WORSE STATE RATE	COMMUNITY ESTIMATE	STATE ESTIMATE
PHYSICAL/MENTAL HEALTH <sup>2</sup>		*	I
% with self-reported fair or poor health status	В	12.3%	20.7%
% injured with a fall in last 3 months		5.4%	5.1%
% with 15+ physically unhealthy days last month		11.5%	14.0%
% disabled for a year or more		27.3%	31.0%
Age-sex adjusted 1-year mortality rate	В	2.6%	4.7%
% with 15+ days poor mental health last month		4.9%	6.7%
% satisfied with life	В	97.6%	95.8%
% receiving adequate emotional support	В	86.8%	80.7%
% ever diagnosed with depression		28.2%	28.6%
CHRONIC DISEASE <sup>3</sup>			
% with Alzheimer's disease or related dementias	В	9.7%	14.4%
% with diabetes	В	18.5%	32.1%
% with stroke		10.8%	12.6%
% with chronic obstructive pulmonary disease (COPD)	В	18.3%	23.3%
% with hypertension	В	61.0%	77.5%
% ever had a heart attack	В	1.9%	5.0%
% with ischemic heart disease	В	36.8%	44.1%
% with congestive heart failure	В	17.6%	24.8%
% with osteoarthritis/rheumatoid arthritis	W	56.9%	50.2%
% ever had hip fracture		4.4%	3.9%
% with glaucoma		22.0%	25.1%
% women with breast cancer		13.3%	10.3%
% with colon cancer		2.2%	3.3%
% men with prostate cancer	W	20.4%	14.6%
% with lung cancer	В	0.6%	2.1%
% with osteoporosis	The state of the s	21.1%	21.7%
% with 4+ chronic conditions (of 14)	В	46.5%	58.6%
% with no chronic conditions (of 14)	В	11.5%	8.2%
% with complete tooth loss	В	27.2%	35.9%
NUTRITION/DIET4		•	
% with 5 or more servings of fruit or vegetables per day		27.4%	24.9%
% obese	В	16.4%	22.6%
% current smokers		6.9%	9.1%
% excessive drinking		10.7%	9.2%

HEALTHY AGING INDICATORS	BETTER / WORSE STATE RATE	COMMUNITY ESTIMATE	STATE ESTIMATE
ACCESS TO CARE⁵			
% with a regular doctor	AND	94.9%	96.2%
% did not see doctor when needed due to cost		3.1%	3.7%
# dentists per 100,000 persons (all ages)		54	85
SERVICE UTILIZATION <sup>6</sup>	2.7		
Inpatient hospital stays/1000 persons 65+ years per year	*	249	354
Inpatient hospital readmissions (as % of admissions)		15.9%	17.8%
Skilled nursing facility stays/1000 persons 65+ years per year	*	66	117
Home health visits per year		2.3	4.2
Physician visits per year		4.6	7.6
Durable medical equipment claims per year	*	1.1	2.1
Emergency room visits/1000 persons 65+ years per year		619	646
Part D monthly prescription fills per person per year	*	40.0	52.7
WELLNESS and PREVENTION <sup>7</sup>			
% any physical activity last month	В	80.3%	72.4%
% mammogram within last 2 years (women)		83.5%	85.4%
% colorectal cancer screening		65.2%	65.6%
% cholesterol screening		96.1%	95.8%
% flu shot past year		65.9%	67.8%
% pneumonia vaccine		61.0%	60.8%
% shingles vaccine		17.0%	14.9%
% with physical exam in past year		88.4%	90.2%
% with annual dental exam	В	83.9%	76.1%
COMMUNITY VARIABLES8	A. HIRANIA MARANA M	COMMUNITY ESTIMATE	STATE ESTIMATE
Walkability of Community			
Walkability score (0-100)	Car Dependent	42.0	52.6
Access to groceries (0-20)		20.0	12.0
Access to restaurants (0-20)		5.1	11.3
Access to shopping (0-15)		3.6	6.1
Access to coffee shops (0-15)		4.7	6.7
Access to schools (0-6)		6.0	4.2
Access to parks (0-6)		3.5	4.8
Access to bookstores (0-6)		0.0	1.6
Access to entertainment (0-6)		6.0	2.3
Access to banking (0-6)		5.8	3.5
Average block length in feet (good, fair, poor)	Poor	1,047	643
# of intersections per square mile (good, fair, poor)	Poor	15	105

HEALTHY AGING INDICATORS		COMMUNITY ESTIMATE	STATE ESTIMATE
SAFETY <sup>9</sup>			
Violent crime rate / 100,000 persons		115	428
Property crime rate / 100,000 persons		2,296	2,259
ECONOMIC VARIABLES <sup>10</sup>			
Household income (65+ householder)			
% households with annual income < \$20,000		13.0%	28.4%
	\$ COUNTY ESTIMATE	\$ STATE ESTIMATE	RATIO OF COUNTY TO STATE
Elder Economic Security Standard Index			
Single, homeowner without mortgage, good health	\$24,672	\$23,808	1.04
Single, renter, good health	\$31,212	\$27,924	1.12
Couple, homeowner without mortgage, good health	\$37,020	\$35,532	1.04
Couple, renter, good health	\$43,560	\$39,648	1.10

See our technical report for information on data sources, methodology, and margin of errors. For most indicators the reported community and state values are both estimates derived from sample data. Hence 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. "Better" is used where a higher/lower value should have positive implications for the health of older residents. "Worse" is used where a higher/lower score should have negative implications for the health of older residents. When the implication for healthy aging is unclear we use an \*.

## **Explanatory Notes:**

<sup>&</sup>lt;sup>1</sup> Total population estimates are from the 2010 Census and are reported for individual cities/towns and subareas within Boston. Medicare managed care and dual eligible estimates are for beneficiaries 65 years or older in 2011 from the 2011 Centers for Medicare and Medicaid Services (CMS) Master Beneficiary Summary File (MBSF). For these estimates some towns with smaller populations were aggregated together resulting in 311 geographic areas in the state. The same estimate is reported for all cities/towns within the same aggregated geographic area. All other estimates are from the 2007-2011 American Community Survey (ACS) and are reported for individual cities/towns and subareas within Boston. Percentages may not add up to 100% due to rounding error.

<sup>&</sup>lt;sup>2</sup> Mortality and depression rates were estimated from 2010-2011 CMS MBSF data for 311 geographic areas (see note 1). The 2007-2011 Behavioral Risk Factor Surveillance System (BRFSS) is the source for all other estimates. BRFSS indicators were estimated for persons 60 years or older for 33 geographic areas based on Aging Services Access Point (ASAP) geographic service areas. The same rate is reported for all cities/towns within the same ASAP service area.

<sup>&</sup>lt;sup>3</sup> The tooth loss rate was estimated for 33 areas from BRFSS data (see note 2). All other rates were estimated for 311 areas from CMS MBSF data (see note 1)

<sup>&</sup>lt;sup>4</sup> All rates were estimated for 33 areas from BRFSS data (see note 2).

<sup>&</sup>lt;sup>5</sup> Rates for access to doctors were estimated for 33 areas from BRFSS data (see note 2). Dentist supply estimates for 2010 were from the Area Resource File for 14 counties. The same rate is reported for all cities/towns within the same county.

<sup>&</sup>lt;sup>6</sup> All rates were estimated for 311 areas from CMS MBSF data (see note 2).

<sup>&</sup>lt;sup>7</sup> All rates were estimated for 33 areas from BRFSS data (see note 2).

Estimates were downloaded from <a href="http://www.walkscore.com/">http://www.walkscore.com/</a> in July-August, 2013 using the finder term "city/town name, Massachusetts." Estimates are reported for individual cities/towns and subareas within Boston. "NA" is reported for towns where data on block length and intersection density were not posted. The state estimates are simple unweighted averages of the values reported for all towns with posted data and the 16 subareas within Boston.

<sup>&</sup>lt;sup>9</sup> Estimates are from 2007-2011 FBI Uniform Crime Reports (<a href="http://www.fbi.gov/stats-services/crimestats">http://www.fbi.gov/stats-services/crimestats</a>). Some towns with smaller populations were aggregated together resulting in 310 geographic areas in the state. The same rate is reported for all cities/towns within these aggregated geographic areas and for subareas within Boston.

<sup>&</sup>lt;sup>10</sup> The household income < \$20,000 estimates are from the 2007-2011 ACS and are reported for individual cities/towns. The city of Boston rate is reported for all subareas within Boston. The 2010 Elder Economic Security Standard Index estimates were downloaded from <a href="http://www.basiceconomicsecurity.org/El/">http://www.basiceconomicsecurity.org/El/</a> for 14 counties for persons 65 years or older. The same rate is reported for all cities/towns within the same county.