



# Healthy Aging Data to Promote Community Action

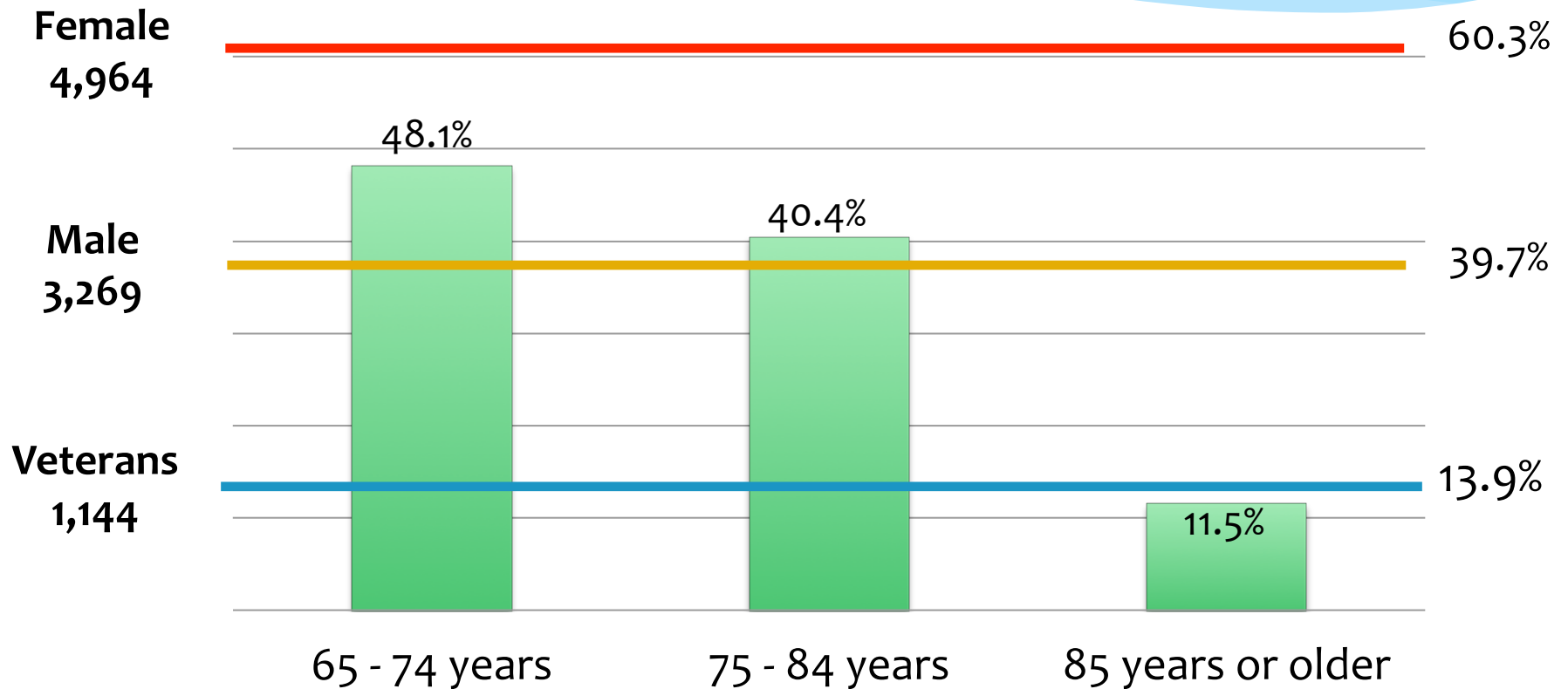
**APPLIED RESEARCH IN AGING: GERCTR 325**

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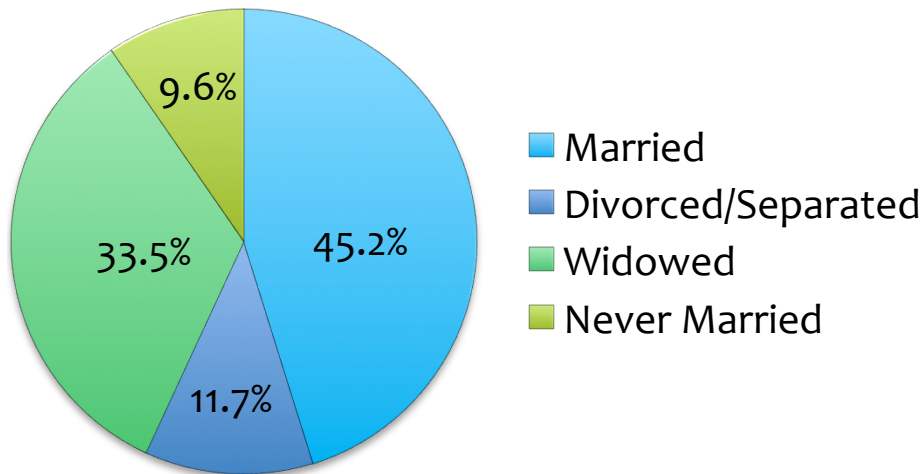
**Spring 2016**

# 65+ Population Distribution



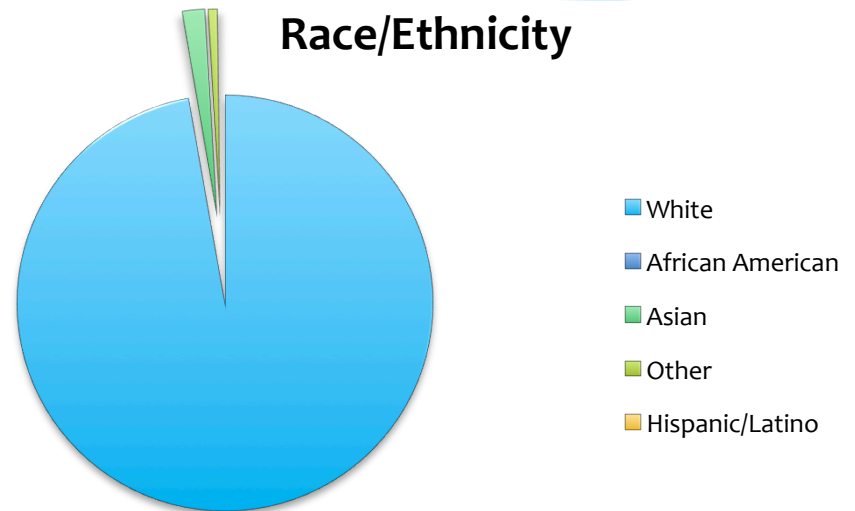
# Population Characteristics 65+

2,659 (32.3%)  
65 and over live alone



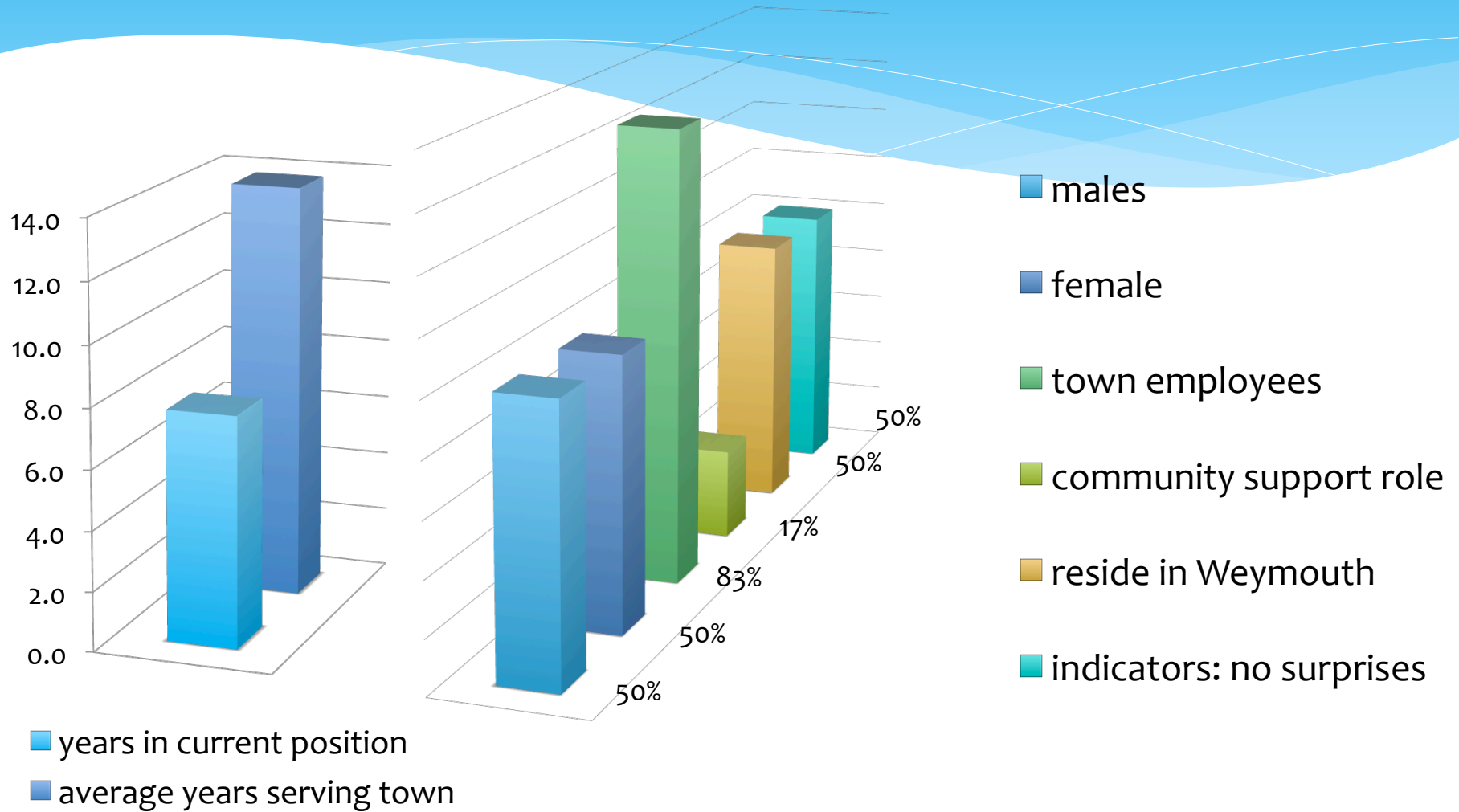
The combination of people age 65 years or older that are divorced/separated, widowed, or never married comprises 54.8% of the 65+ population.

Race/Ethnicity



White	97.4%
African American	0.2%
Asian	1.7%
Other	0.7%
Hispanic/Latino	0.2%

# Research Sample



# Community Leadership Participants

	Years in Current Position	Average Years Serving Town	Reside in Weymouth (Years)
1. Mayor of Weymouth	0.3	24	30
2. Dept. of Public Health – Wellness Coordinator	10	10	0
3. Director – Veterans’ Administration	3	3	0
4. Director – Planning and Development	7	7	30
5. Elder Services – Outreach Coordinator	16	16	42
6. Director – Home Care Division of South Shore Hospital	10	23	0
<b>Average</b>	<b>8</b>	<b>14</b>	<b>17</b>

50% of participants were not surprised by the healthy aging indicators presented.

# Chronic Diseases

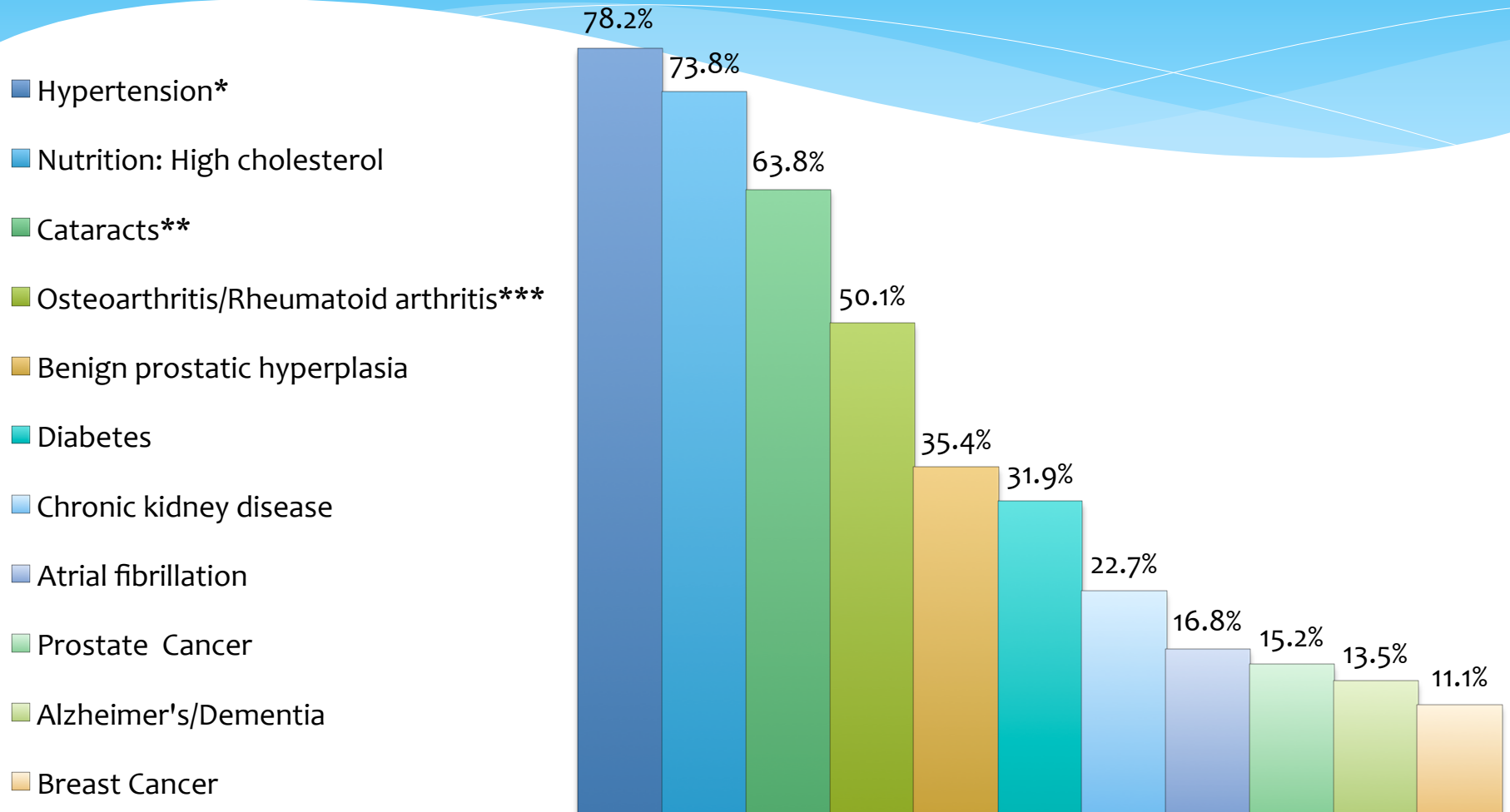
Exceeding State Estimates

	No. of People	Weymouth	State
Anemia	4,421	53.7%	48.7%
Ischemic Heart Disease*	3,952	48.0%	44.1%
Chronic Obstructive Pulmonary Disease	2,396	29.1%	23.3%
Congestive Heart Failure	2,346	28.5%	24.8%
Stroke	1,128	13.7%	12.6%
Colon Cancer	321	3.9%	3.3%

## Chronic Disease Measures

Four or more chronic conditions	5,244	63.7%	61.5%
Zero chronic conditions	683	8.3%	7.80%

# Additional Conditions of Concern



**Co-Morbidity: 4+ Chronic Conditions: 63.7% (5,244)**

*preventable, manageable\**  
*age-related; manageable w/regular treatments\*\**  
*focus on reduce pain, improve function\*\*\**

# Programs and Services

- HealthyWey & Mass in Motion
- Healthy Dining Program
- Weymouth Food Pantry
- Farmers' Market SNAP w/match
- Annual Health Fair
- Community education
- Blood pressure screenings/  
flu clinics/B12 clinics/vaccines
- Quincy Weymouth Wellness Initiative
- Substance Abuse Prevention
- Community Police Officer and Fire Safety Program
- Annual Safety Fair
- Capital improvements for Senior Center
- Community programs at CoA for CHF and COPD management



# Walkability and Transportation

**Walkability Score = 37.0**

- \* Weymouth is a car dependent community
- \* Fragmented local MBTA services
- \* Complete Streets Policy (MassDOT)
- \* Elder Services and The Ride (MBTA)
- \* (MassHealth) NaviCare to provide 70 personal/social rides and unlimited medical rides.
- \* For Veterans, RSVP for Norfolk County (volunteer program) provides rides to appointments, DAV Rides for Vets, and The Ride (MBTA)

# Recommendations

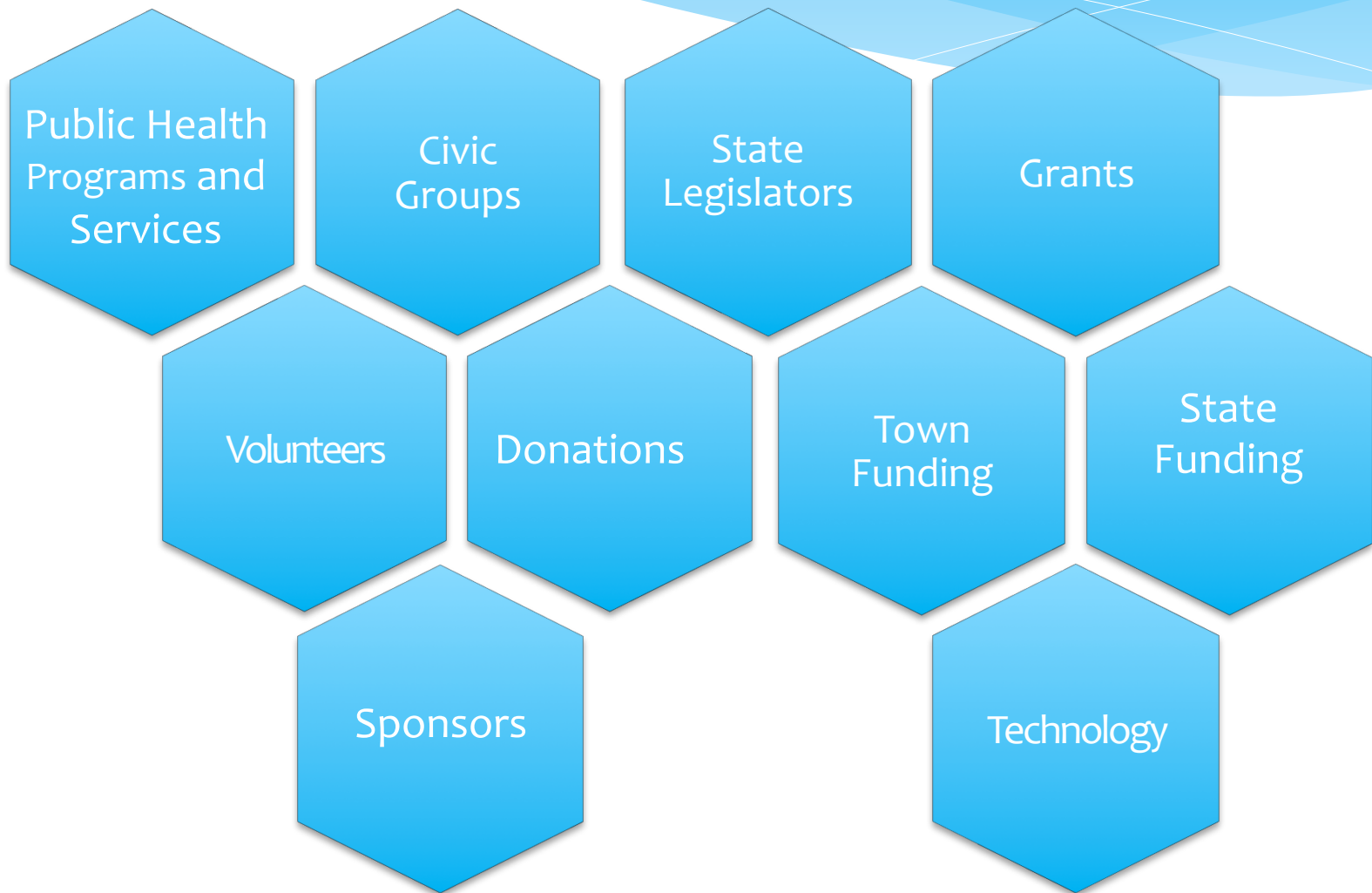
## Short-Term

- \* Continue grant work
- \* Expand outreach
- \* Assess elderly housing needs
- \* Build volunteer base
- \* Town funding – support and sustain existing grant programs

## Long-Term

- \* Capital Improvements to Council on Aging
- \* Utilize technology to expand outreach
- \* Increase revenue base
- \* Review zoning models
- \* Increase Senior Center budget for staffing (*e.g.*, outreach, drivers)

# Resources



# The THPF Healthy Aging Planning Worksheet

Healthy Aging Issue: **Very high chronic disease rates**

Strategy: **Five in Focus**

## Resources

Department of  
Public Health

Weymouth Elder  
Services

South Shore  
Hospital

Manet Community  
Healthcare



## Outputs

Tasks	People	Timeline
Select Top 5 chronic diseases of concern	RN, Public Health Elder Services Outreach Community Director at South Shore Hospital	10 days
Establish program goals	Clinical Director at Manet	30 days
Expand outreach and measure participation – report quarterly	Dept of Pubic Health Weymouth Elder Services	Quarterly (90 days)



## Outcomes

### Initial:

- Identify Five in Focus
- Define Program Develop an Implementation Plan

### Intermediate:

- Successful implementation
- Generate awareness and increase participation
- Continue promotion
- Quarterly measures

### Long-term:

- Meet program objective for chronic disease in focus
- Reassess and repeat process for next Top 5

### Who we reach:

Older adults and Caregivers at Senior Center or through programs supported by local civic organizations, churches and libraries.

# Our town is a great place to grow old because...

*“Weymouth is a very caring community. It has a lot of heart.”*

*“I Love Weymouth!, great health care, public health nurses, hospital, parks, services offered by the town, Elder Services very active, well-run town, safe, police presence is good.”*

*“There is a sense of community; resources available to the aging population . . .”*

## HEALTHY AGING PROFILE OF WEYMOUTH, MA

Kathleen DiLorenzo

## GERCTR 325 – APPLIED RESEARCH IN AGING

**Weymouth Population Characteristics**

Weymouth is a town in Norfolk county with 8,233 residents aged 65 or older representing 15.4% of the total population, slightly higher than the state estimate (13.7%). The largest segment is the 65 to 74 years group at 48.1%, slightly lower than the state estimate of 49.8%. The population of 75 to 84 years is 40.4%, which is higher than the state estimate of 34.3%. The 85 years or older group represents only 11.5% as compared to the state estimate of 15.8%.

Race/ethnicity of Weymouth's 65+ population is primarily White at 97.4% against the state estimate of 91.5%. The race/ethnicity of African American is represented at 0.2%, Asian at 1.7%, Hispanic/Latino is 0.2% and Other race is 0.7, collectively lower than the state estimates.

More than half of Weymouth's 65+ population is married, while about one third are widowed. Less than 10% never married and 11.7% are divorced or separated.

The education level for the 65+ population is 68.8 high school or some college, higher than the state estimate of 54.5%. Only 15.7% have a college degree, which is about 10% less than the state estimate. In addition, 15.5% have less than a high school education, below the state estimate of 20.4%

**Summary of Indicators**

- *Wellness and prevention* (physical activity, injury, vaccines, screenings, oral health):
  - Weymouth ranks above state average for oral health as well as vaccinations and screenings, with the exception of mammogram rates.
  - Weymouth ranks lower than state average on falls.

- *Nutrition/diet* (obesity, cholesterol, smoking, drinking):
  - Weymouth has higher obesity, cholesterol, and alcohol consumption rates than the state average, with less fruits or vegetables consumed than average.
  - On a positive note, the percentage of smokers is below state average.
- *Mental health* indicators (life satisfaction, depression, emotional support):

Weymouth residents are less than one percentage point above or below state averages, although data in this category may be underreported. 95.6% are satisfied with life.
- *Chronic disease*
  - Weymouth is better than state estimates on rates of osteoporosis, glaucoma, cataracts, hyperthyroidism, and BPH [benign prostatic hyperplasia].
  - Older residents of Weymouth do worse than state average on healthy aging indicators including stroke, COPD, ischemic heart disease, congestive heart failure, colon cancer, anemia, and annual inpatient hospital stays.
- *Living with disability* (difficult with hearing, vision, cognition, ambulatory, self care, or independent living)
  - Weymouth residents over 65 living with a disability are less than state estimates; however the predominant group in this area is 75+ years old (4,273 residents [51.9%] of the 65+ population]. Of this group, 1,093 (25.6%) people 75 years and older having difficulty living independently and 539 (12.6%) of the 75+ groups have some type of cognitive impairment and 1,205 (28.2%) have ambulatory impairment.
- *Access to care*: Weymouth residents have good access to care. 95% of the 65+ population has a regular doctor. There are over 300 primary care providers, 1 major hospital, 14 nursing homes and 38 health care agencies in the town.

- *Service utilization* (physician visits, hospital visits, prescription fills, home health visits, hospital stays and readmissions, skilled nursing facility stays).
  - Service utilization rates are slightly higher than the state estimates with 8.3 physician visits per year; 53.1 prescription fills per person/year, 3,210 inpatient hospital stays (390/1000) and 1,045 (127/1000) skilled nursing facility stays.
- *Community variables and civic engagement* (air quality, walkability, voter participation)
  - Weymouth is a car dependent community, receiving a walkability score of only 37.0, far below the state average.
  - Voter participation (age 18+) is higher than state average at 79.8%.
- *Safety* (crime rates, motor vehicle fatalities)
  - Weymouth's crime rate (violent and property) is significantly lower than the state estimates.
  - The number of motor vehicle fatalities involving adults age 60+ is significantly lower than state estimates for both the town and county.
- *Economic variables* (poverty, household income, elder economic security index)
  - 592 (7.2%) people age 65 or older have income below the poverty level of less than \$20,000, which is about 2% lower than the state estimates.
  - 3,589 (43.6%) live in households with an annual income of \$20,000 - \$49,999, which is higher than state estimates.
  - 2,725 (33.1%) live in households with an annual income of \$50,000 or more.  
This represents less than the state estimate.



## Conclusions

1. Although the indicators place Weymouth below the state estimates for cognitive impairment, diabetes, heart attacks, osteoarthritis, rheumatoid arthritis, osteoporosis, glaucoma, cataracts, and BPH, the numbers are still significantly high and need to be addressed. These indicators show us that 1,111 (13.5%) suffer from Alzheimer's or other dementia, 2,626 (31.9%) are diabetic, 4,125 (50.1%) have a form of osteo or rheumatoid arthritis, 5,253 (63.8%) have cataracts, 2,914 have age-related BPH.
  2. 5,244 (63.7%) residents possess four or more chronic conditions -- higher than state average of 61.5%, indicating a need for more wellness and self-management programs.
  3. Nutrition falls short of the state estimate, with only 1,901 (23.1%) of older adults consuming five or more servings of fruits or vegetables per day. This seems to have a direct correlation to the 23.1% of residents over age 65 (1,901) battling obesity, or the fact that 6,076 (73.8% -- slightly higher than state estimate of 73.6%) residents have high cholesterol and 6,438 (78.2%) are being treated for hypertension.
- Furthermore, excessive drinking rates – 12% (988) [higher than state estimate of 9.2%], may contribute to the rates of high cholesterol and chronic disease.

## Interventions/Recommendations

- Partner with physician groups or hospital to educate and implement programs to raise awareness, promote self-management of chronic disease and reduce rates of hospital readmissions.
- Assess and define transportation options available to older adults in the community.