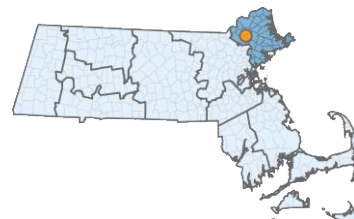# North Andover (Essex)

North Andover is a town in Essex County with 4,843 residents aged 65 and older. Older residents in North Andover fare better on some health indicators with lower rates of tooth loss, asthma, peripheral vascular disease, tobacco use disorder, depression, PTSD, and schizophrenia. However, they face higher rates of anemia, benign prostatic hyperplasia, glaucoma, osteoarthritis/rheumatoid arthritis, and high cholesterol. They are more likely to have a regular doctor and annual dental exams. Community resources to support healthy aging include a COA, one adult day health center, three home health agencies, three assisted living facilities, one hospice agency, one public library, 50 primary care providers, and three skilled nursing facilities.

POPULATION CHARACTERISTICS	Significantly different than state rate	Community estimate	State estimate
Total population (all ages)		30,847	6,984,205
Population 60 years or older as % of total population		23.0%	23.8%
Total population 60 years and older		7,099	1,661,076
Population 65 years or older as % of total population		15.7%	17.1%
Total population 65 years and older		4,843	1,195,589
% 65-74 years		59.3%	58.4%
% 75-84 years	*	22.2%	28.1%
% 85 years or older		18.5%	13.4%
% 65+ population who are female		54.2%	56.2%
% 85+ population who are female		54.0%	66.6%
Race and ethnicity of the population 65+			
% White		90.0%	86.3%
% African American	*	1.0%	4.4%
% Asian		4.6%	4.0%
% Other race(s)		4.4%	5.3%
% Hispanic		3.0%	4.8%
# 55+ who are Native American / Alaskan		15	3,537
Marital status of the population 65+			
% married		49.3%	54.0%
% divorced/separated		17.7%	15.8%
% widowed		26.6%	21.1%
% never married		6.3%	9.0%
Education of the population 65+			
% with less than high school education	*	4.0%	12.7%
% with high school or some college		48.7%	50.3%
% with college degree	*	26.6%	18.1%
% with graduate or professional degree		20.7%	18.9%
% 65+ population who speak only English at home	*	86.9%	83.1%
% 65+ population who are veterans of military service		10.2%	12.7%
% 60+ LGBT		2.5%	3.5%

POPULATION CHARACTERISTICS	Significantly different than state rate	Community estimate	State estimate
HOUSING			
% 65+ population who live alone		33.6%	28.1%
Average household size (all ages)	*	2.6	2.5
Median house value (all ages)	*	$621,100	$483,900
% 60+ own home		75.8%	72.9%
% 60+ homeowners who have mortgage		47.6%	46.8%
% 65+ households (renter) spend >35% of income on housing		51.3%	43.6%
% 65+ households (owner) spend >35% of income on housing		25.8%	27.3%
% grandparents who live with grandchildren		2.9%	2.8%
# of assisted living sites		3	275
SOCIAL DETERMINANTS OF HEALTH			
COST OF LIVING			
Elder Index			
Single, homeowner without mortgage, good health (County)	1.00	$30,600	$30,552
Single, renter, good health (County)	1.03	$39,888	$38,580
Couple, homeowner without mortgage, good health (County)	0.98	$43,728	$44,520
Couple, renter, good health (County)	0.97	$53,016	$54,548
ECONOMIC			
% 60+ receiving food stamps in past year	*	4.6%	13.3%
% 65+ employed in past year		24.8%	22.0%
% 65+ with income below the poverty line in past year		8.2%	9.9%
Median annual income for households with a householder age 65+		$68,825	$61,624
% 65+ households with annual income < $20,000		15.5%	17.1%
% 65+ households with annual income $20,000-$49,999		20.1%	25.3%
% 65+ households with annual income $50,000-$99,999		23.1%	26.7%
% 65+ households with annual income $100,000+	*	41.3%	31.0%
WELLNESS			
% 60+ getting the recommended hours of sleep		65.1%	63.1%
% 60+ doing any physical activity in past month		78.2%	72.8%
% 60+ met CDC guidelines for muscle-strengthening activity		30.3%	25.8%
% 60+ met CDC guidelines for aerobic physical activity		56.5%	53.9%
% 60+ with fair or poor self-reported health status	B	8.6%	18.5%
% 60+ with 15+ physically unhealthy days in past month		8.8%	13.1%
COMMUNITY			
Annual # unhealthy days due to air pollution for 65+ (County)		1	NA
AARP Age-Friendly Communities		Not yet	Yes
Dementia Friendly Communities		Not yet	Yes
# of public universities and community colleges		0	124
# of public libraries		1	455
# of Councils of Aging (COAs)		1	350
# of Osher Lifelong Learning Institutes (OLLI)		0	4
% households with a smartphone (all ages)	*	91.2%	87.6%
% households with only a smartphone to access the Internet (all ages)	*	3.1%	6.4%

SOCIAL DETERMINANTS OF HEALTH	Significantly different than state rate	Community estimate	State estimate
COMMUNITY			
% households without a computer (all ages)	*	3.2%	5.7%
% households with access to Broadband (all ages)	*	95.5%	90.7%
% households without access to the Internet (all ages)	*	4.5%	9.2%
% 60+ who used Internet in past month	*	84.0%	70.6%
Voter participation rate in 2020 election (age 18+)		82.5%	80.8%
Homicide rate/100,000 persons (County)		2.0	2.3
# firearm fatalities (all ages) (County)		137	1267
# 65+ deaths by suicide (County)		56	527
Age-sex adjusted 1-year mortality rate		3.6%	3.9%
TRANSPORTATION			
% householders 65+ who own a motor vehicle		87.3%	84.2%
% 60+ who always drive or ride wearing a seatbelt	B	91.1%	85.9%
% 60+ drove under influence		NA	1.3%
# fatal crashes involving adult age 60+ (County)		51	545
AllTransit Score		NA	2.93
HEALTH OUTCOMES			
FALLS			
% 60+ who fell in past year		27.0%	26.6%
% 60+ who were injured by a fall in past year		11.2%	10.1%
% 65+ with hip fracture		3.4%	3.2%
PREVENTION			
% 60+ with physical exam/check-up in past year		92.2%	89.8%
% 60+ flu shot in past year		71.5%	67.6%
% 60+ with pneumonia vaccine		56.9%	61.7%
% 60+ with shingles vaccine		52.5%	46.3%
% 60+ women with mammogram in past 2 years		83.5%	79.9%
% 60+ had colorectal cancer screening		65.5%	62.4%
% 60+ with optimal preventive health		26.5%	26.1%
NUTRITION & DIET			
% 60+ with 5 or more servings of fruit or vegetables per day		16.5%	16.3%
% 60+ self-reported obese		24.9%	27.8%
% 65+ with high cholesterol	W	79.1%	75.9%
% 60+ with high cholesterol screening		97.4%	96.3%
ORAL HEALTH			
% 60+ with annual dental exam	B	86.9%	74.9%
# dentists per 100,000 persons (all ages) (County)		69.3	69.0
% 60+ with loss of 6+ teeth	B	14.4%	28.2%

HEALTH OUTCOMES	Significantly different than state rate	Community estimate	State estimate
CHRONIC DISEASE			
% 65+ with Alzheimer's disease or related dementias		13.7%	12.9%
% 65+ with anemia	W	47.4%	43.1%
% 65+ with asthma	B	12.4%	13.9%
% 65+ with atrial fibrillation		15.5%	15.2%
% 65+ with benign prostatic hyperplasia (men)	W	46.4%	42.6%
% 65+ with breast cancer (women)		12.7%	11.6%
% 65+ with cataract		66.1%	64.3%
% 65+ with chronic kidney disease		35.7%	34.3%
% 65+ with chronic obstructive pulmonary disease		17.9%	19.1%
% 65+ with colon cancer		2.5%	2.4%
% 65+ with congestive heart failure		20.0%	19.6%
% 65+ with diabetes		28.7%	28.6%
% 65+ with endometrial cancer (women)		2.3%	2.2%
% 65+ with fibromyalgia, chronic pain, and fatigue		36.8%	37.2%
% 65+ with glaucoma	W	27.0%	25.3%
% 65+ ever had a heart attack		4.8%	4.6%
% 65+ with HIV/AIDS		0.17%	0.30%
% 65+ with hypertension		74.4%	72.9%
% 65+ with ischemic heart disease		38.9%	37.1%
% 65+ with liver disease		13.4%	12.2%
% 65+ with lung cancer		2.1%	2.1%
% 65+ with migraine and other chronic headache		8.5%	8.0%
% 65+ with osteoarthritis or rheumatoid arthritis	W	57.7%	55.5%
% 65+ with osteoporosis		20.8%	20.1%
% 65+ with peripheral vascular disease	B	15.0%	18.1%
% 65+ with pressure ulcer or chronic ulcer		7.4%	7.8%
% 65+ with prostate cancer (men)		15.4%	13.6%
% 65+ with stroke		11.7%	11.2%
% 65+ with 4+ (out of 15) chronic conditions		61.2%	60.4%
% 65+ with 0 chronic conditions	W	5.9%	7.2%
BEHAVIORAL HEALTH			
# drug overdose deaths (all ages) (County)		1,556	11,845
% 65+ with substance use disorder		8.6%	9.4%
% 60+ excessive drinking		13.3%	10.9%
% 65+ with tobacco use disorder	B	10.8%	12.3%
% 60+ current smokers		9.1%	8.9%
MENTAL HEALTH			
% 60+ with 15+ days poor mental health in past month		6.6%	8.4%
% 65+ with depression	B	32.4%	34.6%
% 65+ with anxiety disorder		33.8%	33.0%
% 65+ with post-traumatic stress disorder	B	1.9%	3.0%
% 65+ with schizophrenia & other psychotic disorder	B	2.9%	4.0%

HEALTH OUTCOMES

	Significantly different than state rate	Community estimate	State estimate
LIVING WITH DISABILITY			
% 65+ with self-reported hearing difficulty		11.6%	12.3%
% 65+ with self-reported vision difficulty		3.9%	4.8%
% 65+ with self-reported cognition difficulty		10.5%	7.5%
% 65+ with self-reported ambulatory difficulty		21.3%	18.6%
% 65+ with self-reported self-care difficulty		8.4%	7.3%
% 65+ with self-reported independent living difficulty		13.6%	13.2%
CAREGIVING			
# of Alzheimer's support groups		1	25
% grandparents raising grandchildren		0.88%	0.66%
ACCESS TO CARE			
% 65+ dually eligible for Medicare and Medicaid	*	10.3%	17.1%
% 65+ Medicare managed care enrollees	*	25.9%	30.5%
% 60+ with a regular doctor	B	98.5%	96.5%
% 60+ who did not see a doctor when needed due to cost		3.7%	3.9%
# of primary care providers		50	8,899
# of hospitals		0	79
# of home health agencies		3	269
# of skilled nursing facilities		3	352
# of hospice agencies		1	76
# of community health centers		0	215
# of adult day health centers		1	143
SERVICE UTILIZATION			
# physician visits per year	*	7.7	7.3
# emergency room visits/1000 persons 65+ years annually	*	508.6	558.8
# Part D monthly prescription fills per person annually		53.1	53.5
# home health visits annually		2.9	2.9
# durable medical equipment claims annually		1.9	1.9
# inpatient hospital stays/1000 persons 65+ years annually		252.4	251.7
% Medicare inpatient hospital readmissions (as % of admissions)		16.9%	18.2%
# skilled nursing facility stays/1000 persons 65+ years annually		73.4	72.9
# skilled nursing home Medicare beds/1000 persons 65+ years		61.7	33.7
% 65+ getting Medicaid long term services and supports	*	2.8%	3.4%
% 65+ hospice users		3.2%	2.8%
% 65+ hospice users as % of decedents		44.7%	44.0%

NOTES

TECHNICAL NOTES

*For more information on data sources, measures, and methodology used in the 2025 Massachusetts Healthy Aging Data Report see our technical documentation at (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; Massachusetts Department of Public Health (MDPH) (Behavioral Risk Factor Surveillance Survey (BRFSS)), 2010-2022.*
- *Housing: ACS, 2018-2022; Mass.gov, 2023.*
- *Cost of Living: Center for Social and Demographic Research on Aging at the University of Massachusetts Boston, 2023.*
- *Economic: ACS, 2018-2022.*
- *Wellness: BRFSS, 2010-2022.*
- *Community: AARP, 2023; ACS, 2018-2022; BRFSS, 2010-2022; CDC WONDER, 2016-2020; The CMS Master Beneficiary Summary File ABCD/Other (CMS), 2020-2021; Dementia Friendly Massachusetts, 2023; Massachusetts Executive Office of Elder Affairs (EOEA), 2023; NECHE, 2023; OLLI, 2023; MA State Library, 2023; MA Secretary of State, 2023; U.S. EPA Air Compare, 2023.*
- *Transportation: ACS, 2018-2022; AllTransit™, 2023; BRFSS, 2010-2022; NHTSA, 2018-2022.*
- *Falls: CMS, 2020-2021; BRFSS, 2010-2022.*
- *Prevention: BRFSS, 2010-2022.*
- *Nutrition/Diet: BRFSS, 2010-2022; CMS, 2020-2021.*
- *Oral Health: BRFSS, 2010-2022; HRSA, 2023.*
- *Chronic Disease: CMS, 2020-2021.*
- *Behavioral Health: BRFSS, 2010-2022; CDC WONDER 2016-2020; CMS, 2020-2021.*
- *Mental Health: BRFSS, 2010-2022; CMS, 2020-2021.*
- *Living with Disability: ACS, 2018-2022.*
- *Caregiving: ACS, 2018-2022; Alzheimer's Association, 2023.*
- *Access to Care: BRFSS, 2010-2022; CMS, 2020-2021; HRSA, 2023; Medicare.gov, 2023; Massachusetts Executive Office of Health and Human Services (HHS), 2023.*
- *Service Utilization: CMS, 2020-2021.*

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