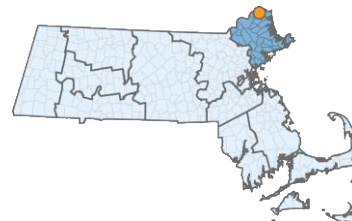# Amesbury (Essex)

Amesbury is a city located in Essex County and has 2,942 residents aged 65 and older. Older residents have lower rates of tooth loss, anemia, benign prostatic hyperplasia, cataract, glaucoma, osteoporosis, and prostate cancer. However, they have higher rates of atrial fibrillation, substance and tobacco use disorders, anxiety disorder, schizophrenia, and high cholesterol. They are likely to take the health promotion step of having annual dental exams. Community resources to support healthy aging include a COA, a public library, two assisted living facilities, eight primary care providers, and two skilled nursing facilities. Amesbury is designated as both an AARP Age-Friendly Community and a Dementia-Friendly Community.

POPULATION CHARACTERISTICS

	Significantly different than state rate	Community estimate	State estimate
Total population (all ages)		17,279	6,984,205
Population 60 years or older as % of total population		25.0%	23.8%
Total population 60 years and older		4,320	1,661,076
Population 65 years or older as % of total population		17.0%	17.1%
Total population 65 years and older		2,942	1,195,589
% 65-74 years		63.8%	58.4%
% 75-84 years		26.3%	28.1%
% 85 years or older		9.9%	13.4%
% 65+ population who are female		57.3%	56.2%
% 85+ population who are female		72.3%	66.6%
Race and ethnicity of the population 65+			
% White	*	95.6%	86.3%
% African American	*	1.1%	4.4%
% Asian	*	0.5%	4.0%
% Other race(s)		2.8%	5.3%
% Hispanic	*	1.0%	4.8%
# 55+ who are Native American / Alaskan		15	3,537
Marital status of the population 65+			
% married		48.8%	54.0%
% divorced/separated		21.8%	15.8%
% widowed		22.7%	21.1%
% never married		6.6%	9.0%
Education of the population 65+			
% with less than high school education	*	6.1%	12.7%
% with high school or some college	*	61.7%	50.3%
% with college degree		19.4%	18.1%
% with graduate or professional degree	*	12.8%	18.9%
% 65+ population who speak only English at home	*	95.8%	83.1%
% 65+ population who are veterans of military service		14.7%	12.7%
% 60+ LGBT		2.5%	3.5%

POPULATION CHARACTERISTICS

POPULATION CHARACTERISTICS	Significantly different than state rate	Community estimate	State estimate
HOUSING			
% 65+ population who live alone		32.8%	28.1%
Average household size (all ages)	*	2.2	2.5
Median house value (all ages)	*	$435,400	$483,900
% 60+ own home		72.6%	72.9%
% 60+ homeowners who have mortgage		51.0%	46.8%
% 65+ households (renter) spend >35% of income on housing		52.2%	43.6%
% 65+ households (owner) spend >35% of income on housing		28.6%	27.3%
% grandparents who live with grandchildren	*	0.9%	2.8%
# of assisted living sites		2	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	*	7.9%	13.3%
% 65+ employed in past year		22.8%	22.0%
% 65+ with income below the poverty line in past year		8.0%	9.9%
Median annual income for households with a householder age 65+		$57,316	$61,624
% 65+ households with annual income < $20,000		16.2%	17.1%
% 65+ households with annual income $20,000-$49,999		25.3%	25.3%
% 65+ households with annual income $50,000-$99,999		31.4%	26.7%
% 65+ households with annual income $100,000+		27.0%	31.0%
WELLNESS			
% 60+ getting the recommended hours of sleep		63.8%	63.1%
% 60+ doing any physical activity in past month		77.6%	72.8%
% 60+ met CDC guidelines for muscle-strengthening activity		31.1%	25.8%
% 60+ met CDC guidelines for aerobic physical activity		60.7%	53.9%
% 60+ with fair or poor self-reported health status		17.0%	18.5%
% 60+ with 15+ physically unhealthy days in past month		14.3%	13.1%
COMMUNITY			
Annual # unhealthy days due to air pollution for 65+ (County)		1	NA
AARP Age-Friendly Communities		Yes	Yes
Dementia Friendly Communities		Yes	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)	*	91.8%	87.6%
% households with only a smartphone to access the Internet (all ages)		4.9%	6.4%

SOCIAL DETERMINANTS OF HEALTH	Significantly different than state rate	Community estimate	State estimate
COMMUNITY			
% households without a computer (all ages)	*	3.7%	5.7%
% households with access to Broadband (all ages)		91.8%	90.7%
% households without access to the Internet (all ages)		8.2%	9.2%
% 60+ who used Internet in past month	*	83.5%	70.6%
Voter participation rate in 2020 election (age 18+)		78.8%	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		4.2%	3.9%
TRANSPORTATION			
% householders 65+ who own a motor vehicle	*	90.6%	84.2%
% 60+ who always drive or ride wearing a seatbelt		84.6%	85.9%
% 60+ drove under influence		NA	1.3%
# fatal crashes involving adult age 60+ (County)		51	545
AllTransit Score		1.40	2.93
HEALTH OUTCOMES			
FALLS			
% 60+ who fell in past year		24.2%	26.6%
% 60+ who were injured by a fall in past year		9.4%	10.1%
% 65+ with hip fracture		2.6%	3.2%
PREVENTION			
% 60+ with physical exam/check-up in past year		89.0%	89.8%
% 60+ flu shot in past year		67.9%	67.6%
% 60+ with pneumonia vaccine		56.0%	61.7%
% 60+ with shingles vaccine		39.0%	46.3%
% 60+ women with mammogram in past 2 years		73.1%	79.9%
% 60+ had colorectal cancer screening		61.2%	62.4%
% 60+ with optimal preventive health		27.3%	26.1%
NUTRITION & DIET			
% 60+ with 5 or more servings of fruit or vegetables per day		19.3%	16.3%
% 60+ self-reported obese		23.2%	27.8%
% 65+ with high cholesterol	W	78.5%	75.9%
% 60+ with high cholesterol screening		95.4%	96.3%
ORAL HEALTH			
% 60+ with annual dental exam	B	81.0%	74.9%
# dentists per 100,000 persons (all ages) (County)		69.3	69.0
% 60+ with loss of 6+ teeth	B	18.3%	28.2%

HEALTH OUTCOMES

	Significantly different than state rate	Community estimate	State estimate
CHRONIC DISEASE			
% 65+ with Alzheimer's disease or related dementias		12.6%	12.9%
% 65+ with anemia	B	39.0%	43.1%
% 65+ with asthma		12.8%	13.9%
% 65+ with atrial fibrillation	W	17.2%	15.2%
% 65+ with benign prostatic hyperplasia (men)	B	38.8%	42.6%
% 65+ with breast cancer (women)		10.5%	11.6%
% 65+ with cataract	B	59.9%	64.3%
% 65+ with chronic kidney disease		32.2%	34.3%
% 65+ with chronic obstructive pulmonary disease		20.4%	19.1%
% 65+ with colon cancer		2.1%	2.4%
% 65+ with congestive heart failure		18.8%	19.6%
% 65+ with diabetes		27.6%	28.6%
% 65+ with endometrial cancer (women)		2.2%	2.2%
% 65+ with fibromyalgia, chronic pain, and fatigue		36.2%	37.2%
% 65+ with glaucoma	B	18.0%	25.3%
% 65+ ever had a heart attack		3.8%	4.6%
% 65+ with HIV/AIDS		0.18%	0.30%
% 65+ with hypertension		71.6%	72.9%
% 65+ with ischemic heart disease		38.1%	37.1%
% 65+ with liver disease		14.0%	12.2%
% 65+ with lung cancer		1.9%	2.1%
% 65+ with migraine and other chronic headache		9.1%	8.0%
% 65+ with osteoarthritis or rheumatoid arthritis		53.9%	55.5%
% 65+ with osteoporosis	B	18.3%	20.1%
% 65+ with peripheral vascular disease		18.5%	18.1%
% 65+ with pressure ulcer or chronic ulcer		7.6%	7.8%
% 65+ with prostate cancer (men)	B	10.6%	13.6%
% 65+ with stroke		10.9%	11.2%
% 65+ with 4+ (out of 15) chronic conditions		60.8%	60.4%
% 65+ with 0 chronic conditions		7.4%	7.2%
BEHAVIORAL HEALTH			
# drug overdose deaths (all ages) (County)		1,556	11,845
% 65+ with substance use disorder	W	11.5%	9.4%
% 60+ excessive drinking		12.0%	10.9%
% 65+ with tobacco use disorder	W	14.3%	12.3%
% 60+ current smokers		8.5%	8.9%
MENTAL HEALTH			
% 60+ with 15+ days poor mental health in past month		9.4%	8.4%
% 65+ with depression		35.3%	34.6%
% 65+ with anxiety disorder	W	35.5%	33.0%
% 65+ with post-traumatic stress disorder		3.5%	3.0%
% 65+ with schizophrenia & other psychotic disorder	W	5.9%	4.0%

HEALTH OUTCOMES	Significantly different than state rate	Community estimate	State estimate
LIVING WITH DISABILITY			
% 65+ with self-reported hearing difficulty		10.8%	12.3%
% 65+ with self-reported vision difficulty		6.9%	4.8%
% 65+ with self-reported cognition difficulty		9.4%	7.5%
% 65+ with self-reported ambulatory difficulty		16.2%	18.6%
% 65+ with self-reported self-care difficulty		5.1%	7.3%
% 65+ with self-reported independent living difficulty		13.4%	13.2%
CAREGIVING			
# of Alzheimer's support groups		0	25
% grandparents raising grandchildren		0.33%	0.66%
ACCESS TO CARE			
% 65+ dually eligible for Medicare and Medicaid	*	13.0%	17.1%
% 65+ Medicare managed care enrollees		30.5%	30.5%
% 60+ with a regular doctor		97.7%	96.5%
% 60+ who did not see a doctor when needed due to cost		3.7%	3.9%
# of primary care providers		8	8,899
# of hospitals		0	79
# of home health agencies		0	269
# of skilled nursing facilities		2	352
# of hospice agencies		0	76
# of community health centers		0	215
# of adult day health centers		0	143
SERVICE UTILIZATION			
# physician visits per year	*	7.7	7.3
# emergency room visits/1000 persons 65+ years annually		555.3	558.8
# Part D monthly prescription fills per person annually		52.6	53.5
# home health visits annually	*	2.2	2.9
# durable medical equipment claims annually		2.0	1.9
# inpatient hospital stays/1000 persons 65+ years annually		229.2	251.7
% Medicare inpatient hospital readmissions (as % of admissions)		16.0%	18.2%
# skilled nursing facility stays/1000 persons 65+ years annually		85.0	72.9
# skilled nursing home Medicare beds/1000 persons 65+ years		75.6	33.7
% 65+ getting Medicaid long term services and supports		3.7%	3.4%
% 65+ hospice users		2.9%	2.8%
% 65+ hospice users as % of decedents		49.8%	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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Questions or Ideas? Beth.dugan@umb.edu

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