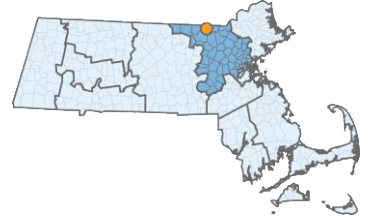# Dunstable (Middlesex)

Dunstable is a town in Middlesex County with 481 residents aged 65 and older. Compared to state average rates, older adults in Dunstable have lower rates of diabetes, fibromyalgia/chronic pain/fatigue, depression, anxiety disorder, and tobacco use disorder. Dunstable residents are more likely to receive annual physical exams but are less likely to be screened for colorectal cancer. Community resources to support healthy aging include a COA and a public library.

POPULATION CHARACTERISTICS	Significantly different than state rate	Community estimate	State estimate
Total population (all ages)		3,359	6,984,205
Population 60 years or older as % of total population		22.9%	23.8%
Total population 60 years and older		769	1,661,076
Population 65 years or older as % of total population		14.3%	17.1%
Total population 65 years and older		481	1,195,589
% 65-74 years	*	81.9%	58.4%
% 75-84 years	*	13.7%	28.1%
% 85 years or older	*	4.4%	13.4%
% 65+ population who are female	*	42.2%	56.2%
% 85+ population who are female		33.3%	66.6%
Race and ethnicity of the population 65+			
% White	*	100.0%	86.3%
% African American		0.0%	4.4%
% Asian		0.0%	4.0%
% Other race(s)		0.0%	5.3%
% Hispanic		1.0%	4.8%
# 55+ who are Native American / Alaskan		0	3,537
Marital status of the population 65+			
% married	*	67.6%	54.0%
% divorced/separated		13.9%	15.8%
% widowed		12.9%	21.1%
% never married		5.6%	9.0%
Education of the population 65+			
% with less than high school education	*	1.9%	12.7%
% with high school or some college		51.6%	50.3%
% with college degree		14.3%	18.1%
% with graduate or professional degree	*	32.2%	18.9%
% 65+ population who speak only English at home	*	95.4%	83.1%
% 65+ population who are veterans of military service		16.6%	12.7%
% 60+ LGBT		3.6%	3.5%

POPULATION CHARACTERISTICS	Significantly different than state rate	Community estimate	State estimate
HOUSING			
% 65+ population who live alone	*	14.8%	28.1%
Average household size (all ages)	*	3.0	2.5
Median house value (all ages)	*	$592,100	$483,900
% 60+ own home	*	97.7%	72.9%
% 60+ homeowners who have mortgage		46.4%	46.8%
% 65+ households (renter) spend >35% of income on housing		NA	43.6%
% 65+ households (owner) spend >35% of income on housing		22.7%	27.3%
% grandparents who live with grandchildren	*	1.4%	2.8%
# of assisted living sites		0	275
SOCIAL DETERMINANTS OF HEALTH			
COST OF LIVING			
Elder Index			
Single, homeowner without mortgage, good health (County)	1.07	$32,592	$30,552
Single, renter, good health (County)	1.12	$43,044	$38,580
Couple, homeowner without mortgage, good health (County)	1.05	$46,584	$44,520
Couple, renter, good health (County)	1.05	$57,036	$54,548
ECONOMIC			
% 60+ receiving food stamps in past year	*	1.2%	13.3%
% 65+ employed in past year	*	37.2%	22.0%
% 65+ with income below the poverty line in past year		4.6%	9.9%
Median annual income for households with a householder age 65+	*	$103,200	$61,624
% 65+ households with annual income < $20,000		7.0%	17.1%
% 65+ households with annual income $20,000-$49,999		17.1%	25.3%
% 65+ households with annual income $50,000-$99,999		22.4%	26.7%
% 65+ households with annual income $100,000+	*	53.5%	31.0%
WELLNESS			
% 60+ getting the recommended hours of sleep		69.7%	63.1%
% 60+ doing any physical activity in past month		75.7%	72.8%
% 60+ met CDC guidelines for muscle-strengthening activity		20.2%	25.8%
% 60+ met CDC guidelines for aerobic physical activity		57.4%	53.9%
% 60+ with fair or poor self-reported health status		13.1%	18.5%
% 60+ with 15+ physically unhealthy days in past month		12.1%	13.1%
COMMUNITY			
Annual # unhealthy days due to air pollution for 65+ (County)		2	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)	*	91.7%	87.6%
% households with only a smartphone to access the Internet (all ages)	*	1.1%	6.4%

SOCIAL DETERMINANTS OF HEALTH	Significantly different than state rate	Community estimate	State estimate
COMMUNITY			
% households without a computer (all ages)	*	1.8%	5.7%
% households with access to Broadband (all ages)	*	99.0%	90.7%
% households without access to the Internet (all ages)	*	1.0%	9.2%
% 60+ who used Internet in past month		72.1%	70.6%
Voter participation rate in 2020 election (age 18+)		83.9%	80.8%
Homicide rate/100,000 persons (County)		1.0	2.3
# firearm fatalities (all ages) (County)		152	1267
# 65+ deaths by suicide (County)		109	527
Age-sex adjusted 1-year mortality rate		3.4%	3.9%
TRANSPORTATION			
% householders 65+ who own a motor vehicle	*	100.0%	84.2%
% 60+ who always drive or ride wearing a seatbelt		82.7%	85.9%
% 60+ drove under influence		NA	1.3%
# fatal crashes involving adult age 60+ (County)		83	545
AllTransit Score		NA	2.93
HEALTH OUTCOMES			
FALLS			
% 60+ who fell in past year		24.5%	26.6%
% 60+ who were injured by a fall in past year		7.1%	10.1%
% 65+ with hip fracture		2.8%	3.2%
PREVENTION			
% 60+ with physical exam/check-up in past year	B	93.9%	89.8%
% 60+ flu shot in past year		70.7%	67.6%
% 60+ with pneumonia vaccine		62.5%	61.7%
% 60+ with shingles vaccine		56.3%	46.3%
% 60+ women with mammogram in past 2 years		77.4%	79.9%
% 60+ had colorectal cancer screening	W	49.2%	62.4%
% 60+ with optimal preventive health		19.8%	26.1%
NUTRITION & DIET			
% 60+ with 5 or more servings of fruit or vegetables per day		23.3%	16.3%
% 60+ self-reported obese		25.4%	27.8%
% 65+ with high cholesterol		79.3%	75.9%
% 60+ with high cholesterol screening		96.1%	96.3%
ORAL HEALTH			
% 60+ with annual dental exam		73.6%	74.9%
# dentists per 100,000 persons (all ages) (County)		95.6	69.0
% 60+ with loss of 6+ teeth		25.4%	28.2%

HEALTH OUTCOMES	Significantly different than state rate	Community estimate	State estimate
CHRONIC DISEASE			
% 65+ with Alzheimer's disease or related dementias		10.0%	12.9%
% 65+ with anemia		39.3%	43.1%
% 65+ with asthma		16.7%	13.9%
% 65+ with atrial fibrillation		14.5%	15.2%
% 65+ with benign prostatic hyperplasia (men)		40.4%	42.6%
% 65+ with breast cancer (women)		9.1%	11.6%
% 65+ with cataract		62.4%	64.3%
% 65+ with chronic kidney disease		30.3%	34.3%
% 65+ with chronic obstructive pulmonary disease		15.4%	19.1%
% 65+ with colon cancer		2.2%	2.4%
% 65+ with congestive heart failure		15.9%	19.6%
% 65+ with diabetes	B	19.2%	28.6%
% 65+ with endometrial cancer (women)		2.4%	2.2%
% 65+ with fibromyalgia, chronic pain, and fatigue	B	31.3%	37.2%
% 65+ with glaucoma		22.3%	25.3%
% 65+ ever had a heart attack		4.1%	4.6%
% 65+ with HIV/AIDS		0.12%	0.30%
% 65+ with hypertension		69.2%	72.9%
% 65+ with ischemic heart disease		33.6%	37.1%
% 65+ with liver disease		12.0%	12.2%
% 65+ with lung cancer		2.1%	2.1%
% 65+ with migraine and other chronic headache		8.1%	8.0%
% 65+ with osteoarthritis or rheumatoid arthritis		57.0%	55.5%
% 65+ with osteoporosis		19.2%	20.1%
% 65+ with peripheral vascular disease		15.1%	18.1%
% 65+ with pressure ulcer or chronic ulcer		6.0%	7.8%
% 65+ with prostate cancer (men)		13.9%	13.6%
% 65+ with stroke		10.4%	11.2%
% 65+ with 4+ (out of 15) chronic conditions		57.9%	60.4%
% 65+ with 0 chronic conditions		6.6%	7.2%
BEHAVIORAL HEALTH			
# drug overdose deaths (all ages) (County)		1,928	11,845
% 65+ with substance use disorder		6.4%	9.4%
% 60+ excessive drinking		12.3%	10.9%
% 65+ with tobacco use disorder	B	7.1%	12.3%
% 60+ current smokers	B	5.0%	8.9%
MENTAL HEALTH			
% 60+ with 15+ days poor mental health in past month		7.1%	8.4%
% 65+ with depression	B	28.6%	34.6%
% 65+ with anxiety disorder	B	26.0%	33.0%
% 65+ with post-traumatic stress disorder		3.1%	3.0%
% 65+ with schizophrenia & other psychotic disorder		3.8%	4.0%

HEALTH OUTCOMES	Significantly different than state rate	Community estimate	State estimate
LIVING WITH DISABILITY			
% 65+ with self-reported hearing difficulty		8.7%	12.3%
% 65+ with self-reported vision difficulty		2.9%	4.8%
% 65+ with self-reported cognition difficulty		1.9%	7.5%
% 65+ with self-reported ambulatory difficulty	*	5.4%	18.6%
% 65+ with self-reported self-care difficulty		2.9%	7.3%
% 65+ with self-reported independent living difficulty	*	4.2%	13.2%
CAREGIVING			
# of Alzheimer's support groups		0	25
% grandparents raising grandchildren		0.59%	0.66%
ACCESS TO CARE			
% 65+ dually eligible for Medicare and Medicaid	*	4.3%	17.1%
% 65+ Medicare managed care enrollees	*	25.5%	30.5%
% 60+ with a regular doctor		97.1%	96.5%
% 60+ who did not see a doctor when needed due to cost	B	2.4%	3.9%
# of primary care providers		0	8,899
# of hospitals		0	79
# of home health agencies		0	269
# of skilled nursing facilities		0	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		6.9	7.3
# emergency room visits/1000 persons 65+ years annually	*	429.7	558.8
# Part D monthly prescription fills per person annually	*	43.9	53.5
# home health visits annually	*	1.3	2.9
# durable medical equipment claims annually		1.6	1.9
# inpatient hospital stays/1000 persons 65+ years annually	*	181.1	251.7
% Medicare inpatient hospital readmissions (as % of admissions)		20.3%	18.2%
# skilled nursing facility stays/1000 persons 65+ years annually		49.3	72.9
# skilled nursing home Medicare beds/1000 persons 65+ years		0.0	33.7
% 65+ getting Medicaid long term services and supports	*	2.7%	3.4%
% 65+ hospice users		2.6%	2.8%
% 65+ hospice users as % of decedents		39.6%	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.*

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

Questions or Ideas? Beth.dugan@umb.edu