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GROWING OLDER IN AMERICA: AGING AND FAMILY CAREGIVING DURING COVID-19

The outbreak of COVID-19 in 2020 has affected the lives of many Americans, with those who provide ongoing living assistance to an aging family member or friend being acutely impacted, according to a new study from The Associated Press-NORC Center for Public Affairs Research. Yet, the pandemic has not led to any heightened awareness when it comes to preparations for growing older or providing care to an aging loved one.

The study reveals a disconnect between the lived experiences of caregivers during the COVID-19 outbreak and the expectations about future care among those not currently receiving or providing it. The pandemic has forced family caregivers to cancel their in-home care and make new arrangements, drawn people young and old into the role of caregiver for the first time, and left many feeling stressed and financially strapped. But compared to 2018, those Americans who are not already a caregiver are even less likely to think a loved one will need care in the near future, and 72% have done little to no planning for their own care needs.

Nearly 1 in 5 Americans are currently providing ongoing living assistance to a family member or friend, and for 36% of caregivers, their caregiving responsibilities have increased because of the pandemic. Those age 18-39 in particular are taking on greater responsibilities because of the pandemic—21% of these younger caregivers started providing care during the outbreak, and the share who provide more than 10 hours of care a week has increased since 2018.

Five Things You Should Know

From The AP-NORC Center's Long-Term Care Poll

Among American Adults:

- Compared to 2018, more say they have done little or no planning for their own care needs (46% vs. 37%) and believe it is unlikely that a loved one will need care (43% vs. 34%).
- 17% are currently providing ongoing living assistance to an aging family member or friend, and rates are similar among those age 18-39 and those age 40 and older.
- For 36% of people who started providing care before the outbreak, their responsibilities have increased as a result of COVID-19.
- More now think health insurance companies (59% vs. 50% in 2018) and Medicare (56% vs. 45%) should have a large responsibility in paying for the costs of ongoing living assistance.
- 75% of caregivers have used telehealth to provide care during the outbreak.

Most new caregivers—those who began providing care since the COVID-19 outbreak began—started doing so for reasons related to the virus, including that restrictions made their loved one less able to care for themselves, that their previous care situation seemed unsafe, or that their previous caregiver contracted COVID-19.

The pandemic has forced many to adapt to new realities in order to stay safe. America's caregivers are now relying on meal and grocery delivery, video chat technology, "senior-only" hours at stores, and transportation services to help care for their loved ones. Telehealth has also become prevalent, with three-quarters of caregivers using it to get professional health care for their loved one.

Americans' attitudes about who should pay for care have also evolved. Compared to 2018, more now think health insurance companies, Medicare, and Medicaid should have a large responsibility in paying for ongoing living assistance in this country, and fewer think individuals and families should bear that burden.

Overall, 47% of American adults have experience with ongoing living assistance, including 17% who are currently family caregivers, but few of those not currently providing or receiving care expect they or a loved one will need it in the future. As a result, few are planning the future. Less than a third have done even a moderate amount of planning, and similar numbers have taken actions like discussing their preferences for care with family or set aside money for care. These rates are similar to 2018, indicating that not even the COVID-19 outbreak has spurred Americans to action.

Thinking about their potential needs for care, three-quarters of Americans would prefer to receive care in their own home if they were to need it. Few would want to receive care in a nursing home or senior community. COVID-19 has shaken Americans' confidence in nursing homes. Forty-one percent have a more unfavorable opinion of the nursing home experience compared to before the outbreak, and 60% express concern about a loved one needing a long-term stay or permanent residence in one during the pandemic.

The AP-NORC Center conducted this study with funding from The SCAN Foundation. The survey includes 1,893 interviews with a nationally representative sample of Americans, including 565 current caregivers, using the AmeriSpeak Panel®, the probability-based panel of NORC at the University of Chicago. Interviews were conducted between August 27 and September 14, 2020 via web and phone in English and Spanish. The margin of sampling error is +/- 3.0 percentage points.

Other key findings from the study include:

- The pandemic has not increased the number of conversations about aging and care among young people—just 17% have had more conversations, 14% have had fewer, and 68% haven't changed.
- Since 2018, concerns about telehealth have declined when it comes to worry about low-quality care (51% in 2018 to 37% now), technical issues (42% to 35%), security of health information (42% vs. 27%), and lack of privacy (33% vs. 24%).
- 28% of current caregivers who employed an in-home caregiver have canceled that care as a result of the outbreak.
- Caregivers age 18-39 are providing more care—35% are providing 10 or more hours of care a week versus 26% who did so in 2018.
- Only 5% of those with caregiving experience have provided care to someone with COVID-19 or related complications, but non-white caregivers have been especially likely to do so compared to white caregivers (11% vs. 2%).
- Those who have suffered financial hardship as a result of COVID-19 are particularly likely to have had their caregiver responsibilities increase compared to those who haven't (42% vs. 25%).
- More than a quarter (29%) of caregivers have struggled to afford providing care, including 41% of those who have been impacted economically by COVID-19 through job loss or lost income.
- 12% of Americans have had a family member or close friend die of COVID-19.
- Despite concerns about infecting the person they provide care to, 31% of caregivers are not sure whether they would get a COVID-19 vaccine, and 34% are not sure whether the person they care for would get one.
- Non-white caregivers and caregivers age 18-39 have been particularly likely to take advantage of meal delivery services and, video chat to provide care.

SECTION 1: TRENDS IN LONG-TERM CARE PLANNING AND EXPERIENCES BEFORE AND DURING COVID-19

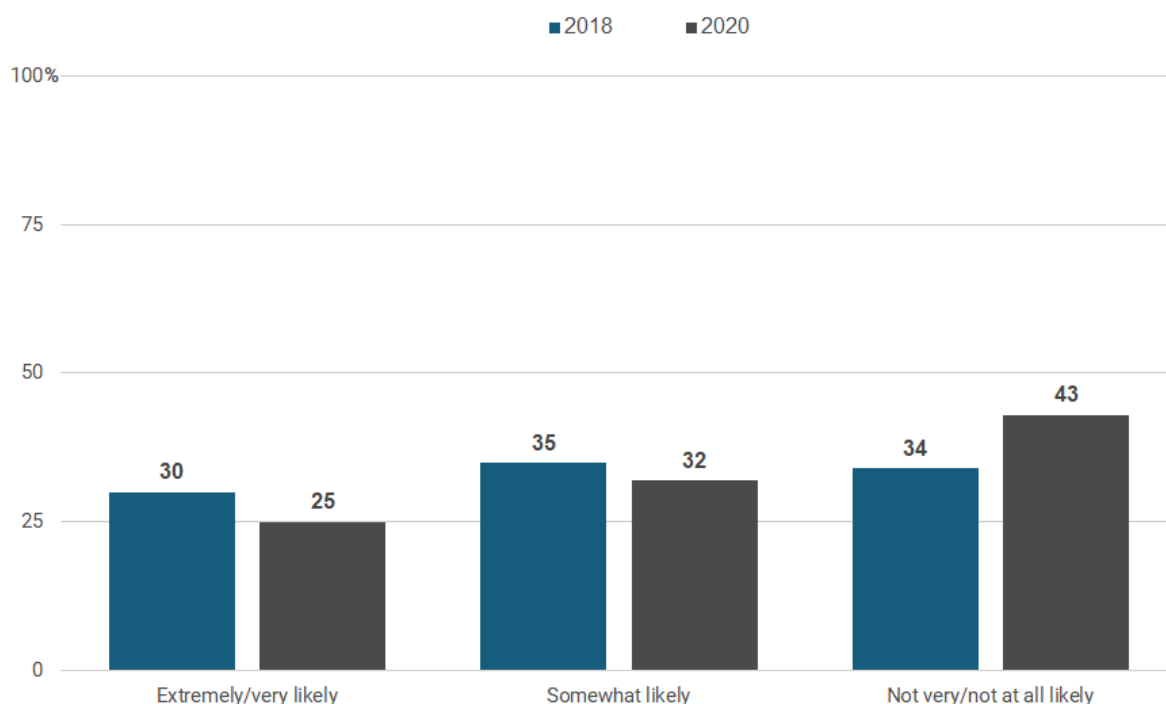
FOR MOST, COVID-19 HAS NOT CHANGED THEIR EXPECTATIONS ABOUT PROVIDING CARE IN THE FUTURE.

Among those not already providing care, few believe it is likely their loved ones will need ongoing living assistance, and COVID-19 has not led many to have more conversations about these situations and arrangements.

Just a quarter think it is very or extremely likely a loved one will need assistance in the next five years. Despite COVID-19 drawing new people into the role of caregiver, more now say that it is unlikely that a loved one will need care than before the outbreak (43% vs. 34%).

More Americans underestimate the likelihood a loved one will need living assistance in the future compared to 2018.

Among those not currently providing care



Question: How likely do you think it is that an aging family member or close friend will need ongoing living assistance in the next five years?

Source: AP-NORC Long-Term Care Polls conducted March 13-April 5, 2018, with 1,945 adults nationwide and August 27-September 14, 2020, with 1,893 adults nationwide.

For a majority of Americans age 18 to 39, COVID-19 has not led to more or fewer conversations about aging and ongoing living assistance with family members or friends—68% have had these conversations neither more nor less often. Seventeen percent have had conversations more often, while 14% have had fewer conversations on the topic.

MANY AMERICANS CONTINUE TO UNDERESTIMATE THE LIKELIHOOD THEY WILL NEED ONGOING LIVING ASSISTANCE SOMEDAY, AND MANY HAVE DONE LITTLE OR NO PLANNING.

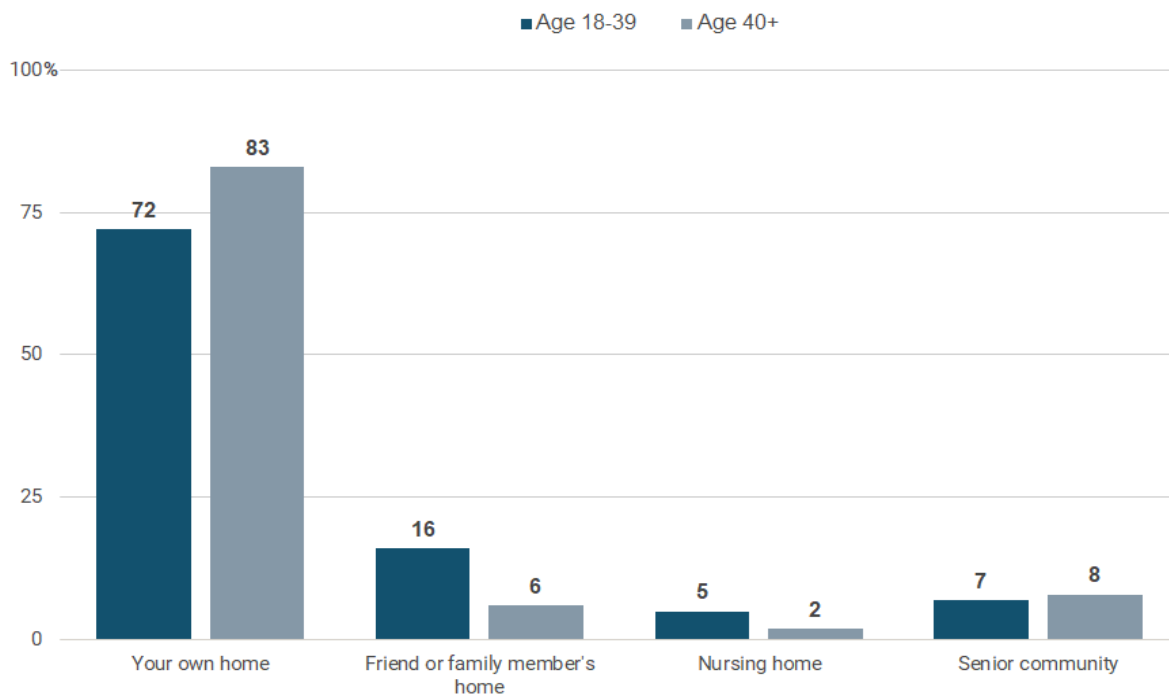
As in the past, few Americans expect to need ongoing living assistance ever in their lives. While more than half of Americans turning 65 today will need ongoing living assistance at some point,¹ just 17% of Americans not currently receiving care think it is very or extremely likely they will require ongoing living assistance at some point in their lives. Forty-two percent think it is somewhat likely, and 40% think it is not too or not at all likely they will need living assistance. In 2018, 22% thought it was likely they would need care someday.

Asked about their preferences if they ever do need care, Americans would most prefer to receive care in their own home. Seventy-nine percent would prefer their own home, while just 10% would be open to a friend or family member's home. Fewer want to receive care in a senior community (8%) or a nursing home (3%). Those age 40 and older are more likely than those age 18-39 to prefer to receive care in their own home.

¹ <https://aspe.hhs.gov/basic-report/long-term-services-and-supports-older-americans-risks-and-financing-research-brief>

Americans overwhelmingly would prefer to remain in their home if they were to need care.

Among all Americans



Question: In the event that you need ongoing living assistance someday, if you could choose, what would be your first choice as to where you would receive that assistance?

Source: AP-NORC Long-Term Care Poll conducted August 27-September 14, 2020, with 1,893 adults nationwide.



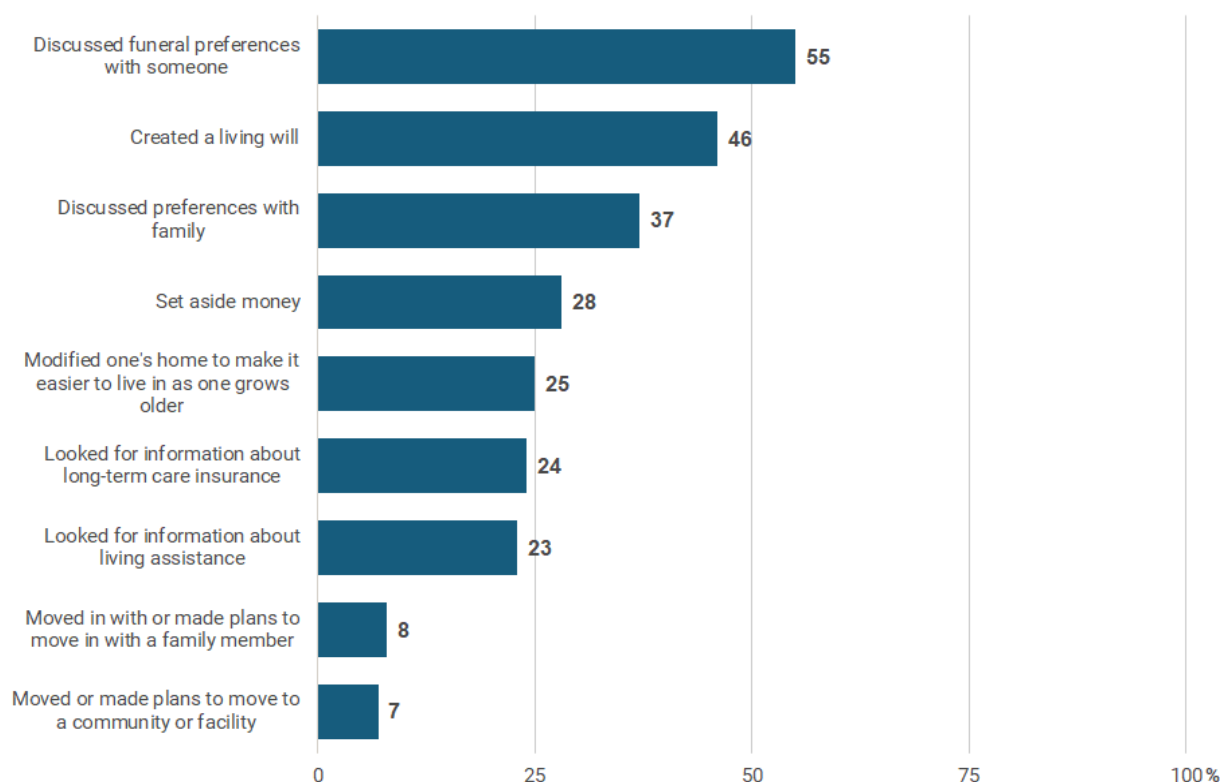
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Few Americans have done much planning for future living assistance. Just 10% of Americans have done quite a bit or a great deal of planning, 18% have done a moderate amount of planning, and 72% have done only a little or no planning at all. Americans are more likely to have done no planning at all now compared to 2018 (46% vs. 37%).

However, when it comes to specific actions that could be considered planning for ongoing living assistance, Americans fare a bit better. About a third have discussed the kinds of ongoing living assistance, and a quarter have set aside money for ongoing living expenses. Still though, more have planned for end of life than the care they might need before then: more than half have discussed preferences for their funeral arrangements, and 46% have created a living will or advance directive.

Few have started planning for their own future care needs.

Among all Americans



Question: What actions have you taken to plan for your own needs as you age? Have you done each of the following or not?

Source: AP-NORC Long-Term Care Poll conducted August 27-September 14, 2020, with 1,893 adults nationwide.



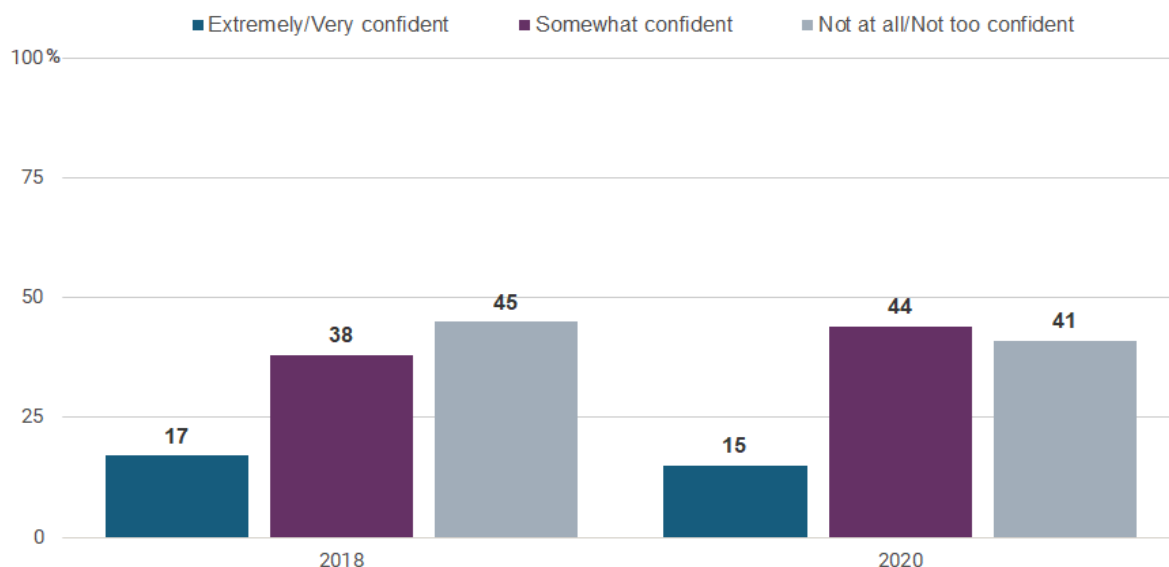
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Americans also feel unprepared financially for the costs of ongoing living assistance. Just 15% are confident they will have the financial resources to pay for care they need as they age. Forty-four percent are somewhat confident, and 41% express little to no confidence.

Among those age 40 and older, 40% express little or no confidence that they will have the financial resources to pay for care. This is a decrease compared to 2018 (47%). But the share expressing high confidence remains low.

The percentage of those age 40+ who feel financially ready to afford caregiving remains very low.

Among those age 40 and older



Question: Thinking about your [current/possible] needs for ongoing living assistance, how confident are you that you will have the financial resources to pay for any care you need as you get older?

Source: AP-NORC Long-Term Care Polls conducted March 13-April 5, 2018, with 1,945 adults nationwide and August 27-September 14, 2020, with 1,893 adults nationwide.

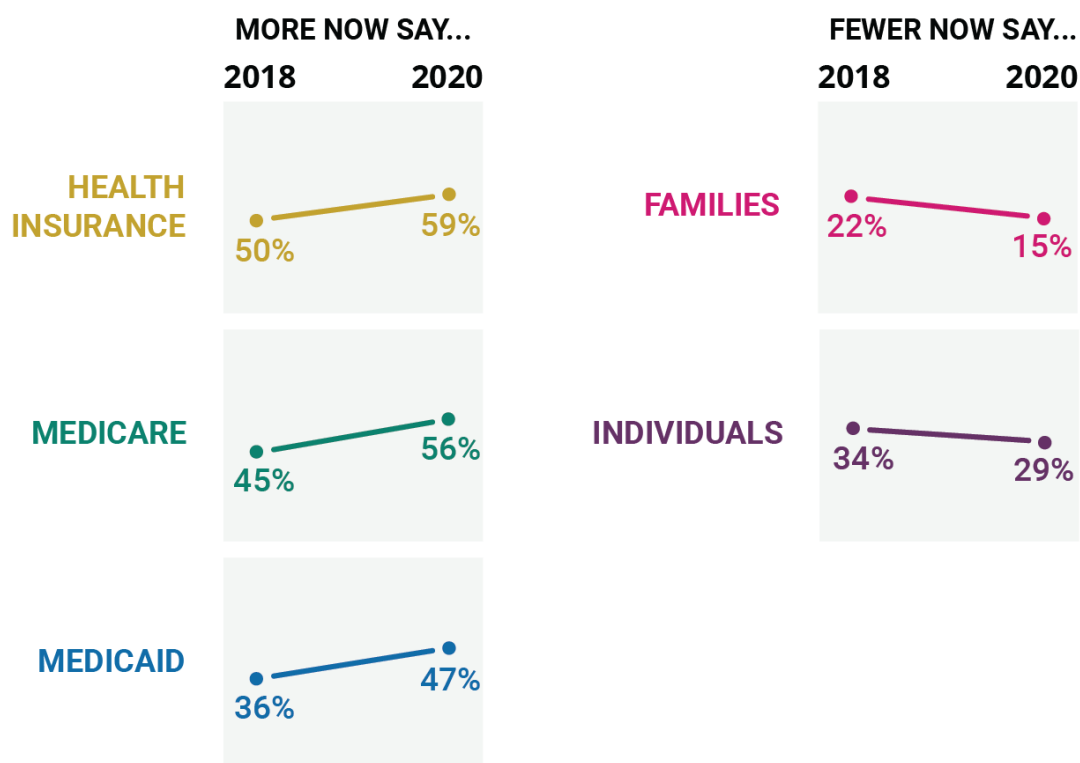


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Young Americans continue to express low confidence. In 2018, 16% felt very or extremely confident they would have the financial resources to pay for caregiving. Fourteen percent express the same confidence today. Forty-three percent are somewhat confident, and another 43% express little to no confidence.

Americans' views on who should be covering the costs of ongoing living assistance have shifted in the past two years. More Americans now believe the financial cost of care should be covered by insurance companies (59%), Medicare (56%), and Medicaid (47%), and fewer feel individuals (29%) or families (15%) should pay the costs compared to 2018.

The percentage of people who believe that the majority of long-term care costs should be covered by insurance and government programs is increasing



The AP-NORC Center conducted this study with funding from The SCAN Foundation. The poll includes 1,893 interviews with a nationally representative sample of Americans age 18 and older, including 565 caregivers, from the AmeriSpeak® Panel. The overall margin of sampling error is +/- 3.0 percentage points at the 95 percent confidence level, including the design effect. For more information, visit www.longtermcarepoll.org.



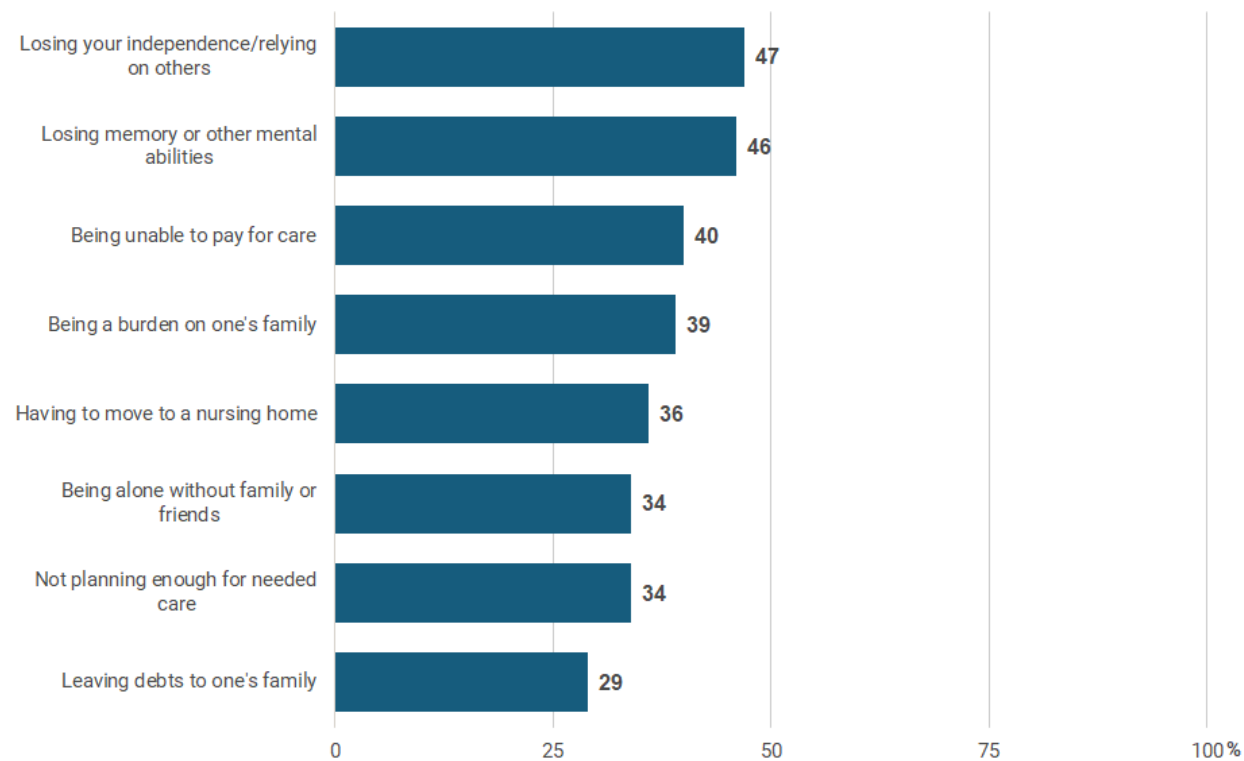
Those who have suffered financial hardship in their household as a result of the pandemic are less likely to think individuals should bear the burden of paying for ongoing care (26% vs. 33%) and more likely to think Medicaid should cover it (52% vs. 42%) than those who have not suffered economic hardship due to COVID-19.

In general, many Americans worry about being able to afford care, but Americans are also concerned about other effects of aging. Though they are often not planning for these things,

many worry about having to rely on others for care and losing cognitive abilities.

Americans fear loss of independence and memory, in addition to worries about being about to afford care.

Among all Americans who are a great deal or quite a bit concerned



Question: Thinking about your own personal situation as you get older, does each of the following cause you a great deal of concern, quite a bit of concern, a moderate amount, only a little, or none at all?

Source: AP-NORC Long-Term Care Poll conducted August 27-September 14, 2020, with 1,893 adults nationwide.



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NEARLY HALF OF AMERICANS HAVE CAREGIVING EXPERIENCE, INCLUDING 17% WHO ARE PROVIDING CARE DURING THE COVID-19 PANDEMIC.

Many Americans experience providing ongoing living assistance on a regular basis to an aging family member or close friend in need. This type of care can involve help with a variety of tasks—like keeping house, cooking, bathing, getting dressed, getting around, paying bills, remembering to take medicine—or can mean just checking in to see that everything is okay. Forty-five percent of Americans have experience providing ongoing care, including 17% who are doing so now. These caregiving roles are taken up by those both young and old. Seventeen percent of those age 18-39 are

currently providing care, as are 17% of those age 40 and older. Many pay others to provide care as well, with 16% having employed someone to provide care for them or a loved one, including 5% who started doing so since the COVID-19 outbreak began.

On the other side of the arrangement, 9% of those age 40 and older are currently receiving ongoing living assistance, and 14% have ever received assistance.

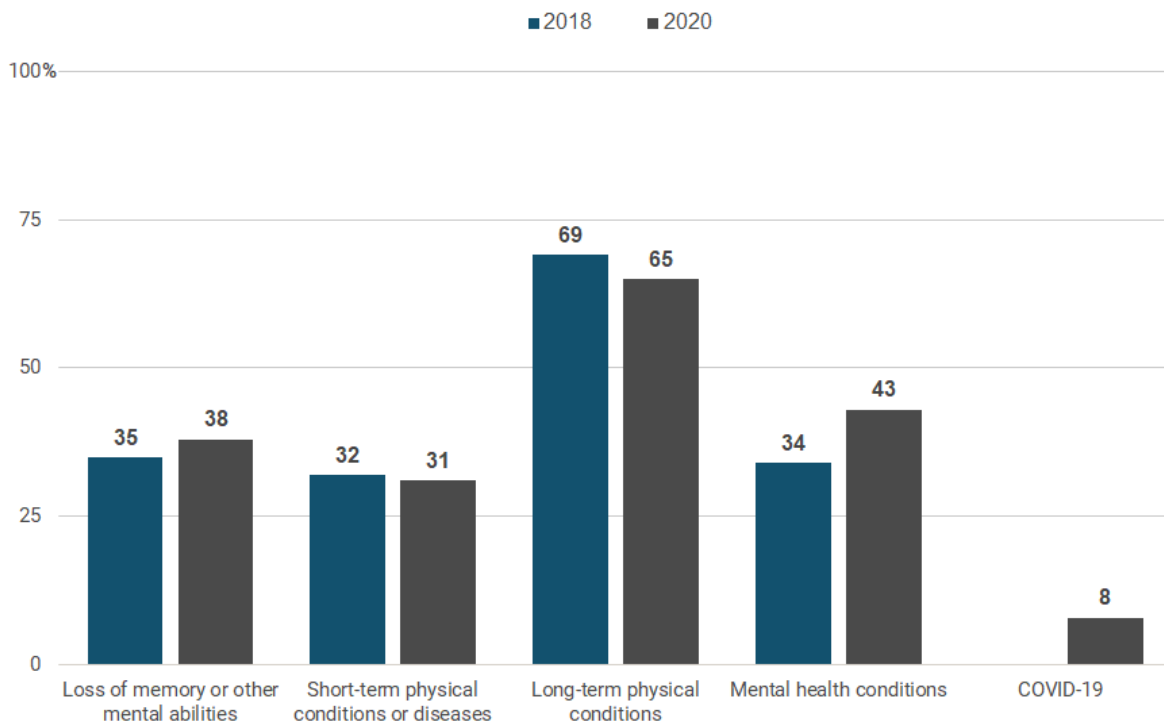
MOST CAREGIVERS ARE CARING FOR SOMEONE WITH A LONG-TERM CONDITION, BUT MORE ARE NOW CARING FOR SOMEONE WITH MENTAL HEALTH NEEDS, TOO.

A majority of caregivers have provided care for someone with chronic conditions. Fewer provide care for those with needs related to mental health conditions like anxiety or depression, loss of memory or other mental abilities, and

short-term ailments like pneumonia or an injury from an accident. Compared to 2018 though, Americans are increasingly caring for others' mental health conditions.

Caregivers are more likely to report giving care for mental health conditions, such as anxiety or depression, now than in 2018.

Among current and former caregivers



Question: Would you say that the [primary person you provide care to needs/most recent person you provided care to] needed care because of any of the following?

Source: AP-NORC Long-Term Care Polls conducted March 13-April 5, 2018, with 1,945 adults nationwide and August 27-September 14, 2020, with 1,893 adults nationwide.



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Caregivers provide care both at home and away. Half of caregivers (50%) provide care in the care recipient's home, and 32% provide it in their own home. Fewer provide care at another loved one's home (9%), a nursing home (7%), or a senior community (3%).

Overall, 37% of current caregivers provide care for more than 10 hours a week, which is similar to 2018 (40%). Twenty-eight percent spend between five and 10 hours a week, while 34% spend five hours or fewer providing care. Older caregivers provide more care, but the role has become increasingly time-demanding for younger caregivers since 2018.

COVID-19 has increased the workload for family caregivers, and younger caregivers have been hit especially hard



36%

**OF ALL CAREGIVERS SAY
THEIR WORKLOAD HAS
INCREASED DUE TO COVID-19**



1 in 3

**CAREGIVERS AGE 18-39 NOW
PROVIDE 10 OR MORE HOURS
OF CARE PER WEEK**

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Providing care remains stressful for many caregivers. Twenty-four percent of current caregivers describe it as very or extremely stressful; 25% said the same in 2018. Another 35% feel moderately stressed, while 41% are only a little or not at all stressed.

While those age 40 and older provide more hours of care, younger and older caregivers find caregiving similarly stressful: 26% of those age 18-39 are extremely or very stressed, and 22% of those age 40 and older feel the same.

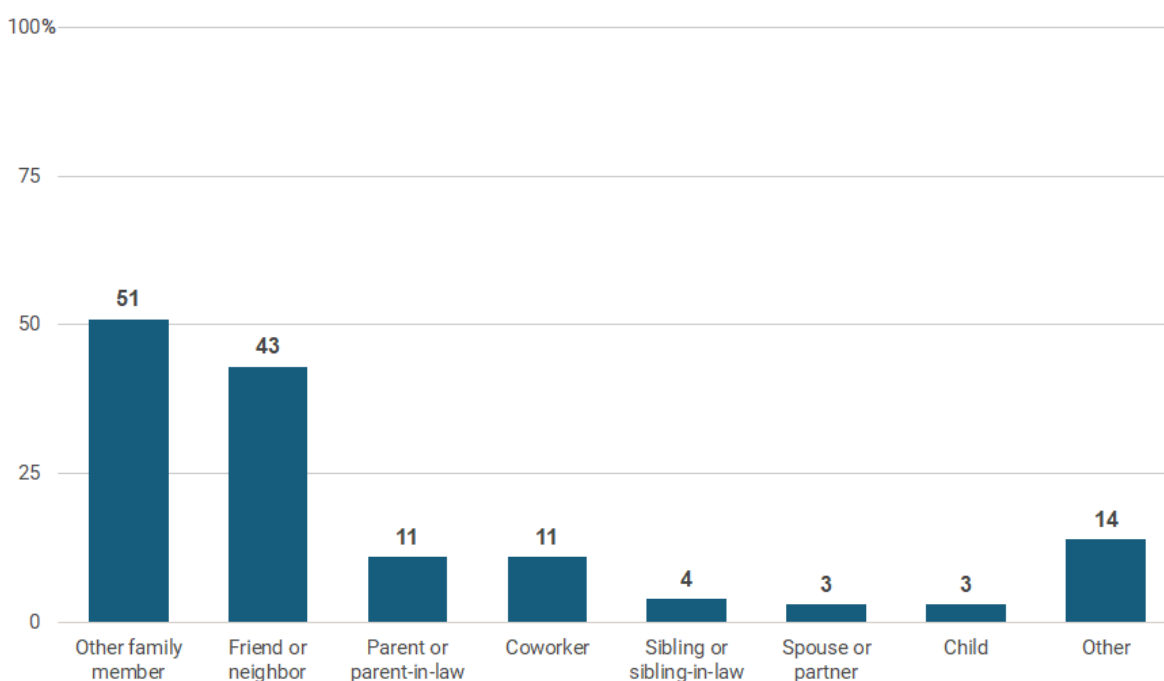
AMERICANS HAVE EXPERIENCED A GREAT DEAL OF LOSS DUE TO COVID-19, BOTH SOCIALLY AND ECONOMICALLY.

COVID-19 has impacted Americans in a multitude of ways. Many have suffered loss of family or close friends: 12% had a family member or close friend die of COVID-19 or COVID-19 related factors, and 6% have suffered losing more than one

person. Among those who lost someone to COVID-19, 11% lost a parent, 4% lost a sibling, 3% lost a child, 3% lost a spouse or partner. Many lost other family members or friends.

Many have lost loved ones to COVID-19.

Among Americans who lost someone to COVID-19, lost a...



Question: Thinking about those you lost as a result of COVID-19 or COVID-19 related factors, how were these people related to you?
Source: AP-NORC Long-Term Care Poll conducted August 27-September 14, 2020, with 1,893 adults nationwide.



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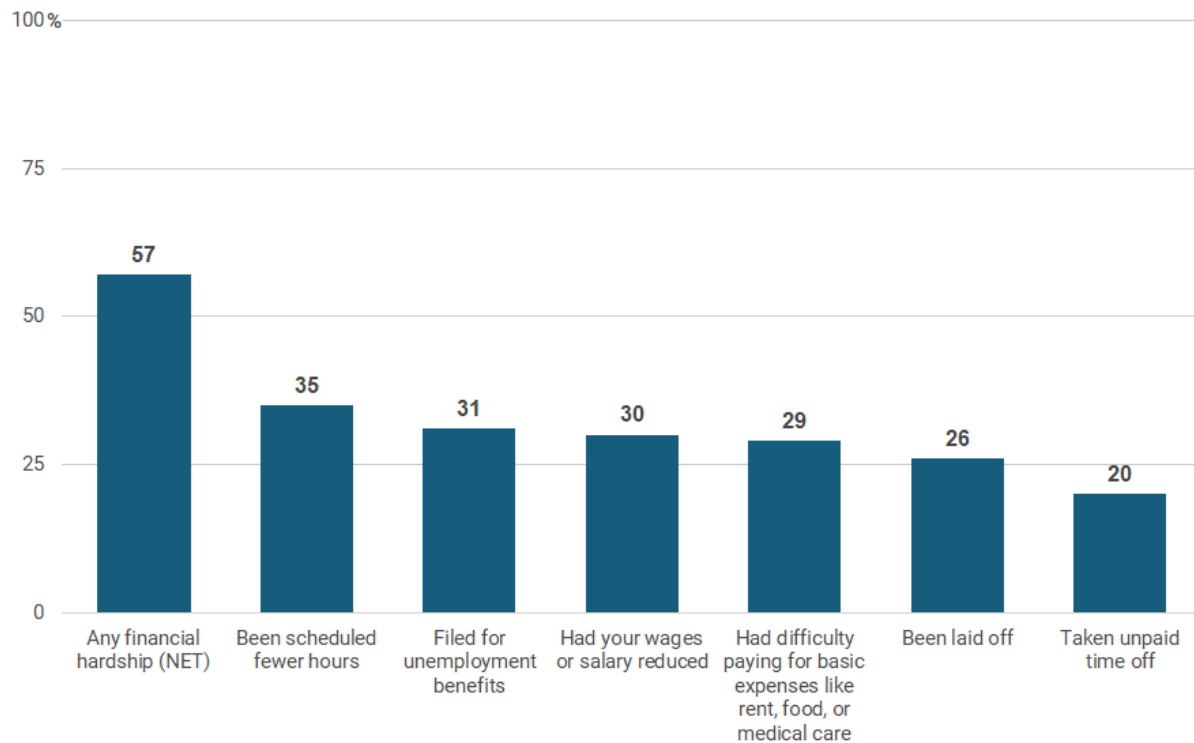
Black and Hispanic Americans are particularly likely to have lost someone to COVID-19. Twenty-six percent of Black Americans and 18% of Hispanic Americans have lost a close friend or family member to COVID-19 compared to 7% of white Americans. Those with any long-term care experience are also more likely to have lost someone to COVID-19 (16% vs. 7%).

Twenty-six percent of those who had a family member or friend die of COVID-19 lost someone who lived in a nursing home.

Fifty-seven percent of Americans say their household suffered a financial hardship of some kind due to COVID-19. This includes 26% who have had someone in their household laid off. While 18% of them have gotten their same job back, 82% still have not. And half of those who have not yet gotten their job back think they never will.

More than half have suffered financial hardship due to COVID-19.

Among all Americans



Question: Have you or has someone in your household experienced each of the following because of the COVID-19 outbreak, or not?
Source: AP-NORC Long-Term Care Poll conducted August 27-September 14, 2020, with 1,893 adults nationwide.



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CONFIDENCE IN NURSING HOMES HAS PLUMMETED IN THE WAKE OF THE COVID-19 OUTBREAK.

The COVID-19 outbreak has ravaged nursing homes, with more than 50,000 deaths in nursing homes linked to COVID-19 since the outbreak began in March. Many states in the southern and northeastern parts of the country have more than 300 reported cases per 1,000 residents. States like Massachusetts, New Jersey, and Connecticut have been hit particularly hard: each has a rate of more than 100 deaths per 1,000 nursing home residents in their state.²

In light of this, 41% of Americans now have a more unfavorable opinion of the nursing home experience than before the COVID-19 outbreak. Just 10% have a more favorable view. Forty-eight percent say their opinion hasn't changed. Those age 40 and older are more likely than those age 18-39 to report more unfavorable opinions (49% vs. 28%).

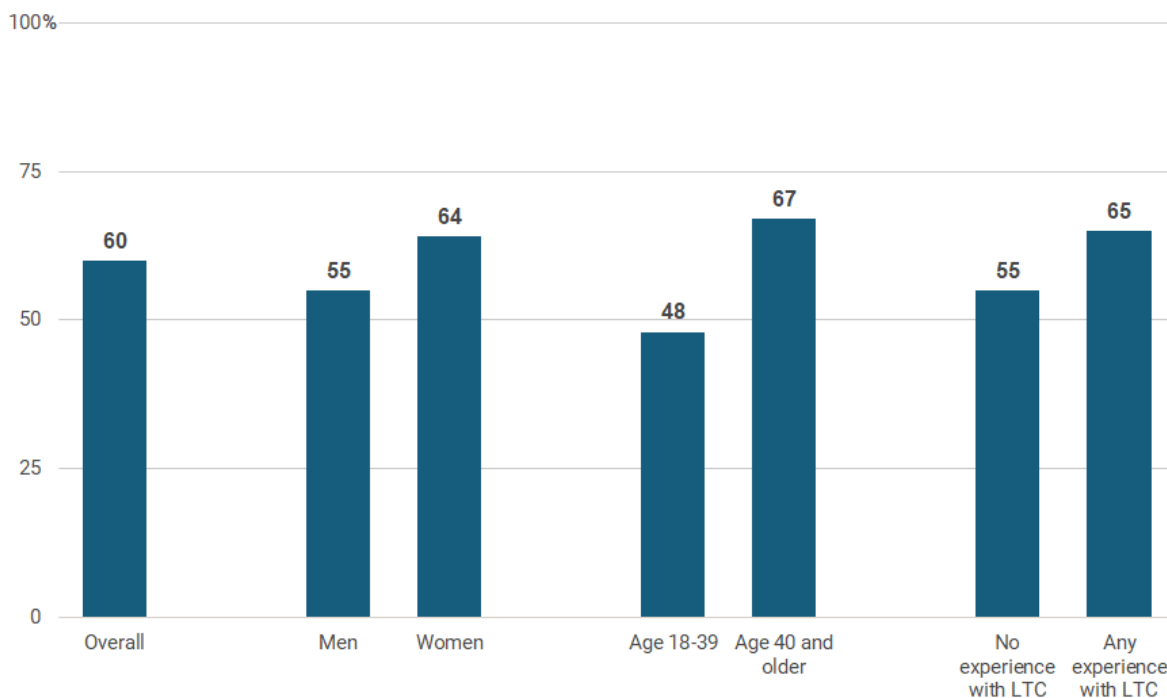
Women are also more likely than men to now have a more unfavorable opinion (46% vs. 36%).

Many would be concerned if a family member or friend needed a stay in a nursing home during the outbreak. This is particularly true regarding a long-term or permanent residence, where 60% would be very or extremely concerned. Forty-four percent would be very or extremely concerned about a short-term stay for rehabilitation before moving home. Those age 40 and older and women are more likely to be concerned about both compared to those age 18-39 and men, respectively. Those with any experience with long-term care—either providing or receiving it—are also more likely to be concerned about long-term or permanent residence in particular.

² <https://data.cms.gov/stories/s/COVID-19-Nursing-Home-Data/bkwz-xpvg/>

Women, those age 40 and older, and those with any experience with long-term care are most concerned about the prospects of a loved one needing a long-term stay in a nursing home.

Among all Americans who are very or extremely concerned



Question: If an aging family member or friend were to need ongoing living assistance during the COVID-19 outbreak, how concerned would you be about having them receive the following types of care in a nursing home? Long-term or permanent residence.

Source: AP-NORC Long-Term Care Poll conducted August 27-September 14, 2020, with 1,893 adults nationwide.



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SECTION 2: CAREGIVING IN THE TIME OF COVID-19

COVID-19 IS INCREASING RESPONSIBILITIES FOR MANY CAREGIVERS.

The COVID-19 outbreak is having a significant impact on many caregivers. Overall, 36% of current caregivers³ who started providing assistance before the outbreak have had their caregiving responsibilities increase as a result of the outbreak, while responsibilities have stayed the same for 54% and decreased for 10%.

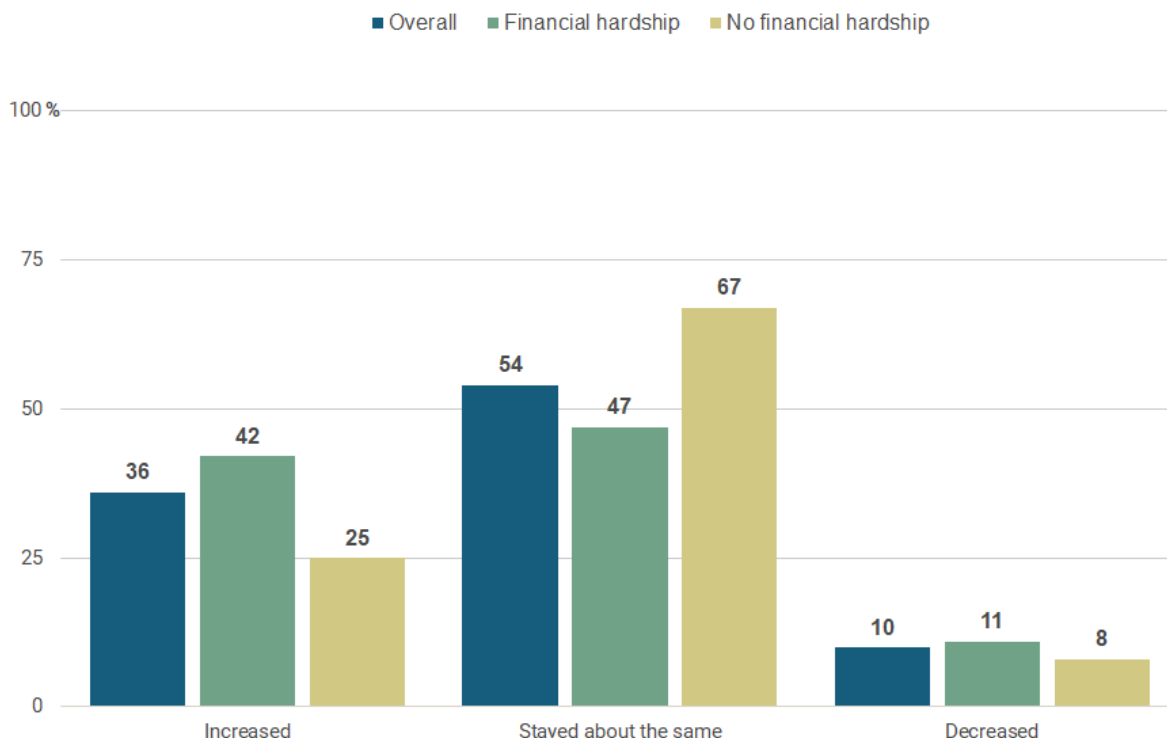
Twenty-eight percent of caregivers who employed an in-home caregiver have canceled that care as a result of the COVID-19 outbreak.

Among caregivers who have faced a financial hardship, such as a layoff or reduced wages due to COVID-19, responsibilities have increased for 42%. Just 25% of those who have not faced financial hardship during the pandemic say the same.

³ Current caregivers are those providing ongoing living assistance on a regular basis to a family member or close friend. This assistance can be help with things like keeping house, cooking, bathing, getting dressed, getting around, paying bills, remembering to take medicine, or just having someone check in to see that everything is okay. This help can happen at one's own home, in a family member's home, in a nursing home, or in a senior community.

Responsibilities for many caregivers are increasing in the COVID-19 era, especially among those facing financial hardship.

Among caregivers who began providing care before the pandemic



Question: As a result of the COVID-19 outbreak, would you say your caregiving responsibilities have...?

Source: AP-NORC Long-Term Care Poll conducted August 27-September 14, 2020, with 1,893 adults nationwide.



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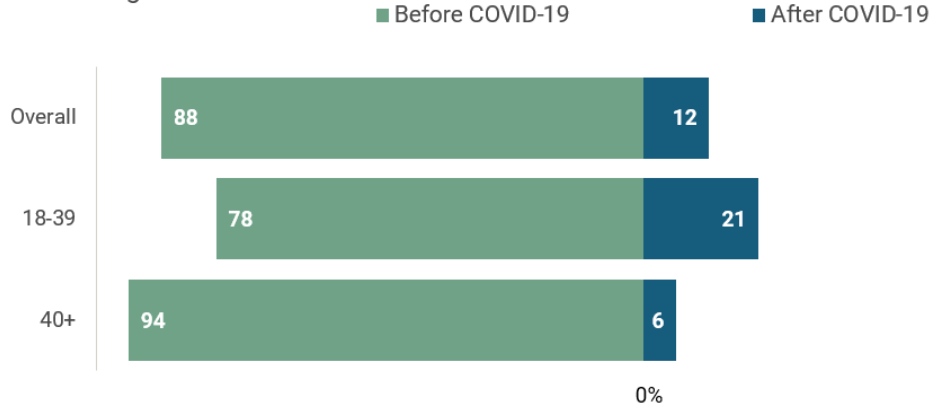
Among current caregivers, 12% began providing ongoing living assistance during the COVID-19 outbreak, and half of them began providing care for reasons related to the pandemic itself. Among those who started providing care during the pandemic, 37% did so because COVID-related restrictions made the person who needs care less able to care for themselves. Thirteen percent started because their previous care situation no longer seemed safe. Additionally, 8% started because the usual caregiver was infected with COVID-19, and 8% began providing care for someone infected

with COVID-19. Forty-eight percent of caregivers who began during the outbreak did so for reasons unrelated to the pandemic.

Younger caregivers are more than three times more likely to have started providing care after the outbreak began than older caregivers. Twenty-one percent of caregivers under age 40 started providing care after the outbreak began, compared to just 6% of older caregivers.

More than 2 in 10 caregivers age 18-39 began providing care since the COVID-19 outbreak began.

Among current caregivers



Question: Were you already providing ongoing living assistance for an aging family member or close friend before the COVID-19 outbreak began, or did you start providing ongoing living assistance after the COVID-19 outbreak began?

Source: AP-NORC Long-Term Care Poll conducted August 27-September 14, 2020, with 1,893 adults nationwide.



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The COVID-19 outbreak also impacted where care is provided. For 13% of current caregivers, the person they provide care for had to move their primary residence during the pandemic. Of those who moved, 39% moved out of their own home and 38% out of another friend or family member's home. Thirteen percent moved out of a nursing home or senior community. For 21% of non-white caregivers, the person they provide care to had to move compared to just 6% of white caregivers.

Overall, 5% of current and former caregivers provided ongoing living assistance for someone with COVID-19 or related complications. Non-white caregivers are more likely to report providing care due to COVID-19, with 11% saying this was a reason for providing care compared to just 2% of white caregivers.

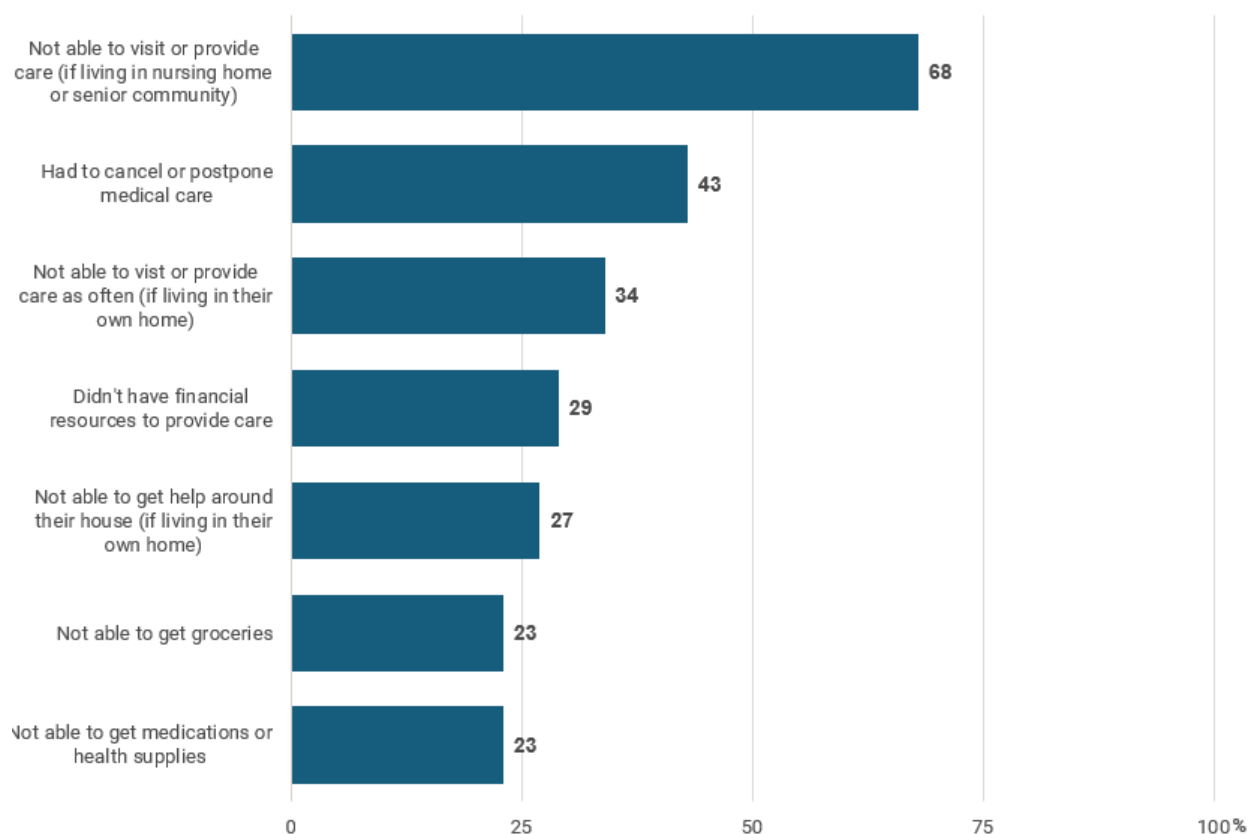
COVID-19 HAS MADE PROVIDING ONGOING LIVING ASSISTANCE MORE DIFFICULT AND MANY CAREGIVERS WORRY ABOUT SAFETY.

Caregivers report that the COVID-19 outbreak has affected their ability to provide care in a variety of ways. Twenty-nine percent don't have the financial resources they need to provide care, and 23% aren't able to get groceries and medications needed for their loved one. Forty-three percent had to postpone medical care.

Caregivers who provide care to someone who lives on their own have their own challenges as well. Thirty-four percent weren't able to visit or provide care as often, and 27% weren't able to get help around the house. Among those who provide care to someone in a nursing home or senior community, 68% weren't able to visit or provide care in that setting.

The COVID-19 outbreak is preventing caregivers from seeing their loved ones and providing care.

Among current caregivers



Question: Has the COVID-19 outbreak affected your ability to provide care in any of the following ways, or not?

Source: AP-NORC Long-Term Care Poll conducted August 27-September 14, 2020, with 1,893 adults nationwide.



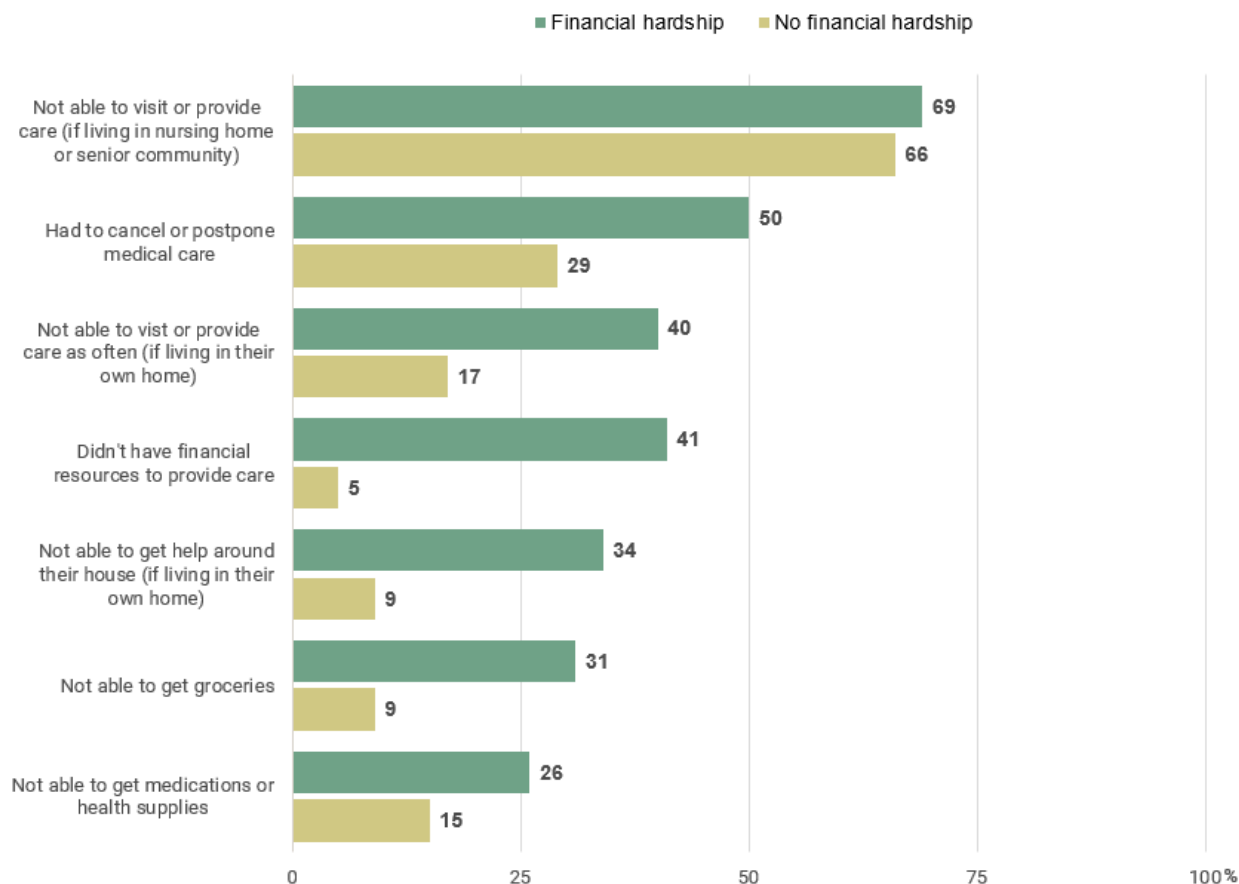
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Caregivers who have faced financial hardship due to the pandemic have been particularly affected in their ability to provide care in a wide range of ways; 41% haven't had the financial resources needed to provide care compared to just

5% of those who have not faced financial hardship. Additionally, they are more likely to face issues getting groceries or medications, and to have cancelled or postponed medical care.

Caregivers facing COVID-related financial hardships are particularly impacted in their ability to provide care.

Among current caregivers



Question: Has the COVID-19 outbreak affected your ability to provide care in any of the following ways, or not?

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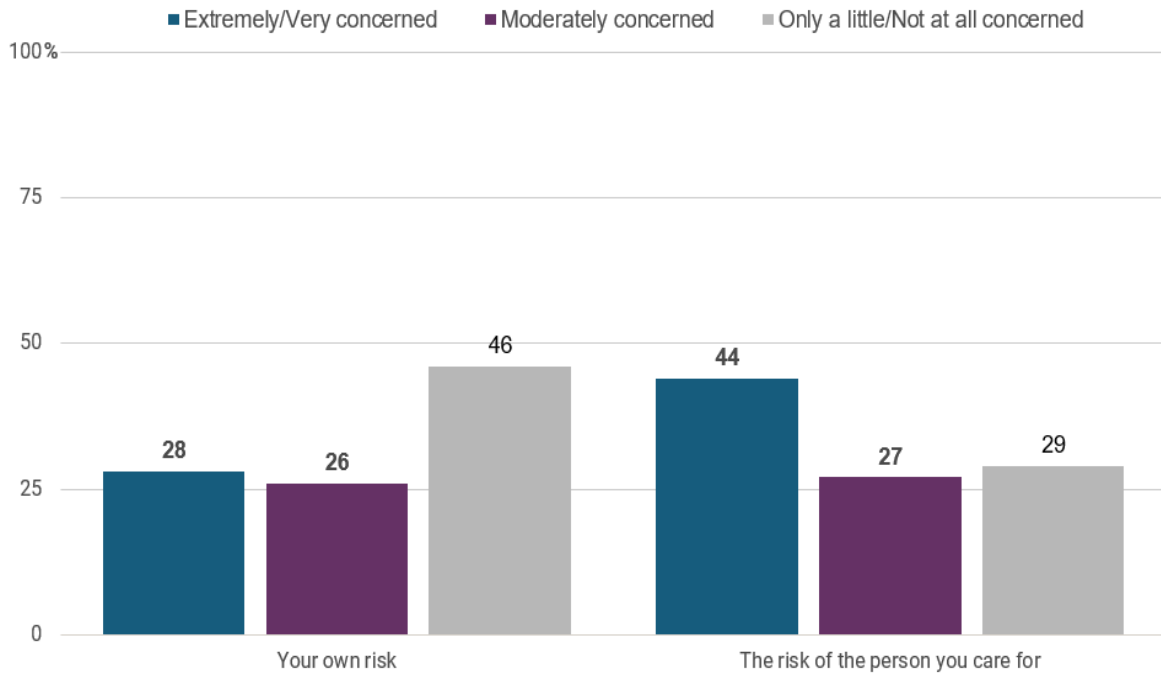
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Many also worry about safety when it comes to providing in-person care during the outbreak. Forty-four percent of current caregivers are extremely or very concerned about

the person they care for being infected with COVID-19, and 27% are moderately concerned. Caregivers are less worried about their own risk of contracting the disease.

Caregivers are more concerned about the person they care for becoming infected with COVID-19 than themselves.

Among current caregivers



Question: Thinking about each of the following, how concerned are you about providing in-person care during the COVID-19 outbreak when it comes to...?

Source: AP-NORC Long-Term Care Poll conducted August 27-September 14, 2020, with 1,893 adults nationwide.



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People caring for a loved one with a chronic condition are particularly likely to be concerned about infecting that person. Forty-nine percent of these caregivers are extremely or very worried about the person they care for getting COVID-19 compared to 34% of those providing care for other reasons.

Non-white caregivers are more concerned about contracting COVID-19 themselves compared to white caregivers; 39% of non-white caregivers are extremely or very concerned compared to 18% of white caregivers.

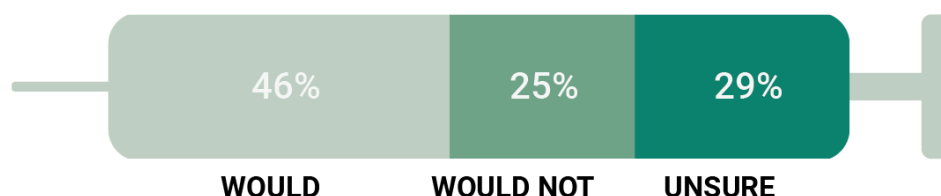
Despite these concerns, many caregivers are unsure if they would get a coronavirus vaccine if it becomes available. Thirty-one percent are unsure, while 25% would not and 43% would. There is also high uncertainty among caregivers whether the person they provide care for would get the vaccine: 34% aren't sure, while 23% say that person would not and 43% say they would.

Interest in a vaccine is similar among the general population, where 29% are unsure if they would get vaccinated, 25% would not and 46% would. These trends have not changed much since May.⁴

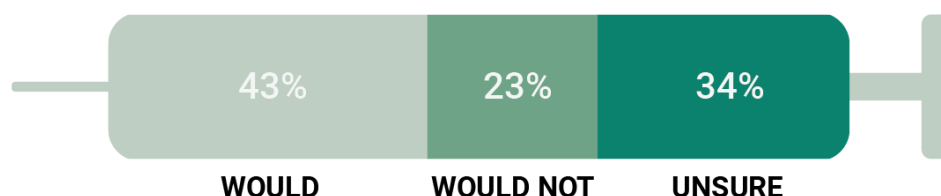
⁴ <https://apnorc.org/projects/expectations-for-a-covid-19-vaccine/>

Many are unsure about getting a COVID-19 vaccine

WOULD FAMILY CAREGIVERS THEMSELVES GET A COVID-19 VACCINE



WOULD THE PERSON THEY CARE FOR GET A COVID-19 VACCINE



The AP-NORC Center conducted this study with funding from The SCAN Foundation. The poll includes 1,893 interviews with a nationally representative sample of Americans age 18 and older, including 565 caregivers, from the AmeriSpeak® Panel. The overall margin of sampling error is +/- 3.0 percentage points at the 95 percent confidence level, including the design effect. For more information, visit www.longtermcarepoll.org.



Men are more likely than women to say that they will get vaccinated against the coronavirus. Fifty-three percent of male caregivers and 52% of men in general say they will get vaccinated compared to 35% of female caregivers and 39% of women overall. Women are more likely to express uncertainty.

Another concern among caregivers is the array of lifestyle changes related to the coronavirus outbreak. Thirty-five percent of caregivers report that the person they provide care for has had difficulty understanding these changes, such as wearing masks, having fewer visitors, or other disruptions.

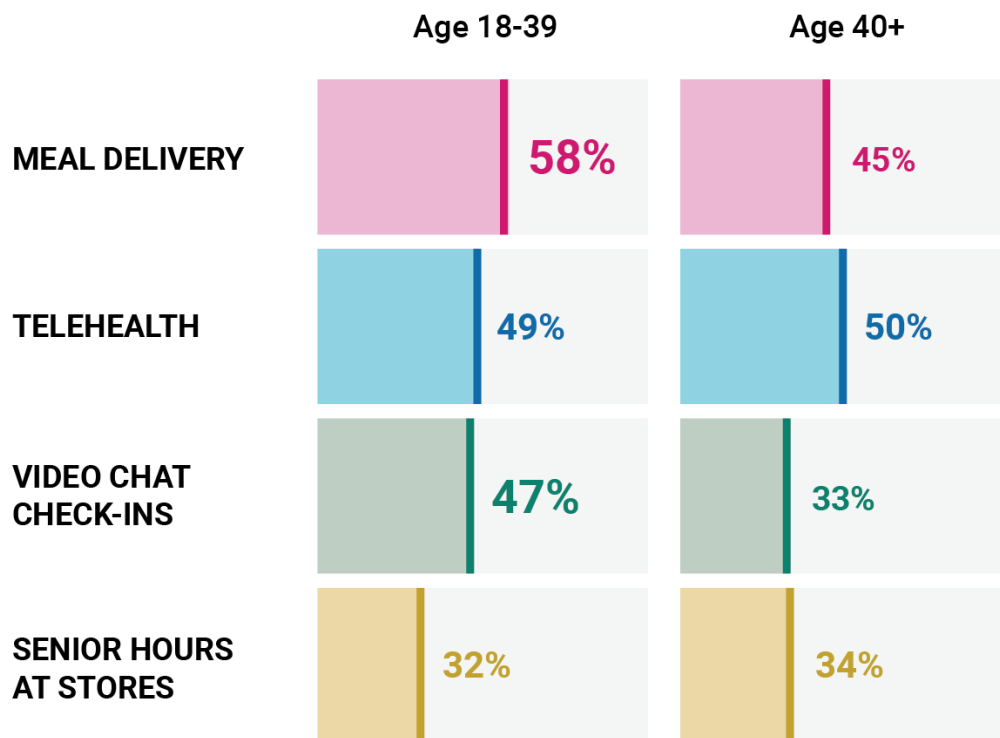
Those suffering from loss of memory or other mental abilities, such as dementia or Alzheimer's disease, are particularly likely to have difficulties with these changes.

Fifty-eight percent of caregivers of someone with these conditions say the person they care for has trouble understanding these changes compared to 21% of those who do not have these conditions.

In order to continue providing assistance to the person they care for, many caregivers have taken advantage of different services since the outbreak began. Half have used meal, grocery, or pharmacy delivery, as well as telehealth or virtual care visits with a health care provider. Thirty-eight percent have used video chats to limit exposure, and a third have used senior hours at stores.

Caregivers age 18-39 are particularly likely to have taken advantage of meal delivery and video check-ins compared to those age 40 and older.

To adapt to COVID-19, many caregiving for older loved ones are taking advantage of new service options



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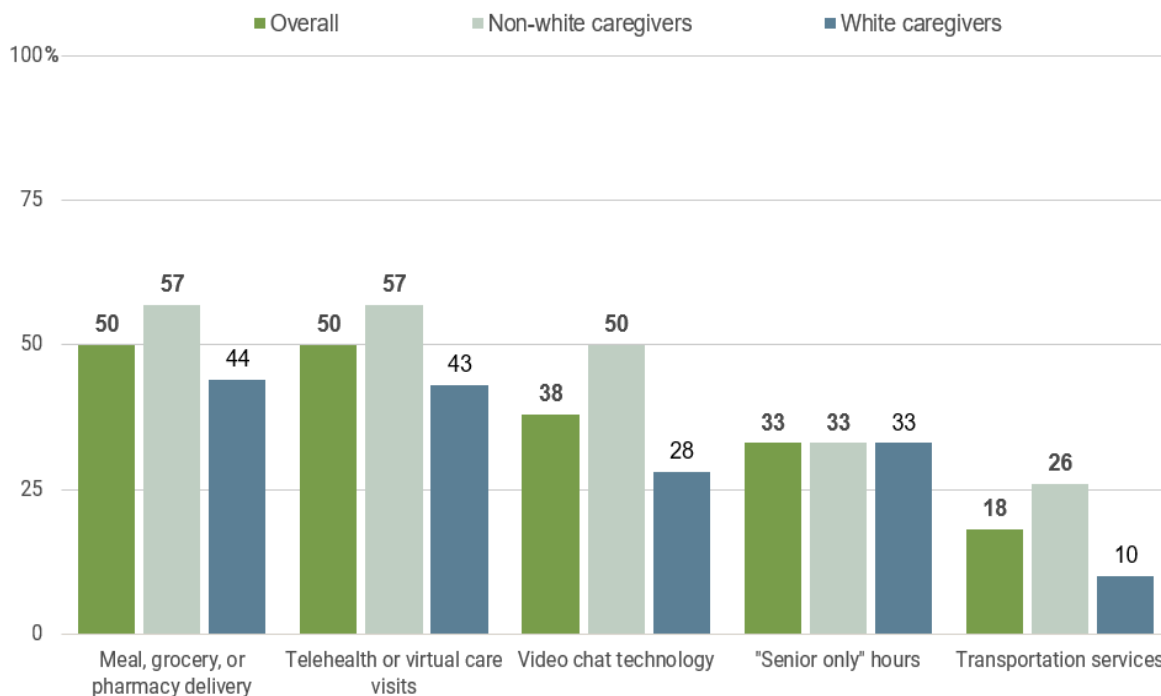
NORC
at the UNIVERSITY of CHICAGO

Non-white caregivers are more likely than white caregivers to have used meal, grocery, or pharmacy delivery, a

transportation service, video chats, and telehealth or virtual care visits.

Many caregivers – especially non-white caregivers – have used services to continue providing assistance.

Among current caregivers



Question: Since the COVID-19 outbreak began, have you used any of the following services in order to provide ongoing living assistance to your family member or friend, or not?

Source: AP-NORC Long-Term Care Poll conducted August 27-September 14, 2020, with 1,893 adults nationwide.

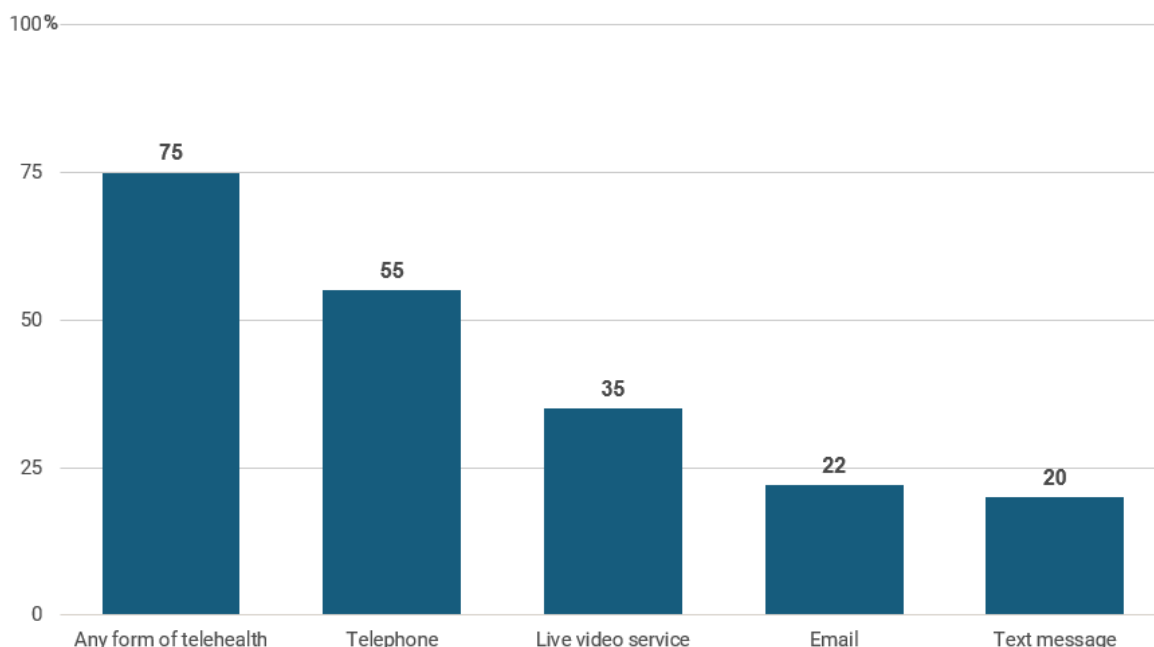
THE USE OF TELEHEALTH IS PREVALENT DURING THE COVID-19 OUTBREAK, BUT MANY ARE UNLIKELY TO CONTINUE USING IT AFTER THE OUTBREAK IS OVER.

As many health care providers have begun using technology to safely provide patients with medical care from a distance, three of every four (75%) caregivers report that the person they provide care for has received care via telehealth of any

kind during the outbreak. Fifty-five percent have done so by talking on the telephone, 35% via live video, 22% by email, and 20% by text message.

A majority of caregivers report use of telehealth during the outbreak.

Among current caregivers



Question: Has the person you provide care to received any care using any of the following?

Source: AP-NORC Long-Term Care Poll conducted August 27-September 14, 2020, with 1,893 adults nationwide.



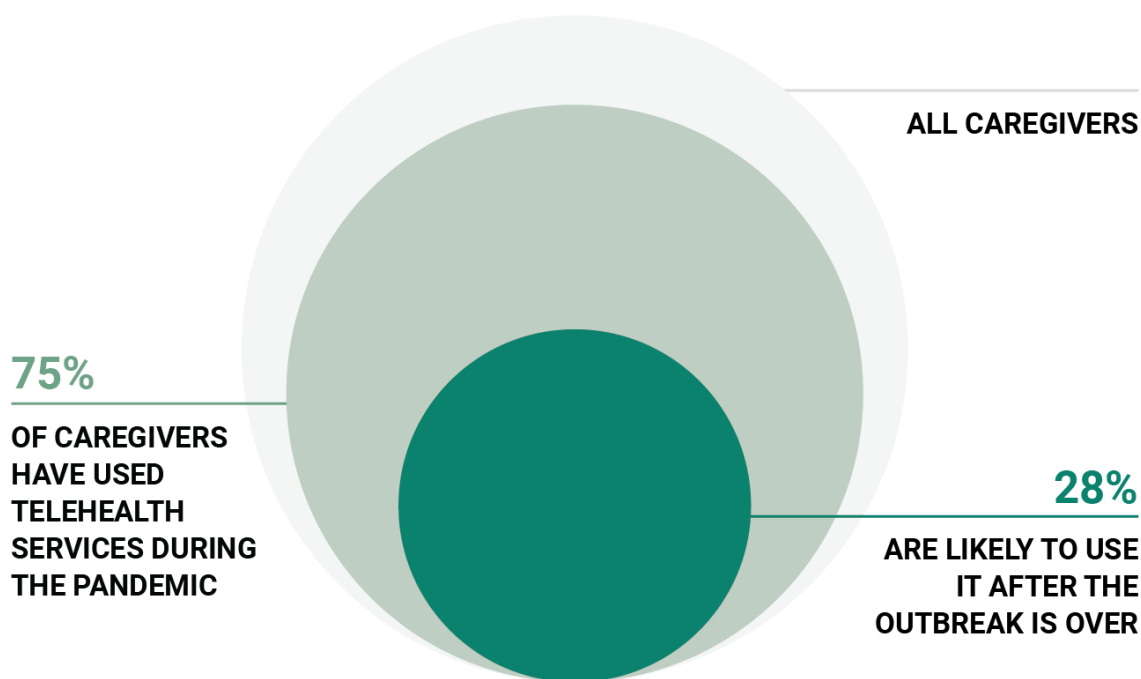
APNORC.org

Non-white caregivers are particularly likely to report the use of telehealth services to access care. Eighty-five percent have used telehealth during the COVID-19 outbreak compared to 66% of white caregivers.

Among caregivers who have used any type of telehealth, 49% were very or extremely comfortable with the service, and 39% were somewhat comfortable. Notably, there were no differences in comfort level based on the age of the caregiver.

Despite the majority of caregivers with telehealth experiences reporting they are at least somewhat comfortable with it, just 28% are very or extremely likely to continue to seek care via telehealth after the COVID-19 outbreak is over. Although another 40% are somewhat likely, 32% are unlikely to continue after the outbreak.

The use of telehealth has been widespread among family caregivers during the COVID-19 outbreak, but not everyone expects to use it once the outbreak is over



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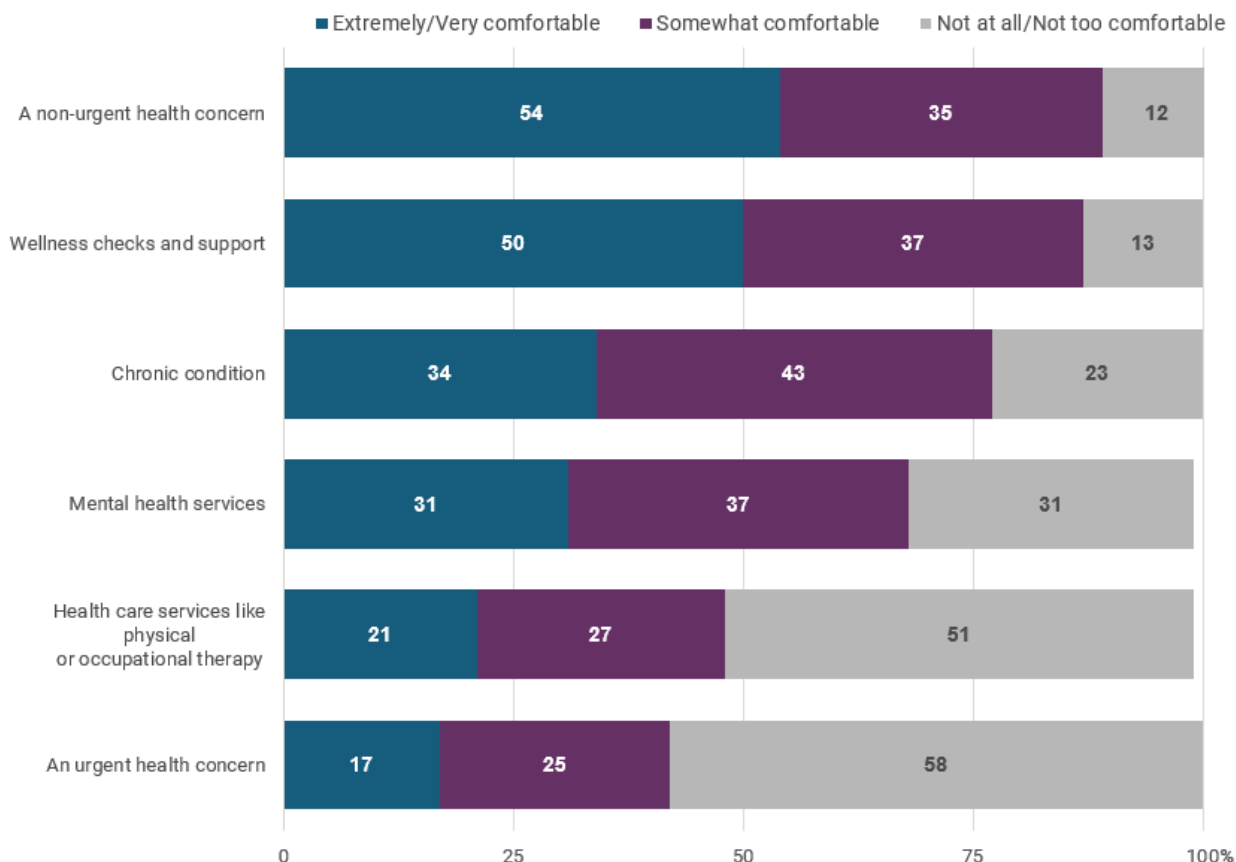


Thinking about types of care, current caregivers would be most comfortable with the person they care for using telehealth for non-urgent health concerns (54%), wellness check-ins and support for people who need ongoing living assistance (50%). About a third would be comfortable using it

to manage their loved one's chronic health condition or for mental health services. They would be less comfortable using it for physical or occupational therapy or for an urgent health concern. Again, no differences emerge when stratifying by age of the caregiver.

Caregivers are most comfortable with telehealth for non-urgent health concerns.

Among current caregivers



Question: If the person you provide care to needed each of the following types of care, how comfortable would you be receiving that care through telehealth?

Source: AP-NORC Long-Term Care Poll conducted August 27-September 14, 2020, with 1,893 adults nationwide.

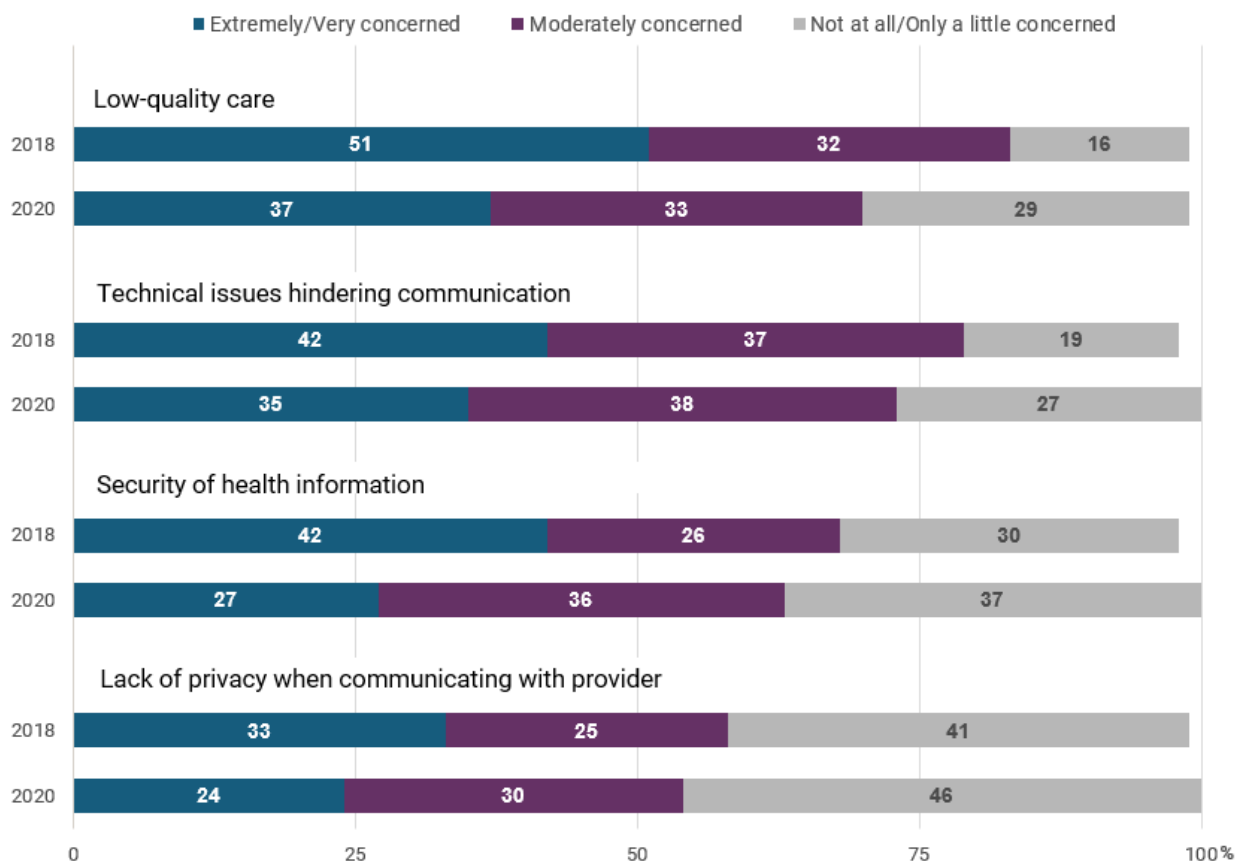


APNORC.org

When it comes to concerns with telehealth, caregivers are most concerned about the quality of care and technology issues that would hinder communication. However, compared to 2018, fewer caregivers are concerned about all of these issues.

Caregivers are less concerned about telehealth than in 2018.

Among current caregivers who received telehealth



Question: When it comes to receiving telehealth, how concerned are you about each of the following?

Source: AP-NORC Long-Term Care Polls conducted March 13-April 5, 2018, with 1,945 adults nationwide and August 27-September 14, 2020, with 1,893 adults nationwide.



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Non-white caregivers are more concerned than white caregivers about the security and privacy of their health information; 33% and 31% of non-white caregivers are very or extremely concerned about each, respectively, while just 21% and 17% of white caregivers feel the same. Caregivers who

have faced financial hardship due to the pandemic are more concerned than those who haven't faced such hardship about receiving low-quality care (43% vs. 26%) and a lack of privacy (28% vs. 15%).

ABOUT THE STUDY

Study Methodology

This study, funded by [The SCAN Foundation](#), was conducted by The Associated Press-NORC Center for Public Affairs Research. Data were collected using AmeriSpeak®, NORC's probability-based panel designed to be representative of the U.S. household population. During the initial recruitment phase of the panel, randomly selected U.S. households were sampled with a known, non-zero probability of selection from the NORC National Sample Frame and then contacted by U.S. mail, email, telephone, and field interviewers (face-to-face). The panel provides sample coverage of approximately 97% of the U.S. household population. Those excluded from the sample include people with P.O. Box only addresses, some addresses not listed in the USPS Delivery Sequence File, and some newly constructed dwellings. Of note for this study, the panel would also exclude recipients of long-term care who live in some institutional types of settings, such as skilled nursing facilities or nursing homes, depending on how addresses are listed for the facility. Staff from NORC at the University of Chicago, The Associated Press, and The SCAN Foundation collaborated on all aspects of the study.

Interviews for this survey were conducted between August 27 and September 14, 2020, with adults age 18 and older representing the 50 states and the District of Columbia. Panel members were randomly drawn from AmeriSpeak, and 1,893 completed the survey—1,809 via the web and 84 via telephone. A general population sample was screened in-field for those currently providing ongoing living assistance, who were weighted back to their proper proportion in the

screeners. Interviews were conducted in both English and Spanish, depending on respondent preference. Respondents were offered a small monetary incentive for completing the survey.

The final stage completion rate is 14.9%, the weighted household panel response rate is 21%, and the weighted household panel retention rate is 80.4%, for a cumulative response rate of 2.5%. The overall margin of sampling error is +/- 3.0 percentage points at the 95% confidence level including the design effect. The margin of sampling error for the 565 completed interviews with current caregivers is +/- 5.9 percentage points at the 95% confidence level including the design effect.

Once the sample has been selected and fielded, and all the study data have been collected and made final, a post-stratification process is used to adjust for any survey nonresponse as well as any non-coverage or under- and oversampling resulting from the study-specific sample design. Poststratification variables included age, gender, census division, race/ethnicity, and education. Weighting variables were obtained from the 2020 Current Population Survey. The weighted data reflect the U.S. population of adults age 18 and over.

Topline data and reports for all previous years, including full methodology statements, are available at www.longtermcarepoll.org. For more information, email info@apnorc.org.

CONTRIBUTING RESEARCHERS

From NORC at the University of Chicago

Dan Malato
Semilla Stripp
Will Bonnell
Jennifer Benz
Trevor Thompson

From The Associated Press

Emily Swanson
Hannah Fingerhut

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