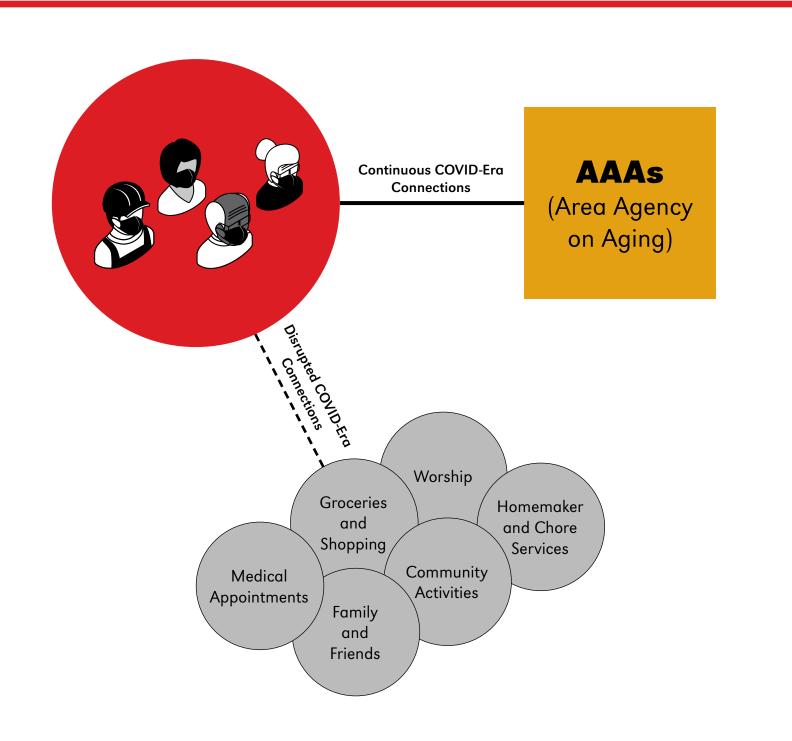
## COVID-19 and Its IMPACT on Aging Nebraskans

A Final Report for Nebraska's Area Agencies on Aging

DECEMBER 2020





Report prepared by Julie Masters and Lindsay Wilkinson of the Department of Gerontology and Tara Grell, Center for Public Affairs Research, UNO College of Public Affairs and Community Service

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Alliance - Angie Flesnor Bayard - Diana Hagel Bridgeport - Michelle Daily Chadron - Sheila Motz Chappell - Kim Schultz Crawford - Judy Gortsema Gering - Bonnie Pelster Gordon - Janet Sasse Harrison - Donna Wickersham Hay Springs - Peggy Tlustos Kimball - Eileen Rowley Mitchell - Jessica Peterson Morrill - Shirley Swenson Oshkosh - Nicki Bruesch Rushville - Judy Schultz Rushville - Dorothy Nyffler Scottsbluff - Mary Smith Sidney - Judy Schaefer

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### Blue Rivers Area Agency on Aging Beatrice:

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 Table Rock:

 Erin Plager, Roberta Turnbull, Lavon Covault, Glee

 Covault, Shad Gager

Wymore: Angie Meyer, Carol Maxson

Eastern Nebraska Office on Aging Numerous delivery drivers and volunteers assisted with the distribution and collection of surveys to meal recipients. Key personnel from ENOA include: Arlis Smidt, Jay Renshaw, Tara Thomas, Kathy Reynolds, Chris Casey, Kortnie Williams, Amanda Hronek

### Midland Area Agency on Aging Numerous delivery drivers and volunteers assisted with the distribution and collection of surveys to meal recipients. Key personnel from the following

**agencies include:** Howard County - Toni Bentz Merrick County - Tina Broekemeier

Merrick County – Tina Broekemeier Adams County – Rachel Devlin Hall County – Diane Rollen, Tracy Bowers Hamilton County – Jenny Friesen Clay County – Rachael McLain Webster County – Becky Simpson Nuckolls County – Jalonda Bouray

### Northeast Nebraska Area Agency on Aging

The following Area Agency on Aging staff assisted with the distribution of the surveys: Michele Schaecher, Amber Roberts, Jacque Black, Chassidy Veik-Beltz, Kayla Roberts, Lori Olson, Laura Wylie, Connie Cooper

### Staff and volunteers from the following senior centers assisted with the distribution of the surveys to meal recipients:

Allen Senior Center, Atkinson Senior Center, Beaver Valley Senior Center, Beemer Senior Center, Boyd County Senior Center, Cedar Rapids Senior Center, Chatt Senior Center, Colfax County Senior Center, Columbus Senior Center, Community Senior Center, Columbus Senior Center, Decatur Senior Center, Elgin Senior Center, Heritage of Emerson, Happy Days Senior Center, Hartington Senior Center, Howells/ Clarkson Grain Bin, Madison Senior Center, Neligh Senior Center, Norfolk Senior Center, Northeast Nebraska Senior Center, Pierce Senior Center, Pilger Senior Center, Plainview Senior Center, Randolph Senior Center, Rock County Senior Center, Santee Senior Center, Stanton Nursing Facility, Valentine Senior Center, Walthill Senior Center, Wayne Senior Center, Sunshine Senior Center, Wisner Senior Center

### South Central Nebraska Area Agency on Aging

South Central Staff - Susan Hutsell, Rod Horsley, Nancy McEntee

Harlan County Senior Center – Bonnie Kresser Ravenna Senior Center – Roberta Douglas Prairie Pioneer Center – Brett DeBusk Spalding Senior Center – Susan Schmett Comstock Den Senior Center – Carol Erickson Valley County Senior Center – Peg Klanecky Franklin County Senior Center – Sila Moore Golden Years Senior Center – Penny Jacob Sherman County Senior Center – Denise Holcomb Golden Generation Senior Center – Ting Hutchens

### West Central Nebraska Area Agency on Aging

West Central Staff – Teri Pokorny, Shyenne Cooper North Platte Senior Center – Becky Blume Heritage Senior Center McCook – Beth Siegfried Wauneta Senior Center – Karon Pantera Gothenburg Senior Center – Susan Anderson Grand Generation Senior Center Lexington – Deb James Grand Generation Senior Center Cozad – Tamie Thurn Keith County Senior Center Staff and Volunteers In July 2020, faculty from the University of Nebraska at Omaha and the University of Nebraska Kearney met to collaborate on a grant proposal for the National Institutes of Health. The focus of the proposal was on addressing the unintended social and psychological consequences of the COVID-19 pandemic and its impact on community-dwelling aging adults across Nebraska. Establishment of need through a pilot survey of aging Nebraskans was key along with formulating final research questions developed by the team.

Of importance was the reality that COVID-19 has laid bare the social, psychological, and digital vulnerabilities of rural and underserved older adults throughout the state. For states like Nebraska, understanding the rural-urban experience of older adults is critical not only during a global pandemic, but also for the future as the population continues to age, particularly in areas where services, resources, and health care professionals are limited. Older adults continue to be at risk for COVID-19 due to existing co-morbidities along with suffering the effects of physical distancing to maintain their safety (Mills et al., 2020). Traditional alternatives for care such as nursing homes are increasingly becoming options of the past for those in less populated areas with the closure of 33 nursing homes in the state in the last three years and another 33 nursing homes under receivership (Seniors Speak Nebraska, 2018). Understanding how to support aging Nebraskans choosing to remain in the community is key.

Faculty met with executive directors of the eight Area Agencies on Aging (AAA) in Nebraska to strategize how best to reach persons receiving services from their respective agencies. After thoughtful discussion, all agencies agreed to working with the faculty research team in disseminating and collecting a two-page survey, developed by the faculty research team, to persons participating in the Meals on Wheels/Home Delivered Meals program (MOW/HDM). 3,725 surveys were distributed to meal recipients across Nebraska. 1,852 completed surveys were received out of a possible 3,725 representing a 50% response rate.

Of note, pandemic delivery guidelines necessitated respondents receive surveys in a contact-free manner. Delivery drivers included surveys and return envelopes with the daily meal in a plastic bag. Meal recipients were instructed that their participation was voluntary. Those choosing to complete the survey did so and placed it in the return envelope, sealed it, and provided it to the driver soon after completion. Surveys were returned to UNO Gerontology and the data entry team completed entering surveys in November. Special thanks to Arlis Smidt (ENOA) for suggesting the use of envelopes to make survey return easier. This research was approved by the Institutional Boards for UNO and UNK researchers.

This report provides an overview of the data collected in July and August 2020. Three themes are used to highlight the results at the state and AAA level. These include: how life has changed because of COVID-19 (includes service use and delay), social connections (loneliness, interactions with others), and technology (access and reliability). Included with this report are suggestions for future actions to take, a final summary for each of the AAAs, and a copy of the survey.

### **NEBRASKA'S AGING POPULATION**

Twenty-two percent of Nebraskans are 60 years of age or older. The majority of these people live in the community. Those with the greatest social and economic needs along with health concerns rely on services such as MOW/HDM from the eight AAAs to maintain their independence. A breakdown of the number of persons age 60 and older living in each AAA service area follows.

### **SPECIAL THANKS TO:**

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## INTRODUCTION

### POPULATION FOR SELECT AGE GROUPS FOR NEBRASKA AREA AGENCIES ON AGING (AAAs): JULY 1, 2019

CINC DADTNEDG

NEBRASKA TOTAL POPULATION 1,934,408					
Category Number Percent					
50-54 years	107,106	5.5			
55-59 years	123,589	6.4			
60-64 years	6.1				
65-74 years	178,908	9.2			
75-84 years	90,492	4.7			
<b>85+ years</b> 43,058 2		2.2			
All ages 50+ 661,857 34.2					

ENOA TOTAL POPULATION 842,065					
Category Number Percent					
50-54 years	48,306	5.7			
55-59 years	52,310	6.2			
60-64 years	47,228	5.6			
65-74 years	69,150	8.2			
75-84 years	31,978	3.8			
85+ years	14,020	1.7			
All ages 50+ 262,992 31.3					

AGING PARTNERS TOTAL POPULATION 404,546						
Category Number Percent						
50-54 years	21,253	5.3				
55-59 years	24,083	6.0				
60-64 years	23,494	5.8				
65-74 years	36,790	9.1				
75-84 years	17,498	4.3				
85+ years	7,918	2.0				
All ages 50+	131,036	32.4				

MIDLAND TOTAL POPULATION 130,078					
Category Number Percent					
50-54 years	7,386	5.7			
55-59 years	8,842	6.8			
60-64 years	8,495	6.5			
65-74 years	12,928	9.9			
75-84 years	6,954	5.3			
85+ years	3,417	2.6			
All ages 50+	48,022	36.9			

SOUTH CENTRAL TOTAL POPULATION 100,396					
Category Number Percent					
50-54 years	5,259	5.2			
55-59 years	6.6				
60-64 years 6,561					
65-74 years	10,682	10.6			
75-84 years 6,017 6					
<b>85+ years</b> 2,985 3.0					

38,110

38.0

### **WEST CENTRAL** TOTAL POPULATION 97.808

Category	Number	Percent		
50-54 years	5,204	5.3		
55-59 years	6,658	6.8		
60-64 years	6,944	7.1		
65-74 years	11,262	11.5		
75-84 years	6,190	6.3		
85+ years	3,051	3.1		
All ages 50+	39,309	40.2		
75-84 years 85+ years	3,051	3.1		

### **BLUE RIVERS** TOTAL POPULATION 72.095

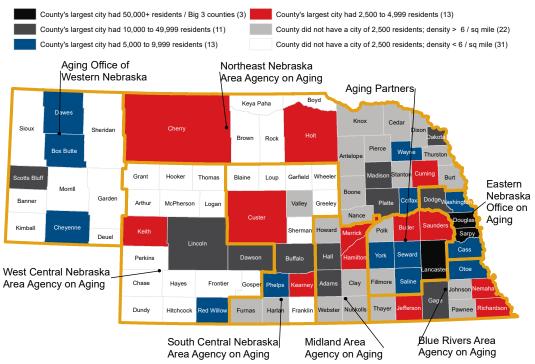
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Number	Percent
4,237	5.9
5,355	7.4
5,501	7.6
8,274	11.5
4,782	6.6
2,751	3.8
30,900	42.9
	4,237 5,355 5,501 8,274 4,782 2,751

### NORTHEAST TOTAL POPULATION 204,458 Category Number Percent

50-54 years	11,104	5.4
55-59 years	14,199	6.9
60-64 years	14,312	7.0
65-74 years	20,440	10.0
75-84 years	11,809	5.8
85+ years	6,222	3.0
All ages 50+	78,086	38.2

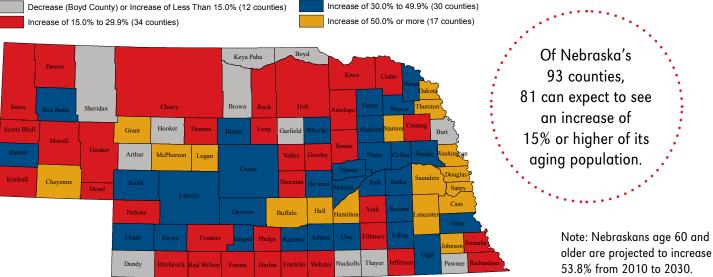
WESTERN TOTAL POPULATION 82,962					
Category Number Percent					
50-54 years	4,357	5.3			
55-59 years	5,536	6.7			
60-64 years	6,169	7.4			
65-74 years	9,382	11.3			
75-84 years	5,264	6.3			
85+ years	2,694	3.2			
All ages 50+	33,402	40.3			

### **NEBRASKA COUNTIES CLASSIFIED BY SIZE OF THEIR LARGEST CITY IN THE 2010 CENSUS**



In thinking of the future, each of Nebraska's Area Agencies on Aging can expect an increase in the number of people they will serve in the next 10 years. In spite of the pandemic, understanding needs and reliance on such things as technology is key.

### **PROJECTED PERCENT CHANGE IN AGE 60 AND OLDER POPULATION: 2010 TO 2030**



Note: To see which Nebraska counties comprise each specific Area Agency on Aging, see: https://nebaaaa.org/locations.html.

Source: 2019 Vintage Population Estimates, U.S. Census Bureau

All ages 50+

Note: Cities of 50,000 can be a separate metropolitan area while nonmetropolitan cities of 10,000 can be a separate micropolitan area. Hall County achieved metropolitan status in 2013 as its urbanized area, which crossed county lines, exceeded 50,000 population even though the population of its largest city was below 50,000. Areas with 2,500 population are considered urban by the Census Bureau. This county classification was developed based upon these definitions.

Source: U.S. Census Bureau, 2010 Census and Census Definitions; U.S. Office of Management and Budget, 2013 Metropolitan and Micropolitan Definitions.

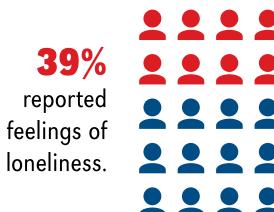
Increase of 30.0% to 49.9% (30 counties)

Source: December 2015 Nebraska County Population Projects



70% perceived that their life had changed as a result of the COVID-19 pandemic.







Compared to their pre-COVID-19 life, most respondents (57%) reported leaving their home less now or being unable to leave (7%).



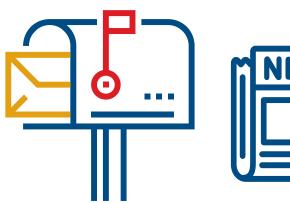
73% of respondents interacted with someone by phone/video chat or in person within the last day.



However, **7%** reported that it had been more than one week since their last interaction.

**98%** 

**25%** of respondents had not left their home to do something other than get the mail or newspaper in over a week.

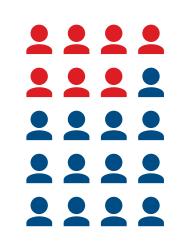




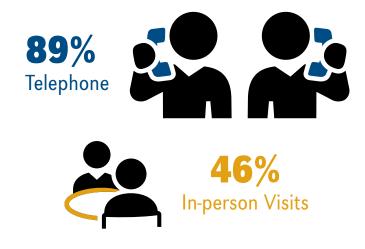
 $\bigcirc$ of respondents had to skip or postpone a health care visit due to the pandemic.

## SOCIAL CONNECTIONS, LONELINESS, AND SOCIAL SUPPORT

35% reported feeling lonelier due to the impact of the pandemic.



When asked how they usually interact with family members, friends, and neighbors, the most frequent modes of interaction were

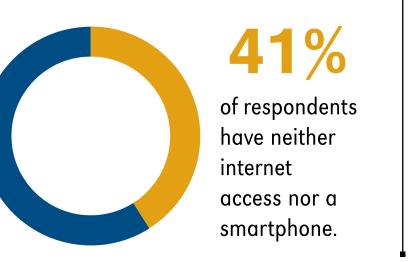


The vast majority of respondents had someone they could contact if they needed help or wanted to visit by phone or video chat.

**27%** have received health care services

via telephone or video chat. Among those respondents, 69% had only begun using telehealth services since the COVID-19 pandemic.

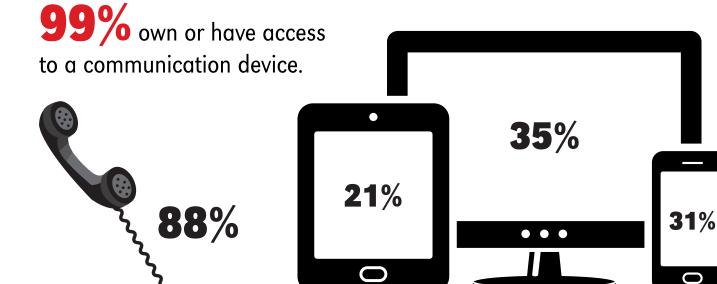






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**INTERNET ACCESS** 



COVID-19 has changed life for all ages. The reliance on technology has required children to attend school remotely along with an expectation of older adults to embrace such novelties as telehealth. The need for a more complete infrastructure, such as internet, broadband, etc., is quickly becoming a necessity during and following the pandemic. Yet, recommending telehealth to people of limited means, digital knowledge, or language proficiency is short-sighted. As a now identified "social determinant of health" (Cortelyou-Ward et al., 2020), seeking ways to connect aging Nebraskans to technology is a greater priority for policy makers and the Aging Network across the state.

In a 2019 internet based study of 2,555 U.S. adults, less than 5% had used telehealth. Although interest was expressed by this sample in using telehealth, persons who are older, have less education, or are Black are typically less likely to use this form of health care (Fischer et al., 2020). Telehealth is not accessible for everyone. The rural-urban divide is also evident as it relates to technology (Whitacre & Mills, 2007; Cortelyou-Ward et al., 2020). Finding alternative ways to give people access to devices such as smartphones may be one way to address the existing deficiencies (Pew Research Center, 2015). Yet, smartphones are also dependent on cellular providers with adequate coverage of a given area. It is noteworthy that there are still places in Nebraska served by only one or two cellular providers, which adds further restrictions to more universal usage.

However, internet access in and of itself is a necessary, but not a solely sufficient step in connecting people to telehealth. More is needed, especially for aging adults. Training on how to use technology is key along with ensuring older people engage in safe practices when going online. There are examples of training already in place in larger metropolitan areas, such as Omaha. Finding ways to bring this knowledge and effort to more rural areas in Nebraska is an important next step once the necessary internet and cellular coverage is in place.

COVID -19 has made visible the limitations faced by aging Nebraskans in accessing technology. In addition, other issues such as loneliness, a pre-pandemic issue, has raised concerns for older adults. The need for sheltering in place, along with limited access to usual destinations including shopping, senior centers, and place of worship, illustrates how loneliness has been accentuated because of the pandemic. The data in this report reflect that loneliness was further exacerbated by physical distancing and other measures put into place to protect older adults. Our study found people who frequently attended community places pre-pandemic were more likely to feel lonelier as a result of the pandemic. Finding ways to keep older adults engaged is necessary for their health and well-being. Technology may be one way to allow for this through social networking and other platforms. At the same, finding ways to keep older people safe in using technology is key, especially as fraud and exploitation continue to be an issue for the aging population.

What is striking, those completing the survey indicated they have people with whom they can contact if needed. The effort extended by the AAAs cannot be underestimated in supporting persons in their service areas. Going forward, finding ways to keep in contact with aging adults is of value during non-pandemic times as well. As an example, a lowtech program like telephone reassurance can provide much needed interaction for older adults and those volunteering with the program. This exchange can include older people interacting with one another along with intergenerational opportunities for young and old to support one another.

As the population of Nebraska ages, the opportunities for supporting people living in rural and underserved areas continues to grow. Bringing together researchers and practitioners in aging is a necessary step to ensure the latest knowledge is considered and applied to the community setting. This project is an example of how researchers from the University of Nebraska system and the Aging Network can come together to identify ways to make a difference in the lives of aging Nebraskans.

## POTENTIAL NEXT STEPS



Results for Aging Office of Western Nebraska are based on valid responses to 343 surveys out of a possible 429 surveys (response rate = 80%).

Life changes in the midst of the pandemic

- COVID-19 pandemic.
- home less now (52%) or being unable to leave (8%).
- within the last day (37%) or more than a day ago but within the last week (32%).
- the pandemic.

Social connections, loneliness, and social support

- Less than one-half of respondents (37%) reported feelings of loneliness; however, 34 percent reported feeling lonelier due to the impact of the pandemic.
- week since their last interaction.
- or wanted to visit by phone or video chat.

Technology, telehealth, and other ways to communicate

- Close to one-third of respondents (31%) have ever received healthcare services via begun using telehealth services since the COVID-19 pandemic.
- If telehealth services were available through a nearby community place, 58 percent of respondents indicated that they would be willing to use them.
- access.
- In contrast to those with telephones (89%), comparatively fewer older adults reported (17%).

### **IN-TEXT REFERENCES**

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## UNIVERSITY OF NEBRASKA AT OMAHA

• The majority of respondents (64%) perceived that their life had changed as a result of the

Compared to their pre-COVID-19 life, the majority of respondents reported leaving their

Close to 9 percent of respondents had not left their home to do something other than get the mail or newspaper in over a month. Older adults most frequently reported leaving their home

Less than one-half of respondents (39%) had to skip or postpone a health care visit due to

Nearly three-quarters of respondents (73%) interacted with someone by phone/video chat or in person within the last day; however, 7 percent reported that it had been more than one

When asked how they usually interact with family members, friends, and neighbors, the most frequent mode of interaction was telephone (89%), followed by in-person visits (43%). • The vast majority of respondents (98%) had someone they could contact if they needed help

telephone or video chat. Moreover, among those respondents, the majority (72%) had only

 Internet access at home varied among respondents: 45 percent reported no internet access, 9 percent reported non-reliable internet access, and 46 percent reported reliable internet

owning or having access to smartphones (32%), computers (31%), and iPads or tablets



Results for Aging Partners are based on valid responses to 143 surveys out of a possible 476 surveys (response rate = 30%).

Life changes in the midst of the pandemic

- The majority of respondents (77%) perceived that their life had changed as a result of the COVID-19 pandemic.
- Compared to their pre-COVID-19 life, most respondents reported leaving their home less now (62%) or being unable to leave (7%).
- Close to 6 percent of respondents had not left their home to do something other than get the mail or newspaper in over a month. Older adults most frequently reported leaving their home within the last day (35%) or more than a day ago but within the last week (37%).
- Less than one-half of respondents (40%) had to skip or postpone a health care visit due to • the pandemic.

Social connections, loneliness, and social support

- Less than one-half of respondents (42%) reported feelings of loneliness; however, 37% percent reported feeling lonelier due to the impact of the pandemic.
- More than two-thirds of respondents (67%) interacted with someone by phone/video chat or in person within the last day; however, 10 percent reported that it had been more than one week since their last interaction.
- When asked how they usually interact with family members, friends, and neighbors, the most frequent mode of interaction was telephone (90%), followed by in-person visits (40%).
- The vast majority of respondents (95%) had someone they could contact if they needed help • or wanted to visit by phone or video chat.

Technology, telehealth, and other ways to communicate

- Close to one-quarter of respondents (24%) have ever received healthcare services via telephone or video chat. Moreover, among those respondents, the majority (68%) had only begun using telehealth services since the COVID-19 pandemic.
- If telehealth services were available through a nearby community place, 51 percent of respondents indicated that they would be willing to use them.
- Internet access at home varied among respondents: 51 percent reported no internet access, 6 percent reported non-reliable internet access, and 43 percent reported reliable internet access.
- In contrast to those with telephones (87%), comparatively fewer older adults reported owning or having access to smartphones (27%), computers (29%), and iPads or tablets (24%).



Results for Blue Rivers Area Agency on Aging are based on valid responses to 239 surveys out of a possible 400 surveys (response rate = 60%).

Life changes in the midst of the pandemic

- COVID-19 pandemic.
- Compared to their pre-COVID-19 life, the majority of respondents reported leaving their home less now (60%) or being unable to leave (8%).
- within the last day (38%) or more than a day ago but within the last week (36%).
- the pandemic.

Social connections, loneliness, and social support

- Less than one-half of respondents (43%) reported feelings of loneliness; however, 39 percent reported feeling lonelier due to the impact of the pandemic.
- since their last interaction.
- or wanted to visit by phone or video chat.

Technology, telehealth, and other ways to communicate

- Close to one-quarter of respondents (23%) have ever received healthcare services via begun using telehealth services since the COVID-19 pandemic.
- respondents indicated that they would be willing to use them.
- access.
- (17%).

## UNIVERSITY OF NEBRASKA AT OMAHA GERONTOLOGY

### COVID-19 Survey of Meals on Wheels/Home-Delivered Meals Recipients

• The majority of respondents (72%) perceived that their life had changed as a result of the

Close to 5 percent of respondents had not left their home to do something other than get the mail or newspaper in over a month. Older adults most frequently reported leaving their home

Less than one-half of respondents (39%) had to skip or postpone a health care visit due to

Three-guarters of respondents (75%) interacted with someone by phone/video chat or in person within the last day; however, 7 percent reported that it had been more than one week

When asked how they usually interact with family members, friends, and neighbors, the most frequent mode of interaction was telephone (91%), followed by in-person visits (51%). The vast majority of respondents (98%) had someone they could contact if they needed help

telephone or video chat. Moreover, among those respondents, the majority (73%) had only

If telehealth services were available through a nearby community place, 55 percent of

Internet access at home varied among respondents: 52 percent reported no internet access, 10 percent reported non-reliable internet access, and 38 percent reported reliable internet

In contrast to those with telephones (90%), comparatively fewer older adults reported owning or having access to smartphones (23%), computers (32%), and iPads or tablets



Results for Eastern Nebraska Office on Aging are based on valid responses to 187 surveys out of a possible 638 surveys (response rate = 29%).

Life changes in the midst of the pandemic

- The majority of respondents (66%) perceived that their life had changed as a result of the COVID-19 pandemic.
- Compared to their pre-COVID-19 life, the majority of respondents reported leaving their home less now (53%) or being unable to leave (16%).
- Approximately one in five respondents (21%) had not left their home to do something other than get the mail or newspaper in over a month. Older adults most frequently reported leaving their home within the last day (26%) or more than a day ago but within the last week (29%).
- One-half of respondents (50%) had to skip or postpone a health care visit due to the pandemic.

Social connections, loneliness, and social support

- Less than one-half of respondents (40%) reported feelings of loneliness; however, 37 percent reported feeling lonelier due to the impact of the pandemic.
- More than two-thirds of respondents (69%) interacted with someone by phone/video chat or in person within the last day; however, 10 percent reported that it had been more than one week since their last interaction.
- When asked how they usually interact with family members, friends, and neighbors, the most frequent mode of interaction was telephone (83%), followed by in-person visits (41%).
- The vast majority of respondents (97%) had someone they could contact if they needed help or wanted to visit by phone or video chat.

Technology, telehealth, and other ways to communicate

- One-third of respondents (33%) have ever received healthcare services via telephone or video chat. Moreover, among those respondents, the majority (70%) had only begun using telehealth services since the COVID-19 pandemic.
- If telehealth services were available through a nearby community place, 50 percent of respondents indicated that they would be willing to use them.
- Internet access at home varied among respondents: 45 percent reported no internet access, 10 percent reported non-reliable internet access, and 44 percent reported reliable internet access.
- In contrast to those with telephones (87%), comparatively fewer older adults reported owning or having access to smartphones (29%), computers (35%), and iPads or tablets (19%).

Results for Midland Area Agency on Aging are based on valid responses to 267 surveys out of a possible 510 surveys (response rate = 52%).

Life changes in the midst of the pandemic

- COVID-19 pandemic.
- Compared to their pre-COVID-19 life, the majority of respondents reported leaving their home less now (54%) or being unable to leave (5%).
- within the last day (42%) or more than a day ago but within the last week (31%).
- the pandemic.

Social connections, loneliness, and social support

- Less than one-half of respondents (41%) reported feelings of loneliness; however, 30 percent reported feeling lonelier due to the impact of the pandemic.
- week since their last interaction.
- or wanted to visit by phone or video chat.

Technology, telehealth, and other ways to communicate

- begun using telehealth services since the COVID-19 pandemic.
- respondents indicated that they would be willing to use them.
- access.
- (23%).

## UNIVERSITY OF NEBRASKA AT OMAHA GERONTOLOGY

### COVID-19 Survey of Meals on Wheels/Home-Delivered Meals Recipients

• The majority of respondents (65%) perceived that their life had changed as a result of the

Close to 7 percent of respondents had not left their home to do something other than get the mail or newspaper in over a month. Older adults most frequently reported leaving their home

Less than one-half of respondents (44%) had to skip or postpone a health care visit due to

More than two-thirds of respondents (70%) interacted with someone by phone/video chat or in person within the last day; however, 7 percent reported that it had been more than one

When asked how they usually interact with family members, friends, and neighbors, the most frequent mode of interaction was telephone (90%), followed by in-person visits (42%). The vast majority of respondents (98%) had someone they could contact if they needed help

 Approximately one-third of respondents (34%) have ever received healthcare services via telephone or video chat. Moreover, among those respondents, the majority (68%) had only

If telehealth services were available through a nearby community place, 47 percent of

Internet access at home varied among respondents: 48 percent reported no internet access, 10 percent reported non-reliable internet access, and 43 percent reported reliable internet

In contrast to those with telephones (84%), comparatively fewer older adults reported owning or having access to smartphones (28%), computers (30%), and iPads or tablets



Results for Northeast Nebraska Area Agency on Aging are based on valid responses to 350 surveys out of a possible 605 surveys (response rate = 58%).

Life changes in the midst of the pandemic

- The majority of respondents (78%) perceived that their life had changed as a result of the COVID-19 pandemic.
- Compared to their pre-COVID-19 life, the majority of respondents reported leaving their home less now (66%) or being unable to leave (3%).
- Close to 6 percent of respondents had not left their home to do something other than get the mail or newspaper in over a month. Older adults most frequently reported leaving their home within the last day (48%) or more than a day ago but within the last week (32%).
- Less than one-half of respondents (44%) had to skip or postpone a health care visit due to the pandemic.

Social connections, loneliness, and social support

- More than one-third of respondents (38%) reported feelings of loneliness; however, the same amount (38%) reported feeling lonelier due to the impact of the pandemic.
- More than three-quarters of respondents (78%) interacted with someone by phone/video chat or in person within the last day; however, 5 percent reported that it had been more than one week since their last interaction.
- When asked how they usually interact with family members, friends, and neighbors, the most frequent mode of interaction was telephone (91%), followed by in-person visits (53%).
- The vast majority of respondents (98%) had someone they could contact if they needed help or wanted to visit by phone or video chat.

Technology, telehealth, and other ways to communicate

- Close to one-quarter of respondents (23%) have ever received healthcare services via telephone or video chat. Moreover, among those respondents, the majority (77%) had only begun using telehealth services since the COVID-19 pandemic.
- If telehealth services were available through a nearby community place, 59 percent of respondents indicated that they would be willing to use them.
- Internet access at home varied among respondents: 40 percent reported no internet access, 7 percent reported non-reliable internet access, and 53 percent reported reliable internet access.
- In contrast to those with telephones (91%), comparatively fewer older adults reported owning or having access to smartphones (36%), computers (42%), and iPads or tablets (26%).



Results for South Central Nebraska Area Agency on Aging are based on valid responses to 169 surveys out of a possible 317 surveys (response rate = 53%).

Life changes in the midst of the pandemic

- COVID-19 pandemic.
- Compared to their pre-COVID-19 life, the majority of respondents reported leaving their home less now (51%) or being unable to leave (8%).
- within the last day (46%) or more than a day ago but within the last week (30%).
- the pandemic.

Social connections, loneliness, and social support

- percent reported feeling lonelier due to the impact of the pandemic.
- since their last interaction.
- or wanted to visit by phone or video chat.

Technology, telehealth, and other ways to communicate

- Close to one-quarter of respondents (23%) have ever received healthcare services via begun using telehealth services since the COVID-19 pandemic.
- If telehealth services were available through a nearby community place, 50 percent of respondents indicated that they would be willing to use them.
- access.
- In contrast to those with telephones (88%), comparatively fewer older adults reported • (22%).

## UNIVERSITY OF NEBRASKA AT OMAHA GERONTOLOGY

### COVID-19 Survey of Meals on Wheels/Home-Delivered Meals Recipients

• The majority of respondents (72%) perceived that their life had changed as a result of the

Close to 7 percent of respondents had not left their home to do something other than get the mail or newspaper in over a month. Older adults most frequently reported leaving their home

Less than one-half of respondents (40%) had to skip or postpone a health care visit due to

Approximately one-third of respondents (34%) reported feelings of loneliness; however, 30

Three-guarters of respondents (75%) interacted with someone by phone/video chat or in person within the last day; however, 5 percent reported that it had been more than one week

When asked how they usually interact with family members, friends, and neighbors, the most frequent mode of interaction was telephone (87%), followed by in-person visits (49%). The vast majority of respondents (99%) had someone they could contact if they needed help

telephone or video chat. Moreover, among those respondents, the majority (54%) had only

 Internet access at home varied among respondents: 48 percent reported no internet access, 10 percent reported non-reliable internet access, and 42 percent reported reliable internet

owning or having access to smartphones (37%), computers (40%), and iPads or tablets



Results for West Central Nebraska Area Agency on Aging are based on valid responses to 154 surveys out of a possible 350 surveys (response rate = 44%).

Life changes in the midst of the pandemic

- The majority of respondents (71%) perceived that their life had changed as a result of the COVID-19 pandemic.
- Compared to their pre-COVID-19 life, the majority of respondents reported leaving their home less now (57%) or being unable to leave (5%).
- Close to 6 percent of respondents had not left their home to do something other than get the mail or newspaper in over a month. Older adults most frequently reported leaving their home within the last day (35%) or more than a day ago but within the last week (37%).
- Less than one-half of respondents (36%) had to skip or postpone a health care visit due to the pandemic.

Social connections, loneliness, and social support

- More than one-third of respondents (42%) reported feelings of loneliness; however, 35 percent reported feeling lonelier due to the impact of the pandemic.
- Approximately three-quarters of respondents (76%) interacted with someone by phone/video chat or in person within the last day; however, 4 percent reported that it had been more than one week since their last interaction.
- When asked how they usually interact with family members, friends, and neighbors, the most frequent mode of interaction was telephone (91%), followed by in-person visits (45%).
- The vast majority of respondents (98%) had someone they could contact if they needed help or wanted to visit by phone or video chat.

Technology, telehealth, and other ways to communicate

- Approximately one in five respondents (21%) have ever received healthcare services via telephone or video chat. Moreover, among those respondents, 45 percent had only begun using telehealth services since the COVID-19 pandemic.
- If telehealth services were available through a nearby community place, 63 percent of respondents indicated that they would be willing to use them.
- Internet access at home varied among respondents: 45 percent reported no internet access, 8 percent reported non-reliable internet access, and 48 percent reported reliable internet access.
- In contrast to those with telephones (88%), comparatively fewer older adults reported owning or having access to smartphones (34%), computers (38%), and iPads or tablets (22%).

COVID-19 Survey

Please indicate the county in which you live: \_\_\_\_

Researchers from the University of Nebraska are requesting your help in understanding whether COVID-19 has altered your life. We are asking you to complete the following survey to the best of your ability. Please note, there are no right or wrong answers. Your participation in this survey is completely voluntary. You do not need to participate in this survey to continue to receive meals. If you do decide to participate, please have only one person in the household, 60 and older, complete the survey.

Please DO NOT write your name or any other identifying information on this survey beyond identifying which county you live in. When you have completed the survey, please place it in a sealed envelope and return this to your Meals on Wheels/Home Delivered Meals delivery driver. Thank you for sharing your opinions with us.

- 1. Has your life changed because of COVID-19? (Please circle either yes or no) Yes
- 2. If yes, how has your life changed? (Please write in space provided)
- 3. Do you feel lonely? (Please circle either yes or no) Yes
- I feel lonelier I feel less lonely It did not change my feeling of loneliness
- other than get your mail, newspaper, etc.? (Please check one answer)

Within the last day More than a day ago, but within the last week More than a week ago, but within the last month Over a month ago Unable to leave my home/apartment

- space below)
- person? Within the last day More than a day ago, but within the last week More than a week ago, but within the last month Over a month ago Unable to leave my home/apartment

Telephone Email Visits Video Chat Family lives with me Other None

## APPENDIX

No

No

4. How do you think COVID-19 has impacted your feeling of loneliness? (Please check one answer)

5. Compared to your pre-COVID-19 life, how often do you leave your home. (Please check one answer). Unable to leave Less now About the same Slightly more More than

6. Since COVID-19 began, when was the last time that you left your home/apartment to do something

7. What services do you need now but do not have access to because of COVID-19? (Please write in the

8. Since COVID-19 began, when was the last time you interacted with someone by phone/video chat or in

9. How do you usually interact with family members, friends/neighbors? (Please check all that apply)

(Please go to the next page)

## APPENDIX (cont.)

10. Who can you c	contact if you need	help or would lik	ke to visit by p	hone or video (	chat? (Please	check one
answer)						

Family \_\_\_\_\_ Friends/Neighbors \_\_\_\_\_ Care Manager \_\_\_\_\_ Other \_\_\_\_ No One \_\_\_\_

**11.** When restrictions are not in place, what community places do you frequently attend? (Please check all that apply)

Church/Place of Worship \_\_\_\_\_ Library \_\_\_\_\_ Senior Center \_\_\_\_ Other \_\_\_\_\_ None \_\_\_\_\_

12. Have you ever received healthcare services via telephone or video chats (skype, zoom, FaceTime, etc)? Yes No

If yes, was it before COVID-19----- or Since COVID-19 ----- (circle one)

- 13. If a community place near you offered services through telehealth (calls or video chats with a health care provider) to promote your health and wellbeing, would you be willing to use it?
   (Please circle either yes or no) Yes No
- 14. Have you had to skip or postpone doctor/nurse visits due to COVID-19? (Please circle either yes or no)

Yes No

15. Please indicate if you own or have access to any of the following by checking all that apply.

Telephone \_\_\_\_\_ Smartphone \_\_\_\_\_ Computer/laptop \_\_\_\_\_\_ iPad or tablet \_\_\_\_\_

16. Which statement best describes your Internet access at home?

I have reliable Internet access

I have Internet access, but it is not reliable

I do not have Internet access

Thank you for completing this survey. As a reminder, please do not write your name on this survey.

Please return the completed form to your Meals on Wheels/Home Delivered Meals driver. Thank you.





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