

SILVER Study Among Older New Yorkers: Summary of Findings

BACKGROUND

In New York City (NYC), older adults (75+) had seven times the mortality rate from COVID-19 compared to all ages (2,527 vs. 338 per 100,000 people¹). However, little is known about the mental health and social ramifications of the COVID-19 pandemic on older adults (70+) who live at home (i.e. do not live in congregate care or institutional settings) in NYC. Older adults have generally been compelled to remain secluded from friends and family during the pandemic which could negatively impact mental health due to fear of the coronavirus. To better understand the effects of the COVID-19 pandemic on older adults living at home, we conducted a phone survey titled SARS-CoV-2 Impact on Lives and Views of Elderly Residents (“SILVER”).

METHODS

Random digit dial sampling was used to contact households with listed landline phone numbers in NYC between December 2020 and March 2021 with oversampling by 20% neighborhoods with a cumulative higher burden of COVID-19. The 70-question survey was administered by computer-assisted telephone interview (CATI) in English, Spanish, Haitian Creole, Mandarin and Cantonese. Eligible persons were 70 years or older, residents of New York City and able to answer questions. A total of 676 participants were enrolled with a 5% response rate². All results were weighted to account for survey design, eligibility, nonresponse rates, and post-stratification; the latter to more accurately reflect the demographic distribution of older adults in NYC.

CHARACTERISTICS OF STUDY PARTICIPANTS

- Survey participants were 60% women and 40% men
- Almost two thirds of the sample (62%) were adults aged 70-79 and 38% were over age 80
- Twenty-eight percent of participants lived in Brooklyn, 29% in Queens, 22% in Manhattan, 14% in the Bronx and 7% in Staten Island
- Forty-five percent of participants were White, 21% Black, 20% Latinx, and 14% another race/ethnicity
- Asians (12% of NYC older adults³) were under-represented in the sample (3%). Due to the small sample size, they were grouped with participants who were not Black, Latinx or White into the “another race/ethnicity” category
- Forty-four percent were married, 22% widowed, 16% never married, 15% divorced, and 3% separated
- Sixteen percent of participants had no co-existing health condition, 21% only had one, and 63% had two or more pre-existing health conditions

1 COVID-19: Data, Total Data New York, NY: New York City Department of Health and Mental Hygiene 2021 [Available from: <https://www1.nyc.gov/site/doh/covid/covid-19-data-totals.page#rates>.]

2 AAPOR Standard Definitions: Final Dispositions of Case Codes and Outcome Rates for Surveys https://www.aapor.org/AAPOR_Main/media/publications/Standard-Definitions20169theditionfinal.pdf Accessed 3 June 2021. Response Rate 4 is used for this survey

3 Health of Older Adults in New York City: New York City Department of Health and Mental Hygiene 2019 [Available from: <https://www1.nyc.gov/assets/doh/downloads/pdf/episrv/2019-older-adult-health.pdf>]

COVID-19 EXPOSURE, TESTING, POSITIVITY

- Sixty-three percent of participants ever tested for COVID-19
- Of those tested, 12% had a positive test for SARS-CoV-2
- By race/ethnicity, testing was highest among Latinx participants (73%). They also reported the highest percentage of positive tests (24%)
- Among all participants, 11% reported ever staying at home due to having COVID-19 or being potentially exposed to COVID-19. This was highest among Latinx (19%) participants
- Most participants (63%) knew at least one person who had COVID-19, and 50% know someone who died from COVID-19
- Fifty-two percent of Latinx participants knew someone who had tested positive for SARS-CoV-2 and 57% knew someone who had died of COVID-19

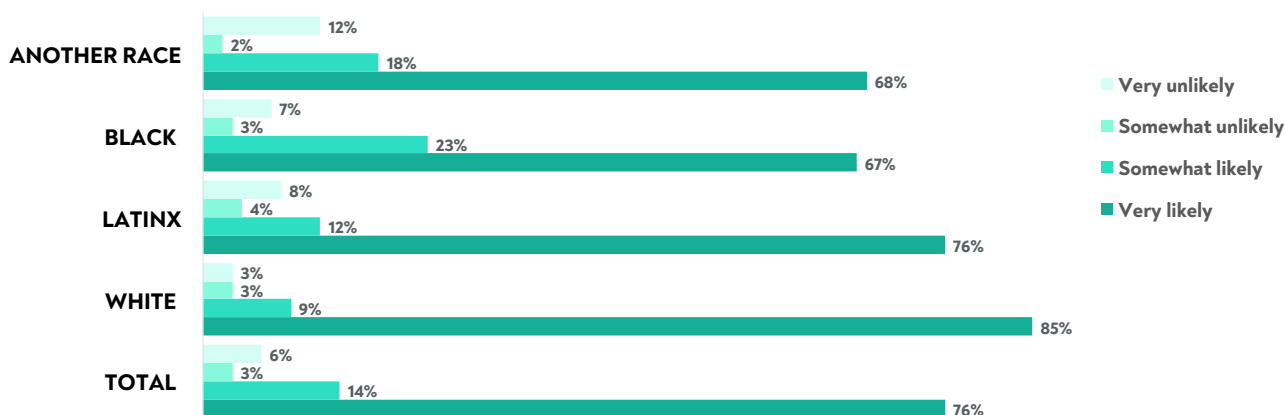
COVID-19 QUARANTINE/ ISOLATION, TESTING AND POSITIVITY BY AGE GROUP	AGE	
	70-79	80+
	(N) %	(N) %
ISOLATED OR QUARANTINED DUE TO COVID-19		
Yes	(59) 14.1	(16) 5.1
No	(376) 85.9	(221) 94.9
EVER TESTED FOR SARS-COV-2		
Yes	(286) 68.1	(124) 53.5
No	(150) 31.9	(115) 46.5
TESTED POSITIVE FOR SARS-COV-2		
Yes	(34) 14.0	(11) 9.0
No	(252) 86	(113) 91

COVID-19 VACCINATION AND INTENT

- Sixty percent of participants reported having been vaccinated against COVID-19 between February and March 2021
- Sixty-nine percent of Whites, 61% of those who identify in another way, 60% of Latinx, and 42% of Blacks received the COVID-19 vaccine. Seventy percent of men received the COVID-19 vaccine, and 50% of women
- Among the unvaccinated, the majority of participants reported very likely (76%) or somewhat likely (14%) to get vaccinated. However, likelihood differed by race/ethnicity: 85% of Whites, 76% of Latinx, 67% of Blacks and 64% of those who identify in another way were very likely to get the COVID-19 vaccination
- Among the 9% somewhat/very unlikely to get a COVID-19 vaccine, the main reasons were concern about side effects (45%) and dislike of needles or shots (12%)
- Among those who were unlikely to get the vaccine, more than three fourths (78%) of men, and 37% of women reported vaccine side effects as the main reason for reporting being somewhat/very unlikely to get the COVID-19 vaccine. Ten percent of men and 3% of women distrust the safety of the vaccine
- Three fifths (60%) of participants reported receipt of the influenza vaccine, 23% planned to receive, and 18% did not plan to receive it

Likelihood of getting COVID-19 vaccination among unvaccinated adults, Feb – March 2021

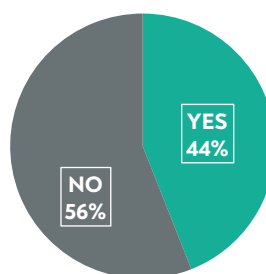
More White older New Yorkers are very likely to get the vaccine compared to other racial/ethnic groups



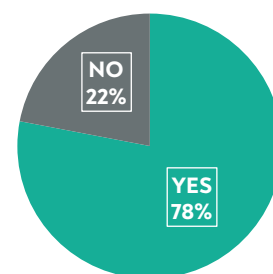
ACCESS TO INTERNET AND HEALTH SERVICES

- Twenty-two percent of participants do not have access to the internet; 34% of those aged 80 and older and 16% of those aged 70-79 do not have internet access. 27% of women and 16% of men do not have access
- Twenty-two percent of participant households do not own or use computers, smartphones, or tablets; 30% of those 80 and older and 18% of those aged 70-79 do not own or use these electronic devices
- Forty-four percent of older adult participants had a doctor appointment by phone or video in the past 3 months; 41% of women and 49% of men reported having virtual appointments

Had doctor appointment by phone or video in the past 3 months



Older adults who own smartphones, computers, tablets

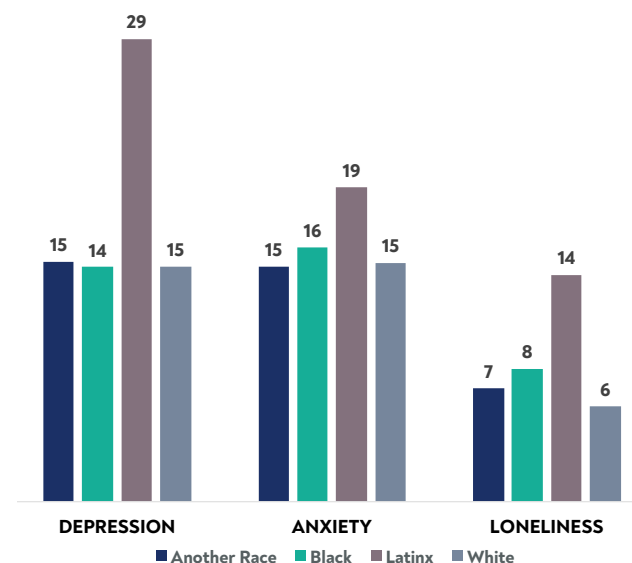


DEPRESSION, ANXIETY AND LONELINESS

- Overall, 18% of participants screened for depression⁴ and 17% for anxiety⁵
- Latinx participants were most likely to screen positive for depression (29%) and anxiety (19%)
- Sixteen percent of Black, 15% White and 15% of those of another race were symptomatic of anxiety
- Fifteen percent of Black, White, and those of another race were symptomatic of depression
- Fourteen percent of Latinx participants reported loneliness, 8% of Black participants, 7% among those of another race, and 6% of White participants
- Screening for depression and anxiety was higher among those reported earning less than \$25,000 annually (23% screened for depression, 21% for anxiety) compared to those who reported earning more than \$100,000 annually (5% for depression, 6% for anxiety)
- Reports of depression, anxiety and loneliness were similar among those born in the US compared to those born in another country (18% and 17% depression; 20% and 14% anxiety; 10% and 6% loneliness)
- Depression and anxiety were almost four times higher among those who were not currently working compared to those who were currently working (19% and 6% for depression; 18% and 9% for anxiety)
- More than two thirds (68%) of participants reported interacting with people a lot less since COVID-19 started

Mental distress among older adults in NYC Dec 2020 – March 2021 by race

More Latinx respondents reported poor mental health outcomes than other races/ethnicities



HOUSING AND EMPLOYMENT

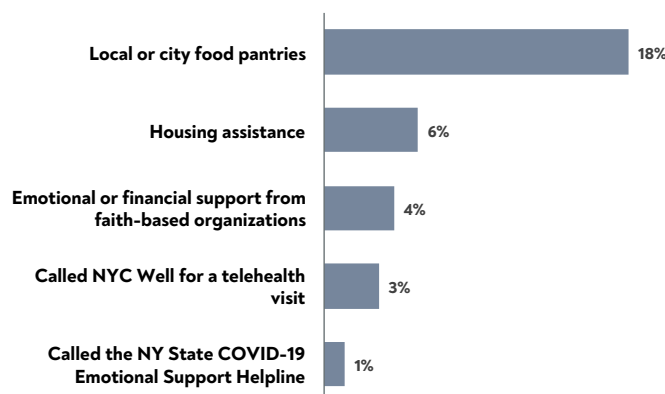
- Forty-three percent of participants live on their own, while 39% live with one other person, and 19% live with more than two people
- Ten percent of participants reported employment with 31% of those working doing so outside the home and 43% of workers doing so at home
- Thirty-eight percent reported living in multi-generational households⁶
- More women (46%) live in multi-generational households compared to 28% of men
- COVID-19 positivity in multi-generational households was double (18%) that of households that were not multi-generational (9%)

SOCIAL SUPPORT

- Forty-three percent of participants reported that worrying about someone sick with COVID-19 has impacted them a lot/somewhat
- Fifty-eight percent of participants reported experiencing isolation a lot/somewhat due to COVID-19
- Fifty-three percent of participants were impacted somewhat or a lot by thinking about their own death or the death of someone else
- Eighty-eight percent of participants reported having someone to talk to, and this person was most likely to be a family member (47%) or spouse (27%)
- Participants reported relying primarily on family (61%), friends (41%), and a partner/spouse (36%) for mental, physical, and social support including activities such as transportation and household tasks

Services used by older NYC adults, Dec 2020 – March 2021

Food pantries were the most used service



4 Depression: A score of 3 or greater on the Patient Health Questionnaire-2 (PHQ-2) screener was used to assess prevalence of depressive symptoms. Kroenke K, Spitzer RL, Williams JB. The Patient Health Questionnaire-2: Validity of a Two-Item Depression Screener. Medical Care. 2003;41:1284-92

5 Anxiety: a score of 3 or greater on the Generalized Anxiety Disorder-2 (GAD-2) screener was used to determine prevalence of anxiety. Kroenke K, Spitzer RL, Williams JB, Monahan PO, Löwe B. Anxiety disorders in primary care: prevalence, impairment, comorbidity, and detection. Ann Intern Med. 2007;146:317-25.

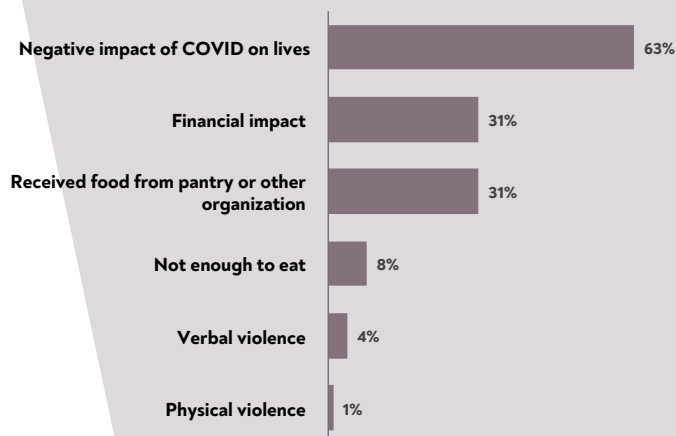
6 A household was defined as multi-generational if a participant indicated that they currently live with their children or grandchildren

PERSONAL IMPACTS FROM COVID-19

- Almost two-thirds (63%) of older NYC adults reported that COVID-19 impacted their lives in a negative way a lot or somewhat
- Thirty-one percent reported that COVID-19 created financial problems for them or their household a lot or somewhat
- Since COVID-19 started, 8% of participants reported that often or sometimes there was not enough to eat in their household
- About 31% of participants reported receiving food from a food pantry, community organization, or the government since COVID-19 started
- More than two thirds (68%) of participants reported interacting with people a lot less since COVID-19 started
- One percent of participants reported experiencing physical violence and 4% reported experiencing verbal violence since COVID-19 started

Impact of COVID-19 on older NYC adults, Dec 2020 – March 2021

The most frequently cited impact was financial



CONCLUSIONS

- Overall, 18% of older adults screened for depression and 17% for anxiety. Latinx older adults were most likely to report knowing someone who died of COVID-19, having tested themselves for COVID-19 and testing positive for COVID-19. Consequently, a greater percent of Latinx older adults screened likely for anxiety and depression and reported more loneliness than other races/ethnicities
- Social determinants of health⁷ – particularly income, race and employment status – were related to worse mental health outcomes
- A substantial percent of older adults did not have internet (22%) or related technology in their homes (22%) meaning approximately 1 in 5 older New Yorkers were not able to connect to others via internet during the pandemic limiting access to telehealth services, information sources, and COVID-19 vaccine appointments
- While a majority of older adults indicated an intention to be vaccinated, vaccination rates and intentions were lowest among Black older adults, mirroring a nationwide trend of hesitancy among Black Americans; a group whose medical experience is one of institutionalized racism⁸

SILVER was guided by an advisory group. Members of the group are as follows:

Linda P. Fried, MD, MPH – Dean, Columbia’s Mailman School of Public Health, DeLamar Professor of Public Health Practice, Professor of Epidemiology and Medicine and Senior VP of Columbia University Medical Center

Oxiris Barbot, MD – Senior Fellow for Public Health and Social Justice with The JPB Foundation, Adjunct Assistant Professor at the Mailman School of Public Health

Lorraine Cortés-Vázquez, MPA – Commissioner, NYC Department for the Aging; President, Aging in New York; Board of Trustees, CUNY

Ruth Finkelstein, ScD - Rose Dobrof Executive Director, Brookdale Center for Healthy Aging, Hunter College; Professor at Hunter College’s School of Urban Public Health; Adjunct professor Mailman School of Public Health

Jennifer Rosen, MD - Director, Epidemiology and Surveillance, Bureau of Immunization, NYC Department of Health and Mental Hygiene

FUNDING This survey was supported by the New York Community Trust, the Samuels Foundation, and an anonymous donor

AUTHORS Abigail R Greenleaf, Shannon M Farley, Monique Millington, Kiana Chan, David Hoos, Andrea Low, Wafaa El-Sadr.

SUGGESTED CITATION

Greenleaf AR, Farley SM, Millington M, Chan K, Hoos D, Low A, El-Sadr W. Mental health and self-reported experiences among older New York City residents (aged 70 and above) during the COVID-19 pandemic. [ICAP at Columbia University](#). June 2021.

7 Social determinants of health are conditions in the places where people live, learn, work, and play that affect a wide range of health

8 Bajaj SS, Stanford FC. Beyond Tuskegee - Vaccine Distrust and Everyday Racism. *N Engl J Med.* 2021;384(5):e12.