

The Indirect Impacts of the COVID-19 Pandemic on Individuals Living in the Nipissing and Parry Sound Districts: A Focus on Individuals Aged 65 and Older

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The Indirect Impacts of the COVID-19 Pandemic on Individuals in the Nipissing and Parry Sound Districts: A Focus on Individuals Aged 65+

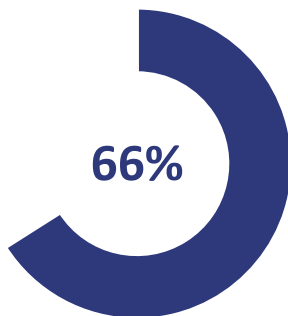
In January and February 2021, the North Bay Parry Sound District Health Unit surveyed individuals, aged 16 and older, living in Nipissing and Parry Sound districts to learn about the indirect impacts of the COVID-19 pandemic. Participants were asked about their experiences since the start of the COVID-19 pandemic (March 2020). Survey questions were related to mental health and well-being, physical health, substance use, access to programs/services, child well-being, parental concerns, income, and access to basic needs. During the survey's collection period, the Nipissing and Parry Sound districts were under a Stay-at-Home Order, and schools were closed for a portion of the survey collection period (January 5th to February 8th, 2021).

Overall, 180 individuals aged 65 years and older responded to the survey. Three-quarters (74%) of respondents identified as female, and nearly two-thirds (64%) indicated they lived in the Nipissing district.


This report outlines key findings specific to individuals aged 65 years and older living in the Nipissing and Parry Sound districts. Descriptive statistics of demographic traits, as well as frequency tables detailing supplementary information, can be found in the appendix (Tables 1-6).

Please note, data collected from the community survey may be subject to various survey biases, including social desirability bias (i.e., respondents may give an answer that they believe is socially acceptable), response bias (i.e., certain groups of people are more likely to complete a survey than others) and recall bias (i.e., misremembering events or information to accurately answer a question). As a result, data should be interpreted with caution. Additionally, individuals without internet access were excluded from the sampling frame.

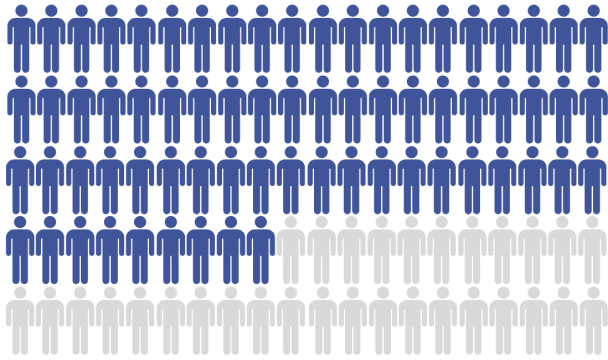
FINDING #1: The survey asked respondents about their worries concerning the impacts of the COVID-19 pandemic. As with respondents aged 64 years and younger, respondents aged 65 years and older were most worried about the impacts of COVID-19 on their social life or that of others in their household.



Sixty-six percent of respondents aged 65 years and older reported they are **worried about the impacts** of COVID-19 on their **social life** or the social life of others in their household.



FINDING #2: The survey asked respondents about changes to their mental health and well-being since the start of the pandemic. **Over two-thirds** of respondents aged 65 years and older reported experiencing more **feelings of loneliness or isolation** due to the COVID-19 pandemic. This is slightly less than respondents aged 64 years and younger (75%); however, this difference is not statistically significant¹.

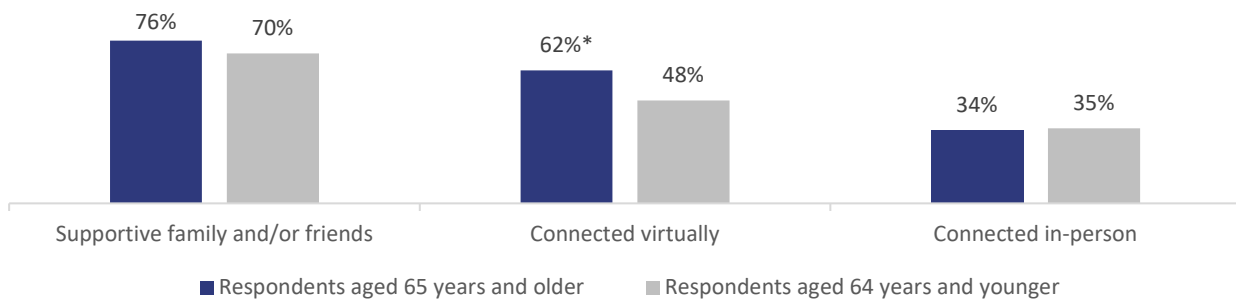


69%

of respondents aged 65 years and older experienced more feelings of loneliness or isolation due to the COVID-19 pandemic.

Thirty-nine percent of respondents aged 65 years and older reported experiencing **decreased feelings of happiness at home**, which is less than respondents aged 64 years and younger (45%), though not statistically significant.

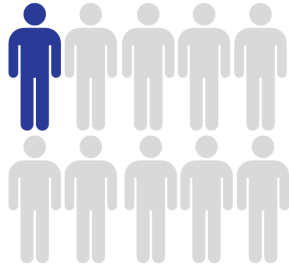
FINDING #3: The survey asked respondents about their social interactions, both those that occurred virtually and in-person, as well as their feelings about having supportive family and/or friends. Respondents aged 65 years and older were **more likely** to report feeling they have **supportive family and/or friends**, and that they have **connected virtually with others** in the last seven days, compared to respondents aged 64 years and younger.



* Indicates the difference is statistically significant.

¹ The term “significant” is used within this report to describe differences between seniors (those 65 and older) and non-seniors (those 16-64) that are statistically meaningful. Without statistical significance, we cannot say with certainty that the differences are real, or simply due to chance. Sampling variability associated with each estimate is determined using 95% confidence intervals (95% CI), which indicate the precision of the estimate. Confidence intervals were used to determine significant differences between estimates.

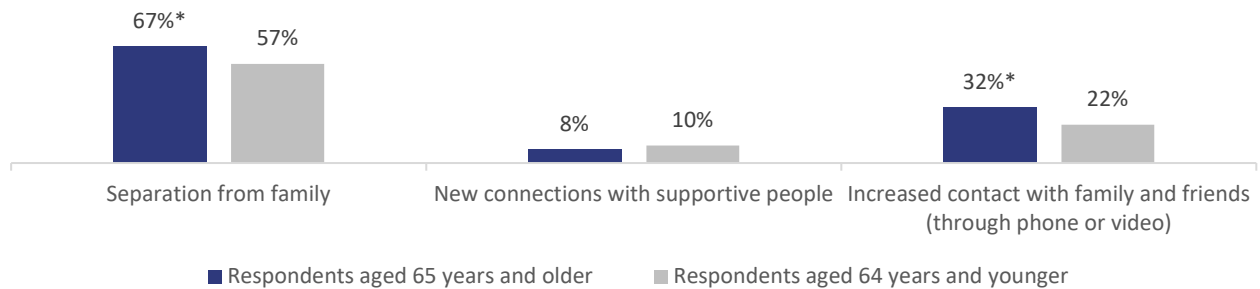
FINDING #4: The survey asked respondents about their dietary practices since the start of the COVID-19 pandemic. Nine percent of respondents aged 65 years and older reported **eating meals with family more often**, which is **significantly less** than respondents aged 64 years and younger (26%). This difference is statistically significant.



9%*

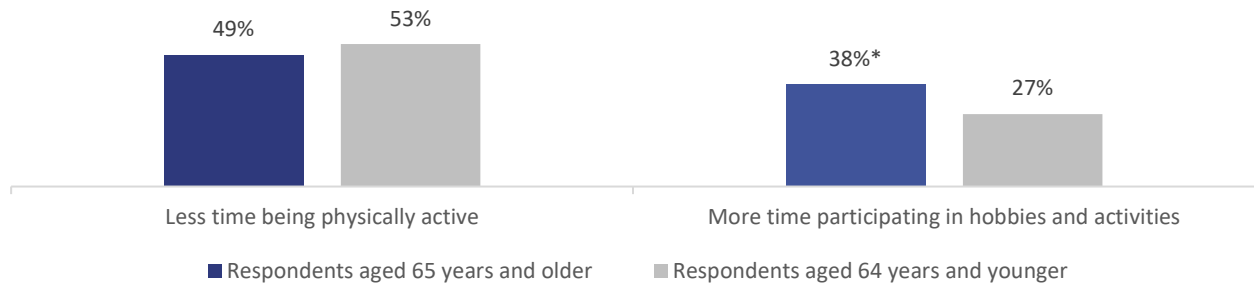
of respondents aged 65 years and older reported eating meals with family more often since the start of the COVID-19 pandemic.

FINDING #5: The most reported issue arising from the pandemic by respondents aged 65 years and older was **separation from family**. While this was also the most reported issue among those under 65 years, a significantly higher proportion of those 65 years and older reported this issue. Compared to respondents aged 64 years and younger, **significantly more** respondents aged 65 years and older reported **increased contact with family and friends** through phone or video.



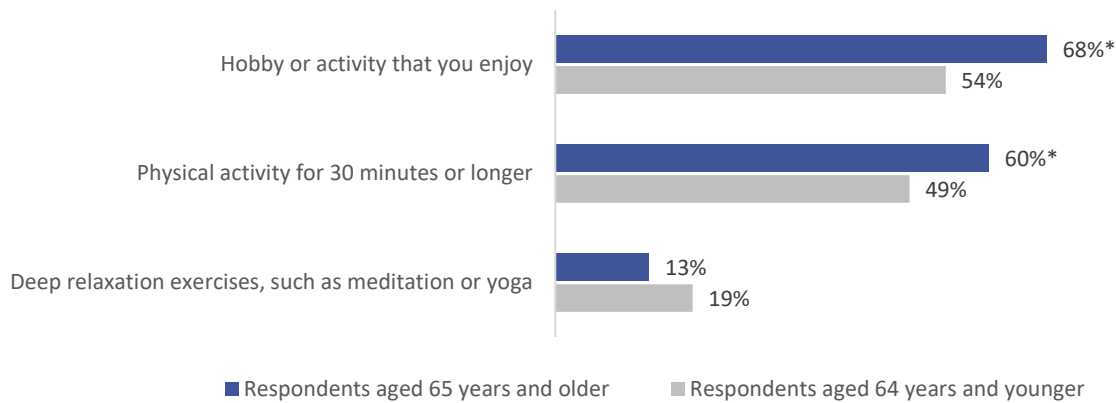
* Indicates the difference is statistically significant.

FINDING #6: The survey asked about physical health behaviours. **Nearly half** of respondents aged 65 years and older indicated they were **less physically active** since the start of the pandemic, which is consistent with respondents aged 64 years and younger. In contrast, **a significantly greater percentage** of respondents aged 65 years and older indicated they participated in **hobbies and activities** more often since the start of the pandemic compared to those aged 64 years and younger.



* Indicates the difference is statistically significant.

FINDING #7: The survey also asked respondents about their engagement in activities over the **last seven days**. Respondents aged 65 years and older were **significantly more likely** to report participating in a **hobby or activity** that they enjoy and engaging in **physical activity** for 30 minutes or longer, compared to respondents aged 64 years and younger.



* Indicates the difference is statistically significant.

Fewer respondents aged 65 years and older reported **more time in nature/being outdoors** since the start of the COVID-19 pandemic compared to those aged 64 years and younger, though this difference was not statistically significant.

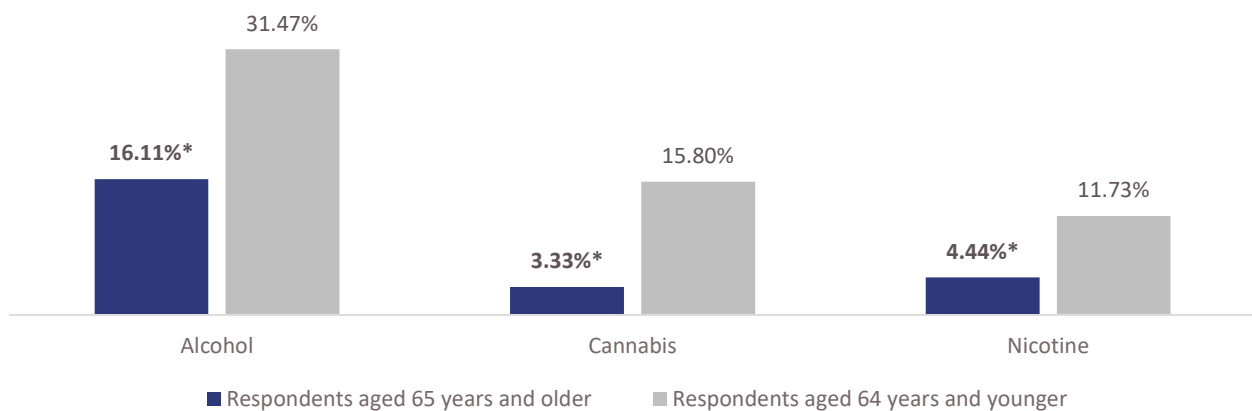
FINDING #8: The survey asked respondents about their ability to access and pay for food. **Significantly fewer** respondents aged 65 years and older reported they were **worried about paying for food** than those aged 64 years and younger. Similarly, **significantly fewer** respondents aged 65 years and older reported they were **unable to access food because of a lack of income** compared to those aged 64 years and younger.



* Indicates the difference is statistically significant.

Seven percent of respondents aged 65 years and older indicated they were **worried about the loss of food programs** as a result of the pandemic, which is consistent with respondents aged 64 years and younger.

FINDING #9: Respondents were asked about their substance use since the start of the pandemic. **Sixteen percent** of respondents aged 65 years and older reported an **increase in alcohol use** since the start of the pandemic. Rates of **alcohol, cannabis, and nicotine** use increase since the start of the pandemic were **significantly lower** for respondents aged 65 years and older compared to those aged 64 years and younger.



Appendix

Table 1

Characteristics of Respondents aged 65 years and older

Characteristic	%
Gender (n = 171)	
Female	74.27
Male	25.73
Age Group (n = 180)	
65 to 74 years	84.44
75 to 84 years	13.89
85 years of age and older	1.67
COVID-19 Government Financial Assistance (n = 180)	
Yes	15.00
No	78.33
Prefer not to answer	6.67
Employment Status (n = 166)	
Working outside the home, without regular face-to-face interaction with the public	2.41
Working outside the home, with regular face-to-face interaction with the public	4.22
Working from home	7.23
Not working but for other reasons than the pandemic	25.90
Not working because of the pandemic	2.41
Retired	57.83

Note. Government financial assistance includes CERB, CESB, EI, rent/mortgage or other payment deferrals (e.g. utilities, credit card balance) from the beginning of the COVID-19 pandemic to the time of the survey.

Table 2

Frequency of Respondents aged 65 years and older identifying as Belonging to the following Groups (n = 180)

Population Group	%
A person with a chronic (long-term) illness (e.g., asthma, diabetes, cancer, arthritis)	30.56
A person with a mental health disorder (e.g., anxiety, depression)	10.00
A person with a physical, developmental or sensory disability (e.g., hearing or vision)	8.33
A person who identifies as Francophone	7.22
A person who identifies as First Nations, Inuit, or Métis	6.11
A person living in poverty	4.44
A member of a racialized community	2.22
A person who accesses the local food bank or soup kitchen	2.22
A member of the LGBTQ2S+ community	1.11
A person who is homeless or at risk for homelessness	0.00
A recent newcomer to Canada (within the last 5 years)	0.00
None of the above	54.44

Note. Participants were requested to select all that apply.

Table 3

Level of Agreement of the Changes Experienced by Respondents aged 65 years and older since the Start of the COVID-19 Pandemic

Change	%					
	Much more	Somewhat more	About the same	Somewhat less	Much less	Does not apply
Feelings of loneliness or isolation (n = 173)	21.39	47.98	15.61	2.31	1.16	11.56
Feelings of happiness at home (n = 178)	2.25	8.43	46.07	15.73	23.03	4.49
Being physically active (n = 179)	7.82	15.64	26.82	22.91	26.26	0.56
Participating in hobbies & activities (n = 176)	14.20	23.86	30.11	11.93	18.75	1.14

Note. Response options included “much more often”, “somewhat more often”, “about the same”, “somewhat less often”, “much less often”, and “does not apply to me”.

Table 4

Frequency of Respondents aged 65 years and older who indicated they were worried about the following impacts caused by the COVID-19 Pandemic (n = 180)

Variable	%
Social life	66.11
Physical health	54.44
Mental health	42.78
Spiritual or cultural connection	17.22
Safety at home or domestic violence	2.22
None of the above	18.89

Note. Participants were requested to select all that apply.

Table 5

Frequency of Respondents aged 65 years and older who indicated the following statements applied to them in the last seven days (n =180)

Statement	%
You feel you have a supportive family and/or friends	75.56
You have participated in a hobby or an activity that you enjoy	68.33
You have connected virtually with others (for example, video chat, book club, exercise class, community support group, etc., done online)	62.22
You have participated in some form of physical activity for 30 minutes or longer	60.00
You have connected in-person with others	33.89
You have practiced some form of deep relaxation exercises, such as meditation or yoga	13.33
None of the above	5.56

Note. Participants were requested to select all that apply.

Table 6

Frequency of Positive Impacts as a result of the COVID-19 Pandemic reported by Respondents aged 65 years and older (n = 180)

Impact	%
More time doing enjoyable activities (e.g., reading, books, puzzles)	40.00
More time in nature/being outdoors	32.22
Increased contact with family and friends (through phone or video)	31.67
Eating meals with family more often	8.89
New connections with supportive people	7.78

