

Research Study Final Report

Partnering to explore COVID-19 public messaging and its impact on internalized ageism among older people

This report has been prepared to advise you, as a research participant, about some of the general findings from the study you took part in during the first year of the pandemic (July 2020 to February 2021).

The purpose of this study was to explore the impacts of COVID-19 public messaging on the internalized ageism that older people might be experiencing. The three main research objectives involved the exploration of:

1. How older people interpreted COVID-19 public messaging and discussion, particularly as it related to older age
2. Whether older people felt more vulnerable at the time of the study versus prior to the pandemic and to determine what role COVID-19 public messaging and discussion may have played in such feelings
3. Whether COVID-19 messaging and discussion may have influenced the social and/or health behaviours of older people during the pandemic

Data were gathered between July 2020 and February 2021 and included 1) a series of three interviews, 2) a monthly Expectations Regarding Aging Survey over six months, 3) a demographic survey, and 4) optional monthly journals over a period of six months.

Participant Demographics

# of participants	33
Gender	76% were women
Average age	75.3 years
Race/ethnicity	94% identified as White
Education	51.5% had completed at least some post-secondary education; 24% had a master's degree
Work-related status	72.7% were retired
Marital status	54.5% were married; 21% were widowed; 18% were divorced/separated
Living arrangements	54.4% lived with partner/spouse; 45.4% lived alone
Health region	51.5% were from Winnipeg Regional Health Authority 27.3% were from Prairie Mountain Health region 9.1% were from Southern Health region 6.1% were from Interlake/Eastern Health region 3% were from Northern Health Region
Health status	78.8% reported being in excellent, very good, or good health

Mask wearing	84.8% reported wearing a mask in public at the time they completed their questionnaire (July or August 2020)
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Study Findings

Interview Timeline

Interview 1	Completed between July and August 2020
Interview 2	Completed between mid-October and early December 2020
Interview 3	Completed between mid-January and late February 2021

Objective 1 Findings: Interpretations of COVID-19 Information and Factors Influencing Interpretation Amongst Older People

At the time of the first interview, daily engagement with COVID-19 messaging by the participants was characterized by a need to gain knowledge about the virus. Specifically, participants described seeking out multiple, trustworthy information sources for this purpose (e.g., healthcare institutions, World Health Organization, national/provincial public health leaders). Radio and television news programming, newspapers, the internet, social media, and family/friends were also mentioned as being other potential sources of information.

By the second interview, participant perspectives on the clarity of pandemic-related messaging appeared mixed (i.e., some described feeling like they understood the restrictions that were being put in place provincially/nationally, while other expressed some confusion with such restrictions—particularly the pandemic colour-coding system within Manitoba). Several also mentioned feeling a degree of pandemic-related information fatigue (e.g., they felt mentally burned out by excessive media consumption on the topic).

During the third interview, some participants continued to mention experiencing information fatigue, with others described that they had begun to limit their daily information consumption to just a few sources (e.g., email bulletins, daily case reports, one television news program).

Objective 2 Findings: Manifestations of Vulnerability for Older People During Pandemic

Within the first interview, some participants expressed feeling a degree of fear for their own health, as well as the health of their children and similar aged friends based on the COVID-19 information that was being reported. Such fears appeared to be of particular concern to those individuals with pre-existing medical conditions. Many participants described taking precautions to be “careful” in their day-to-day lives (e.g., they avoided leaving their homes, limited shopping trips or had items delivered, wore masks and/or gloves when venturing out, routinely disinfected surfaces).

By the second interview, some participants had begun to express feelings of frustration and sometimes outright anger at those individuals within their communities that they felt were “not doing their part” to protect others (e.g., not limiting their contacts, not wearing a mask). By the time of the third interview, vaccines were becoming available to members of the general public and were a topic of discussion for the participants. Perspectives on who should be prioritized to receive the vaccines, however, were mixed (i.e., some felt older people should be prioritized while others felt that those identified as being potential virus “spreaders” should receive the vaccines first).

COVID-19 outbreaks within personal care homes within the province (and the numerous deaths that resulted) led some participants to mention feeling a degree of trepidation at the thought of becoming a future long-term care resident. Several also discussed the need for authorities to examine how society approaches the care of older people, as well as ways facility-based care could be improved within Canada. Some participants also expressed anger related to perceived ageism they encountered within society. Medical rationing, the perceived decreased social value of older lives, and the suggestion by some that older people should be primarily responsible for limiting their social contacts were all mentioned as examples of ageist social discourse/discussion points. Finally, most participants appeared to be focused on aspects of their daily life and behaviours that were within their control to help manage their concerns about risk/vulnerability.

Objective 3 Findings: Impacts of Pandemic on Everyday Living for Older People

During the first interview, participants mentioned numerous disruptions to their daily living during the pandemic (e.g., not being able to travel, exercise, socialize with friends or family in the ways they were previously accustomed). By interview two, many participants mentioned the valuable role technology had been playing in keeping them “busy” and connected to pandemic-related information, as well as others. Some, however, recognized that technology could act as a barrier for certain individuals (e.g., personal care home residents, individuals who lacked experience or training with technology).

By interview 3, disrupted daily routines were frequently described as being “the new normal” amongst most of the participants. Decreased social contact with friends/family continued to be reported and while some had gone virtual with their socializing (e.g., via Zoom, Facetime), several participants described that this was not as enjoyable as seeing individuals in person. By this stage in the pandemic, some participants mentioned that they had begun to re-engage with their communities in small ways (e.g., doing their own groceries, visiting the dentist), albeit cautiously. Several described this process as feeling a bit odd at first.

Implications of Findings

The findings from this study suggest that the late/post COVID-19 era could be valuable time to introduce programming related to:

- Tackling ageism/internalized ageism within our society
- Assisting older people to re-emerge and re-integrate with their communities
- Increasing health literacy amongst older people and bridging the digital divide (e.g., ensuing access to the internet and increasing knowledge of technology usage)

We would also suggest that advocacy is needed to ensure that Manitoba and national public health-related messaging is consistent and clear to all community members in the future.

Publication of Study Findings

Findings from this study have already resulted in one published article in the Canadian Journal on Aging's 2021 special COVID-19 issue. Select study findings have also been presented at conferences held by the Canadian Association on Gerontology, Gerontological Society of America, the Canadian Association of Occupational Therapists, as well as the Centre on Aging's annual Spring Symposium over the past 18 months. In fact, Dr. Ruheena Sangrar, the postdoctoral fellow who completed the interviews with you, won an award for the poster she presented at the Canadian Association on Gerontology conference last year. We plan to continue publishing and presenting findings from this study in national and international journals and conferences over the coming years. Where possible, we will post links to written publications through the Centre on Aging's research page at <https://umanitoba.ca/centre-on-aging/research> so that you can access them.

Where This Research Is Headed

Findings from this study have already helped to inform a project, headed by the Centre on Aging, to implement a community-based program to provide education about recognizing and addressing ageism and internalized ageism. This new project will be supported by funding from the Government of Canada's New Horizons for Seniors Program.