



The Associated Press-NORC  
Center for Public Affairs Research

# The Long-Term Care Poll 2020

Conducted by The Associated Press-NORC Center for Public Affairs Research  
Funded by The SCAN Foundation

*2020 Data:*

*Interview dates: August 27-September 14, 2020*

*Nationally representative sample of 1,893 adults, conducted using the AmeriSpeak® Panel, the probability-based panel of NORC at the University of Chicago*

*Margin of error: +/- 3.0 percentage points at the 95% confidence level*

*2018 Data:*

*Interview dates: March 13-April 5, 2018*

*Nationally representative sample of 1,945 adults, conducted using the AmeriSpeak Panel*

*Margin of error: +/- 3.3 percentage points at the 95% confidence level*

*Interview dates: June 26-July 10, 2018*

*1,024 adults with past or current experience providing long-term care, conducted using the AmeriSpeak Panel*

*Margin of error: +/- 4.1 percentage points at the 95% confidence level*

*NOTE: All results show percentages among all respondents, unless otherwise labeled.*

**Q1. In general, how would you rate your overall health?**

**[HALF SAMPLE ASKED RESPONSE OPTIONS IN REVERSE ORDER]**

|                                | AP-NORC<br>8/27-9/14/20 | AP-NORC<br>3/13-4/5/18 |
|--------------------------------|-------------------------|------------------------|
| <b>Excellent/Very good NET</b> | <b>42</b>               | <b>40</b>              |
| Excellent                      | 9                       | 8                      |
| Very good                      | 33                      | 32                     |
| <b>Good</b>                    | <b>40</b>               | <b>41</b>              |
| <b>Poor/Fair NET</b>           | <b>17</b>               | <b>19</b>              |
| Fair                           | 14                      | 16                     |
| Poor                           | 3                       | 3                      |
| DON'T KNOW                     | -                       | -                      |
| SKIPPED ON WEB/REFUSED         | *                       | *                      |
| N=                             | 1,893                   | 1,945                  |

**Q2. 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?**

**[HALF SAMPLE ASKED RESPONSE OPTIONS IN REVERSE ORDER]**

| AP-NORC<br>8/27-9/14/20   | <b>A great<br/>deal/ Quite<br/>a bit NET</b> | A great<br>deal | Quite<br>a bit | <b>A<br/>moderate<br/>amount</b> | <b>Only a<br/>little/None<br/>at all NET</b> | Only a<br>little | None<br>at all | DK | SKP/<br>REF |
|---|--|-----------------|----------------|----------------------------------|--|------------------|----------------|----|-------------|
| Losing your independence and having to rely on others                   | <b>47</b>                                    | 23              | 24             | <b>26</b>                        | <b>26</b>                                    | 17               | 9              | *  | *           |
| Losing your memory or other mental abilities                            | <b>46</b>                                    | 25              | 21             | <b>25</b>                        | <b>29</b>                                    | 17               | 12             | *  | *           |
| Being able to pay for any care or help you might need as you grow older | <b>40</b>                                    | 20              | 21             | <b>26</b>                        | <b>33</b>                                    | 22               | 12             | *  | *           |
| Having to leave your home and move into a nursing home                  | <b>36</b>                                    | 19              | 17             | <b>21</b>                        | <b>43</b>                                    | 24               | 19             | *  | *           |
| Being a burden on your family   | <b>39</b>                                    | 21              | 18             | <b>25</b>                        | <b>36</b>                                    | 20               | 16             | *  | *           |
| Leaving debts to your family  | <b>29</b>                                    | 16              | 14             | <b>17</b>                        | <b>53</b>                                    | 24               | 29             | *  | *           |
| Not planning enough for the care you might need when you get older      | <b>34</b>                                    | 17              | 17             | <b>30</b>                        | <b>36</b>                                    | 24               | 11             | *  | *           |
| Being alone without family or friends around you                        | <b>34</b>                                    | 17              | 17             | <b>25</b>                        | <b>41</b>                                    | 25               | 16             | *  | *           |

N=1,893

**Q3. Some people need ongoing living assistance as they get older. 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 your own home, in a family member’s home, in a nursing home, or in a senior community. And, it can be provided by a family member, a friend, a volunteer, or a health care professional.**

**Are you currently providing ongoing living assistance on a regular basis to a family member or close friend or not?**

| AP-NORC                | AP-NORC<br>8/27-9/14/20 | AP-NORC<br>3/13-4/5/18 |
|------------------------|-------------------------|------------------------|
| Yes                    | 17                      | 16                     |
| No                     | 83                      | 84                     |
| DON’T KNOW             | -                       | -                      |
| SKIPPED ON WEB/REFUSED | *                       | *                      |
| <i>N=</i>              | <i>1,893</i>            | <i>1,945</i>           |

*If “No,” “DON’T KNOW,” “SKIPPED ON WEB,” OR “REFUSED” in Q3*

**Q4. Have you ever provided ongoing living assistance on a regular basis to a family member or close friend or not?**

| AP-NORC                | AP-NORC<br>8/27-9/14/20 | AP-NORC<br>3/13-4/5/18 |
|------------------------|-------------------------|------------------------|
| Yes                    | 34                      | 29                     |
| No                     | 66                      | 71                     |
| DON’T KNOW             | -                       | -                      |
| SKIPPED ON WEB/REFUSED | *                       | *                      |
| <i>N=</i>              | <i>1,328</i>            | <i>1,633</i>           |

*If current caregiver in Q3*

**Q5. 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?**

|   | AP-NORC<br>8/27-9/14/20 |
|---|-------------------------|
| Before the COVID-19 outbreak began        | 88                      |
| Started after the COVID-19 outbreak began | 12                      |
| DON’T KNOW                                | -                       |
| SKIPPED ON WEB/REFUSED                    | *                       |
| <i>N=</i>                                 | <i>565</i>              |

If “Started after the COVID-19 outbreak began” in Q5

**Q6. Did you start providing ongoing living assistance for any of the following reasons?**

Please select all that apply.

|   | AP-NORC<br>8/27-9/14/20 |
|---|-------------------------|
| The person you provide care to was infected with COVID-19   | 8                       |
| The person who usually provides care was infected with COVID-19                                       | 8                       |
| Restrictions because of the pandemic made the person who needed care less able to care for themselves | 37                      |
| The person’s previous care situation no longer seemed safe due to the COVID-19 outbreak               | 13                      |
| The person started needing care for reasons unrelated to COVID-19 or the pandemic                     | 48                      |
| DON’T KNOW  | *                       |
| SKIPPED ON WEB/REFUSED  | 1                       |

N=

69

If age 40+

**Q7. Are you currently receiving ongoing living assistance or not?**

As a reminder, 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 your own home, in a family member’s home, in a nursing home, or in a senior community. And, it can be provided by a family member, a friend, a volunteer, or a health care professional.

| AP-NORC                | AP-NORC<br>8/27-9/14/20 | AP-NORC<br>3/13-4/5/18 |
|------------------------|-------------------------|------------------------|
| Yes                    | 9                       | 5                      |
| No                     | 91                      | 95                     |
| DON’T KNOW             | *                       | -                      |
| SKIPPED ON WEB/REFUSED | *                       | *                      |

N=

1,175

1,522

If "No," "DON'T KNOW", "SKIPPED ON WEB", or "REFUSED" in Q7

**Q8. Have you ever received ongoing living assistance like this or not?**

| AP-NORC                | AP-NORC<br>8/27-9/14/20 | AP-NORC<br>3/13-4/5/18 |
|------------------------|-------------------------|------------------------|
| Yes                    | 5                       | 4                      |
| No                     | 95                      | 96                     |
| DON'T KNOW             | *                       | -                      |
| SKIPPED ON WEB/REFUSED | -                       | *                      |
| N=                     | 1,062                   | 1,428                  |

**Q9. The next question is about people who provide in-home ongoing living assistance other than those who solely provide housekeeping assistance.**

Have you employed someone to provide in-home ongoing living assistance for yourself, a family member, or a friend:

| AP-NORC<br>8/27-9/14/20           | Yes | No | DK | SKP/<br>REF |
|-----------------------------------|-----|----|----|-------------|
| Before the COVID-19 outbreak      | 14  | 86 | -  | *           |
| Since the COVID-19 outbreak began | 5   | 94 | *  | 1           |

N=1,893

If age 18-39 or if "No", "DON'T KNOW", "SKIPPED ON WEB", or "REFUSED" in Q7

**Q10. How likely do you think it is that you will personally require ongoing living assistance some day?**

[HALF SAMPLE ASKED RESPONSE OPTIONS IN REVERSE ORDER]

|                                      | AP-NORC<br>8/27-9/14/20 | AP-NORC<br>3/13-4/5/18 |
|--------------------------------------|-------------------------|------------------------|
| <b>Extremely/Very likely NET</b>     | <b>17</b>               | <b>22</b>              |
| Extremely likely                     | 4                       | 4                      |
| Very likely                          | 14                      | 18                     |
| <b>Somewhat likely</b>               | <b>42</b>               | <b>43</b>              |
| <b>Not at all/Not too likely NET</b> | <b>40</b>               | <b>35</b>              |
| Not too likely                       | 33                      | 29                     |
| Not at all likely                    | 8                       | 6                      |
| DON'T KNOW                           | *                       | 1                      |
| SKIPPED ON WEB/REFUSED               | *                       | *                      |

N= 1,780 1,851

**Q11.**

**If “Yes” in Q7: If you could choose, what would be your first choice as to where you would receive assistance right now?**

**If “No,” “DON’T KNOW,” “SKIPPED ON WEB,” OR “REFUSED” in Q7: 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?**

|                                | AP-NORC<br>8/27-9/14/20 |
|--------------------------------|-------------------------|
| Your own home                  | 79                      |
| Friend or family member’s home | 10                      |
| Nursing home                   | 3                       |
| Senior community               | 8                       |
| DON’T KNOW                     | *                       |
| SKIPPED ON WEB/REFUSED         | *                       |

N= 1,893

*If age 40+*

**Q12. How much planning, if any, [did you do/have you done] for your own needs for ongoing living assistance?**

**[HALF SAMPLE ASKED RESPONSE OPTIONS IN REVERSE ORDER]**

|                                      | AP-NORC<br>8/27-9/14/20 | AP-NORC<br>3/13-4/5/18 |
|--------------------------------------|-------------------------|------------------------|
| <b>A great deal/Quite a bit NET</b>  | <b>10</b>               | <b>12</b>              |
| A great deal                         | 3                       | 5                      |
| Quite a bit                          | 7                       | 7                      |
| <b>A moderate amount</b>             | <b>18</b>               | <b>23</b>              |
| <b>None at all/Only a little NET</b> | <b>72</b>               | <b>64</b>              |
| Only a little                        | 26                      | 27                     |
| None at all                          | 46                      | 37                     |
| DON’T KNOW                           | -                       | *                      |
| SKIPPED ON WEB/REFUSED               | 1                       | *                      |

N= 1,175 1,522

*If age 40+*

**Q13. [If "None at all" in Q12: The following actions might be considered planning for living assistance even if you haven't thought about them that way.]**

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

**[ITEMS RANDOMIZED]**

| AP-NORC<br>8/27-9/14/20   | Yes | No | DK | SKP/<br>REF |
|---|-----|----|----|-------------|
| Set aside money to pay for ongoing living assistance expenses including nursing home care, senior community, or care from a home healthcare aide                | 28  | 72 | -  | *           |
| Discussed your preferences for the kinds of ongoing living assistance you do or do not want with your family  | 37  | 63 | *  | *           |
| Created a legal document such as a living will or advance treatment directive that allows someone you trust to make decisions for you if you cannot on your own | 46  | 54 | -  | *           |
| Looked for information about aging issues or ongoing living assistance  | 23  | 76 | -  | 1           |
| Modified your home in any way to make it easier to live in as you grow older  | 25  | 75 | -  | *           |
| Moved/made plans to move to a community or facility designed for older adults   | 7   | 93 | -  | 1           |
| Discussed your preferences for your funeral arrangements with someone you trust   | 55  | 44 | -  | *           |
| Looked for information about long-term care insurance. That's extra insurance that covers expenses of ongoing living assistance.                                | 24  | 76 | -  | *           |
| Moved or made plans to move in with a family member or friend   | 8   | 91 | -  | *           |

*N=1,175*

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| AP-NORC<br>3/13-4/5/18  | Yes | No | DK | SKP/<br>REF |
|---|-----|----|----|-------------|
| Set aside money to pay for ongoing living assistance expenses including nursing home care, senior community, or care from a home healthcare aide                | 29  | 70 | *  | 1           |
| Discussed your preferences for the kinds of ongoing living assistance you do or do not want with your family  | 39  | 60 | *  | *           |
| Created a legal document such as a living will or advance treatment directive that allows someone you trust to make decisions for you if you cannot on your own | 44  | 55 | *  | *           |
| Looked for information about aging issues or ongoing living assistance  | 25  | 74 | *  | 1           |
| Modified your home in any way to make it easier to live in as you grow older  | 29  | 70 | *  | 1           |
| Moved/made plans to move to a community or facility designed for older adults   | 8   | 91 | -  | 1           |
| Discussed your preferences for your funeral arrangements with someone you trust   | 57  | 43 | -  | 1           |
| Looked for information about long-term care insurance. That's extra insurance that covers expenses of ongoing living assistance.                                | 23  | 76 | *  | 1           |
| Moved or made plans to move in with a family member or friend   | 9   | 89 | *  | 1           |

N=1,522

*If current or former caregiver in Q3/Q4*

**Q14. When you think about your personal experience providing ongoing living assistance, would you say you [feel/felt]...?**

**[HALF SAMPLE ASKED RESPONSE OPTIONS IN REVERSE ORDER]**

|  | AP-NORC<br>8/27-9/14/20 | AP-NORC<br>3/13-4/5/18 |
|--|-------------------------|------------------------|
| <b>Extremely/Very stressed NET</b>           | <b>26</b>               | <b>31</b>              |
| Extremely stressed                           | 8                       | 13                     |
| Very stressed                                | 17                      | 18                     |
| <b>Moderately stressed</b>                   | <b>36</b>               | <b>40</b>              |
| <b>Not at all/Only a little stressed NET</b> | <b>38</b>               | <b>29</b>              |
| Only a little stressed                       | 27                      | 22                     |
| Not at all stressed                          | 11                      | 7                      |
| DON'T KNOW                                   | -                       | -                      |
| SKIPPED ON WEB/REFUSED                       | *                       | *                      |

N=

1,020

784

*If current or former caregiver in Q3/Q4*

**Q15. About how many hours [do/did] you provide unpaid care to a family member or friend?**

| AP-NORC  | AP-NORC<br>8/27-9/14/20 | AP-NORC<br>3/13-4/5/18 |
|--|-------------------------|------------------------|
| 5 hours per week or less                                   | 28                      | 29                     |
| More than 5 hours per week but less than 10 hours per week | 21                      | 20                     |
| 10 hours per week or more                                  | 50                      | 51                     |
| DON'T KNOW   | -                       | *                      |
| SKIPPED ON WEB/REFUSED                                     | 1                       | *                      |
| <i>N=</i>  | 1,020                   | 784                    |

*If "Before the COVID-19 outbreak began" in Q5*

**Q16. As a result of the COVID-19 outbreak, would you say your caregiving responsibilities have...?**

**[HALF SAMPLE ASKED RESPONSE OPTIONS IN REVERSE ORDER]**

|                        | AP-NORC<br>8/27-9/14/20 |
|------------------------|-------------------------|
| Increased              | 36                      |
| Decreased              | 10                      |
| Stayed about the same  | 54                      |
| DON'T KNOW             | -                       |
| SKIPPED ON WEB/REFUSED | *                       |
| <i>N=</i>              | 493                     |

*If current or former caregiver in Q3/Q4*

**Q17. 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?**

| AP-NORC<br>8/27-9/14/20   | Yes | No | DK | SKP/<br>REF |
|---|-----|----|----|-------------|
| Loss of memory or other mental abilities, such as Alzheimer's disease or dementia                               | 37  | 63 | -  | 1           |
| Short-term physical conditions or diseases, such as pneumonia or an injury from a fall or accident              | 39  | 61 | -  | 1           |
| Long-term physical conditions, diseases, or disabilities, such as diabetes, loss of vision, or loss of mobility | 68  | 32 | -  | *           |
| Mental health conditions, such as anxiety or depression   | 34  | 66 | -  | 1           |
| COVID-19 or complications stemming from a COVID-19 infection  | 5   | 94 | -  | 1           |
| Something else  | 9   | 88 | -  | 3           |

*N=1,020*

| AP-NORC<br>3/13-4/5/18  | Yes | No | DK | SKP/<br>REF |
|---|-----|----|----|-------------|
| Loss of memory or other mental abilities, such as Alzheimer’s disease or dementia                               | 32  | 66 | *  | 2           |
| Short-term physical conditions or diseases, such as pneumonia or an injury from a fall or accident              | 32  | 64 | *  | 3           |
| Long-term physical conditions, diseases, or disabilities, such as diabetes, loss of vision, or loss of mobility | 69  | 30 | -  | 1           |
| Mental health conditions, such as anxiety or depression   | 28  | 69 | *  | 3           |
| Something else  | 6   | 81 | 1  | 3           |

N=1,024

*If current caregiver in Q3*

**Q18. Thinking about the person you are currently providing ongoing living assistance to, where does this person live?**

|  | AP-NORC<br>8/27-9/14/20 | AP-NORC<br>6/26-7/10/18 <sup>1</sup> |
|--|-------------------------|--------------------------------------|
| Your home                              | 32                      | 38                                   |
| Their own home                         | 50                      | 38                                   |
| Another friend or family member’s home | 9                       | 12                                   |
| Nursing home                           | 7                       | 7                                    |
| Senior community                       | 3                       | 5                                    |
| DON’T KNOW                             | -                       | -                                    |
| SKIPPED ON WEB/REFUSED                 | *                       | -                                    |

N=

565

481

*If current caregiver in Q3*

**Q19. Did the person you are providing ongoing living assistance to need to move their primary residence due COVID-19 at any point during the pandemic, or not?**

|                        | AP-NORC<br>8/27-9/14/20 |
|------------------------|-------------------------|
| Yes                    | 13                      |
| No                     | 86                      |
| DON’T KNOW             | -                       |
| SKIPPED ON WEB/REFUSED | *                       |

N=

565

<sup>1</sup> 2018 Question text: “Are you currently providing this ongoing living assistance in your own home, in your aging friend or family member’s home, in another friend or family members’ home, in a nursing home, or in a senior community?”

If "Yes" in Q19

**Q20. Where did this person live before they moved?**

|  | AP-NORC<br>8/27-9/14/20 |
|--|-------------------------|
| Your home                              | 10                      |
| Their own home                         | 39                      |
| Another friend or family member's home | 38                      |
| A nursing home                         | 10                      |
| A senior community                     | 2                       |
| DON'T KNOW                             | -                       |
| SKIPPED ON WEB/REFUSED                 | -                       |
| <i>N=</i>                              | <i>60</i>               |

If current caregiver in Q3

**Q21. Thinking about each of the following, how concerned are you about providing in-person care during the COVID-19 outbreak when it comes to...?**

[HALF SAMPLE ASKED RESPONSE OPTIONS IN REVERSE ORDER]

| AP-NORC<br>8/27-9/14/20   | <b>Extremely/<br/>Very con-<br/>cerned NET</b> | Extremely<br>con-<br>cerned | Very<br>con-<br>cerned | <b>Moder-<br/>ately<br/>con-<br/>cerned</b> | <b>Not at<br/>all/Only a<br/>little con-<br/>cerned<br/>NET</b> | Only a<br>little<br>con-<br>cerned | Not at<br>all con-<br>cerned | DK | SKP/<br>REF |
|---|--|-----------------------------|------------------------|---|---|------------------------------------|------------------------------|----|-------------|
| Your own risk of being<br>infected with COVID-19                          | <b>28</b>                                      | 14                          | 14                     | <b>26</b>                                   | <b>46</b>   | 26                                 | 20                           | -  | *           |
| The risk of the person<br>you care for becoming<br>infected with COVID-19 | <b>44</b>                                      | 23                          | 21                     | <b>27</b>                                   | <b>29</b>   | 18                                 | 11                           | -  | *           |

*N=565*

*If current caregiver in Q3 and employed someone to provide in-home ongoing living assistance either before or since the COVID-19 outbreak*

**Q22. As a result of the COVID-19 outbreak, have you or has anyone in your family canceled in-home ongoing living assistance, or not?**

|                        | AP-NORC<br>8/27-9/14/20 |
|------------------------|-------------------------|
| Yes                    | 28                      |
| No                     | 71                      |
| DON'T KNOW             | -                       |
| SKIPPED ON WEB/REFUSED | 1                       |
| <i>N=</i>              | 176                     |

*If current caregiver in Q3*

**Q23. Has the person you provide care for had difficulty understanding lifestyle changes related to the COVID-19 outbreak like: wearing a mask, having fewer visitors, or the cause of other disruptions?**

|                                  | AP-NORC<br>8/27-9/14/20 |
|----------------------------------|-------------------------|
| Yes, they have had difficulty    | 35                      |
| No, they have not had difficulty | 65                      |
| DON'T KNOW                       | *                       |
| SKIPPED ON WEB/REFUSED           | *                       |
| <i>N=</i>                        | 565                     |

*If current caregiver in Q3*

**Q24. 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?**

| AP-NORC<br>8/27-9/14/20  | Yes | No | DK | SKP/<br>REF |
|--|-----|----|----|-------------|
| Meal, grocery, or pharmacy delivery service  | 50  | 50 | *  | *           |
| "Senior only" hours at stores  | 33  | 66 | -  | *           |
| A transportation service   | 18  | 82 | -  | *           |
| Video chat technology to check in on the person in order to limit in-person exposure | 38  | 61 | -  | *           |
| Telehealth or virtual care visits with a health care provider                        | 50  | 50 | -  | 1           |

*N=565*

If "Yes" in Q3

**Q25. Has the COVID-19 outbreak affected your ability to provide care in any of the following ways, or not?**

| AP-NORC<br>8/27-9/14/20   | Yes | No | DK | SKP/<br>REF |
|---|-----|----|----|-------------|
| You weren't able to get groceries for the person you care for   | 23  | 76 | -  | 1           |
| You weren't able to get medications or health care supplies for the person you care for   | 23  | 77 | -  | 1           |
| [If "Their own home" in Q18] You weren't able to get help around their house, such as housekeeping (N=281)                                    | 27  | 72 | -  | 1           |
| You didn't have the financial resources you need to provide care  | 29  | 70 | -  | 1           |
| You had to cancel or postpone medical care for the person you care for  | 43  | 57 | -  | *           |
| [If "A nursing home" or "A senior community" in Q18] You weren't able to visit or provide care in the nursing home or senior community (N=48) | 68  | 32 | -  | -           |
| [If "Their own home" in Q18] You weren't able to visit or provide care in their home as often (N=281)   | 34  | 66 | -  | 1           |

N=565

If "No", "DON'T KNOW", "SKIPPED ON WEB", OR "REFUSED" in Q3

**Q26. 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?**

[HALF SAMPLE ASKED RESPONSE OPTIONS IN REVERSE ORDER]

|                                      | AP-NORC<br>8/27-9/14/20 | AP-NORC<br>3/13-4/5/18 |
|--------------------------------------|-------------------------|------------------------|
| <b>Extremely/Very likely NET</b>     | <b>25</b>               | <b>30</b>              |
| Extremely likely                     | 8                       | 11                     |
| Very likely                          | 17                      | 19                     |
| <b>Somewhat likely</b>               | <b>32</b>               | <b>35</b>              |
| <b>Not at all/Not too likely NET</b> | <b>43</b>               | <b>34</b>              |
| Not too likely                       | 30                      | 27                     |
| Not at all likely                    | 12                      | 8                      |
| DON'T KNOW                           | *                       | 1                      |
| SKIPPED ON WEB/REFUSED               | *                       | *                      |

N=

1,328

1,633

*If age 18-39*

**Q27. As a result of the COVID-19 outbreak, have you had conversations about aging and ongoing living assistance with your family members or friends more often than before the outbreak, less often than before the outbreak, or neither more nor less often?**

|                             | AP-NORC<br>8/27-9/14/20 |
|-----------------------------|-------------------------|
| More often                  | 17                      |
| Less often                  | 14                      |
| Neither more nor less often | 68                      |
| DON'T KNOW                  | -                       |
| SKIPPED ON WEB/REFUSED      | *                       |

N=

718

**Q28. 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?**

**[HALF SAMPLE ASKED RESPONSE OPTIONS IN REVERSE ORDER]**

|   | AP-NORC<br>8/27-9/14/20 | AP-NORC<br>3/13-4/5/18 |
|---|-------------------------|------------------------|
| <b>Extremely/Very confident NET</b>     | <b>15</b>               | <b>17</b>              |
| Extremely confident                     | 4                       | 3                      |
| Very confident                          | 11                      | 14                     |
| <b>Somewhat confident</b>               | <b>44</b>               | <b>38</b>              |
| <b>Not at all/Not too confident NET</b> | <b>41</b>               | <b>45</b>              |
| Not too confident                       | 28                      | 29                     |
| Not at all confident                    | 13                      | 15                     |
| DON'T KNOW                              | -                       | *                      |
| SKIPPED ON WEB/REFUSED                  | 1                       | *                      |

N=

1,893

1,945

**Q29. Now, thinking about who should be responsible for paying for the costs of ongoing living assistance...**

**How much responsibility should each of the following have for paying for the costs of ongoing living assistance?**

**[ITEMS RANDOMIZED; HALF SAMPLE ASKED RESPONSE OPTIONS IN REVERSE ORDER]**

|                            | <b>Very large/<br/>Large<br/>NET</b> | Very large | Large | <b>Moderate</b> | <b>Small/<br/>None at all<br/>NET</b> | Small | None at all | DK | SKP/<br>REF |
|----------------------------|--------------------------------------|------------|-------|-----------------|---------------------------------------|-------|-------------|----|-------------|
| AP-NORC<br>8/27-9/14/20    |                                      |            |       |                 |                                       |       |             |    |             |
| Individuals                | <b>29</b>                            | 9          | 20    | <b>36</b>       | <b>34</b>                             | 23    | 11          | *  | 1           |
| Families                   | <b>15</b>                            | 5          | 11    | <b>32</b>       | <b>51</b>                             | 31    | 20          | *  | 1           |
| Medicare                   | <b>56</b>                            | 24         | 32    | <b>31</b>       | <b>12</b>                             | 9     | 3           | *  | 1           |
| Medicaid                   | <b>47</b>                            | 21         | 26    | <b>32</b>       | <b>19</b>                             | 12    | 7           | *  | 1           |
| Health insurance companies | <b>59</b>                            | 23         | 36    | <b>29</b>       | <b>11</b>                             | 7     | 4           | *  | 1           |

*N=1,893*

|                            | <b>Very large/<br/>Large<br/>NET</b> | Very large | Large | <b>Moderate</b> | <b>Small/<br/>None at all<br/>NET</b> | Small | None at all | DK | SKP/<br>REF |
|----------------------------|--------------------------------------|------------|-------|-----------------|---------------------------------------|-------|-------------|----|-------------|
| AP-NORC<br>3/13-4/5/18     |                                      |            |       |                 |                                       |       |             |    |             |
| Individuals                | <b>34</b>                            | 12         | 22    | <b>35</b>       | <b>29</b>                             | 19    | 10          | 1  | 1           |
| Families                   | <b>22</b>                            | 7          | 14    | <b>33</b>       | <b>44</b>                             | 26    | 18          | *  | 1           |
| Medicare                   | <b>45</b>                            | 17         | 28    | <b>38</b>       | <b>16</b>                             | 11    | 4           | *  | 1           |
| Medicaid                   | <b>36</b>                            | 14         | 22    | <b>36</b>       | <b>25</b>                             | 16    | 9           | 1  | 2           |
| Health insurance companies | <b>50</b>                            | 19         | 32    | <b>33</b>       | <b>14</b>                             | 9     | 6           | 1  | 1           |

*N=1,945*

**Q30. Many health care providers have begun using technology to safely provide patients with medical care from a distance during the COVID-19 outbreak, for example by using a live video service like Zoom, Doxy.me, or FaceTime, talking over the telephone, or by email or text message. This is often referred to as telehealth.**

*If current caregiver in Q3: Has the person you provide care to received any care using any of the following?*

*If "No", "DON'T KNOW", "SKIPPED ON WEB", OR "REFUSED" in Q3: Have you received any care using any of the following?*

|  | AP-NORC<br>8/27-9/14/20 |
|--|-------------------------|
| Live video service like Zoom, Doxy.me, or FaceTime | 28                      |
| Talking on the telephone                           | 33                      |
| Email  | 16                      |
| Text message                                       | 11                      |
| None of the above                                  | 49                      |
| <i>N=</i>  | <i>1,893</i>            |

*If "Yes" to any "Live video service like Zoom, Doxy.me, or FaceTime," "Talking on the telephone," "Email," or "Text message" in Q30*

**Q31. If current caregiver in Q3: How comfortable were you with them receiving care through telehealth?**

*If "No", "DON'T KNOW", "SKIPPED ON WEB", OR "REFUSED" in Q3: How comfortable were you receiving care through telehealth?*

**[HALF SAMPLE ASKED RESPONSE OPTIONS IN REVERSE ORDER]**

|   | AP-NORC<br>8/27-9/14/20 |
|---|-------------------------|
| <b>Extremely/Very comfortable NET</b>     | <b>51</b>               |
| Extremely comfortable                     | 18                      |
| Very comfortable                          | 34                      |
| <b>Somewhat comfortable</b>               | <b>36</b>               |
| <b>Not at all/Not too comfortable NET</b> | <b>12</b>               |
| Not too comfortable                       | 8                       |
| Not comfortable at all                    | 4                       |
| DON'T KNOW                                | *                       |
| SKIPPED ON WEB/REFUSED                    | *                       |
| <i>N=</i>                                 | <i>1,009</i>            |

If "Yes" to "Live video service like Zoom, Doxy.me, or FaceTime," "Talking on the telephone," "Email," or "Text message" in Q30

**Q32. If current caregiver in Q3: Once the COVID-19 outbreak is over, how likely are they to continue to seek care through telehealth?**

If "No", "DON'T KNOW", "SKIPPED ON WEB", OR "REFUSED" in Q3: **Once the COVID-19 outbreak is over, how likely are you to continue to seek care through telehealth?**

**[HALF SAMPLE ASKED RESPONSE OPTIONS IN REVERSE ORDER]**

|                                      | AP-NORC<br>8/27-9/14/20 |
|--------------------------------------|-------------------------|
| <b>Extremely/Very likely NET</b>     | <b>26</b>               |
| Extremely likely                     | 10                      |
| Very likely                          | 16                      |
| <b>Somewhat likely</b>               | <b>36</b>               |
| <b>Not at all/Not too likely NET</b> | <b>37</b>               |
| Not too likely                       | 25                      |
| Not at all likely                    | 12                      |
| DON'T KNOW                           | *                       |
| SKIPPED ON WEB/REFUSED               | *                       |

N=

1,009

**Q33. If current caregiver in Q3: 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?**

*If "No", "DON'T KNOW", "SKIPPED ON WEB", OR "REFUSED" in Q3: If you needed each of the following types of care, how comfortable would you be receiving that care through telehealth?*

**[HALF SAMPLE ASKED RESPONSE OPTIONS IN REVERSE ORDER]**

| AP-NORC<br>8/27-9/14/20  | <b>Extremely/<br/>Very<br/>comfort-<br/>able NET</b> | Extremely<br>comfort-<br>able | Very<br>comfort-<br>able | <b>Somewhat<br/>comfort-<br/>able</b> | <b>Not at<br/>all/Not too<br/>comfort-<br/>able NET</b> | Not too<br>comfort-<br>able | Not<br>comfort-<br>able at<br>all | DK | SKP/<br>REF |
|--|--|-------------------------------|--------------------------|---------------------------------------|---|-----------------------------|-----------------------------------|----|-------------|
| A non-urgent health concern  | <b>53</b>  | 24                            | 30                       | <b>33</b>                             | <b>13</b>   | 7                           | 5                                 | *  | 1           |
| An urgent health concern   | <b>14</b>  | 5                             | 10                       | <b>25</b>                             | <b>60</b>   | 33                          | 26                                | *  | 1           |
| Ongoing care to manage a chronic condition   | <b>33</b>  | 13                            | 20                       | <b>41</b>                             | <b>25</b>   | 15                          | 10                                | *  | 1           |
| <i>[If current caregiver]</i><br>Wellness check-ins and support for people needing ongoing living assistance (N=565) | <b>50</b>  | 19                            | 31                       | <b>37</b>                             | <b>13</b>   | 9                           | 4                                 | *  | *           |
| Mental health services   | <b>29</b>  | 11                            | 19                       | <b>36</b>                             | <b>34</b>   | 20                          | 14                                | *  | *           |
| Health care services like physical or occupational therapy   | <b>16</b>  | 6                             | 10                       | <b>30</b>                             | <b>54</b>   | 30                          | 23                                | *  | 1           |

N=1,893

**Q34. If current caregiver in Q3: When it comes to the person you provide care to receiving telehealth<sup>2</sup>, how concerned are you about each of the following?**

*If "No", "DON'T KNOW", "SKIPPED ON WEB", OR "REFUSED" in Q3: When it comes to receiving telehealth, how concerned are you about each of the following?*

**[ITEMS RANDOMIZED; HALF SAMPLE ASKED RESPONSE OPTIONS IN REVERSE ORDER]**

| AP-NORC<br>8/27-9/14/20  | <b>Extremely/<br/>Very con-<br/>cerned NET</b> | Extremely<br>con-<br>cerned | Very<br>con-<br>cerned | <b>Moder-<br/>ately<br/>con-<br/>cerned</b> | <b>Not at<br/>all/Only a<br/>little con-<br/>cerned<br/>NET</b> | Only a<br>little<br>con-<br>cerned | Not at<br>all con-<br>cerned | DK | SKP/<br>REF |
|--|--|-----------------------------|------------------------|---|---|------------------------------------|------------------------------|----|-------------|
| Running into technical issues that prevent [them/you] from communicating effectively | <b>29</b>                                      | 10                          | 20                     | <b>38</b>                                   | <b>33</b>   | 25                                 | 8                            | *  | *           |
| Receiving low-quality care   | <b>36</b>                                      | 14                          | 22                     | <b>36</b>                                   | <b>28</b>   | 21                                 | 7                            | *  | *           |
| The security of [their/your] health information                                      | <b>27</b>                                      | 11                          | 16                     | <b>33</b>                                   | <b>40</b>   | 28                                 | 12                           | *  | *           |
| A lack of privacy when communicating [their/your] health care provider               | <b>23</b>                                      | 9                           | 14                     | <b>30</b>                                   | <b>46</b>   | 32                                 | 14                           | *  | 1           |

N=1,893

<sup>2</sup> 2018 question wording used the phrase “medical care from a distance” rather than “telehealth.”

The Long-Term Care Poll 2020

| AP-NORC<br>3/13-4/5/18   | <b>Extremely/<br/>Very con-<br/>cerned NET</b> | Extremely<br>con-<br>cerned | Very<br>con-<br>cerned | <b>Moder-<br/>ately<br/>con-<br/>cerned</b> | <b>Not at<br/>all/Only a<br/>little con-<br/>cerned<br/>NET</b> | Only a<br>little<br>con-<br>cerned | Not at<br>all con-<br>cerned | DK | SKP/<br>REF |
|--|--|-----------------------------|------------------------|---|---|------------------------------------|------------------------------|----|-------------|
| Running into technical issues that prevent [them/you] from communicating effectively | <b>39</b>                                      | 17                          | 22                     | <b>33</b>                                   | <b>26</b>   | 19                                 | 7                            | 1  | 1           |
| Receiving low-quality care   | <b>47</b>                                      | 21                          | 27                     | <b>33</b>                                   | <b>18</b>   | 12                                 | 6                            | 1  | 1           |
| The security of [their/your] health information                                      | <b>39</b>                                      | 17                          | 23                     | <b>29</b>                                   | <b>30</b>   | 22                                 | 8                            | 1  | 1           |
| A lack of privacy when communicating [their/your] health care provider               | <b>31</b>                                      | 14                          | 18                     | <b>28</b>                                   | <b>39</b>   | 28                                 | 11                           | 1  | 1           |

N=1,945

**Q35. Compared to before the COVID-19 outbreak, would you say that you now have a more favorable or unfavorable opinion of the nursing home care experience?**

|  | AP-NORC<br>8/27-9/14/20 |
|--|-------------------------|
| <b>Much/Somewhat more favorable NET</b>            | <b>10</b>               |
| Much more favorable                                | 4                       |
| Somewhat more favorable                            | 6                       |
| <b>Neither more favorable nor more unfavorable</b> | <b>48</b>               |
| <b>Much/Somewhat more unfavorable NET</b>          | <b>41</b>               |
| Somewhat more unfavorable                          | 24                      |
| Much more unfavorable                              | 17                      |
| DON'T KNOW   | *                       |
| SKIPPED ON WEB/REFUSED                             | 1                       |

N=

1,893

**Q36. If current caregiver in Q3: If another 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?**

*If "No", "DON'T KNOW", "SKIPPED ON WEB", OR "REFUSED" in Q3: 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?*

**[HALF SAMPLE ASKED RESPONSE OPTIONS IN REVERSE ORDER]**

| AP-NORC<br>8/27-9/14/20                                      | <b>Extremely/<br/>Very con-<br/>cerned NET</b> | Extremely<br>con-<br>cerned | Very<br>con-<br>cerned | <b>Moder-<br/>ately<br/>con-<br/>cerned</b> | <b>Not at<br/>all/Only a<br/>little con-<br/>cerned<br/>NET</b> | Only a<br>little<br>con-<br>cerned | Not at<br>all con-<br>cerned | DK | SKP/<br>REF |
|--|--|-----------------------------|------------------------|---|---|------------------------------------|------------------------------|----|-------------|
| Short-term stays for<br>rehabilitation before<br>moving home | <b>44</b>                                      | 20                          | 24                     | <b>37</b>                                   | <b>19</b>   | 15                                 | 4                            | *  | *           |
| Long term or<br>permanent residence                          | <b>60</b>                                      | 31                          | 29                     | <b>27</b>                                   | <b>12</b>   | 9                                  | 4                            | *  | 1           |

*N=1,893*

**Q37. If a vaccine against the coronavirus becomes available, do you plan to get vaccinated, or not?**

|  | AP-NORC<br>8/27-9/14/20 | AP-NORC<br>05/14-18/20 |
|--|-------------------------|------------------------|
| Yes, I will get a coronavirus vaccine    | 46                      | 49                     |
| No, I will not get a coronavirus vaccine | 25                      | 20                     |
| Not sure                                 | 29                      | 31                     |
| SKIPPED ON WEB/REFUSED                   | *                       | 1                      |

*N=*

*1,893*

*1,056*

*If current caregiver in Q3*

**Q38. If a vaccine against the coronavirus becomes available, do you think the person you currently provide care for plans to get vaccinated, or not?**

|   | AP-NORC<br>8/27-9/14/20 |
|---|-------------------------|
| Yes, they will get a coronavirus vaccine    | 43                      |
| No, they will not get a coronavirus vaccine | 23                      |
| Not sure                                    | 34                      |
| SKIPPED ON WEB/REFUSED                      | *                       |
| N=  | 565                     |

**Q39. Regarding COVID-19, have you ever had...**

|  | AP-NORC<br>8/27-9/14/20 |
|--|-------------------------|
| A test indicating that you had the disease                                   | 4                       |
| A medical diagnosis indicating that you had the disease, but no test results | 2                       |
| Some possible symptoms, but no diagnosis by doctor                           | 11                      |
| No symptoms or signs, or tested as not having the disease                    | 82                      |
| DON'T KNOW   | *                       |
| SKIPPED ON WEB/REFUSED   | 1                       |
| N=   | 1,893                   |

*If current caregiver in Q3*

**Q40. Now how about the person you provide ongoing living assistance to, regarding COVID-19, has that person ever had...**

|   | AP-NORC<br>8/27-9/14/20 |
|---|-------------------------|
| A test indicating that they had the disease                                   | 5                       |
| A medical diagnosis indicating that they had the disease, but no test results | 5                       |
| Some possible symptoms, but no diagnosis by doctor                            | 11                      |
| No symptoms or signs, or tested as not having the disease                     | 77                      |
| DON'T KNOW  | *                       |
| SKIPPED ON WEB/REFUSED  | 1                       |
| N=  | 565                     |

**Q41. We would now like to ask you some questions about friends or family who have passed away.**

**Have you experienced the death of a family member or close friend this year?**

|                        | AP-NORC<br>8/27-9/14/20 |
|------------------------|-------------------------|
| Yes                    | 37                      |
| No                     | 63                      |
| DON'T KNOW             | -                       |
| SKIPPED ON WEB/REFUSED | *                       |
| N=                     | 1,893                   |

If “Yes” in Q41

**Q42. How many losses during that time, if any, were a result of COVID-19 or COVID-19-related factors?**

|                        | AP-NORC<br>8/27-9/14/20 |
|------------------------|-------------------------|
| None                   | 64                      |
| One                    | 16                      |
| Two                    | 9                       |
| Three                  | 3                       |
| Four or more           | 4                       |
| Unsure                 | 5                       |
| DON'T KNOW             | -                       |
| SKIPPED ON WEB/REFUSED | -                       |
| <i>N=</i>              | 723                     |

If “One,” “Two,” “Three” or “Four or more” in Q42

**Q43. Thinking about those you lost as a result of COVID-19 or COVID-19 related factors, how was this person related to you? Please select all that apply.**

|                                | AP-NORC<br>8/27-9/14/20 |
|--------------------------------|-------------------------|
| Your spouse/partner            | 3                       |
| Your parent or parent-in-law   | 11                      |
| Your sibling or sibling-in-law | 4                       |
| Child                          | 3                       |
| Other family member            | 51                      |
| Friend or neighbor             | 43                      |
| Coworker                       | 11                      |
| Other                          | 14                      |
| DON'T KNOW                     | -                       |
| SKIPPED ON WEB/REFUSED         | -                       |
| <i>N=</i>                      | 238                     |

If “One,” “Two,” “Three” or “Four or more” in Q42

**Q44. Thinking about those you lost as a result of COVID-19 or COVID-19 related factors, did [they/any of them] live in a nursing home when they passed away?**

|                        | AP-NORC<br>8/27-9/14/20 |
|------------------------|-------------------------|
| Yes                    | 26                      |
| No                     | 73                      |
| DON'T KNOW             | -                       |
| SKIPPED ON WEB/REFUSED | 1                       |
| <i>N=</i>              | 238                     |

**Q45. Have you or has someone in your household experienced each of the following because of the COVID-19 outbreak, or not?**

[GRID ITEMS RANDOMIZED; TOP ITEM ANCHORED]

| AP-NORC<br>8/27-9/14/20   | Yes | No | DK | SKP/<br>REF |
|---|-----|----|----|-------------|
| Been laid off   | 26  | 73 | -  | *           |
| Been scheduled fewer hours  | 35  | 64 | -  | 1           |
| Taken unpaid time off   | 20  | 79 | -  | 1           |
| Had your wages or salary reduced  | 30  | 69 | *  | 1           |
| Had difficulty paying for basic expenses like rent, food, or medical care | 29  | 71 | -  | *           |
| Filed for unemployment benefits   | 31  | 69 | *  | *           |

*N=1,893*

| AP-NORC<br>8/17-19/20   | Yes         | No | DK | SKP/<br>REF |
|---|-------------|----|----|-------------|
| Been laid off   | 23          | 76 | *  | 1           |
| Been scheduled fewer hours  | 34          | 65 | *  | 1           |
| Taken unpaid time off   | 22          | 77 | *  | 1           |
| Had your wages or salary reduced  | 25          | 74 | *  | 1           |
| Had difficulty paying for basic expenses like rent, food, or medical care | (Not asked) |    |    |             |
| Filed for unemployment benefits   | (Not asked) |    |    |             |

*N=1,075*

*If someone in household has been laid off in Q45*

**Q46. Do you think that you or the person in your household who was laid off will or will not be able to go back to the same job once the coronavirus outbreak is over?**

|  | AP-NORC<br>8/27-<br>9/14/20 | AP-NORC<br>8/17-19/20 |
|--|-----------------------------|-----------------------|
| <b>Definitely/probably will</b>            | <b>41</b>                   | <b>39</b>             |
| Definitely will                            | 16                          | 14                    |
| Probably will                              | 25                          | 25                    |
| <b>Definitely/probably will <u>NOT</u></b> | <b>41</b>                   | <b>49</b>             |
| Probably will <u>NOT</u>                   | 22                          | 30                    |
| Definitely will <u>NOT</u>                 | 19                          | 19                    |
| <b>Already back at the same job</b>        | <b>18</b>                   | <b>11</b>             |
| DON'T KNOW                                 | -                           | 1                     |
| SKIPPED/REFUSED                            | *                           | -                     |
| N=   | 514                         | 232                   |

**PID1. Do you consider yourself a Democrat, a Republican, an Independent or none of these?**

*If Democrat:*

**PIDA. Do you consider yourself a strong or moderate Democrat?**

*If Republican:*

**PIDB. Do you consider yourself a strong or moderate Republican?**

*If independent, none of these, don't know, skipped, or refused:*

**PIDI. Do you lean more toward the Democrats or the Republicans?**

**Combines PID1, PIDI, PIDA, and PIDB.**

|                                      | AP-NORC<br>8/27-9/14/20 | AP-NORC<br>3/13-4/5/18 |
|--------------------------------------|-------------------------|------------------------|
| <b>Democrat NET</b>                  | <b>46</b>               | <b>46</b>              |
| Strong Democrat                      | 15                      | 13                     |
| Moderate Democrat                    | 19                      | 20                     |
| Lean Democrat                        | 11                      | 12                     |
| <b>Independent/None – Don't lean</b> | <b>15</b>               | <b>18</b>              |
| <b>Republican NET</b>                | <b>38</b>               | <b>36</b>              |
| Lean Republican                      | 11                      | 10                     |
| Moderate Republican                  | 15                      | 18                     |
| Strong Republican                    | 12                      | 8                      |
| Unknown                              | *                       | 1                      |
| N=                                   | 1,893                   | 1,945                  |

**CADEM2. Do you speak a language other than English at home?**

| AP-NORC                | AP-NORC<br>8/27-9/14/20 | AP-NORC<br>3/13-4/5/18 |
|------------------------|-------------------------|------------------------|
| Yes                    | 22                      | 22                     |
| No                     | 77                      | 77                     |
| DON'T KNOW             | -                       | -                      |
| SKIPPED ON WEB/REFUSED | 1                       | *                      |
| <i>N=</i>              | 1,893                   | 1,945                  |

**AGE**

|           | AP-NORC<br>8/27-9/14/20 | AP-NORC<br>3/13-4/5/18 |
|-----------|-------------------------|------------------------|
| 18-24     | 11                      | 12                     |
| 25-34     | 18                      | 21                     |
| 35-44     | 18                      | 13                     |
| 45-54     | 13                      | 16                     |
| 55-64     | 18                      | 18                     |
| 65-74     | 15                      | 13                     |
| 75+       | 7                       | 7                      |
| <i>N=</i> | 1,893                   | 1,945                  |

**EDUCATION**

|                                    | AP-NORC<br>8/27-9/14/20 | AP-NORC<br>3/13-4/5/18 |
|------------------------------------|-------------------------|------------------------|
| Less than a high school diploma    | 10                      | 11                     |
| High school graduate or equivalent | 28                      | 29                     |
| Some college                       | 28                      | 29                     |
| College graduate or above          | 34                      | 31                     |
| <i>N=</i>                          | 1,893                   | 1,945                  |

**RACE/ETHNICITY**

|                           | AP-NORC<br>8/27-9/14/20 | AP-NORC<br>3/13-4/5/18 |
|---------------------------|-------------------------|------------------------|
| White                     | 63                      | 64                     |
| Black or African American | 12                      | 12                     |
| Hispanic                  | 17                      | 16                     |
| Other                     | 9                       | 8                      |
| <i>N</i> =                | 1,893                   | 1,945                  |

**INCOME**

|                              | AP-NORC<br>8/27-9/14/20 | AP-NORC<br>3/13-4/5/18 |
|------------------------------|-------------------------|------------------------|
| Under \$10,000               | 6                       | 8                      |
| \$10,000 to under \$20,000   | 8                       | 10                     |
| \$20,000 to under \$30,000   | 12                      | 13                     |
| \$30,000 to under \$40,000   | 10                      | 10                     |
| \$40,000 to under \$50,000   | 8                       | 10                     |
| \$50,000 to under \$75,000   | 19                      | 18                     |
| \$75,000 to under \$100,000  | 16                      | 13                     |
| \$100,000 to under \$150,000 | 13                      | 12                     |
| \$150,000 or more            | 8                       | 7                      |
| <i>N</i> =                   | 1,893                   | 1,945                  |

**MARITAL STATUS**

|             | AP-NORC<br>8/27-9/14/20 | AP-NORC<br>3/13-4/5/18 |
|-------------|-------------------------|------------------------|
| Married     | 58                      | 47                     |
| Not married | 42                      | 53                     |
| <i>N</i> =  | 1,893                   | 1,945                  |

**GENDER**

|            | AP-NORC<br>8/27-9/14/20 | AP-NORC<br>3/13-4/5/18 |
|------------|-------------------------|------------------------|
| Male       | 48                      | 48                     |
| Female     | 52                      | 52                     |
| <i>N</i> = | 1,893                   | 1,945                  |

## 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 screener. Interviews were conducted in both English and Spanish, depending on respondent preference. Respondents were offered a small monetary incentive (\$3) for completing the survey.

The final stage completion rate is 14.9 percent, the weighted household panel response rate is 21.0 percent, and the weighted household panel retention rate is 80.4 percent, for a cumulative response rate of 2.5 percent. The overall margin of sampling error is +/- 3.0 percentage points at the 95 percent 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 percent 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 poststratification 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](http://www.longtermcarepoll.org). For more information, email [info@apnorc.org](mailto:info@apnorc.org).

## About The Associated Press-NORC Center for Public Affairs Research

The AP-NORC Center for Public Affairs Research taps into the power of social science research and the highest-quality journalism to bring key information to people across the nation and throughout the world.

## The Long-Term Care Poll 2020

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