Experiences of Older Adults During the 2020 COVID-19 Pandemic in the U.S.: An Initial Exploration of Nationally Representative Data at the Intersection of Gender and Race

By Takashi Yamashita, Ph.D., MPH [1*], Wonmai Punksungka, MA[1], Samuel Van Vleet, BA [2, 3], Abigail Helsinger, MS [2, 3], and Phyllis Cummins, Ph.D. [3]

*Corresponding author

1. Department of Sociology, Anthropology & Public Health, University of Maryland, Baltimore County, 1000 Hilltop Circle, Baltimore, MD, 21250
   yamataka@umbc.edu
   Phone: 410-455-5938
   Fax: 410-455-1154
2. Department of Sociology and Gerontology, Miami University, 100 Bishop Circle, Oxford, OH, 45056
3. Scripps Gerontology Center, Miami University, 100 Bishop Circle, Oxford, OH, 45056

Acknowledgement

The authors report no conflict of interest. This study was in part supported by the Sloan Research Network on Aging and Work at Boston College, small grant program for "unequal prospects for continued work in later life amid a global pandemic: possible solutions." The opinions expressed are those of the authors and do not represent views of the Sloan Research Network on Aging and Work at Boston College.

Experiences of Older Adults During the 2020 COVID-19 Pandemic in the U.S.: An Initial Exploration of Nationally Representative Data at the Intersections of Gender and Race

Abstract

Little is known about the overall experiences and feelings of diverse older populations during the 2020 COVID-19 pandemic. To provide the baseline information for future research and policy, this study analyzed the 2020 Health and Retirement Study COVID-19 project data (n = 1,782). More than 70% of older adults reported the following activities: watching TV (98%), reading (90%), using a computer and the internet (83%), gardening (82%), walking (75%), baking and cooking (73%), and praying (73%). Volunteering and attending community groups, which are known to benefit well-being, were unpopular (less than 8%). During the pandemic, older adults were generally satisfied with their lives, but more than half of them were concerned about their own health, family's health, and future prospects. Our study also showed the differences in the experiences and feelings by gender and race as well as the intersection of gender and race in the U.S.

Introduction

Since early 2020, the COVID-19 pandemic (pandemic, hereafter) has impacted virtually all aspects of life among all members of society. However, older adults are known to face greater disadvantages (e.g., health, employment) resulting from events like the Great Recession and pandemics than their younger counterparts (Johnson & Butrica, 2012). Also, given the gendered life course and diversity (e.g., race, ethnicity) among older populations, experiences during the pandemic are not homogenous (Moen, 2001). Indeed, women and racial/ethnic minorities tended to face a greater risk of unemployment and discrimination during the pandemic (Gemelas et al., 2021). Moreover, the theory of intersectionality suggests that these differences are exacerbated

when we consider the intersection of gender and race due to unique advantages/disadvantages shaped by social and political systems (Crenshaw, 1989).

Individual characteristics (e.g., gender, race) are often examined separately in emerging COVID-19-related studies (Morrow-Howell et al., 2020). For example, mental health by gender, race, and ethnic groups are reported separately (Bui et al., 2020). This view is in alignment with the medical model, or disease-centered approach, which views an outcome of interest (e.g., mental health, diabetes) is the same regardless of the individual characteristics and social circumstances. While a specific area of inquiry is critical for systematic hypothesis testing and theory building, a bigger picture involving the overall experience, may be overlooked.

This study takes a person-centered approach inspired by a gerontological paradigm – biopsychosocial model (Morgan, 2012), the intersectionality framework (McCall, 2005), and the whole-person wellness model, which depicts how multiple life domains jointly contribute to well-being (Montague & Frank, 2007). Considering that more COVID-19 data are becoming available, timely national data exploration could provide baseline findings for future research, allow for initial/immediate review of older adults' lived experiences, determine needs for emergency response through policy, and identify interventions to help older adults adapt to the ongoing pandemic and post-pandemic times. Taken together, the goal of this study was to provide a timely description of what diverse older populations did and felt during the pandemic and illustrate unique experiences at the intersections of gender and race.

Methods

We employed the descriptive inter-categorical complexity analytic framework to document experiences at the intersections of gender and race (Bauer & Scheim, 2019; McCall, 2005). We focused on the four cross-classified sub-groups by gender (women and men) and race

(White and Black). Nationally representative data were derived from the 2020 Health and Retirement Study (HRS) COVID-19 project. HRS is a biannual survey for U.S. adults aged 50 years and older. More detailed descriptions of HRS and the COVID-19 project have been published elsewhere (The Institute for Social Research, 2021). We analyzed the HRS COVID-19 project preliminary data (Early version 1.0), which provide information of older adults' experience during the pandemic. After excluding the missing values (n = 96 or about 4.9% of the total samples), our final sample consisted of 1,782 older adults aged 50 years and older (see Tables 1 and 2 for more detailed breakdowns by gender and race). Considering the life expectancy at birth in the U.S. (about 79 years old), we considered the age of 50 as the typical transition to the second half of the adult life stage.

Measures

Outcome variables. In view of the whole-person wellness framework (Montague & Frank, 2007), we selected the survey items which are relevant to all older adults rather than those relevant to only a sub-group of older adults, such as those with children. Specifically, we focused on the activities and subjective evaluation of life. To make a large set of measures more comparable, all variables of interests were dichotomized (see Supplemental Table 1 for the coding) and classified into one or more of seven wellness dimensions, including physical, social, emotional, vocational/financial, intellectual, spiritual, and environmental (see Supplemental table 2) (Montague & Frank, 2007). Five researchers with graduate-level training discussed and added the environmental dimension to the original six dimensions by Montague and Frank, and then chose relevant wellness dimensions for each item (see Table 1 and Table 3). Consideration of an additional environmental dimension (e.g., comfortable living space, safety) and multiple

wellness dimension was necessary as an activity may be linked to more than one wellness dimension.

Grouping variables. The respondents were cross-classified by gender (women and men) and race (White and Black). We considered four groups, including White women, White men, Black Women, and Black men, given the available data.

Covariates. Per the analytic framework suggested by McCall (2005), we adopted a descriptive intersectionality approach and included age (in years) and educational attainment (college [associate] degree or higher vs. less than college degree) as the only covariates in the analysis. Differences across age groups (e.g., 50 years old vs. 65 years old vs. 85 years old) and educational attainment, which is a widely accepted summary indicator of socioeconomic position and resource (e.g., financial, social) availability, are important even in a descriptive intersectionality study because the crude/unadjusted measures could result in misleading interpretations. While more comprehensive sets of covariates should be considered in future analytic intersectionality studies (Bauer & Scheim, 2019), age and education should still be the necessary adjustments for any baseline group comparisons.

Analytic Approach

All analyses were conducted using the SAS software version 9.4 (Copyright © 2013, SAS Institute, Inc.), and the HRS COVID-19 module preliminary weights (CVWGTR) were applied. To examine the experiences across gender and race, survey-weighted age-education-adjusted proportions were computed, and multiple pairwise comparisons with Tukey-Kramer method were employed (Benjamini & Braun, 2002). We used SAS PROC GLM with LSMEANS command (Cai, 2014). Given the outcome measures were all dichotomous, the means are equivalent to the proportions. The least squares mean, which is estimated based on the

linear combinations of all measures, can be considered the adjusted proportion in this study. Tukey-Kramer method corrects the inflated Type 1 error rates due to the multiple comparisons of unbalanced group sizes. The analytic approach is equivalent to the analysis of covariance or ANCOVA with post hoc tests for gender and race, as well as the linear model with gender, race, gender-race interaction term, age, and educational attainment as the predictors (DeMaris, 2004). The statistical significance was determined based on whether the estimated 95% confidence intervals included 0.

Results

Tables 1-4 show the adjusted percentages of all outcome measures of interest. Regarding the activities, about 34% of older adults worked for pay during the pandemic in 2020. More than 70% of older adults reported the following activities: watching TV (98%), reading (90%), using a computer and the internet (83%), gardening (82%), walking 20 minutes or more (75%), baking and cooking (73%), and praying (73%). These activities are relevant to the physical, intellectual, spiritual, and vocational dimensions of wellness. The least popular activities were volunteering (7%) and attending community groups (5%). Regarding the subjective evaluation of life, more than half of the older adults were concerned about their family's health (69%), own health (56%), and future prospect (53%) during the pandemic. Also, 59% felt stressed. At the same time, most older adults reported positive evaluations of life in general. For example, over 80% of respondents were satisfied with life and all life domains (e.g., place to live, leisure, financial situation).

When compared across the intersections of gender and race, several statistically significant differences were observed. Regarding the activities, for example, Black women were less likely to work for pay than White men and Black men during the pandemic. Also, Whites

were more likely to volunteer than Blacks, but White women were more likely to volunteer than White men and Black women. Moreover, White men were more likely to go to sport or social clubs than Black women. Regarding the subjective evaluation of life, Black men were more concerned about getting help if needed and their future prospects than White women. Finally, White women were more satisfied with their financial situation than Black men.

Discussion

The initial explorations of nationally representative data showed that during the pandemic, most older adults engaged in watching TV, reading, using a computer and the internet, gardening, walking, baking and cooking, and praying. Yet, despite the health and well-being benefits, volunteering and attending community groups were unpopular (Russell et al., 2019). Also, whereas most older adults were satisfied with their lives, over half of them were also concerned about their own health, family's health, and future prospects. As shown in Tables 5-6, some of the differences at the intersections of gender and race would have been missed if gender and race were analyzed separately.

A few limitations should be noted. Only community-dwelling older adults were included in the HRS data. Therefore, findings may be somewhat biased toward healthier, older populations. Also, we cannot address possible systematic activity patterns as well as underlying explanations of observed differences at the intersections of gender and race, for example, due to functional limitations/disability, caregiving responsibilities, access to certain activity spaces (e.g., walkable parks and neighborhoods) and community/societal-level policy (e.g., social distancing) in place in our exploratory analysis.

This study made two contributions. First, the explorations of the nationally-representative data, which reflect older adults' activities and subjective assessment of life during the pandemic,

are useful to identify important areas of future research and policy discussions for well-being in later life. Second, our initial findings of differential experiences at the intersections of gender and race in later life could inform future policies targeting specific sub-groups (McCall, 2005) and benefit the development of an analytical intersectionality study with specific hypotheses.

In view of whole-person wellness (Montague & Frank, 2007), four preliminary implications are worth noting. First, most older adults engaged in physical (e.g., walking, gardening), intellectual (e.g., reading), and spiritual (e.g., praying) activities, which benefit physical and mental health (Zimmer et al., 2016). Watching TV, which is one of the relatively passive leisure activities, from a wellness standpoint, was the most popular activity. Compared to the pre-pandemic period (89%; see Krantz-Kent, 2018), our findings (98%) showed a potential increase in TV watching, although the purpose (e.g., leisure vs. public health information seeking), changes in the amount of screen time, and contexts (e.g., lockdown policy in place), need to be further studied.

Second, future research needs to identify changes more clearly in activity participation and the reasons for reduced and missed wellness opportunities (e.g., volunteering). For instance, while our findings (7%) indicated that the volunteer participation rate might have decreased, compared to the pre-pandemic period statistic (25%; see Grimm, 2018), qualitative changes in volunteering (e.g., formal, informal, virtual, COVID-19-related) are yet to be investigated (Sun et al., 2021). Third, using only one life satisfaction assessment item may fail to capture overall subjective well-being as well as concerns about specific life domains. One could be simultaneously satisfied with life and concerned about a specific domain of life (Diener et al., 2013). Finally, the preliminary findings on the intersection of gender and race should be verified with more comprehensive sets of covariates.

In conclusion, while most older adults engaged in physically, intellectually, spiritually, and vocationally beneficial activities during the pandemic, only a few participated in volunteering and community groups despite known well-being benefits. During the pandemic, older adults were generally satisfied with their lives, but more than half of them were concerned about their own health, family's health, and future prospect. Our study also showed the differences in the activities and subjective evaluation of their lives by gender and race as well as the intersection of gender and race in the U.S.

References

Bauer, G. R., & Scheim, A. I. (2019). Methods for analytic intercategorical intersectionality in quantitative research: Discrimination as a mediator of health inequalities. *Social Science & Medicine*, *226*, 236-245. https://doi.org/https://doi.org/10.1016/j.socscimed.2018.12.015

Benjamini, Y., & Braun, H. (2002). John W. Tukey's contributions to multiple comparisons. *The Annals of Statistics*, *30*(6), 1576-1594, 1519. https://doi.org/10.1214/aos/1043351247

Bui, C. N., Peng, C., Mutchler, J. E., & Burr, J. A. (2020). Race and Ethnic Group Disparities in Emotional Distress Among Older Adults During the COVID-19 Pandemic. *The Gerontologist*, *61*(2), 262-272. https://doi.org/10.1093/geront/gnaa217

Cai, W. (2014). *Making Comparisons Fair: How LS-Means Unify the Analysis of Linear Models*. https://support.sas.com/resources/papers/proceedings14/SAS060-2014.pdf

Crenshaw, K. (1989). Demarginalizing the intersection of race and sex: A black feminist critique of antidiscrimination doctrine, feminist theory and antiracist politics. *University of Chicago Legal Forum*, 139-168.

DeMaris, A. (2004). *Regression with social data: Modeling continuous and limited response variables*. John Wiley & Sons.

Diener, E., Inglehart, R., & Tay, L. (2013). Theory and validity of life satisfaction scales. *Social Indicators Research*, *112*(3), 497-527.

Gemelas, J., Davison, J., & Ing, S. (2021). Inequities in employment by race, ethnicity, and sector during COVID-19. *Journal of Racial and Ethnic Health Disparities*, 1-6.

Grimm, R. T. (2018). *Where Are America's Volunteers? A Look at America's Widespread Decline in Volunteering in Cities and States*. https://dogood.umd.edu/sites/default/files/2019-07/Where%20Are%20Americas%20Volunteers_Research%20Brief%20_Nov%202018.pdf

Johnson, R. W., & Butrica, B. A. (2012). Age disparities in unemployment and reemployment during the Great Recession and recovery. *Unemployment and Recovery Project Brief*, *3*, 1-8. https://www.urban.org/sites/default/files/publication/25431/412574-age-disparities-in-unemployment-and-reemployment-during-the-great-recession-and-recovery.pdf

Krantz-Kent, R. (2018). *Television, capturing America's attention at prime time and beyond*. https://www.bls.gov/opub/btn/volume-7/television-capturing-americas-attention.htm

McCall, L. (2005). The complexity of intersectionality. *Signs: Journal of women in culture and society*, *30*(3), 1771-1800.

Moen, P. (2001). The gendered life course. In R. H. Binstock & L. K. George (Eds.), *Handbook of aging and the social sciences* (5 ed., pp. 179-196). Academic Press.

Montague, J., & Frank, B. (2007). *Creating Whole-person Wellness*. https://www.assistedlivingconsult.com/issues/03-04/alc78-Wellness-719.pdf

Morgan, L. (2012). Paradigms in the gerontology classroom: Connections and challenges to learning. *Gerontology & geriatrics education*, *33*(3), 324-335.

Morrow-Howell, N., Galucia, N., & Swinford, E. (2020). Recovering from the COVID-19 Pandemic: A Focus on Older Adults. *Journal of Aging & Social Policy*, *32*(4-5), 526-535. https://doi.org/10.1080/08959420.2020.1759758

Russell, A. R., Nyame-Mensah, A., de Wit, A., & Handy, F. (2019). Volunteering and Wellbeing Among Ageing Adults: A Longitudinal Analysis. *VOLUNTAS: International Journal of Voluntary and Nonprofit Organizations*, *30*(1), 115-128. https://doi.org/10.1007/s11266-018-0041-8

Sun, P. C., Morrow-Howell, N., Pawloski, E., & Helbach, A. (2021). Older Adults' Attitudes Toward Virtual Volunteering During the COVID-19 Pandemic. *Journal of Applied Gerontology*, *0*(0), 07334648211006978. https://doi.org/10.1177/07334648211006978

The Institute for Social Research. (2021). *2020 HRS COVID-19 Project*. https://hrsdata.isr.umich.edu/sites/default/files/documentation/data-descriptions/1613082944/2020COVID_DD_Feb2021.pdf

Zimmer, Z., Jagger, C., Chiu, C.-T., Ofstedal, M. B., Rojo, F., & Saito, Y. (2016). Spirituality, religiosity, aging and health in global perspective: A review. *SSM - Population Health*, *2*, 373-381. https://doi.org/https://doi.org/10.1016/j.ssmph.2016.04.009

Table 1: Weighted Descriptive Summary by Gender and Race

	Wellness dimension(s)	All (n = 1,782) Mean (standard error) or percentage	Women (n = 937) Mean (standard error) or percentage	Men (n = 845) Mean (standard error) or percentage	White (n = 1,387) Mean (standard error) or percentage	Black (n = 395) Mean (standard error) or percentage
Age		68.60 (0.27)	68.40 (0.38)	68.83 (0.39)	67.99 (0.30)	70.82 (0.59)
Educational attainment (college or higher)		19.13%	17.28%	21.28%	21.14%	11.79%
Activities (At least once a month vs. less than once a month)						
Work for pay	Vocational	33.79%	25.64%	33.54%	31.25%	27.91%
Caregiving for an adult	Social	17.98%	16.83%	19.32%	18.67%	15.43%
Volunteer	Social	7.06%	8.62%	5.24%	7.94%	3.81%
Charity	Social	19.97%	20.38%	19.49%	19.76%	20.72%
Education and training	Intellectual	12.96%	12.75%	13.20%	13.80%	9.83%
Sport or social club	Social	20.34%	18.11%	22.94%	21.51%	16.06%
Interest groups	Intellectual	12.88%	18.11%	13.67%	13.10%	12.74%
Pray	Spiritual	72.74%	72.55%	72.96%	74.00%	68.16%
Reading	Intellectual	90.35%	91.00%	89.60%	90.98%	88.08%
TV	Physical*	97.78%	97.96%	97.56%	98.15%	96.39%
Word games	Intellectual	51.63%	52.67%	50.41%	50.91%	54.24%
Play cards	Social	34.16%	35.44%	32.67%	32.85%	38.91%
Writing	Intellectual	30.00%	30.48%	29.43%	30.48%	28.25%
Computer and the internet	Intellectual	82.91%	83.57%	82.13%	83.41%	81.08%
Gardening	Physical	82.00%	80.53%	83.70%	81.95%	82.16%
Baking and cooking	Vocational	73.12%	74.05%	72.04%	73.36%	72.25%
Making clothing and knitting	Vocational	11.82%	13.10%	10.32%	11.69%	12.42%
Hobby	Vocational/social	58.22%	58.00%	58.47%	57.08%	63.32%
Play sports	Physical/social	61.45%	60.76%	62.26%	61.37%	61.75%
Walking 20 minutes or more	Physical	74.72%	75.88%	73.36%	74.64%	74.98%
Community art groups	Social	5.48%	6.23%	4.61%	5.60%	5.07%

*In a reverse direction, physically inactive.

The sampling weights (CVWGTR) were applied; For all groups, the means were adjusted for age and educational attainment

Table 2: Weighted Descriptive Summary by the Intersections of Gender and Race

	White women (n = 720) Mean (standard error) or percentage	White men (n = 667) Mean (standard error) or percentage	Black women (n = 217) Mean (standard error) or percentage	Black men (n = 178) Mean (standard error) or percentage
Age (years)	67.87 (0.42)	68.13 (0.43)	70.30 (0.83)	71.45 (0.84)
Educational attainment (college or higher)	17.65%	25.16%	15.99%	6.69%
Activities (At least once a month vs. less than once a month)				
Work for pay	29.90%	32.61%	21.38%	34.45%
Caregiving for an adult	17.33%	20.22%	15.02%	15.93%
Volunteer	10.31%	5.22%	2.56%	5.33%
Charity	19.86%	19.65%	22.24%	18.88%
Education and training	14.35%	13.17%	6.99%	13.31%
Sport or social club	19.55%	23.75%	13.03%	19.82%
Interest groups	12.09%	14.26%	12.57%	11.46%
Pray	73.64%	74.40%	68.66%	67.54%
Reading	91.36%	90.54%	89.74%	86.06%
TV	97.93%	98.41%	98.06%	94.32%
Word games	51.70%	50.00%	56.14%	51.93%
Play cards	33.75%	31.82%	41.42%	35.87%
Writing	31.09%	29.77%	28.31%	28.18%
Computer and the internet	83.28%	83.55%	84.61%	76.80%
Gardening	80.29%	83.86%	81.40%	83.08%
Baking and cooking	74.78%	71.73%	73.41%	73.24%
Making clothing and knitting	12.84%	10.29%	14.03%	10.45%
Hobby	56.22%	58.07%	64.29%	59.93%
Play sports	60.75%	62.07%	60.78%	62.97%
Walking 20 minutes or more	74.77%	75.50%	79.80%	69.09%
Community art groups	6.93%	4.05%	3.73%	6.71%

The sampling weights (CVWGTR) were applied; For all groups, the means were adjusted for age and educational attainment

Table 3: Weighted Descriptive Summary by Gender and Race

	Wellness dimension(s)	All (n = 1,782) Percentage	Women (n = 937) Percentage	Men (n = 845) Percentage	White (n = 1,387) Percentage	Black (n = 395) Percentage
Because of the coronavirus pandemic, were you worried about…? (Yes)						
Your own health	Physical	55.80%	54.91%	58.40%	54.33%	58.97%
The health of others in your family	Social	69.32%	69.01%	71.80%	67.77%	73.04%
Your financial situation	Vocational	33.72%	34.47%	34.40%	32.09%	36.79%
Being able to get help if you needed it from family friends, or others	Social	29.85%	28.37%	34.99%	29.47%	34.90%
What will happen in the future	Emotional	52.67%	53.79%	56.39%	50.30%	59.88%
Have you felt…? (Yes)						
Lonely	Emotional	42.88%	42.10%	42.22%	43.52%	50.80%
Emotionally overwhelmed	Emotional	42.10%	43.33%	42.83%	40.49%	45.67%
Stressed	Emotional	58.63%	59.19%	57.76%	56.92%	60.04%
Life satisfaction (Yes)						
Life is close to ideal	Emotional	69.33%	66.72%	70.38%	69.92%	67.19%
The conditions of my life are excellent	Emotional	70.67%	69.00%	70.49%	71.09%	68.40%
Satisfied with life	Emotional	82.47%	80.44%	82.97%	82.84%	80.57%
I have gotten the important things I want in life	Emotional	83.59%	82.82%	84.62%	84.11%	83.33%
I would change almost nothing	Emotional	56.57%	55.72%	57.63%	58.40%	54.94%
Are you satisfied with…? (Yes)						
The place where you live	Environmental	94.09%	94.56%	93.74%	94.33%	93.97%
The city where you live	Environmental	94.92%	95.49%	94.46%	95.18%	94.78%
Leisure	Social/physical	90.17%	89.52%	91.91%	90.38%	91.05%
Financial situation	Vocational	87.03%	86.59%	86.63%	87.90%	85.33%
Income	Vocational	85.30%	83.69%	86.02%	86.44%	83.27%
Health	Physical	80.03%	78.27%	82.37%	80.56%	80.06%

The sampling weights (CVWGTR) was applied; For all groups, the means were adjusted for age and educational attainment

Table 4: Weighted Descriptive Summary by the Intersections of Gender and Race

	White women (n = 720) Mean (standard error) or percentage	White men (n = 667) Mean (standard error) or percentage	Black women (n = 217) Mean (standard error) or percentage	Black men (n = 178) Mean (standard error) or percentage
Because of the coronavirus pandemic, were you worried about…? (Yes)				
Your own health	52.63%	56.03%	57.18%	60.77%
The health of others in your family	67.19%	68.36%	70.84%	75.24%
Your financial situation	30.83%	33.35%	38.12%	35.46%
Being able to get help if you needed it from family friends, or others	26.68%	30.25%	30.06%	39.74%
What will happen in the future	49.93%	50.67%	57.66%	62.10%
Have you felt…? (Yes)				
Lonely	45.03%	42.02%	39.19%	42.42%
Emotionally overwhelmed	43.73%	37.25%	42.94%	48.41%
Stressed	60.84%	53.00%	57.54%	62.53%
Life satisfaction (Yes)				
Life is close to ideal	68.12%	7273%	65.33%	69.04%
The conditions of my life are excellent	68.43%	73.75%	69.56%	67.24%
Satisfied with life	81.64%	84.05%	79.23%	81.89%
I have gotten the important things I want in life	83.48%	84.75%	82.17%	84.49%
I would change almost nothing	55.04%	61.77%	56.41%	53.48%
Are you satisfied with…? (Yes)				
The place where you live	94.40%	94.26%	94.71%	93.22%
The city where you live	95.12%	95.23%	95.85%	93.70%
Leisure	90.98%	89.77%	88.06%	94.05%
Financial situation	88.67%	87.14%	84.52%	86.14%
Income	85.90%	86.98%	81.49%	85.05%
Health				

The sampling weights (CVWGTR) was applied; For all groups, the means were adjusted for age and educational attainment

Table 5: 95% Confidence Intervals of the Differences in the Estimated Proportions

	Race (Whites - Blacks)	Gender (Women - Men)	White women - White men	White women - Black women	White women - Black men	White men - Black women	White men - Black men	Black women - Black men
Activities (At least once a month vs. less than once a month)								
Work for pay	-0.02, 0.08	**-0.13, -0.03***	-0.09, 0.03	-0.01, 0.17	-0.14, 0.05	**0.03, 0.20***	-0.11, 0.08	**-0.24, -0.02***
Caregiving for an adult	-0.02, 0.07	-0.06, 0.02	-0.08, 0.02	-0.6, 0.09	-0.08, 0.08	-0.03, 0.12	-0.05, 0.12	-0.12, 0.09
Volunteer	**0.01, 0.06***	-0.02, 0.04	**0.01, 0.08***	**0.02, 0.12***	-0.01, 0.10	-0.03, 0.72	-0.06, 0.56	-0.09, 0.05
Charity	-0.05, 0.04	-0.03, 0.06	-0.05, 0.06	-0.10, 0.06	-0.08, 0.10	-0.11, 0.05	-0.08, 0.09	-0.07, 0.14
Education and training	-0.03, 0.05	-0.07, 0.01	-0.03, 0.06	-0.01, 0.12	-0.09, 0.05	-0.03, 0.11	-0.10, 0.04	-0.16, 0.01
Sport or social club	**0.05, 0.10***	**-0.10, -0.01***	-0.09, 0.02	-0.01, 0.15	-0.09, 0.08	**0.03, 0.19***	-0.06, 0.12	-0.18, 0.03
Interest groups	-0.03, 0.05	-0.05, 0.03	-0.07, 0.02	-0.07, 0.06	-0.07, 0.07	-0.05, 0.08	-0.05, 0.10	-0.08, 0.09
Pray	**0.02, 0.12***	-0.04, 0.06	-0.07, 0.05	-0.40, 0.14	-0.02, 0.17	0.03, 0.15	-0.01, 0.18	-0.09, 0.14
Reading	**0.01, 0.07***	-0.01, 0.06	-0.03, 0.04	-0.04, 0.08	-0.01, 0.12	-0.05, 0.07	-0.01, 0.12	-0.03, 0.12
TV	**0.01, 0.04***	-0.01, 0.03	-0.02, 0.02	-0.03, 0.02	**0.01, 0.07***	-0.03, 0.03	**0.01, 0.07***	-0.01, 0.08
Word games	-0.09, 0.03	-0.02, 0.09	-0.06, 0.08	-0.15, 0.05	-0.11, 0.11	-0.16, 0.04	-0.12, 0.10	-0.08, 0.18
Play cards	-0.12, -0.01	-0.02, 0.09	-0.05, 0.08	-0.17, 0.01	-0.13, 0.07	**-0.19, -0.01**	-0.15, 0.06	-0.07, 0.17
Writing	-0.04, 0.06	-0.04, 0.06	-0.05, 0.08	-0.08, 0.10	-0.08, 0.12	-0.09, 0.10	-010, 0.11	-0.12, 0.16
Computer and the internet	-0.05, 0.03	-0.01, 0.07	-0.06, 0.04	-0.12, 0.02	-0.06, 0.01	-0.11, 0.03	-0.06, 0.10	-0.03, 0.16
Gardening	-0.06, 0.03	-0.08, 0.07	-0.09, 0.01	-0.09, 0.06	-0.13, 0.03	-0.06, 0.10	-0.10, 0.07	-0.13, 0.07
Baking and cooking	-0.07, 0.03	-0.05, 0.05	-0.03, 0.09	-0.07, 0.10	-0.12, 0.07	-0.11, 0.07	-0.15, 0.05	-0.15, 0.08
Making clothing and knitting	-0.04, 0.03	-0.06, 0.07	-0.02, 0.07	-0.07, 0.05	-0.05, 0.10	-0.10, 0.03	-0.08, 0.07	-0.05, 0.12
Hobby	-0.14, -0.03*	-0.05, 0.06	-0.09, 0.05	**-0.10, -0.01***	-0.19, 0.02	-0.18, 0.02	--0.16, 0.05	-0.10, 0.15
Play sports	-0.08, 0.03	-0.08, 0.03	-0.08, 0.05	-0.11, 0.08,	-0.13, -0.06	-0.10, 0.10	-0.14, 0.08	-0.16, 0.10
Walking 20 minutes or more	-0.07, 0.03	-0.01, 0.10	-0.06, 0.06	-0.15, 0.02	-0.06, 0.13	-0.16, 0.02	-0.06, 0.13	-0.01, 0.21
Community art groups	-0.02, 0.03	-0.03, 0.02	-0.01, 0.06	-0.01, 0.08	-0.05, 0.05	-0.04, 0.05	-0.08, 0.02	-0.09, 0.03

*Statistically significant difference

All least squares means/percentages and multiple comparisons were adjusted for age and educational attainment (college or higher vs. less than college), and by the survey weights.

Table 6: 95% Confidence Intervals of the Differences in the Estimated Proportions

	Gender (Women - Men)	Race (Whites - Blacks)	White women - White men	White women - Black women	White women - Black men	White men - Black women	White men - Black men	Black women - Black men
Because of the coronavirus pandemic, were you worried about…? (Yes)								
Your own health	-0.11, 0.01	-0.09, 0.02	-0.11, 0.04	-0.15, 0.06	-0.19, 0.03	-0.12, 0.09	-0.16, 0.07	-0.17, 0.10
The health of others in your family	-0.11, 0.01	-0.08, 0.03	-0.08, 0.05	-0.13, 0.06	-0.18, 0.02	-0.12, 0.07	-0.17, 0.04	-0.17, 0.08
Your financial situation	-0.11, 0.01	-0.06, 0.06	-0.10, 0.05	-0.18, 0.03	-0.16, 0.07	-0.16, 0.06	-0.14, 0.10	-0.11, 0.17
Being able to get help if you needed it from family friends, or others	**-0.13, -0.01***	**-0.13, -0.01***	-0.11, 0.04	-0.14, 0.07	**-0.25, -0.01***	-0.11, 0.11	-0.21, 0.02	-0.23, 0.04
What will happen in the future	**-0.16, -0.03***	-0.09, 0.03	-0.08, 0.07	-0.18, 0.03	**-0.24, -0.01***	-0.18, 0.04	-0.23, 0.01	-0.18, 0.10
Have you felt…? (Yes)								
Lonely	-0.03, 0.08	-0.06, 0.06	-0.04, 0.10	-0.04, 0.16	-0.08, 0.14	-0.07, 0.13	-0.12, 0.11	-0.16, 0.10
Emotionally overwhelmed	-0.11, 0.01	-0.05, 0.06	-0.01, 0.13	-0.09, 0.11	-0.16, 0.06	-0.16, 0.05	-0.22, 0.01	-0.19, 0.08
Stressed	-0.09, 0.03	-0.04, 0.07	0.01, 0.15*	-0.07, 0.13	-0.13, 0.09	-0.15, 0.06	-0.21, 0.02	-0.18, 0.08
Life satisfaction (Yes)								
Life is close to ideal	-0.03, 0.08	-0.09, 0.02	-0.10, 0.03	-0.07, 0.12	-0.11, 0.09	-0.03, 0.16	-0.08, 0.13	-0.16, 0.09
The conditions of my life are excellent	-0.03, 0.08	-0.07, 0.04	-0.11, 0.01	-0.10, 0.08	-0.09, 0.11	-0.05, 0.14	-0.04, 0.17	-0.10, 0.14
Satisfied with life	-0.02, 0.07	-0.07,0.02	-0.08, 0.03	-0.05, 0.10	-0.09, 0.08	-0.03, 0.13	-0.06, 0.11	-0.13, 0.07
I have gotten the important things I want in life	-0.04, 0.05	-0.06, 0.02	-0.06, 0.04	-0.06, 0.09	-0.09, 0.07	-0.5, 0.10	-0.08, 0.09	-0.12, 0.08
I would change almost nothing	-0.02, 0.09	-0.07, 0.04	-0.14, 0.01	-0.11, 0008	-0.09, 0.12	-0.05, 0.15	-0.03, 0.19	-0.10, 0.16
Are you satisfied with…? (Yes)								
The place where you live	-0.02, 0.03	-0.02, 0.04	-0.03, 0.03	-0.05, 0.04	-0.04, 0.06	-0.05, 0.04	-0.04, 0.06	-0.05, 0.08
The city where you live in	-0.02, 0.03	-0.01, 0.04	-0.03, 0.03	-0.05, 0.04	-0.03, 0.06	-0.05, 0.04	-0.03, 0.06	-0.04, 0.08
Leisure	-0.04, 0.03	-0.06, 0.01	-0.03, 0.05	-0.03, 0.09	-0.10, 0.04	-0.04, 0.08	-0.11, 0.02	-0.14, 0.02
Financial situation	**0.01, 0.06***	**0.01, 0.06***	-0.03, 0.04	-0.04, 0.06	**0.01, 0.12***	-0.05, 0.05	-0.01, 0.11	-0.02, 0.12
Income	-0.01, 0.06	-0.04, 0.04	-0.03, 0.06	-0.03, 0.11	-0.05, 0.10	-0.04, 0.10	-0.07, 0.09	-0.11, 0.07
Health	-0.01, 0.07	-0.06, 0.02	-0.06, 0.04	-0.03, 0.12	-0.07, 0.09	-0.02, 0.13	-0.06, 0.10	-0.13, 0.06

*Statistically significant difference

All least squares means/percentages and multiple comparisons were adjusted for age and educational attainment (college or higher vs. less than college), and by the survey weights.