

OLMSTED COUNTY COVID-19 IMPACT SURVEY REPORT

Created by Olmsted County Public Health Services, April 2021

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INTRODUCTION

The COVID-19 Impact Survey provides a glimpse of the toll that the pandemic has taken on our community. Much like the entire nation more adults are reporting being financially stressed and having poor mental health. Here in Olmsted County, we see these changes connected to an increase in substance use. Additionally, the survey data provides insight into disparities that have been exacerbated by the pandemic. This glimpse should be used in accompaniment with community to best identify steps in recovery.

SURVEY BACKGROUND

In early 2021, Olmsted County Public Health Services partnered with Mayo Clinic and the Community Health Assessment and Planning (CHAP) Process to administer both mailed and convenience COVID-19 Impact Survey questionnaires. The goal of the survey was to assess the impacts of COVID-19, with a focus on the three previously identified Community Health Improvement Plan (CHIP) priorities of financial stress, mental health, and substance use.

Following the same sampling method of previous Olmsted County Community Health Needs Assessment surveys, 2,000 random mailed surveys were sent to Olmsted County households. Olmsted County received 737 completed surveys (37% response rate). In addition to the random mailed survey, convenience surveys were administered at 19 community partner sites and an online survey was also made available for the general public. A total of 860 convenience surveys were completed.

Detailed information about the survey methodology can be found in Appendix A.

ABOUT THE REPORT

The following report provides an overview of the findings from the COVID-19 Impact Survey. When possible, data is provided from the 2018 Community Health Needs Assessment survey to provide context to the survey findings. Frequency and demographic tables can be found in the supplemental document.

This report only includes data from the random mailed survey. Convenience survey data can be found in the supplemental document.

To best understand the impacts of COVID-19 in our community, crosstabs were utilized to look at key demographics and connections between other indicators. These cross tabs are included for the three CHIP priorities when the disparity ratio was greater than 1.5 difference. A full list of all cross tabs for the three priorities is included in the supplemental document as well.

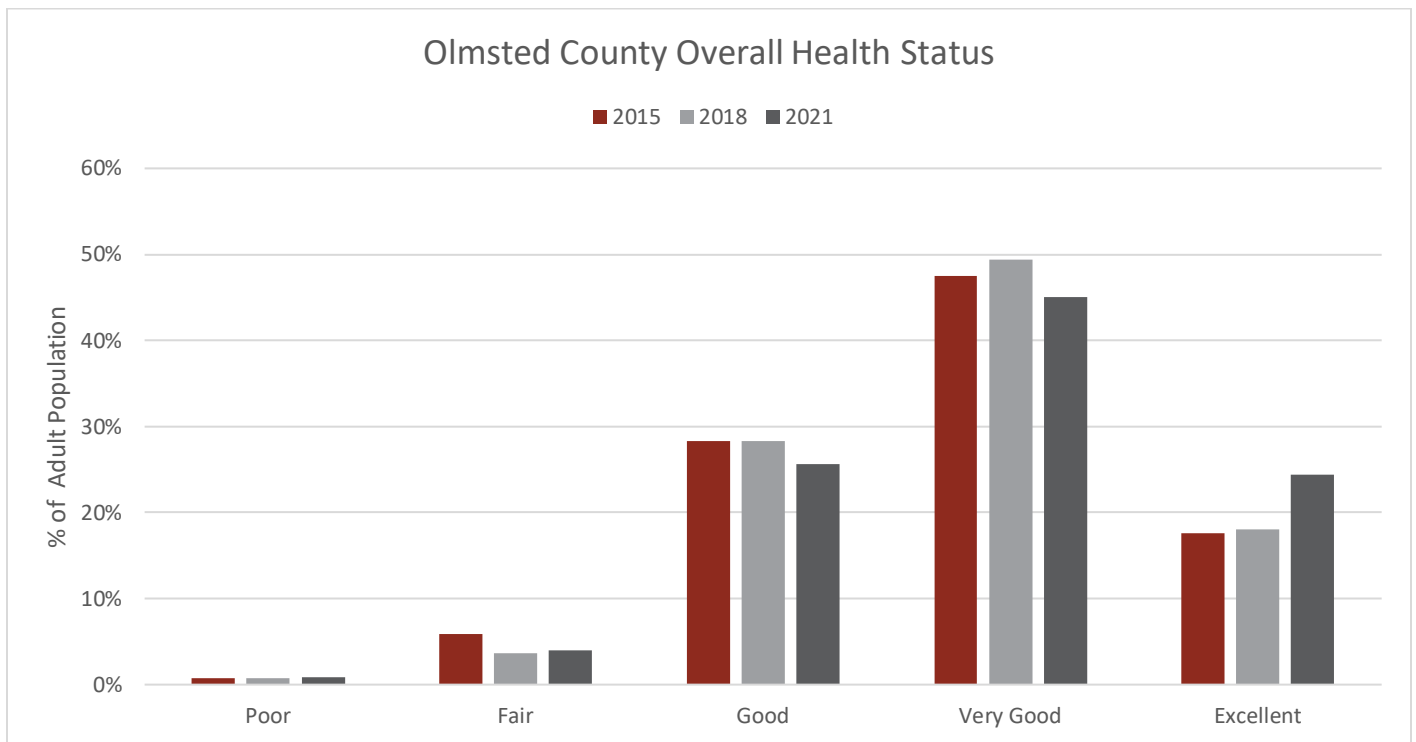
HEALTH STATUS AND HEALTH CARE

SUMMARY

- Overall health status in 2021 remains similar to 2018
- More residents reported their mental health worsened compared to their physical health since the pandemic began
- There is an increase in delay of care during the pandemic, and dentist visit is most common healthcare delay

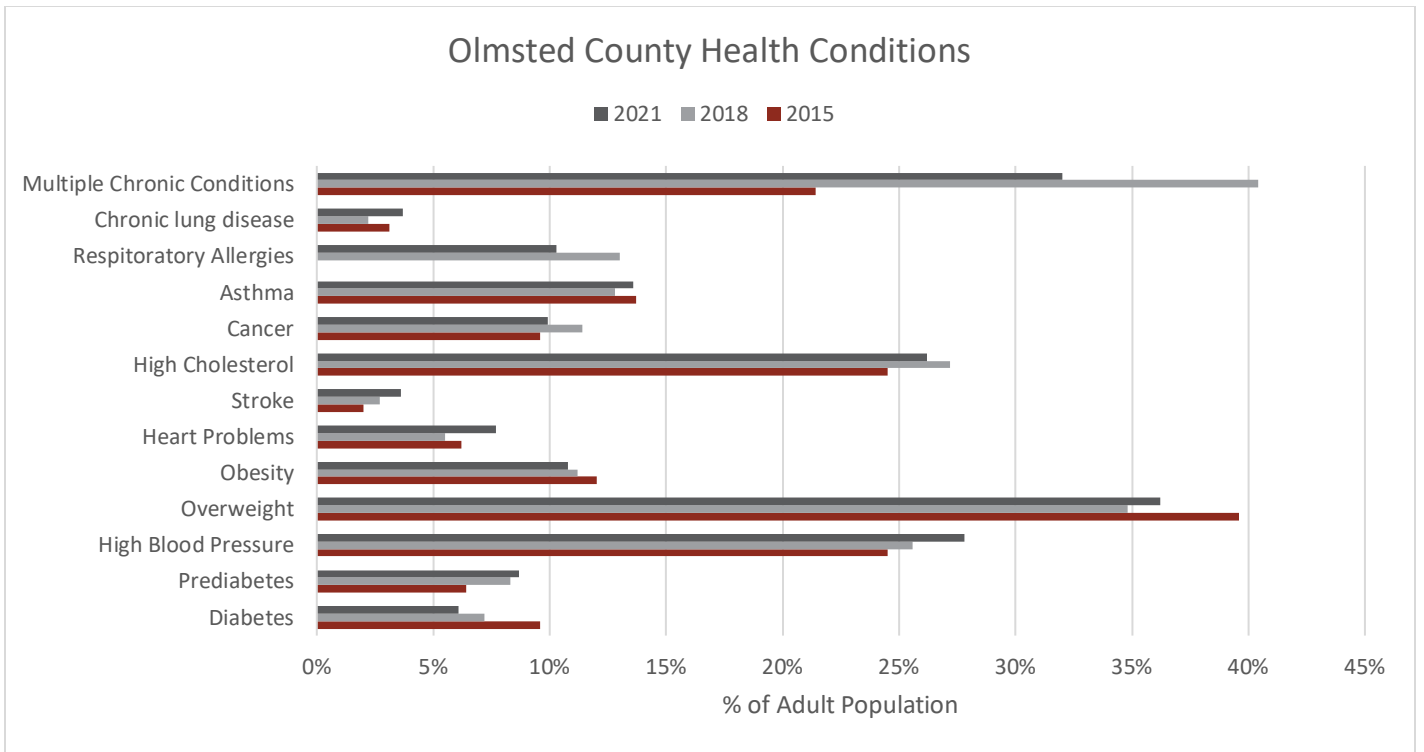
OVERALL HEALTH STATUS

In 2021, 95% of Olmsted County adults report good to excellent overall health. This very similar to what was reported in 2018. However, in 2021, 15% of Olmsted County adults report their physical health got worse and 27.9% report their mental health got worse during the pandemic.



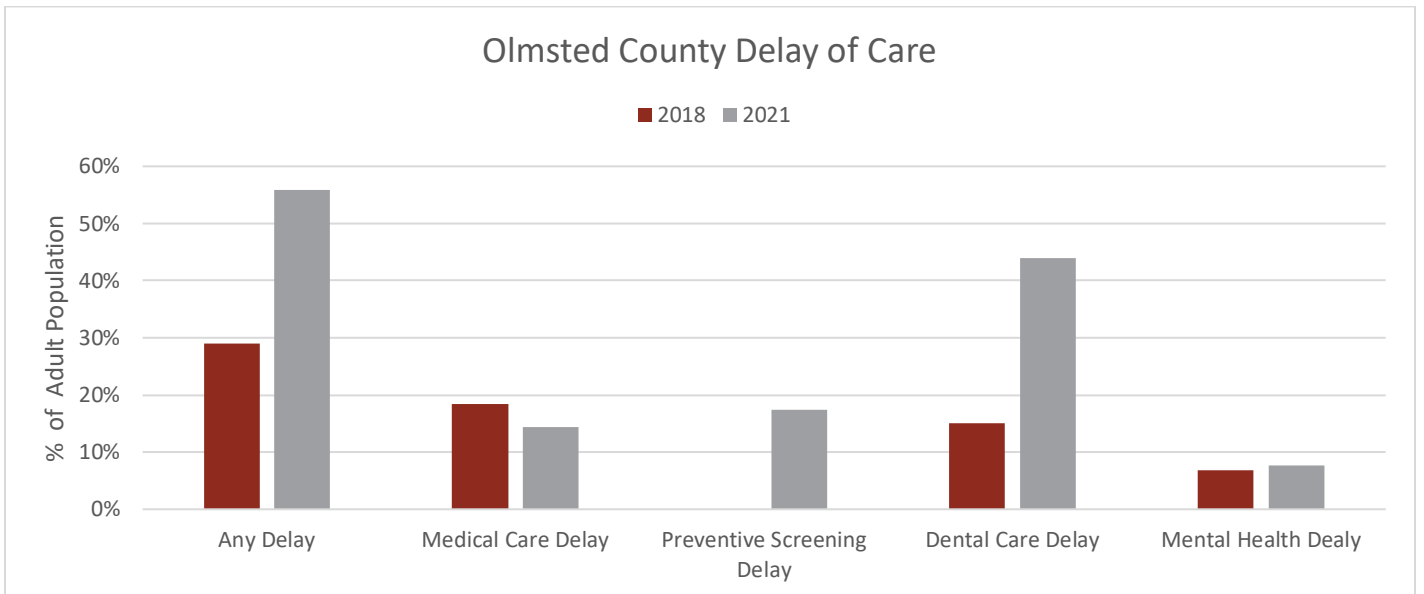
HEALTH CONDITIONS

Residents were asked to self-report specific health conditions. These specific health conditions are tied to understanding multiple chronic conditions (two or more chronic diseases that require treatment or are treatable). From the 2021 results, more residents reported having high blood pressure, being overweight, or having asthma compared to 2018. The portion of residents reporting multiple chronic conditions decreased in 2021 to 32% compared to 40% in 2018.



DELAY IN CARE

In Olmsted County, 56% of residents reported delaying any care during the pandemic. For comparison, in 2018, 29% of residents reported any delay of care. Dental care was the highest reported healthcare delay in 2021. The top reasons for the delay of care during the pandemic were: couldn't get an appointment, clinic was closed, and hesitant or scared due to COVID-19. It should be noted that preventive screening was not asked in 2018.



MENTAL HEALTH

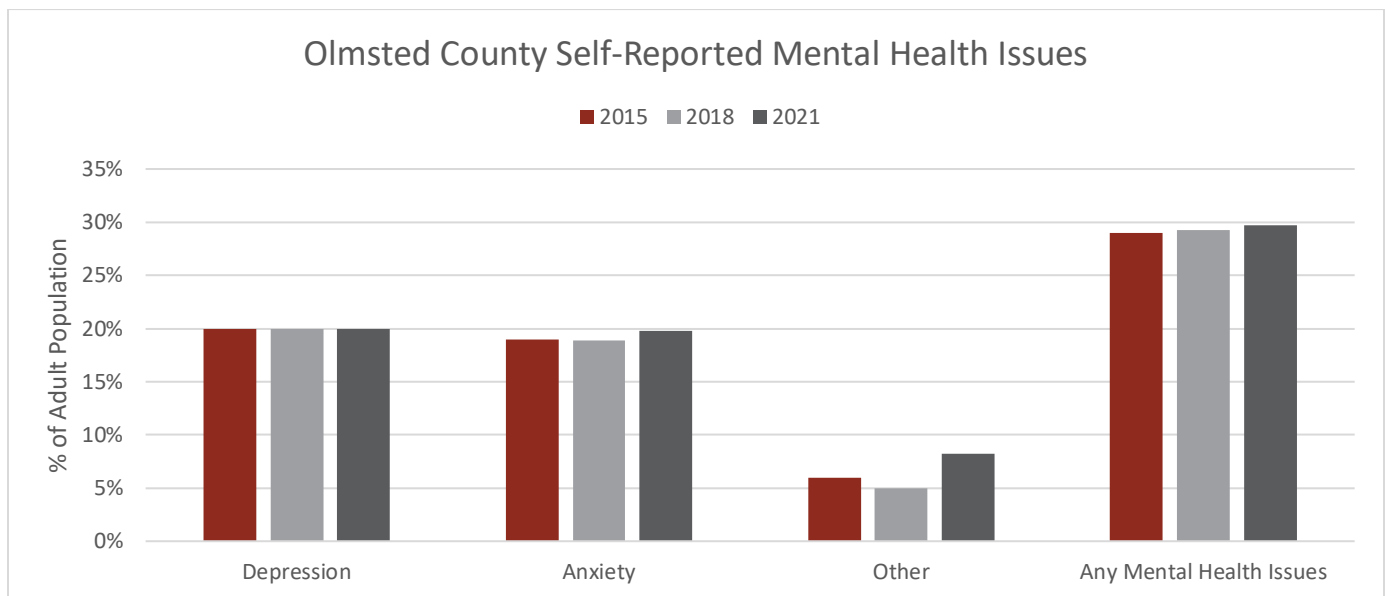
Olmsted County Community Health Needs Assessment (CHNA) has tracked both self-reported mental health issues/illnesses and mental health since 2015. The COVID-19 Impact Survey used the same questions from previous surveys to be able to compare not only changes in overall mental issues/illness and mental health but also disparities.

SUMMARY

- Self-reported mental health issues like depression have remained the same since 2018
- Since the pandemic started, more residents are reporting poor mental health (WHO Wellbeing Index)
- Disparities are connected to gender, birthplace, race/ethnicity, marital status, income, and retirement status
- Connections to other priorities include increased substance use, increased financial stress, and decreased household income

MENTAL HEALTH ISSUES AND ILLNESS

Overall, 29% of Olmsted County residents self-report any mental health issues in 2021. This has been consistent since 2015. In addition, 20% of Olmsted County residents self-report being diagnosed with depression. There have been changes from survey cycle to survey cycle with more residents reporting being diagnosed with anxiety/panic attacks or any other mental health issues.



DISPARITIES

According to the COVID-19 Impact Survey disparities exist among certain subpopulations throughout Olmsted County self-reporting mental illness. Specifically, those who identify as female and are born in the United States are more likely to self-report any mental health issues. When comparing 2018 to 2021, similar disparities exist including gender identity and birthplace.

| % Any Mental Health Issues | |
|-----------------------------------|--------|
| Gender Identity | |
| Male | 21.05% |
| Female | 37.53% |
| Birthplace | |
| Born in the United States | 31.15% |
| Foreign Born | 12.96% |

Additionally, with survey data connections and further understanding of the social determinates of health can be made. Specifically, those who have multiple chronic conditions, report any delay in healthcare or mental health care during the pandemic, whose mental health got worse during the pandemic, whose substance use increased during the pandemic, who are concerned about their increase in substance use, who experience discrimination, who are financially stressed, whose household income decreased during the pandemic and were not an essential worker were more likely to self-report any mental health issues.

| % Any Mental Health Issues | |
|---|--------|
| Have multiple chronic conditions | |
| Yes | 49% |
| No | 17.44% |
| Any Health Care Delay | |
| Yes | 37.85% |
| No | 20.49% |
| Mental Health Care Delay | |
| Yes | 73.58% |
| No | 26.09% |
| Mental Health Got Worse During the Pandemic | |
| Yes | 48.86% |
| No | 22.72% |
| Substance Use Increase During the Pandemic | |
| Yes | 44.09% |
| No | 26.18% |
| Concerned About Substance Use Increase | |
| Yes | 50% |
| No | 30.67% |
| Experienced Discrimination | |
| Yes | 42.95% |
| No | 30.67% |
| Financial Stress | |
| Financially Stressed | 41.35% |
| Not Financially Stressed | 23.53% |
| Household Income Decreased During the Pandemic | |
| Yes | 45.52% |
| No | 25.61% |
| Was an Essential Worker During the Pandemic | |
| Yes | 32.28% |
| No | 72.35% |

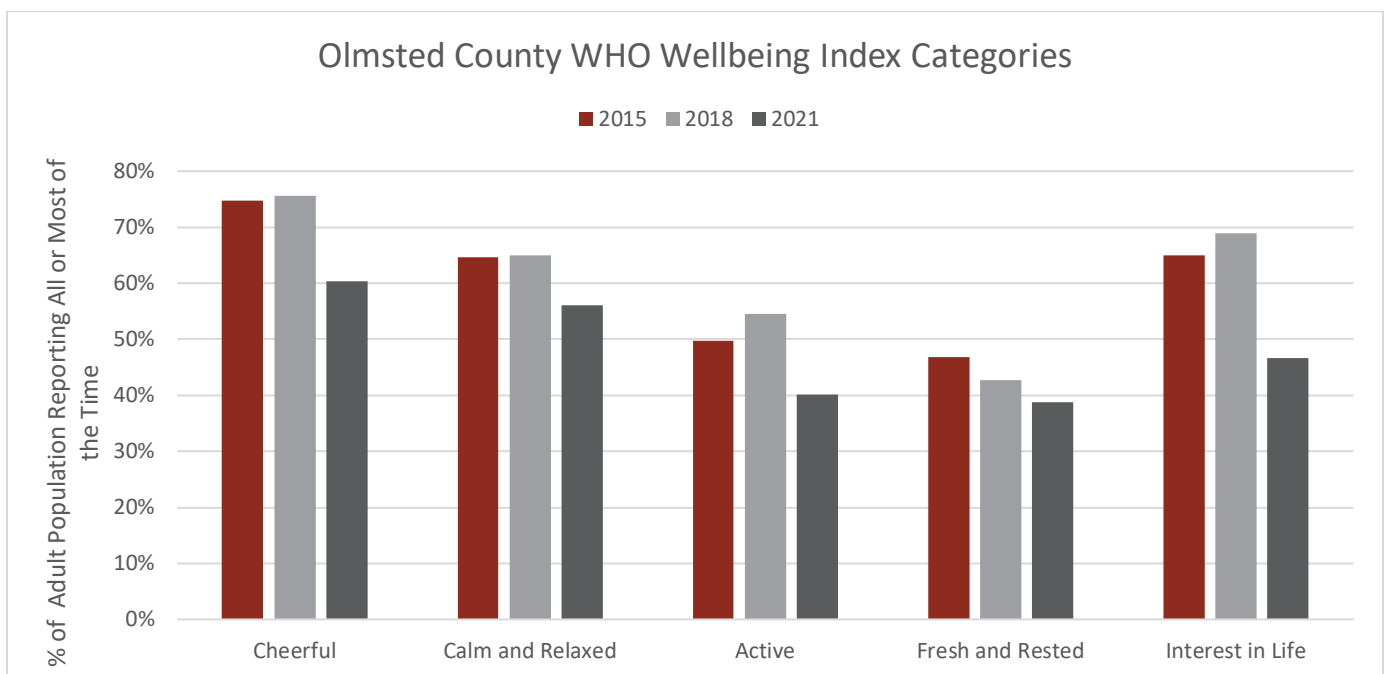
MENTAL HEALTH

The WHO Wellbeing Index is used to understand overall mental health/wellbeing in Olmsted County adults by asking five questions and asking individuals to use the scale from “all of the time” to “at no time.”

Specifically, respondents are asked to rate themselves over the last two weeks on the following:

- I have felt cheerful
- I have felt calm and relaxed
- I have felt active and vigorous
- I woke up feeling fresh and rested
- My daily life has been filled with things that interest me

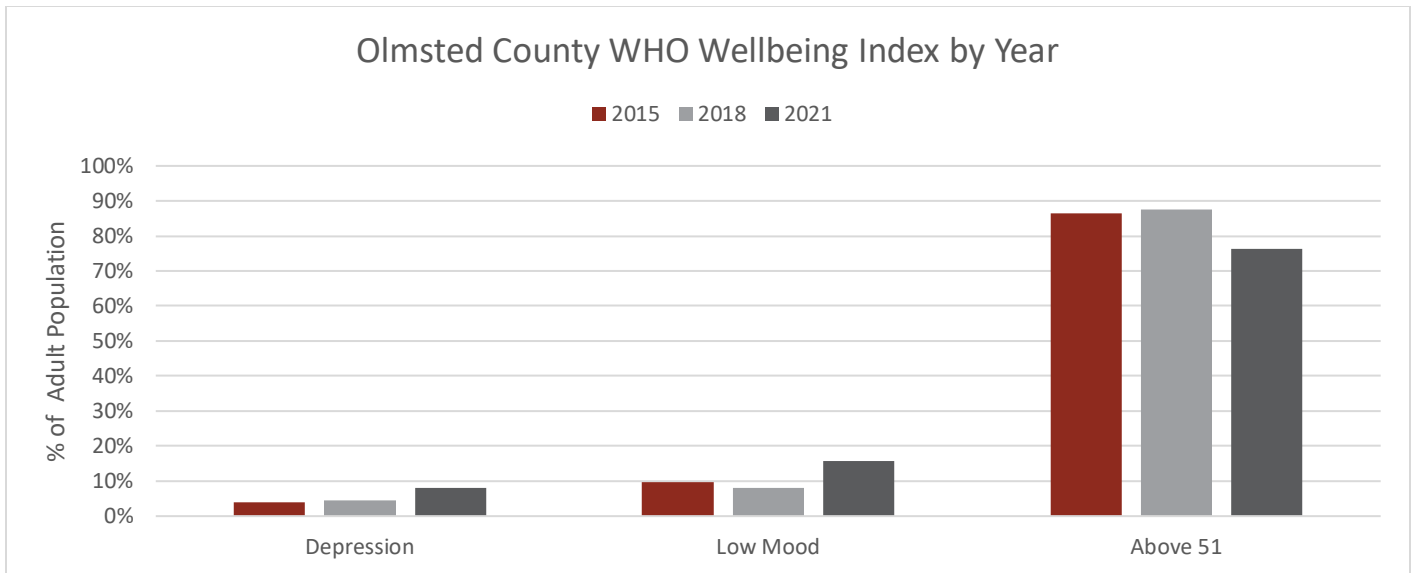
When comparing 2018 to 2021, the true impact of the pandemic on Olmsted County resident’s mental health is evident. In each of these categories there is a decrease. For example, in 2018 69% of Olmsted County adults reported their life interested them, in 2021 that dropped to 47% (a 31% decrease).



Based on responses, the WHO Wellbeing Index can assist in breaking people into three different categories. The higher the score (closer to 100) equates to better well-being. Evidence-based research suggests a score of 50 or below is indicative of low mood. A score of 28 or below indicates likely depression and warrants further assessment to confirm depression.

From the decreases reported in each category, it is not surprising that depression and low mood increased during the pandemic (24%) and fewer residents meet the threshold of scoring 51 or more (indicative of positive mental health).

Olmsted County WHO Wellbeing Index by Year



DISPARITIES

According to the COVID-19 Impact Survey disparities exist among certain subpopulations throughout Olmsted County reporting a WHO score of less than 50. Specifically, those who identify as female, identify as white/non-Hispanic, born in the United States, not married, have a household income of less than \$35,000, and not retired are more likely to score less than 50 on the WHO Wellbeing Index.

| | % WHO Score ≤50 |
|---------------------------|-----------------|
| Gender Identity | |
| Female | 29.70% |
| Male | 18.44% |
| Race | |
| White, non-Hispanic | 24.63% |
| All other races | 14.29% |
| Birthplace | |
| Born in the United States | 25.12% |
| Foreign Born | 7.41% |
| Marital Status | |
| Married | 19.83% |
| Not Married | 32.23% |
| Household Income | |
| <\$35,000 | 33.71% |
| >\$35,000 | 22.26% |
| Retired | |
| Yes | 16.56% |
| No | 25.91% |

Additionally, with survey data connections and further understanding of the social determinates of health can be made. Specifically, those whose physical health got worse during the pandemic, reported any delay in healthcare or mental health care during the pandemic, whose mental health got worse during the pandemic, whose substance use increased

during the pandemic, who are concerned about their increase in substance use, who experienced discrimination, are financially stressed, whose household income decreased during the pandemic, and whose housing stability decreased during the pandemic were more likely to score less than 50 on the WHO Wellbeing Index.

| | % WHO Score ≤50 |
|--|------------------------|
| Physical Health Got Worse During the Pandemic | |
| Yes | 58.16% |
| No | 18.10% |
| Any Health Care Delay | |
| Yes | 30.46% |
| No | 15.25% |
| Mental Health Care Delay | |
| Yes | 69.81% |
| No | 19.77% |
| Mental Health Got Worse During the Pandemic | |
| Yes | 57.78% |
| No | 11.41% |
| Substance Use Increase During the Pandemic | |
| Yes | 34.15% |
| No | 21.40% |
| Concerned About Substance Use Increase | |
| Yes | 44.07% |
| No | 23.26% |
| Experienced Discrimination | |
| Yes | 31.61% |
| No | 16.99% |
| Financially Stressed | |
| Financially Stressed | 35.53% |
| Not Financially Stressed | 17.65% |
| Household Income Decreased During the Pandemic | |
| Yes | 34.72% |
| No | 20.46% |
| Housing Stability Decreased During the Pandemic | |
| Yes | 56.25% |
| No | 22.17% |

SUBSTANCE USE

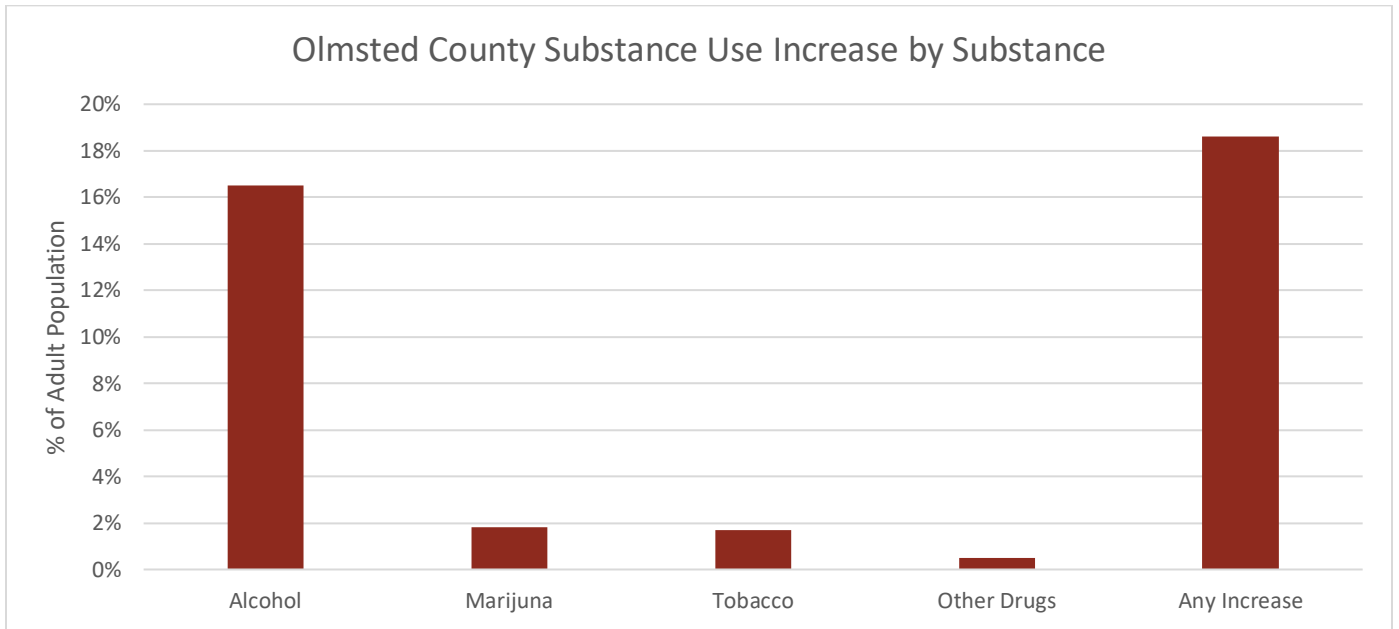
SUMMARY

- Adults reported an increase in substance use since the pandemic began, alcohol being the most common
- Disparities are connected to race/ethnicity, household income, and retirement status
- Connections to other priorities include poorer mental health status (both mental health and self-reported mental health issues) and delay in mental health care

INCREASE IN SUBSTANCE USE

In 2018, 39% of Olmsted County adult residents use at least one substance. Using one substance includes either consuming alcohol, using tobacco products, or using other drugs such as marijuana, hallucinogens, or opioids. Breaking adult substance use further down in Olmsted County, 8% use any tobacco products, 28% binge drink, and 14% use any drugs.

In 2021, 18.60% of Olmsted County adults reported any substance use increase during the pandemic. More adults said their alcohol use increased than use of marijuana, tobacco, or other drugs. Boredom and stress were the main drivers of reported increases. Of those that reported any substance use increase, only 11% were concerned about their increase.



DISPARITIES

According to the COVID-19 Impact Survey disparities exist among certain subpopulations throughout Olmsted County reporting any substance use increase. Specifically, those who identify as white/non-Hispanic, have a household income of more than \$35,000, and are not retired are more likely to report any substance use increase.

| % Any Substance Use Increase | |
|------------------------------|--------|
| Race | |
| White, non-Hispanic | 19.30% |
| All other races | 14.29% |
| Household Income | |
| <\$35,000 | 12.50% |
| >\$35,000 | 20.31% |
| Retired | |
| Yes | 6.71% |
| No | 21.92% |

Additionally, with survey data connections and further understanding of the social determinates of health can be made. Specifically, those whose physical or mental health got worse during the pandemic, reported any delay in mental health care during the pandemic, scored lower than 50 on the WHO Wellbeing Index, have any self-reported mental health issues, and who experience discrimination were more likely to report any substance use increase.

| % Any Substance Use Increase | |
|--|--------|
| Physical Health Got Worse During the Pandemic | |
| Yes | 58.16% |
| No | 18.10% |
| Mental Health Got Worse During the Pandemic | |
| Yes | 57.78% |
| No | 11.41% |
| WHO Wellbeing Index | |
| 50 or below | 27.10% |
| 51 or above | 16.33% |
| Any Mental Health Delay | |
| Yes | 33.33% |
| No | 17.84% |
| Any Mental Health Issues | |
| Yes | 28.72% |
| No | 15.33% |
| Experienced Discrimination | |
| Yes | 31.61% |
| No | 16.99% |

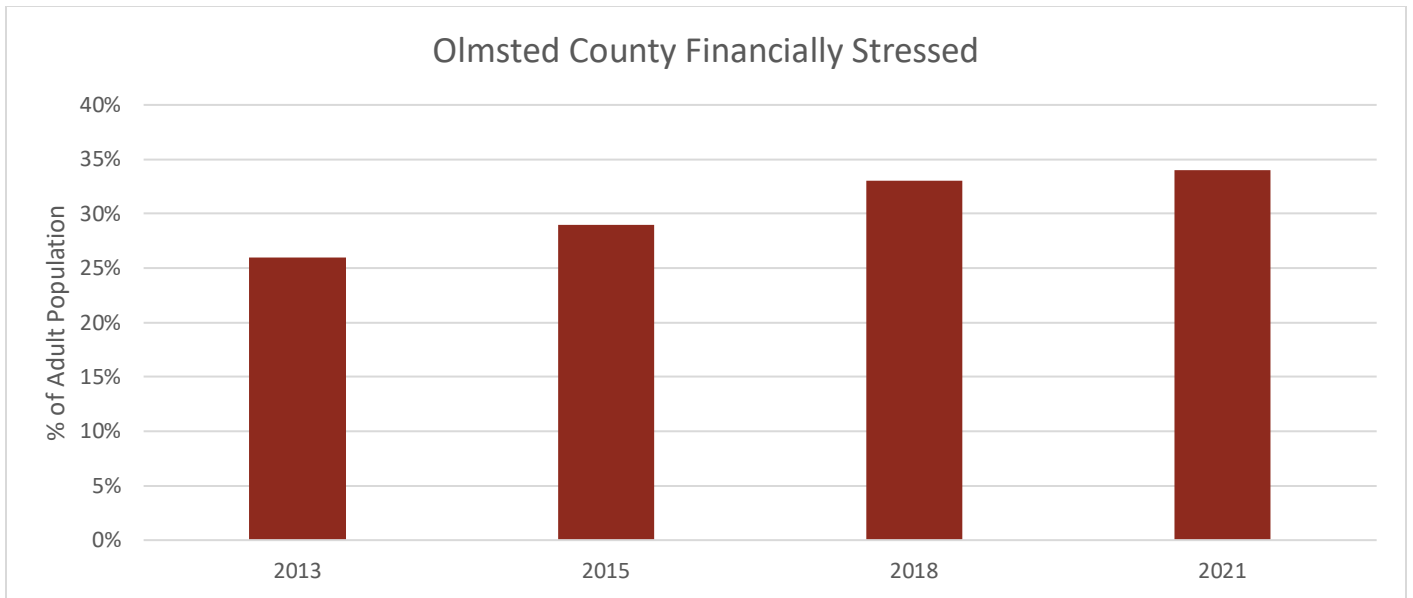
FINANCIAL STRESS

SUMMARY

- Financial stress has increased since the start of the pandemic
- Loss of a job or decrease in hours are the main drivers
- Medical bills and rent/mortgage cause the most financial stress
- Disparities are connected to children in the household, birthplace, education level, income, home ownership, and retirement status
- Connections to other priorities include poorer mental health status

FINANCIAL STRESS

Olmsted County has been tracking financial stress in our community since 2013. Every survey cycle, the percentage of adults feeling financially stressed has increased. In 2013, 26% of Olmsted County adults reported being financially stressed compared to 34% in 2021. Of those reporting being financially stressed, the main drivers for their stress were loss of a job or decrease in hours.



Adults were most worried about paying medical bills and rent/mortgage payments, the same worries from 2018. Since the pandemic began 21% of Olmsted County adults reported their household income decreased and 6% reported their housing stability decreased.

DISPARITIES

According to the COVID-19 Impact survey disparities exist among certain subpopulations throughout Olmsted County reporting any financial stress increase. Specifically, those who have children, those not born in the United States, have a household income of less than \$35,000, and are not retired are more likely to report being financially stressed. In 2018 there were similar disparities including retirement status and income.

| | % Financially Stressed |
|----------------------------------|------------------------|
| Children in the Household | |
| Yes | 45.41% |
| No | 29.11% |
| Birthplace | |
| Born in the United States | 32.42% |
| Foreign Born | 52.73% |
| Education | |
| No College | 53.03% |
| Some College | 32.15% |
| Household Income | |
| <\$35,000 | 57.61% |
| >\$35,000 | 31.16% |
| Homeownership | |
| Rent | 53.51% |
| Own | 28.52% |
| Retired | |
| Yes | 21.74% |
| No | 37.59% |

Additionally, with survey data connections and further understanding of the social determinates of health can be made. Specifically, those whose mental health got worse during the pandemic, scored lower than a 50 on the WHO Wellbeing Index, who have any self-reported mental health issues, who experienced discrimination, whose household income decreased during the pandemic, and whose housing stability decreased were more likely to report being financially stressed.

| | % Financially Stressed |
|--|-------------------------------|
| Mental Health Got Worse During the Pandemic | |
| Yes | 47.57% |
| No | 29.8% |
| WHO Wellbeing Index | |
| 50 or below | 50.94% |
| 51 or above | 28.77% |
| Any Mental Health Issues | |
| Yes | 48.51% |
| No | 29.14% |
| Experienced Discrimination | |
| Yes | 45.78% |
| No | 23.95% |
| Household Income Decreased | |
| Yes | 72.79% |
| No | 23.90% |
| Housing Stability Decreased | |
| Yes | 75% |
| No | 31.63% |

SOCIAL FACTORS

SUMMARY

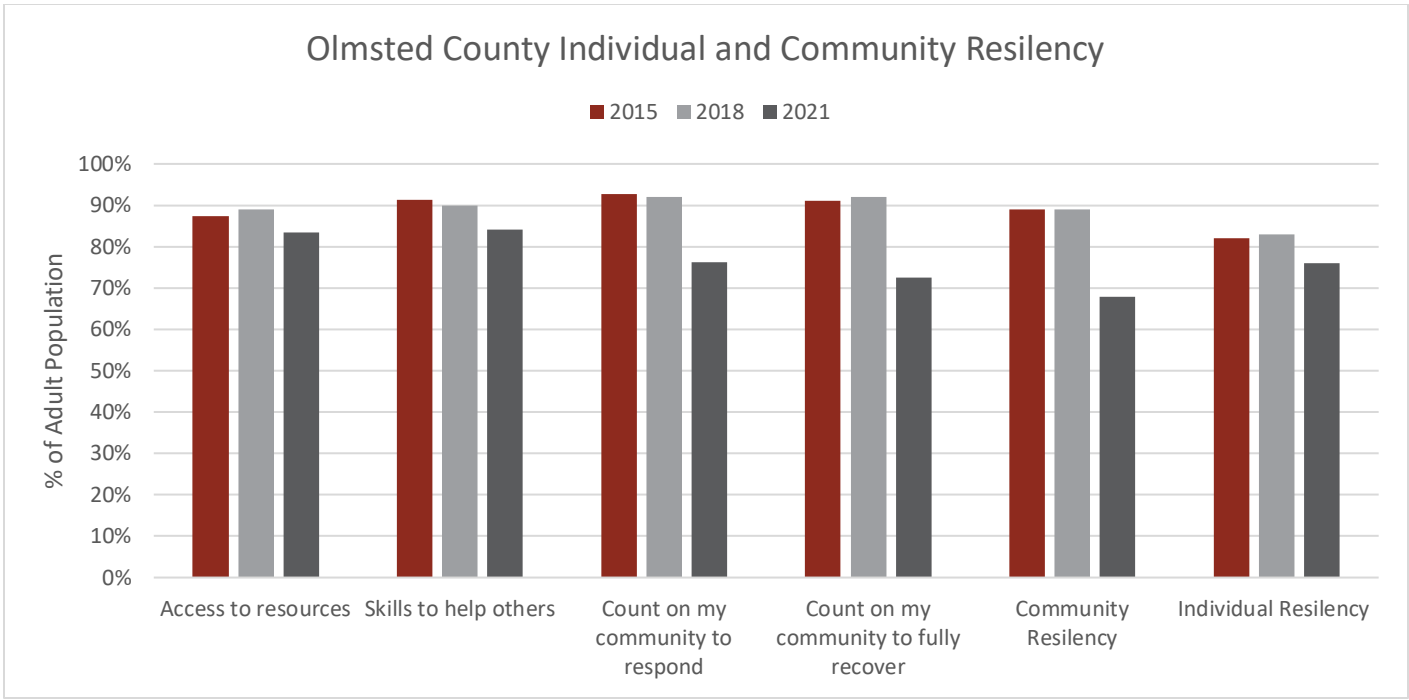
- Social connections have decreased since the pandemic began
- Individual and community resiliency have decreased since the pandemic began
- Since the pandemic began more residents report feeling unaccepted or not welcomed

SOCIAL CONNECTEDNESS

In 2018, 68% of Olmsted County residents felt socially connected. During the pandemic, Olmsted County adults reported a decrease in communicating with their neighbors (51%) and family and friends (47.3%).

RESILIENCY

The COVID-19 Impact Survey asked Olmsted County adults to reflect how resilient they felt and how resilient the community has been during the pandemic. When comparing to previous years, there are decreases in every resilient category and in overall individual (access to resources and skills to help others) and community (count on my community to respond and count on my community to fully recover) resiliency. In 2018, 89% felt Olmsted County was a resilient community compared to 68% during the pandemic, a 24% decrease. Individual resiliency decreased from 83% in 2018 to 76% in 2021, an 8.4% decrease.



COMMUNITY INCLUSIVENESS

In 2018, 33% of Olmsted County adults reported being in situations where they felt unaccepted. This increased to 47% in 2021. The main reason in both 2018 and 2021 for not feeling accepted was people acting not friendly followed by socio-economic factors.

NEXT STEPS AND CONNECTION TO THE COMMUNITY HEALTH IMPROVEMENT PLAN

The COVID-19 Impact Study will provide supplemental context to the CHIP and the three community health priorities of financial stress, mental health, and substance use. These priorities were identified in 2019 and included in the new 2021 – 2023 CHIP document adopted earlier this year.

In 2021, one of several goals of the CHAP process is to develop population-level strategies around each community health priority. This data, along with trending data from previous Community Health Needs Assessments, will be used to identify those most impacted by each priority and eventually, how to best implement population-level solutions. CHIP strategy selection will occur with CHAP partners during the summer of 2021.

APPENDIX A: SURVEY METHODOLOGY

SURVEY INSTRUMENT

The COVID-19 Impact Survey was developed by a team from Olmsted County and Mayo Clinic Research. Questions were based on previous Community Health Needs Assessment surveys and other national COVID-19 impact surveys. Technical assistance was provided by Mayo Clinic Research. The survey was formatted by the survey vendor, as a scannable, self-administered, English questionnaire.

SAMPLE

A two-stage sampling strategy was used for obtaining a probability sample of adults living in Olmsted County. For the first stage of sampling, a random sample of Olmsted County residential addresses was purchased from a national

sampling vendor. Address-based sampling was used so that all households would have an equal chance of being selected for the survey. For the second stage of sampling, the ‘most recent birthday’ method of within-household respondent selection was used to specify one adult from each selected household to complete the survey.

SURVEY ADMINISTRATION

An initial survey packet was mailed to 2,000 households in Olmsted County in January 2021. This packet included a cover letter, the survey instrument, and a postage-paid return envelope. Ten days after the first survey packets were mailed, a postcard was sent to all sampled households reminding those who had not yet returned a survey to do so and thanking those who had already responded. Two weeks after the reminder postcards were mailed, another full survey packet was sent to all households that had still not returned the survey. The remaining completed surveys were received over the next four weeks, with the final date for the receipt of surveys being in March of 2021.

DATA WEIGHTING AND ANALYSIS

To ensure that the county-level survey results are representative of the adult population in Olmsted County, the data was weighted when analyzed. The weighting accounts for the sample design by adjusting for the number of adults living in each sampled household. The weighting also includes a post-stratification adjustment so that the gender identity and age distribution of the survey respondents mirrors the gender identity and age distribution of the adult population in Olmsted County according to the US Census Bureau 2010 estimates. All descriptive and associative data analysis was completed using SPSS – Statistical Package for the Social Sciences.