The Impact of COVID-19 on Community-Based Organizations Serving Older Adults

Findings from April 2020 through January 2021

Across the nation, thousands of community-based organizations provide vital services that enable older adults to stay in their own homes. When the pandemic hit, these organizations pivoted quickly to meet the shifting health and economic needs of the people they serve. Since April 2020, the National Council on Aging (NCOA) has conducted four surveys to better understand the impact of COVID-19 on these organizations and the people they serve.

Older Adults’ Needs

The highest-priority needs for older adults during the pandemic have remained relatively consistent—staying socially connected, affording basic expenses, and getting help with technology and transportation. In January, a new need was identified around getting reliable information about the pandemic with 52% identifying it as high-priority.

Respondent totals:
April: 1,003
July: 890
October: 814
January: 430

Community-Based Organizations

Organizations have continued to adapt to meet the needs of older adults. This includes ramping up with vaccine support and continuing to offer services virtually.

Vaccine Distribution

Organizations are playing an important role in vaccine education and distribution for older adults.

Vaccine Activities

54% Providing general education on the benefit of vaccines
36% Registering older adults for vaccines
19% Serving as a COVID-19 immunization site in the future
14% Serving as a COVID-19 immunization site now

High-Priority Needs

<table>
<thead>
<tr>
<th>Service</th>
<th>JANUARY</th>
<th>OCTOBER</th>
<th>JULY</th>
<th>APRIL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Affording food</td>
<td>52%</td>
<td>48%</td>
<td>51%</td>
<td>52%</td>
</tr>
<tr>
<td>Affording prescription medications</td>
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Services Reduced or Stopped

- Caregiver support
  - JANUARY: 20%
  - OCTOBER: 18%
  - JULY: 23%
  - APRIL: 29%

- Take-home meals
  - JANUARY: 57%
  - OCTOBER: 55%
  - JULY: 61%
  - APRIL: 58%

- Home-delivered meals
  - JANUARY: 5%
  - OCTOBER: 6%
  - JULY: 5%
  - APRIL: 4%

- Chronic disease self-management virtual education
  - JANUARY: 36%
  - OCTOBER: 31%
  - JULY: 46%
  - APRIL: 46%

- Falls prevention virtual education
  - JANUARY: 48%
  - OCTOBER: 51%
  - JULY: 47%
  - APRIL: 45%

- Benefits counseling
  - JANUARY: 16%
  - OCTOBER: 21%
  - JULY: 27%
  - APRIL: 21%

- Transportation
  - JANUARY: 33%
  - OCTOBER: 34%
  - JULY: 41%
  - APRIL: 41%

Effects on Operations

- Lost revenue (% reporting a great deal/quite a lot)
  - JANUARY: 38%
  - OCTOBER: 44%
  - JULY: 45%
  - APRIL: 50%

- Reduced staff
  - JANUARY: 30%
  - OCTOBER: 42%
  - JULY: 42%
  - APRIL: 44%

Demand for Services

- Serving more older adults since Fall 2020
  - JANUARY: 48%

- Sometimes or less often able to meet increased demand for food services
  - JANUARY: 30%

- Extra COVID funding used or about to run out
  - JANUARY: 36%

Services Increased or Introduced

- Caregiver support
  - JANUARY: 15%
  - OCTOBER: 9%
  - JULY: 9%
  - APRIL: 11%

- Take-home meals
  - JANUARY: 53%
  - OCTOBER: 45%
  - JULY: 59%
  - APRIL: 58%

- Home-delivered meals
  - JANUARY: 26%
  - OCTOBER: 35%
  - JULY: 61%
  - APRIL: 61%

- Chronic disease self-management virtual education
  - JANUARY: 4%
  - OCTOBER: 2%
  - JULY: 3%
  - APRIL: 1%

- Falls prevention virtual education
  - JANUARY: 22%
  - OCTOBER: 21%
  - JULY: 13%
  - APRIL: 7%

- Benefits counseling
  - JANUARY: 21%
  - OCTOBER: 12%
  - JULY: 7%
  - APRIL: 4%

- Transportation
  - JANUARY: 11%
  - OCTOBER: 9%
  - JULY: 4%
  - APRIL: 4%

Where Funding Is Needed

- Providing older adults with access to technology
  - JANUARY: 66%

- Offering new programs and services
  - JANUARY: 55%

- Paying staff salaries
  - JANUARY: 39%