Women’s Health Behaviors and Decision Making During and After COVID-19
Since 1988, HealthyWomen has been the most trusted go-to resource for women, especially for our target audience—women age 35+ who seek health and wellness information across a broad range of topics as they enter midlife.

Women connect with us because they trust our 30+ years of experience, our easy-to-navigate programming, our conversational tone and our keen use of data and technology that informs our offerings.

About HealthyWomen

HealthyWomen is the nation's leading independent, nonprofit, comprehensive health information source for women.

Our mission is to educate women to make informed health choices for themselves and for their families so that they can live and age well.
HealthyWomen would like to thank its sponsors for supporting this project:

• Astellas Pharma
• The Pfizer Foundation
• Survey purpose and methodology
• Key findings
  • Pre-pandemic behaviors
  • Behaviors during the pandemic
  • Predicted behaviors post-pandemic
  • Menopause report
• Panel discussion
• Audience Q&A
Survey Purpose and Methodology

Two Survey Reports
• Women and COVID-19: Understanding the Emotional and Physical Impact on Women’s Behaviors and Health Decision Making During and After the Pandemic
• Women, Menopause, and COVID-19: Understanding the Emotional and Physical Impacts on Women’s Behaviors and Health Decision-Making During and After the Pandemic

Purpose
• To understand how the pandemic has affected the physical and emotional health of adult women in the U.S., including among certain demographics

Methodology
• Socioeconomic
• Geographic
• Race/ethnicity
• To understand how experiences influence current and future health care behavior and choices
• To raise awareness and promote dialogue about impact of COVID-19 on women

• 15-minute online survey was conducted in June
• 3,004 women responded
Key Findings: Pre-Pandemic Behaviors – Routine Medical Appointments

Routine medical appointments – Self
• Important for early diagnosis and treatment
• 86% attended their own appointments pre-pandemic

Routine medical appointments – Family Member
• Aid with emotional support, logical assistance, transportation, and communication
• 44% attended appointments with a family member

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<th>Total</th>
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<th>Hispanic</th>
<th>Black/AA</th>
<th>Asian</th>
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<tbody>
<tr>
<td>Pre-COVID Routine Appointments for Self</td>
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<tr>
<td>Yes</td>
<td>86%</td>
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<td>No</td>
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<td>Total</td>
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<tr>
<td>Pre-COVID Routine Appointments for Family</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Yes</td>
<td>56%</td>
<td>59%</td>
<td>43%</td>
<td>53%</td>
<td>69%</td>
</tr>
<tr>
<td>No</td>
<td>44%</td>
<td>41%</td>
<td>57%</td>
<td>47%</td>
<td>31%</td>
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</table>
**Key Findings: Pre-Pandemic Behaviors – Telehealth**

**Benefits:** Help treat patients who are unable to attend in-person appointments

**Pre-pandemic hurdles:** legal barriers, lack of reimbursement, implementation

**Survey findings:**
- 23% reported using telehealth for themselves or family members
- Usage significantly higher among Hispanic/Latino and Black/AA women
Key Findings: Behaviors During COVID-19

By March, national emergency, public health emergency, and state of emergency declarations issued

By June, social distancing measures for 75% of Americans implemented

Requirements created unique hurdles for American women
• Childcare
• Homeschooling
• Maintaining jobs
• Serving as essential workers
Key Findings: Behaviors During Pandemic – Missed Appointments and Social Distancing

- 64% had scheduled appointments when pandemic hit (e.g., checkup, dental exam, mental health appointment)
- 32% kept in-person appointment
- 32% booked a telehealth appointment
- 13% cancelled
- 24% rescheduled
- 75% decided whether to keep or cancel based on advice from provider

Outcome of Appointments Scheduled During Pandemic

<table>
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<tr>
<th>Decision</th>
<th>Total</th>
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<th>Hispanic/Latino</th>
<th>Black/AA</th>
<th>Asian</th>
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</thead>
<tbody>
<tr>
<td>Keep the appointment in person</td>
<td>32%</td>
<td>32%</td>
<td>33%</td>
<td>29%</td>
<td></td>
</tr>
<tr>
<td>Keep the appointment via telehealth</td>
<td>32%</td>
<td>32%</td>
<td>34%</td>
<td>34%</td>
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<tr>
<td>Reschedule the appointment</td>
<td>24%</td>
<td>25%</td>
<td>21%</td>
<td>21%</td>
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<tr>
<td>Cancel the appointment</td>
<td>12%</td>
<td>13%</td>
<td>9%</td>
<td>8%</td>
<td>14%</td>
</tr>
<tr>
<td>Not show up to the appointment</td>
<td>1%</td>
<td>1%</td>
<td>2%</td>
<td>2%</td>
<td>0%</td>
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</table>
New health appointments

- 93% who needed care ultimately received it
- But, only 53% said it was easy to receive care or advice, and 26% reported difficulties finding care
- Hispanic/Latino women were less likely to make appointments, in general

Seeking care for COVID-19 symptoms

- 11% said they needed to seek care for potential COVID-19 symptoms
- Percentages higher for Black/AA (19%) and Hispanic/Latino (21%) women

Consistent with reported health disparities

Immunizations

- CDC has noted a significant decrease in routine childhood vaccinations
- Survey results
  - 19% of women needed to schedule a vaccination during the pandemic
  - 71% (34% on their own and 37% after speaking with their health care provider) actually scheduled the appointment
Key Findings: Behaviors During Pandemic – Prescriptions

Centers for Medicare and Medicaid Services (CMS) and states have improved access to prescriptions during the pandemic (e.g., waived prior authorization or step therapy requirements; allowed for 90-day refills and early refills).

Survey results:
- 73% needed a prescription fill or refill
- 43% enter the pharmacy to pick it up
- 30% went through the drive-thru
- 21% had it delivered

Actions Taken for Prescription Fill/Refill

- Go into the pharmacy to pick up: 43% (Total), 33% (White/Caucasian), 40% (Hispanic/Latino), 51% (Black/AA), 4% (Asian)
- Go through the pharmacy drive thru to pick it up: 30% (Total), 32% (White/Caucasian), 28% (Hispanic/Latino), 23% (Black/AA), 11% (Asian)
- Have the prescription delivered: 21% (Total), 19% (White/Caucasian), 23% (Hispanic/Latino), 23% (Black/AA), 5% (Asian)

- Not refill it because you could not afford to pay for it: 4% (Total), 2% (White/Caucasian), 10% (Hispanic/Latino), 5% (Black/AA), 6% (Asian)
- Not refill it because it was not available: 2% (Total), 1% (White/Caucasian), 3% (Hispanic/Latino), 3% (Black/AA), 5% (Asian)
Key Findings: Behaviors During Pandemic – Mental Health, Worries, and Concerns

Pandemic had general negative impact on mental health and wellbeing

Contributing factors: fear of the uncertain, job loss, economic hardships, quarantining in close quarters with others, lack of childcare

Survey results
- 31% experienced stress, worry, general anxiety, or boredom more so than pre-pandemic
- Hispanic/Latino women noted greater need to seek mental health services during pandemic than White and Asian Women
- Asian women were least likely to seek mental health services

Emotions Regularly Experienced During Quarantine
Key Findings: Behaviors During Pandemic – Specific Worries

Accessing outdoor spaces
• Hispanic/Latino women (17%) worry more than White (11%) & Asian (9%) women

Having a place to stay (e.g., home, apartment, room)
• Hispanic/Latino women (9%) worry more than White women (5%)
• Black/AA women (14%) worry more than White & Asian (6%) women

Affording health care
• Hispanic/Latino (16%) & Black/AA (14%) women worry more than White (9%) women

Mental health
• White (19%), Hispanic/Latino (22%), & Black/AA (17%) women worry more than

Asian women (8%)

Affording prescriptions
• Hispanic/Latino (11%) & Black/AA (10%) women worry more than White (6%) & Asian (4%) women

Accessing prescriptions (ability to go to the pharmacy)
• Hispanic/Latino (14%) women worry more than White (9%) & Black/AA (9%) women

Physical safety
• Hispanic/Latino (20%) & Black/AA (19%) women worry more than White (15%) women
Key Findings: Behaviors During Pandemic – Daily & Physical Behaviors

Maintaining health and wellness through new routines and practices can support healthy living during the pandemic.

Survey results:
- 48% reported staying connected.
- 38% were physically active.
- 32% reported following healthy eating habits and routines.
- 30% reported relaxing.
- 24% reported “good” sleep.

Activities Performed During Quarantine

<table>
<thead>
<tr>
<th>Activity</th>
<th>Total</th>
<th>White/Caucasian</th>
<th>Hispanic/Latino</th>
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<tbody>
<tr>
<td>Staying connected with family and/or friends</td>
<td>48%</td>
<td>45%</td>
<td>38%</td>
<td>37%</td>
<td>51%</td>
</tr>
<tr>
<td>Physical activity</td>
<td>38%</td>
<td>39%</td>
<td>32%</td>
<td>31%</td>
<td>32%</td>
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<tr>
<td>Healthy eating habits</td>
<td>32%</td>
<td>35%</td>
<td>32%</td>
<td>38%</td>
<td>35%</td>
</tr>
<tr>
<td>Create/maintain routines</td>
<td>31%</td>
<td>33%</td>
<td>26%</td>
<td>22%</td>
<td>31%</td>
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<tr>
<td>Relaxation</td>
<td>30%</td>
<td>30%</td>
<td>29%</td>
<td>34%</td>
<td>29%</td>
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<tr>
<td>Good sleep habits</td>
<td>24%</td>
<td>24%</td>
<td>20%</td>
<td>28%</td>
<td>31%</td>
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</table>
Key Findings: Behaviors in Post–COVID–19 Era

**Future health care services**
- 41% said they were comfortable seeing health care providers within next six months; 55% were comfortable considering time frame longer than six months.
- Black/AA women were less comfortable at six months (30%) and longer time frames (42%) compared to both White (44% and 59%, respectively) and Hispanic/Latino women (41% and 52%, respectively).
- 76% reported primary reason for forgoing in-person visit was risk of COVID-19.

**Future of telehealth**
- 40% reported they would likely make telehealth appointment in future.

**COVID-19 Vaccine**
- 54% were extremely likely or likely to get vaccine, and 19% said they were extremely unlikely or unlikely to get a vaccine.
- Only 45% of Black/AA women said they were extremely likely/likely to get vaccine compared to 67% of Asian, 55% of White, and 53% of Hispanic/Latino women.
- 62% who said they would not get a vaccine cited lack of trust in safety or efficacy.
Key Findings: Women, Menopause, and COVID-19

54% of respondents reported living with menopausal symptoms.

Pre-pandemic
- 25% of women with menopausal symptoms had scheduled in-person visits to discuss symptoms and receive treatment options.
- Only 2% with symptoms talked to health care provider about symptoms via telehealth.

Visits regarding menopause during the pandemic
- 44% of respondents with menopausal symptoms needed to schedule an appointment during quarantine.
- 36% were able to see their doctor in person, and 36% were able to see their doctor via telehealth.

Scheduled an appointment: What did you do?

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<th>Hispanic/Latino</th>
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<th>Asian</th>
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<tbody>
<tr>
<td>Schedule the appointment for remote visit</td>
<td>36%</td>
<td>32%</td>
<td>45%</td>
<td>43%</td>
<td>14%</td>
</tr>
<tr>
<td>Schedule the appointment in person</td>
<td>36%</td>
<td>31%</td>
<td>34%</td>
<td>43%</td>
<td>14%</td>
</tr>
<tr>
<td>Decide on your own to not schedule an appointment</td>
<td>22%</td>
<td>20%</td>
<td>17%</td>
<td>29%</td>
<td>6%</td>
</tr>
<tr>
<td>Decide to not schedule an appointment after discussing with the health care provider</td>
<td>6%</td>
<td>6%</td>
<td>6%</td>
<td>6%</td>
<td>14%</td>
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</table>
Use of technology and telehealth

• 40% said they used some form of technology to manage their well-being or help manage their menopause symptoms

• Women who reported living with menopausal symptoms (38%) were more likely to use technology to manage well-being than those who did not have symptoms (25%)

• Women with menopause symptoms (34%) were more likely to use telehealth during quarantine than those without symptoms (28%)

• However, they were significantly less satisfied (62%) with their telehealth services than women without symptoms (73%)

Other key findings

• Hispanic/Latino (50%) and Black/AA (44%) women were significantly more likely to need to schedule an appointment for menopause symptoms compared to White (20%) or Asian (22%) women

• Hispanic/Latino (39) and Black/AA women were significantly more likely to delay/put off seeking treatment for menopausal symptoms compared to White (16%) and Asian (19%) women

• Women experiencing menopausal symptoms were more likely to experience social anxiety (16% vs. 13%), separation anxiety (7% vs. 4%), insomnia (14% vs. 11%), and panic (10% vs. 7%)
Panelists

• Beth Battaglino, RN-C; CEO, HealthyWomen

• Phyllis Arthur, MBA; Vice President, Infectious Disease & Diagnostics Policy, BIO

• Alejandra Y. Castillo, Esq.; CEO, YWCA USA

• Kate Russell Woodworth, MD, MPH; General Pediatrician and Medical Officer, Emerging Threats Team, Division of Birth Defects and Infant Disorders, U.S. Centers for Disease Control and Prevention
Thank You