

Table 2: ANOVA and Chi-Square Results

Results	Analysis; p-Value
Women (compared to men):	
More likely to report that they had thought more about experiencing a long-term care event themselves at some point in their life	ANOVA; 0.003
More likely to report they felt more financially at risk from a long-term care event	ANOVA; 0.018
Less likely to have a higher level of belief in their financial preparedness	ANOVA; 0.002
More likely to expect that a child would provide care for them	ANOVA; <.001
More likely to have spoken with children about care expectations	Chi-square; <.001
Current or former caregivers (compared to non-caregivers):	
More likely to say that they had thought more about experiencing a long-term care event	ANOVA; <.001
More likely to say they felt more financially at risk of experiencing a long-term care event	ANOVA; <.001
More likely to expect that a child would be part of their care team	ANOVA; <.001
More likely to expect that a paid professional would be part of their care team	ANOVA; 0.033
Less likely to say they haven't spoken to anyone about their care expectations	Chi-square; <.001
More likely to have spoken with a spouse or partner about their care expectations	Chi-square; <.001
More likely to have spoken about their hopes or expectations for care with a spouse	Chi-square; <.001
More likely to have spoken about their hopes or expectations for care with children	Chi-square; <.001
More likely to have spoken about their hopes or expectations for care with other family members	Chi-square; 0.028
Marital status:	
People in a civil union, who were divorced, or who were widowed were more likely to have thought about experiencing a long-term care event themselves compared to those who were single	ANOVA; 0.002
LGBTQIA+ identifying respondents (compared to those who did not identify as such):	
More likely to indicate that a form of technology would help with some aspect of their care	ANOVA; 0.024
Less likely to indicate that a spouse or partner is part of their care team	ANOVA; 0.012
Less likely to indicate that a child as part of their care team	ANOVA; <.001
More likely to identify a sibling as a potential caregiver	ANOVA; 0.013
More likely to identify a friend as a potential caregiver	ANOVA; 0.008
More likely to say they felt more financially at risk of a long-term care event	ANOVA; <.001
People currently working with a financial professional (compared to those not):	
More likely to say that they had thought more about the possibility of experiencing a long-term care event	ANOVA; <.001
More likely to rate the importance of having a policy for themselves more highly	ANOVA; 0.013
More likely to express a higher degree of interest in learning more about long-term care policies	ANOVA; 0.002
More likely to indicate higher interest in purchasing a long-term care policy for themselves	ANOVA; <.001
People with children (compared to those without):	
More likely to have thought about the possibility of experiencing a long-term care event	ANOVA; 0.022
More likely to report they felt more financially at risk from a long-term care event	ANOVA; 0.019
More likely to rate the importance of having a policy for themselves more highly	ANOVA; <.001
More likely to express a higher degree of interest in learning more about such policies	ANOVA; <.001
More likely to indicate higher interest in purchasing a policy for themselves	ANOVA; <.001
More likely to have greater interest in purchasing a long-term care policy for their spouses or partners	ANOVA; <.001
More likely to have spoken with a spouse or partner about their expectations for care	ANOVA; <.001
Less likely to say they haven't spoken to anyone about the possibility of a long-term care event	ANOVA; <.001

Notes: Results are based on bivariate ANOVA or chi-square analyses.