

**Alameda County
Older Adult Digital Needs Assessment Survey:
Gaps in Equitable Access to Digital Resources**

June 16, 2022



Executive Summary

The COVID-19 pandemic has exposed and exacerbated existing problems faced by older adults and people with disabilities, including inequitable access to digital resources. During the pandemic, many resources for older adults were moved online. Currently, older adults are increasingly asked to use telehealth to access medical care as well as resources for caregivers and isolated seniors.

The [Alameda County Council for Age-Friendly Communities](#) (Age-Friendly Council) Digital Inclusion Workgroup was established in August 2020 to discuss growing concerns about inequitable access to digital resources and identify and consider best practices to address gaps. To collect information specific to Alameda County, the workgroup conducted a countywide needs assessment of adults ages 50 and older. The group developed a survey that was translated into the County's nine most common languages, including Arabic, Farsi, Korean, Simplified and Traditional Chinese, Spanish, Tagalog, and Vietnamese. It focused on three areas related to digital resources, including:

- Internet access;
- Access to digital devices including smartphones, tablets, laptops, and desktop computers; and
- Training and technical assistance needed to use digital devices.

The survey also asked questions about respondent demographics; special needs that would affect the type of device respondents could use; preferred learning methods; and provided space for comments.

The workgroup disseminated the survey from April to October 2021 via an online platform (SurveyMonkey) and paper copies with business reply envelopes to increase access and responses. With a focus on reaching residents with the lowest incomes and minimal internet access, the workgroup disseminated over 72,000 surveys county-wide through County and community partners that serve older adults. Recipients of the surveys likely passed them along to their contacts.

There were 1,413 survey responses from people ages 50 and older. Key findings include:

- Forty-five percent stated that their income was \$2,000 per month or lower, and 55% of all surveys returned were paper copies.
- Comfort using telehealth was significantly lower among respondents ages 75 and older than among younger groups.
- Across all the findings, income level had more of an impact than any other variable. There were significant differences between respondents reporting incomes below \$2,000 per month and those with higher monthly incomes.

- While 90% of older adults with incomes over \$2,000 per month had internet access at least once a week, only 68% of those with monthly incomes below \$2,000 per month had access.
- Across all digital devices, respondents with incomes under \$2,000 per month had less access than those with monthly incomes over \$2,000. Smartphones were the most-used device for respondents of all income levels.
- Race/Ethnicity was associated with digital access, and some of those differences remained within groups of the same income level. For respondents with incomes under \$2,000 per month, Whites had more internet access than all other groups and were comfortable with most online tasks including telehealth, as compared with other groups.
- For all income levels, African American and Latinx populations were more likely to have access to smartphones than to tablets, laptops, or desktop computers. White populations had more access to all devices than other groups.

Focus Groups

“Many seniors simply don’t have the resources to buy ANYTHING that would allow them to access the internet.”

To learn about internet and device needs among senior residents of long-term care facilities (LTCFs), the workgroup conducted two focus group discussions with LTCF staff. Empowered Aging, which provides ombudsman services in Alameda, Contra Costa, and Solano Counties, advised that it would be difficult to

survey LTCF residents during the pandemic because many would need support from staff in order to complete the survey, and many staff were already handling a heavy workload. Focus group staff participants described the critical importance of technology for keeping clients connected with family, particularly at end-of-life and during COVID-related lockdowns. Clients preferred using tablets to listen and speak with family members and access voice-activated functions. Many needed assistance to use the tablets. Along with clients, many of their families needed support to obtain the devices and instruction on how to use them.

Latinx Community Survey

The workgroup noted a gap in responses from Latinx older adults. To seek feedback about possible reasons for the low response rate and discuss ideas to address it, the workgroup engaged in meaningful discussions with an advisory group of community-based partners who provide services and supports to Latinx older adults. Recommendations included creating a shorter survey instrument that was focused on technology and training needs, removed demographic information questions, and designed to be administered verbally. Community partners also recommended that the survey be conducted in-person at community events and food distribution locations in the County’s priority zip codes.

From November 2021 through March 2022, the workgroup circulated electronic and paper copies of the Latinx Community Survey in Spanish and English to community partners and administered the survey in person at community events. There were 63 responses from Latinx residents over the age of fifty. Findings generally followed the age-based trends in the general survey, but there were some critical differences. Respondents' comfort with telehealth decreased as age increased, with significantly fewer Latinx respondents older than 65 reporting comfort with telehealth. Further, significantly fewer respondents to the Latinx Community Survey had access to tablets and devices other than smartphones; and just 48% of Latinx Community Survey respondents had weekly access to the internet, compared with 63% of Latinx respondents to the general survey.

Recommendations

The results from the general survey and the Latinx Community Survey include a large proportion of Alameda County residents with a high level of need for support to access digital resources. The Digital Inclusion Workgroup developed the following policy and program recommendations, based on the results from both surveys, that could make a difference in Alameda County. Any effort to address gaps in digital resources should include a culturally appropriate approach that considers the needs of the County's diverse populations.

1. Consider the internet to be a public utility so that everyone can access critical resources regardless of income level. This includes providing secure, low-cost and no-cost broadband access – or free, secure Wi-Fi in areas where broadband infrastructure is not available – as a government or health system benefit tied to household income level.
2. Fund programs that provide low-income seniors with tablets and other digital devices that include:
 - a. Working cameras that seniors can use at home to access telehealth and other critical services.
 - b. Adjustments including enlarged font sizes, larger screens, screen readers, enhanced keyboards or ergonomic equipment and voice-activated software for older adults and people with disabilities who need those supports.
 - c. Flexibility to meet individual language needs.
3. Support programs that provide culturally and linguistically competent training and ongoing technical assistance that are specific to the needs of older adults.
4. Support senior centers, libraries, and other public venues that can serve as digital access/navigation points and provide technical support.
5. Fund, train, and support culturally relevant and linguistically competent Community Health Outreach Workers to become “digital navigators” to help older adults find internet access and obtain digital devices; and to assist them to access telehealth and apply for benefits online.

6. Continue funding in-person and telephonic health care and service delivery options for those who are unable or not ready to utilize digital options for services and/or information and assistance.