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Low-Income Older Adults’ Use of Health Technology: A Double-Digital Divide

Author 1 Lisa S. Miller (University of California, Davis), Heather M. Young (University of California, Davis), and Pauline D. Martinez (University of California, Davis).

The COVID-19 pandemic has drawn attention to digital divide among the most vulnerable segments of the population, and in particular, low-income older adults (LIOA) (Sensmeier, 2020; Singh et al., 2020). LIOA face barriers related to both age and income, representing a double digital divide. The consequences of not using the internet has significant implications for older adults' health and well-being (Holt-Lunstad, 2018; Shankar et al., 2017; Steinman et al., 2020). Using data from the Health Information National Trends Survey (HINTS, 2019-2020), we compared health technology use and reasons for non-use of older adults (age 65+) who live in low- (N=1601; 63.5% female; 61.1% white) versus high- (N=2533; 47.0% female; 76.2% white) income households. Results showed LIOA were far less likely to own a smartphone or tablet (55.6 vs 84.4%) and to access online health records (21.6 vs 46.7%) than high-income older adults, p<.001. Both groups were equally likely to indicate that login problems, privacy, and not having a health record were reasons for non-use. However, LIOA were less likely than their high-income counterparts to report “no need” as a reason for non-use and were more likely to report lack of internet and feeling uncomfortable as reasons for non-use, p<.001. The findings suggest that, in general, LIOA see a need for online medical records and, in addition to internet access, would benefit from education that increases their comfort with using health technology. Findings have implications for federal ARPA policy implementation to expand technology for underserved groups.