Bridging the Digital Divide for HCBS Beneficiaries:
Access, Affordability, and Digital Literacy

2020 HCBS Technical Assistance Series
February 18, 2021 3:00-4:30 p.m. ET





OPENING REMARKS





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Bridging the Digital Divide with and for Older Adults



Kim McCoy Wade

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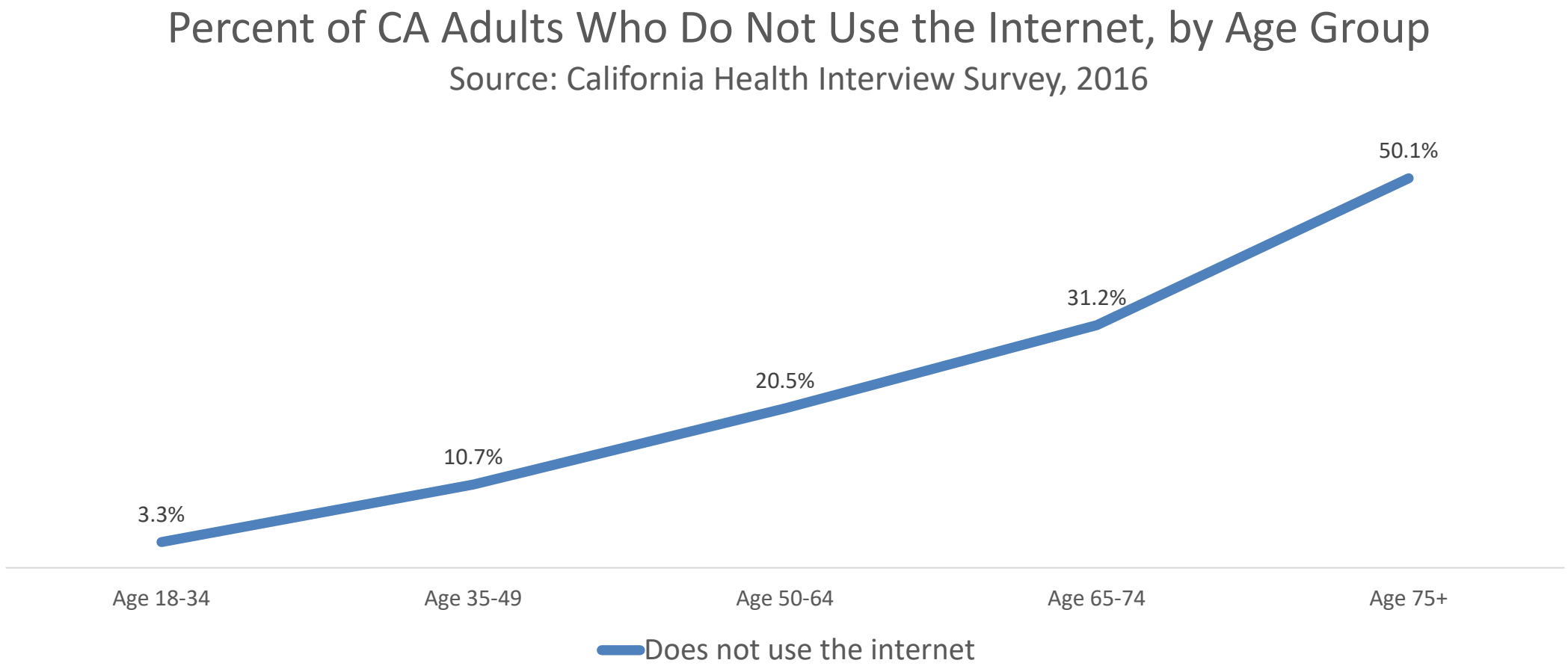
California's Approach

Person-centered, data driven, equity "baked in"

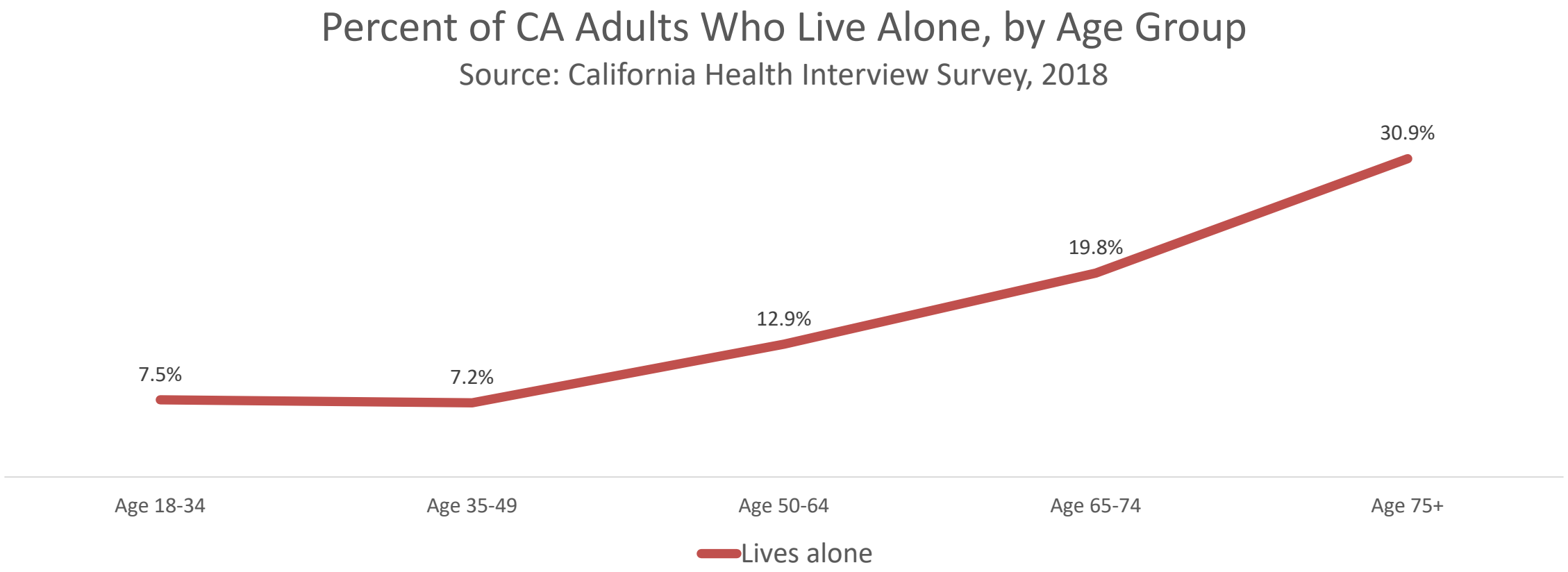
Strategies:

1. Policy & Data
2. Provider Support
3. Program Partnerships
4. Planning for the Future

Policy & Data (1 of 3)



Policy & Data (2 of 3)



Policy & Data (3 of 3)

Governor Newsom's Executive Order N-73-20, August 14, 2020

- Called for "California Broadband for All", with a new State Broadband Action Plan released December 2020
- "The California Department of Aging, in partnership with CDT and CPUC, is directed to analyze the needs of people ages 60 and older for access to affordable, reliable, high-speed broadband, and to identify program and partnership opportunities to close the digital divide among older Californians."
- Intergenerational approach in naming both the departments of Aging & Education

Provider Support

March 15, 2020 – COVID-19 "Stay at Home" orders

- CDA's network of aging & disability services rapidly pivoted from congregate settings to remote and virtual options – including senior center meals and activities, adult day health centers, and more
- Case Study: Adult Day Health Centers/Community-Based Adult Services (CBAS)

Before COVID-19: Provide congregate, center-based health, social, meal and more services to 35,000 older adults and people with disabilities, to support home and community living

Provider Support (Cont.)

Current: Adult Day Health's Temporary Alternative Services (TAS)

- Virtual and telephone case management, care, and evaluation.
- Drive-by and doorstep services.
- In-home and in-person visits are conducted on a case-by-case basis, and in accordance with COVID-19 safety protocols
- Approved through March 2021

"The nurses help me so much with my medical needs. I couldn't wait for the doctors, but the nurses keep checking in on me."

❖Essential pandemic support for home and community living, family caregivers, and now vaccine roll-out

Provider Support

Next: Post-pandemic planning

- Within next 2-4 months: 100-day plan to return to hybrid services – “best of” congregate and virtual

Program Partnerships

- ✓ *Training* - April –May 2020 – Convened "Staying Connected" webinars for AAA& HCBS network
  - Lessons from the Field, San Francisco Tech Council
  - Digital Literacy to Combat Loneliness and Isolation, Oasis San Diego
- ✓ *Digital devices* – January 2021 – Donations of 8500 smart speakers to AAA & HCBS network
- ✓ *Broadband access* – February 2021 – Purchase of 4000 tablets, with data plans and dedicated support, to AAA & HCBS network

More to come: Philanthropy partnerships, program trainings and support, device variety, low-cost broadband

https://aging.ca.gov/covid19/Digital_Divide/

Planning for the Future

California's Master Plan for Aging (MPA), January 2021

Goal 3: Inclusion & Equity, Not Isolation

Strategy B: Closing the Digital Divide

Data Dashboard Indicators: Percent of older adults with internet access at home; participating in Lifeline

https://mpa.aging.ca.gov

Thank you!

Kim McCoy Wade

Director

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Bridging the Digital Divide



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UNIVERSITY OF COLORADO
Boulder | Colorado Springs | Denver | Anschutz Medical Campus

Disruption and equity in the digital age

- ✓ Innovation and digital transformation
- ✓ Technology disruption across all domains of community living
- ✓ Greater reliance on technology solutions during the pandemic
- ✓ Hybrid or customized approach to technology utilization
- ✓ Technology and information access

Barriers to technology for people with cognitive disabilities

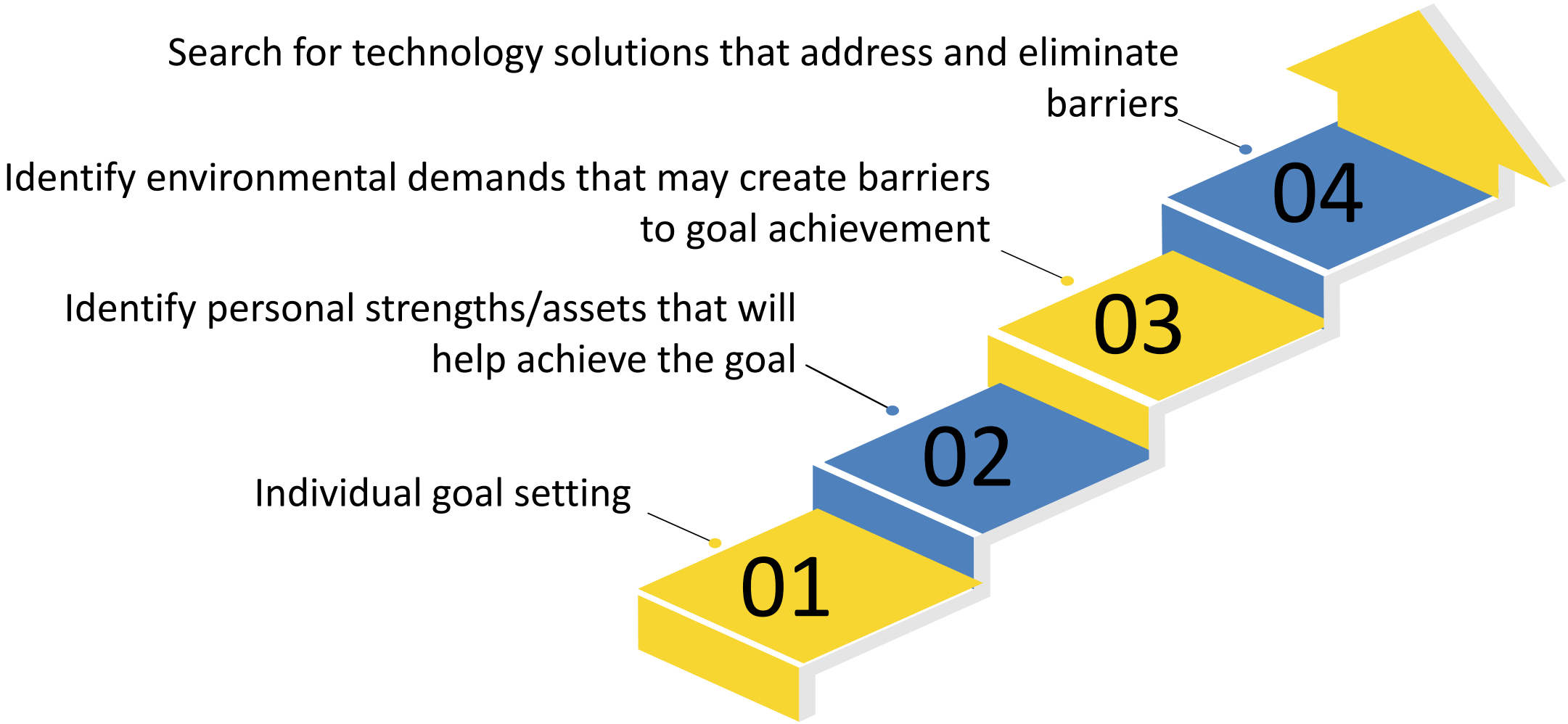
- ✓ Lack of universal design
- ✓ Useworthiness alongside usability
- ✓ Digital literacy and technical skills
- ✓ Knowledge translation
- ✓ Equal opportunity – gatekeepers
- ✓ Modern policies and practices
- ✓ Systemic barriers
- ✓ Economic barriers



Technology First

> Technology First began as a movement but has transformed to a “framework for systems change where technology is considered first in the discussion of support options available to individuals and families through person-centered approaches to promote meaningful participation, social inclusion, self-determination and quality of life”
>
> (Tanis, 2019)

Person-centered process for identifying technology solutions



Why are states and programs investing in Technology First?

Technology First solves the most pressing challenges of our field today

- ✓ Promote autonomy, self-direction, and community integration
- ✓ Address the direct care workforce shortages
- ✓ Drives more efficient and effective practices – cost efficiencies

Elements and activities of Technology First

- ✓ State policy initiative
- ✓ Resource allocation
- ✓ Capacity building
- ✓ Communications strategy
- ✓ Meaningful stakeholder engagement
- ✓ Fidelity and data-driven decision-making
- ✓ Implementation plan



Waiver language and amendments

Appendix K

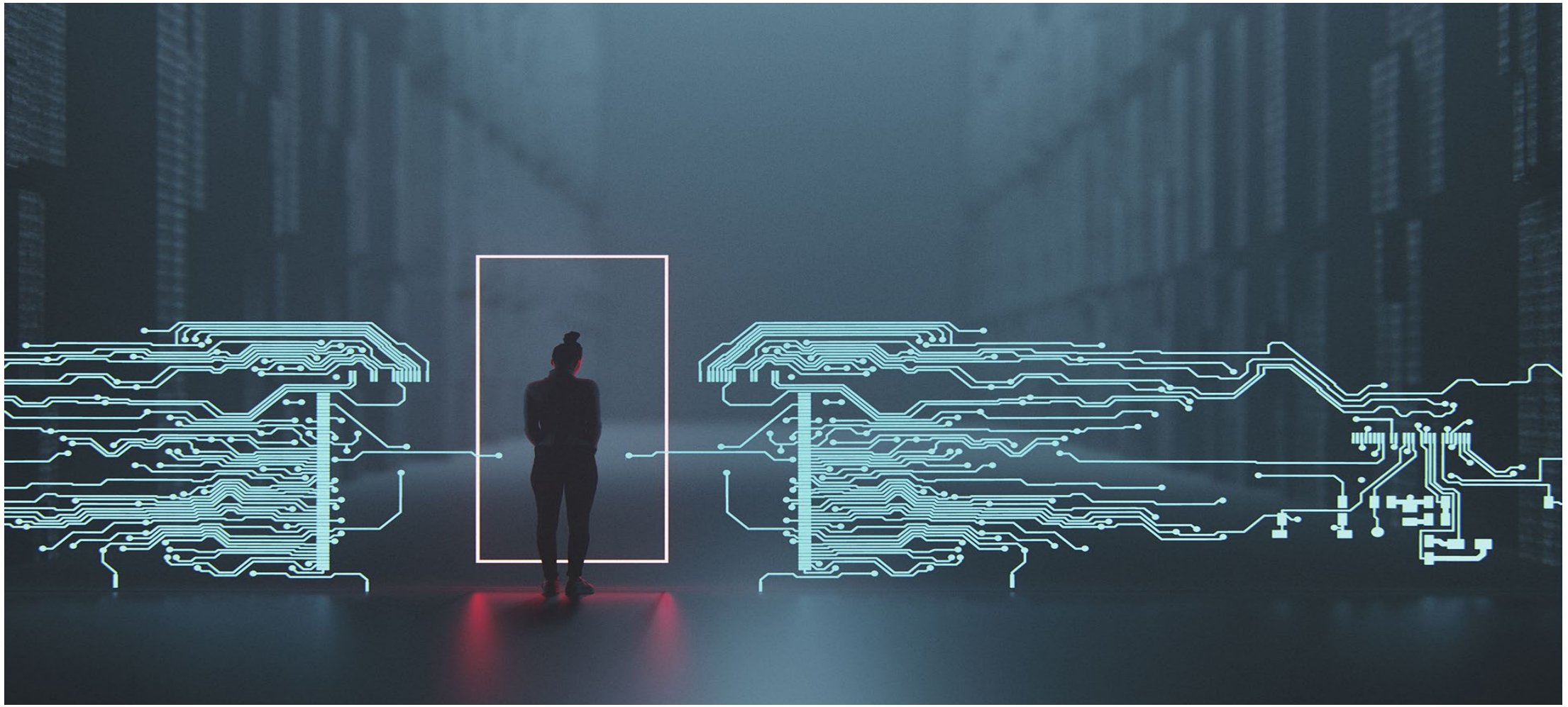
- ✓ Broader application of technology solutions to address immediate needs
- ✓ Telehealth and service delivery
- ✓ Areas of expansion: remote supports, telepresence for planning, electronic signatures, e-learning, etc.

What next…?

Opportunities

- ✓ Customization of care and hybrid models of services and supports
- ✓ Modernization of policies and language
- ✓ Innovation in research and practice using emerging and cognitively accessible technologies
- ✓ Metrics on the impact of technology solutions: quality of life, programmatic changes, social capital, community engagement, services efficiencies, cost reduction, etc.
- ✓ Partnerships and collaborations

Risk of building digital walls to community living



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Coleman Institute
for Cognitive Disabilities

Bridging the Digital Divide for HCBS Beneficiaries: Access, Affordability, and Digital Literacy

Thomas Kamber, PhD
OATS Executive Director

OATS FROM AARP | OLDER ADULTS TECHNOLOGY SERVICES

Introduction to OATS

2004: OATS launches in NYC to help seniors learn and use technology to live better in the digital age.

2013: Launch of the Senior Planet Exploration Center in Manhattan—America's first technology-themed community center for older adults. Nearly 15,000 seniors attend the first year.

2014: Milestone, as OATS teaches 10,000th class session (having worked at over 70 partner sites + built 30 new computer labs in NYC).

2015: Expands programs outside of NYC to Plattsburgh, New York, and partners with local sponsors in Maryland, Florida and California.

2018: Foundation grants of more than $3 million help expand Senior Planet to Texas and Colorado.

2020: Generous grant from the Humana Foundation helps launch Aging Connected, a national campaign to bridge the digital divide.

2021: After a series of successful collaborations, OATS formally joined the AARP family as a charitable affiliate in 2021.

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FROM AARP

The Digital Pivot



- OATS suspends in-person program activity on March 16, 2020.
- Within two weeks OATS was streaming all-digital courses on SeniorPlanet.org
- Over 100 programs created, including multiple languages, and 45 tech tips videos for streaming
- NYCHA: 10,000 tablets distributed, 50,493 calls at the hotline, and 5,550 attendees for virtual training

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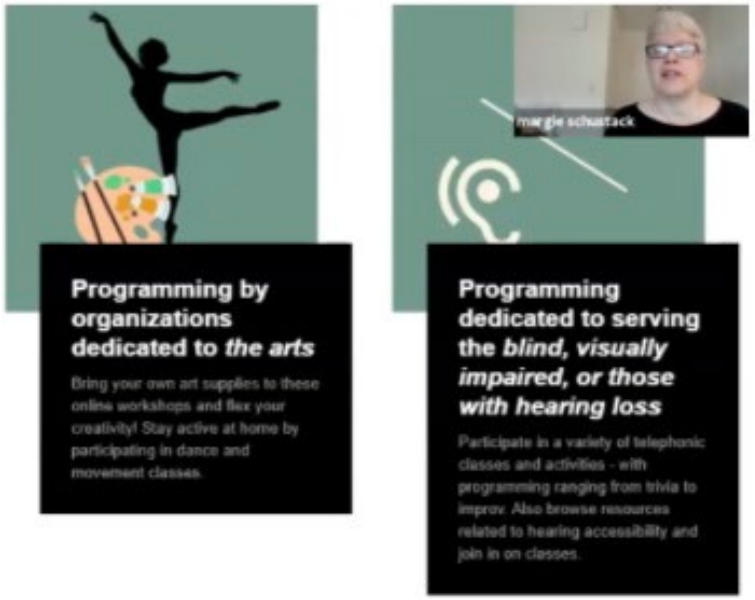
In 2020:

Senior Planet hosted 3,026 Virtual Programs





Capacit-Building training to 555 attendees



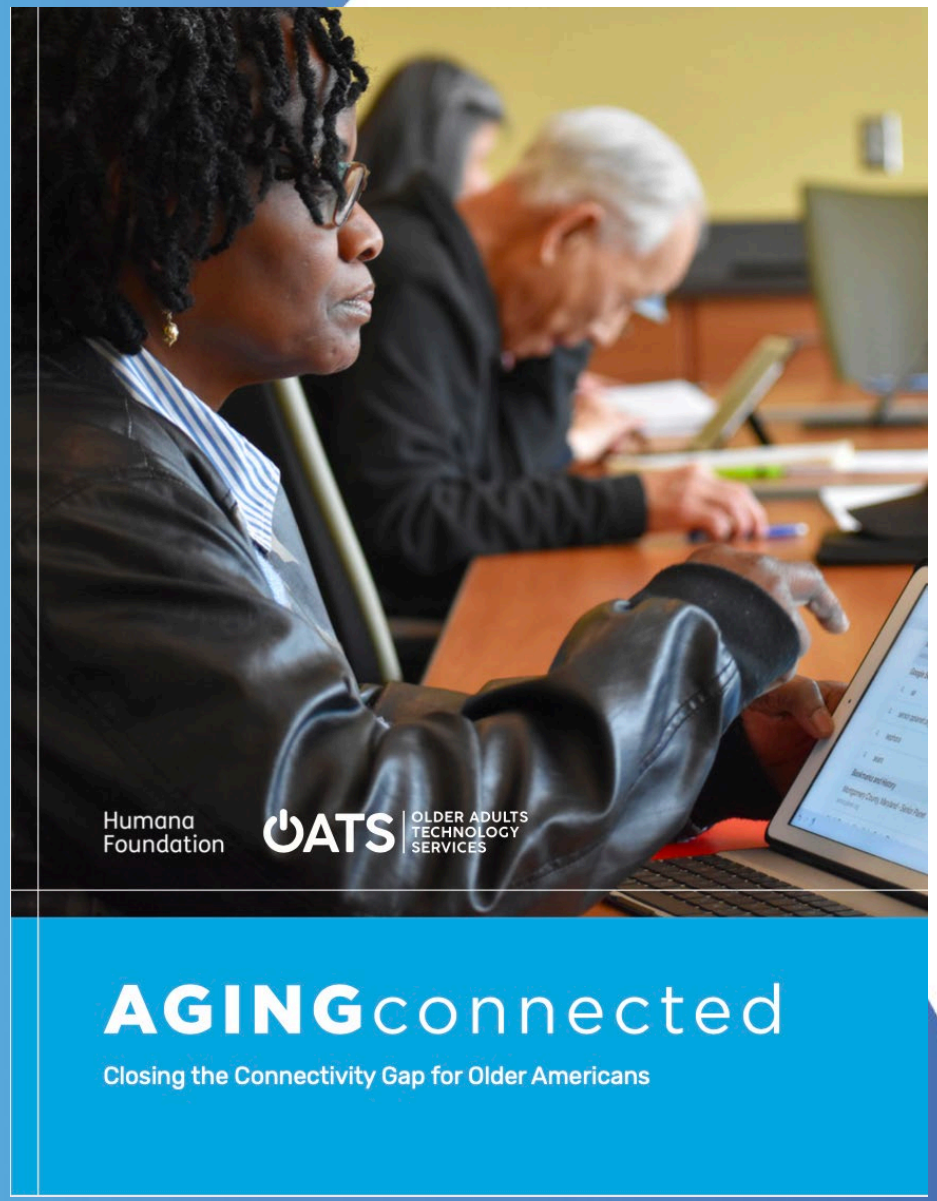
630 Hours of training for Connected NYCHA

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Survey of Senior Planet participants on value of home internet access (n=200).



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FROM AARP



Introducing Aging Connected:

- www.AgingConnected.org
- Increased awareness
- Expanding supply
- Consortium partnerships
- Senior Planet programming

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FROM AARP

Aging Connected:
A National Campaign to Close the Technology Age Gap

21.8 million older Americans offline at home.

Digital disconnect is most severe for:

- **low income (10X more likely to be offline)**
- **less education (17X)**
- **Black/Latino (~3X)**
- **poor health/disability/mental health (1.5 - 3X)**
- **rural or living alone (1.6 - 2.7X)**

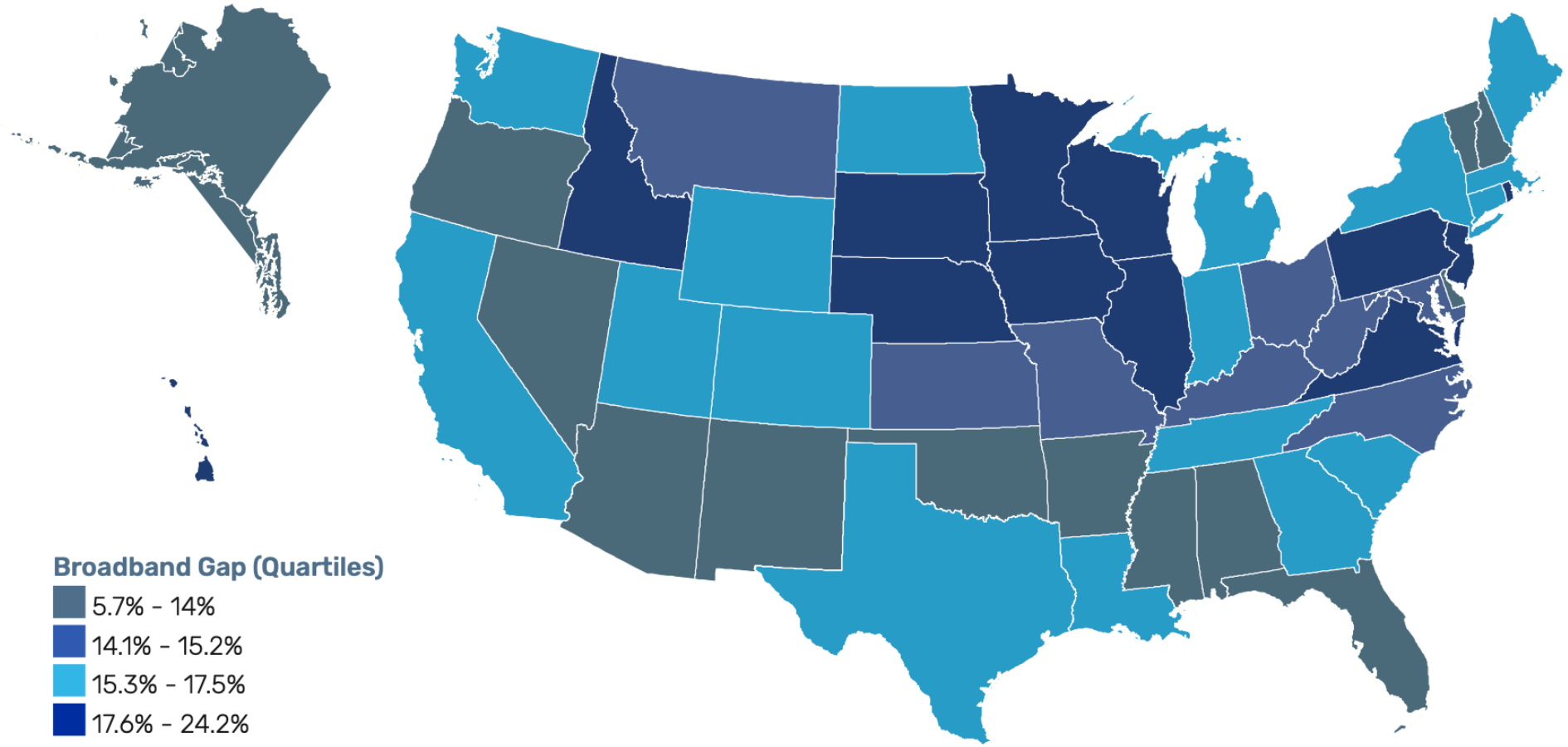
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Closing the Digital Divide: A Social Justice Crisis

- Existing subsidy programs are patch-work and provided by telecoms companies
- Seniors' eligibility ranges from 53 percent (Comcast) to 2 percent (Charter), and many firms offer no low-cost options for older consumers
- One-third of seniors who are offline would not qualify for means-tested programs
- Wide variation in the age gap by state

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FROM AARP

Home Broadband Gap by State and Age



Smallest Gap	Age 18-64	Age 65+	Broadband Gap
Alaska	69.4%	63.7%	5.7%
Nevada	74.5%	64.4%	10.0%
Arizona	72.9%	62.0%	10.8%
Vermont	74.2%	63.4%	10.8%
Florida	75.0%	64.1%	10.9%

Largest Gap	Age 18-64	Age 65+	Broadband Gap
Wisconsin	73.2%	53.3%	19.9%
Pennsyvalnia	77.7%	57.6%	20.2%
Minnesota	76.6%	56.0%	20.6%
Nebraska	75.5%	54.1%	21.4%
District of Columbia	81.0%	56.8%	24.2%

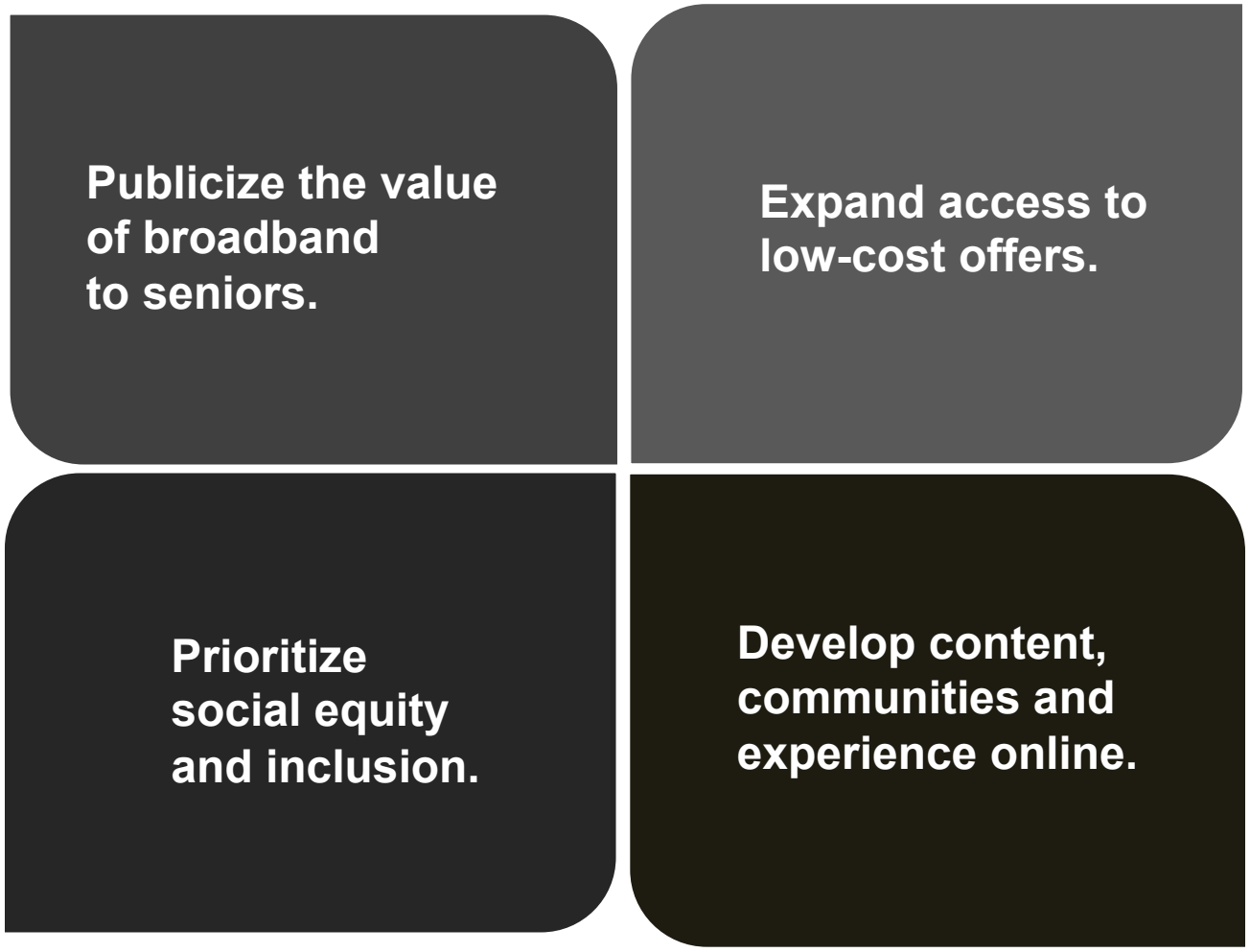
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The Risks of Digital Isolation Amid COVID

- 80% of COVID deaths have been older Americans
  - About 40% of them likely lacked access to online resources like telemedicine and social connectedness.
- Seniors need to get connected to access vaccine appointments and tele-health resources.

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Four Paths Forward



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Building an Online Community



- Spanish club, open threads, and daily morning stretch classes.
- Senior Planet Montgomery County launches first 5-week virtual course.
- Building confidence when navigating the internet.
- Spotting scams, banking online, navigating telehealth applications, etc.

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AARP Affiliation

As of January 1, 2021, OATS will be joining the family of AARP affiliate nonprofits, allowing us to accelerate our growth and impact.

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THANK YOU



www.oats.org
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LI: @OlderAdultsTechnologyServices

www.seniorplanet.org
FB: @SeniorPlanet
TW: @SeniorPlanet
IG: @senior.planet

OATS FROM AARP | OLDER ADULTS TECHNOLOGY SERVICES

The Healthy Community Living Project



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Presentation Overview

- Healthy Community Living
- Technology Use & Support Based on Healthy Community Living
- Barriers to Accessing Technology
- Data Analysis
- Concluding Thoughts

Healthy Community Living

- Healthy Community Living is a NIDILRR funded project, in the second year of the evaluation when the pandemic began
- 80 Consumers at CIL's were participating in health promotion workshops in-person with a CIL staff member
- After a two week break, 63 (79%) of those consumers decided to continue the workshops with the CIL staff member on Zoom
- 56 of the 63 (89%) individuals who started the workshop on Zoom with our team finished an 11-week (meeting once per week for about 2 hours) program and completed our post-survey
- CIL staff worked with their consumers to help them with get online and using zoom to continue with their workshops
- Anecdotally based on our experience moving individuals to an online platform this suggests just getting online may be challenging but having a reason, like a workshop or to join a group may provide increased motivation

Technology Support Provided by Our Program

- We have wi-fi tablets and tablets with data plans that can be sent out to consumers on loan for use during the program
- Some CIL's chose to purchase their own tablets or iPad for loan to their consumers
- The cost for tablets is minimal, we have experience very good return rates and the benefits of having technology for individuals has been very beneficial
- Thus far the loan programs have been very successful in helping individuals access technology and learn more about technology use as they participated in the program
- Peer Support has been a large component of both the individuals participating in the workshop learning more from one another as well as the CIL staff
- Our team hosts a weekly call with the CIL staff to discuss many of these issue, and provide peer support to one another around the workshop, technology, zoom, etc.

Technology Use & Supports

Meeting individuals where they are:

- Thinking about technology as a foreign language and understanding where their skills are right now – first time you are working in with this language or did you take a class in high school?
- The way people think about technology is very individual
- Lets build on what you have vs. we have a specific method for technology adoption
- Have a computer but don't use it, has a smartphone, has wi-fi but do not have access to a device
- For some individuals we started by introducing them to concept of attending a workshop via landline – conference calls, as they became more comfortable they then grew into using a device at their own pace

Barriers to Accessing Technology

- Physical Access to internet, wi-fi connections or even cellular service/data is still a large problem in our work particularly in rural areas
- Access is a huge reason we have the device loan programs but it also allows individuals to try using the device at a low stakes to them
- Additional barriers to accessing or having a computer/tablet or other device include cost, access, shopping for devices is challenging, unsure of where to start, reliance on more experienced individuals in the household who get frustrated quickly
- The idea of learning something new can be very overwhelming for individuals
- This may cause them to shy away from participation in programs, workshops, or other technology related experiences entirely

Barriers to Accessing Technology (continued)

- Being on video may introduce or trigger new social anxieties, as individuals may feel increased pressure not to make a mistake or to “do it right”
- Attitudinal barriers
  - “I’m not good at technology” – confidence and competence
  - “I scared to mess things up”
  - Overall fear of technology related to privacy, webcams or overall trust
- Social pressure is different with a webcam, it’s an inside look into your home, which you may not feel comfortable sharing with others
  - Anxieties about appearances “My hair isn’t I don’t people to see me.”
  - Privacy issues around being in the home, and others overhearing discussions

Workshop Participants – Demographics

- We collected some data about online communication and individuals comfort as the pandemic began
- Workshop participants began in-person and moved to Zoom (n =59), group who completed pre measure
- Our participants responded to the Online Communication Attitudes Questionnaire
- Demographics:
  - Participants were CIL consumers, participating in a health promotion workshop in one of the following states: New Jersey, Arizona, South Carolina, Minnesota, Missouri, Colorado, New York, Ohio
  - Average Age: 40 years old
  - 39% Male; 56% Female
  - 3% Asian, 32% African American, 46% White, 9% Other
  - 17% Hispanic

Comfort with Devices (n = 59)

- Online Rating of 5 or higher, 6 or 7 – 4 somewhat true, 7 = very true
- 60% of this sample are comfortable using a Desktop Computer
- 65% of this sample are comfortable using a laptop
- 58% of this sample are comfortable using a tablet
- 68% of this sample are comfortable using a smart phone

Online Communication Attitudes Questionnaire

- 33% of this group felt apprehensive about communicating online
- 24% felt the lack of nonverbal cues (such as eye contact, facial expression, etc.) made them feel uncomfortable
- 48% found communication online easy
- 50% enjoyed communicating online
- 50% Felt online communication was convenient

What does it all mean?

- We still have a great deal to learn about how to best work with individuals and increase technology adoption
- Individuals still face many barriers to accessing technology, these barriers can be challenging to overcome
- Those who gain access may feel apprehensive, uncomfortable or experience other barriers that need to be addressed and understood on a broader level
- Approaches that focus on the individual may provide solutions, but can also be time consuming and require a great deal of resources
- We are continuing to explore the digital divide further and try to gain an understanding of how to best support CILs in helping individuals as well as helping individuals

Nevada Ensures Support Together (NEST) Collaborative



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Nevada Ensures Support Together (NEST)

- What is the NEST Collaborative?
- Where did the NEST Collaborative get its start?
- Who do we serve?
- How do we do it?



Challenges

- Getting the word out
- Recruiting guides and volunteers
- Referral process
- Data

Lessons Learned

- Collaboration is the key
- People do not always ask for the help they need
- Online training is very effective
- Guides are very popular with our volunteers
- Use feedback and surveys to improve the process

Sustainability / Where are we headed?

- Program funding
- Program expansion to adults living with disabilities and veterans
- Updating our training materials and moving to an online learning management system
- Looking at expanding our options for Peer groups
- Researching alternate telephone call platforms
- Telehealth

Q & A

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