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What factors have impacted on older people's (75+) access/experience of public services during Covid-19?

Phase 2: Qualitative Report
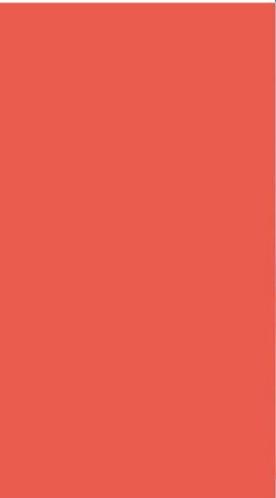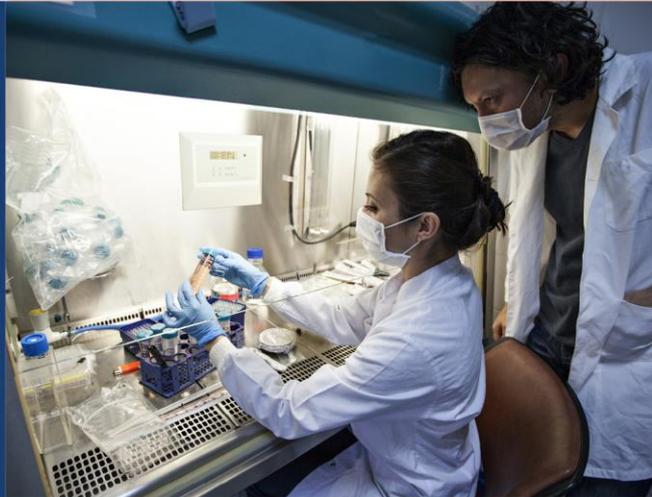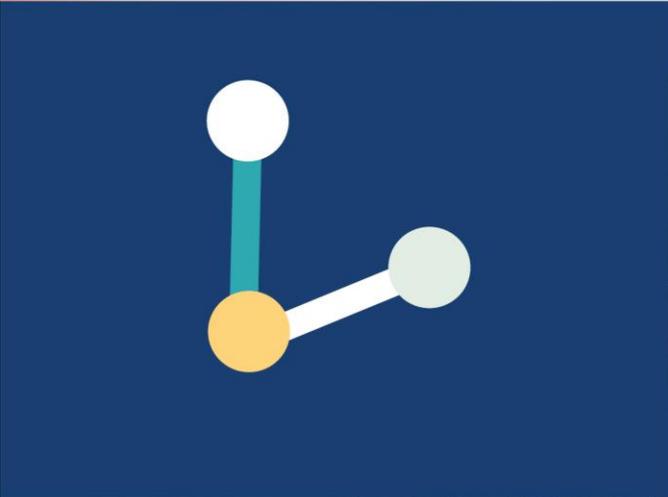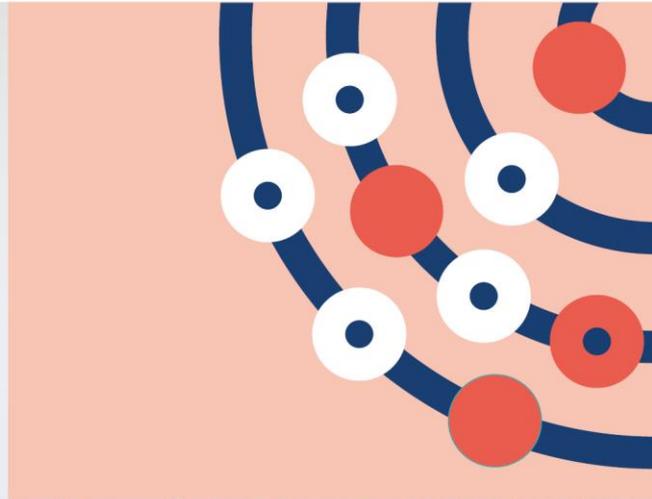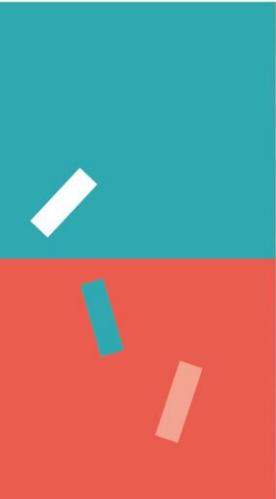
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Executive Summary

Over the past two years there has been a rapid shift towards digital services both as a result of the Covid-19 pandemic but also driven by national and regional policy. National policy including: the NHS Long Term Plan[1], Build Back Better: our plan for growth [2], Transforming public services, using technology and digital tools and approaches[3], amongst many others. The inevitability of the future digitalised life is recognised by the Greater Manchester Strategy 2021-2031 where the commitment to be 100% digitally enabled[4] sits alongside the Mayoral manifesto to provide all under-25s, disabled people and over-75s with the skills, connectivity, and technology to get online[5].

Digital exclusion affects many people; those on low incomes, those living in social housing, people living with disabilities, people in rural areas and people for whom English is not their first language, as well as other marginalised groups. Whilst all these factors are important indicators as to who is likely to be digitally excluded, age remains the biggest indicator[6], in particular older people. It is estimated that 11 million people, 20% of the UK population, lack basic digital skills. In Greater Manchester, as many of 1.2 million residents[7] are estimated to be limited digital users as a result of exclusion or personal preferences, with a substantial proportion of these being people in later life.

Project Overview

Towards the end of 2021, researchers from the National Institute for Health Research Applied Research Collaboration Greater Manchester (NIHR ARC-GM) Healthy Ageing theme at the University of Manchester began working on a project to gather insight around factors that may contribute to older adults (75+) digital participation in GM. This was directly aligned to the ambitions of the GM Digital Inclusion Action Network, chaired by the Mayor, with a view to enabling a greater understanding of digital inclusion and exclusion of older residents.

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[1] NHS Long Term Plan 2019
[2] Build Back Better: our plan for growth (March, 2021)
[3] Transforming public services, using technology and digital tools and approaches, Local Government Association (2014)
[4] Greater Manchester Digital Inclusion Agenda - collaborating to fix the digital divide, cited https://www.greatermanchester-ca.gov.uk/what-we-do/digital/digital-inclusion-agenda/ accessed 28.04.22
[5] Greater Manchester Strategy 2021-2031
[6] A blueprint to fix the digital divide, The Good Things Foundation (September 2021)
[7] New Digital Inclusion Taskforce launched to tackle the digital divide across Greater Manchester, https://www.gmcvo.org.uk/news/new-digital-inclusion-taskforce-launched-tackle-digital-divide-across-greater-manchester accessed 28.04.2022

The project was delivered in two phases. Firstly, a rapid review which integrated the latest evidence from a broad range of sources and summarised key issues regarding older adults' digital skills, internet use, non-use and disengagement. For more information see Older People's Access to Digitalised Services - a rapid review. Secondly, a series of interviews were undertaken with a range of older adults aged 75+ years and with digital community support officers based in GM, to explore issues around digital participation. This report focusses on the second phase of this project.

Summary of Findings

26 interviews were conducted in total; 24 with older adults aged 75+ (which included 2 pilot interviews), and 2 with community digital support officers. 14 of the 24 (58%) respondents were female and the mean (average) age of respondents was 81 years (range 75 to 91 years). 23/24 (96%) of the respondents were white, 1 respondent was of South Asian background; the number of older adults by GM geographical area is as follows: Trafford (7), Stockport (6); Rochdale (6), Manchester (5); interviews lasted on average 23 minutes (range between 8 min – 60 min).   Of those respondents who were either participating digitally or who owned hardware (20/24), over half (11) preferred to use tablets / iPads (often with smartphone use for outside the home), a quarter preferred laptop (5), 2 respondents used smartphones only, and 2 preferred desktop computer use.

Key Themes
The following themes and sub-themes have been identified through the analysis.

Initial motivation to participate digitally
- Connecting socially with friends and family was a motivational factor that led to older adults' willingness to participate digitally.
- Being given hardware by family and friends was a further influencing factor – tablets were preferred by participants.
- Accessing services online was convenient, in particular when ordering prescriptions and for online shopping.

Narrow use and restriction of activity online
- The majority of participants' (around 75%) online activity can be described as 'narrow'[8] users - undertaking between 1-4 activities online.
- Online activity and skills were often limited to this 'narrow' use with little interest in further skills development to enable broader use.
- Within the defined narrow online activity, older adults only carried out tasks they were comfortable doing, these were often very specific and potentially limited – e.g. only using online banking to check balance.

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[8] Ofcom (2019) Adults' media use and attitudes. https://www.ofcom.org.uk/research-and-data/media-literacy-research/adults/adults-media-use-and-attitudes

- Limited use was linked to confidence in skills but also lack of knowledge of data protection and fear of scams.

Public services and freedom of choice
- There was very little use of online public services by participants other than for ordering repeat prescriptions.
- There was consensus that alternatives to digital access must be provided by public service organisations and these needed to be inclusive and accessible.

Impact of digital participation on well-being
- Too much digital participation was seen as potentially leading to loss of social interaction, in particular the widespread use of smart phones and impact on everyday interactions that occur spontaneously (e.g. on a bus or train).
- Not being online was also described as being good for physical and mental health. Going out to make and attend appointments, the physical exercise involved in shopping, as well as making oneself use their brain to recall information (rather than an internet search engine) were listed as non-digital benefits.

The 'last generation'
- The pandemic has done little to close the digital divide but rather may have amplified it, in particular levels of hard (never used or no access) and soft exclusion (engagement, skills, confidence).
- Inaccurate perceptions of younger generation's ability and fluency in digital technology use resulted in older adults feeling less confident and deskilled.

Making digital accessible
- One-to-one sessions and on-going support were identified as important enablers for encouraging older adults to engage with and to develop digital literacy and skills.
- Learning about and using accessibility features that were embedded in digital software programmes (font size adjuster, text reader, microphone, etc.) were valuable for older adults who experienced changes in senses or dexterity due to health conditions.

Next Steps and Recommendations

Although this research was relatively small in numbers, it does focus on older people who are aged 75+ (average respondent age 81), who are typically under-represented and seldom heard especially in digital arenas. Therefore much remains to be considered when developing policy and practice solutions to ensure digitally inclusive and accessible services for our ageing population. The rapid shift to digital services both throughout the pandemic and also as a driving force for future public services, National Health Service transformation, economic growth and related opportunities, are examples of where the needs and preferences of older people must be thought through. Mitigation against digital exclusion features in one of the

five strategic priorities to reduce health inequalities across England[9] and as such, it is vital that the experience and preferences of residents from across the life course are considered.   Here are some specific recommendations for policy makers and practitioners:

- Over-75-year-olds are not an homogenous group, therefore the importance of providing public services access both digitally, but also inclusively with non-digital options being available, is vital to ensure digital inequalities are not further exacerbated.
- Building confidence in online activities is essential and includes activities such as claiming pensions and banking. This should include the delivery of task focussed support to develop skills; this needs to be repeated in line with technological developments.
- The role of the communications and messaging around digital technology use needs to be addressed effectively. Communications should focus on tackling older people's concerns over scams, data protection as well as redressing the young-age bias in technology advertising.
- Consideration of the impact of digital technology on other policy ambitions is vital. For example, strategic objectives to enable older people to be more active or approaches to reduce violence in the home may be compounded by a shift to digital only appointments.
- Further learning across the realm of digital technology provision to understand what works could inform future development of accessible digitalised services, in particular further understanding of acceptance and use of online prescription ordering in over-75s.

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[9] NHS 2021/22 Priorities and operational planning guidance: Implementation, March 2021

Main Report

Introduction and Context

Over the past two years there has been a rapid shift towards digital services both as a result of the Covid-19 pandemic but also driven by national and regional policy. National policy in this space includes: the NHS Long Term Plan[10], which commits to digitalising the entire NHS by 2024; Build Back Better: our plan for growth[11], which places technology at the heart of economic growth and opportunity; Transforming public services, using technology and digital tools and approaches [12] , which demonstrates the financial saving linked to digital tools and technologies for local authorities, amongst many others. In 2025 the public telephone network will be switched off[13], with progression to newer digital technologies that use broadband connection for phone calls becoming the only option to make a phone call. The inevitability of the future digitalised life is recognised by the Greater Manchester Strategy 2021-2031 where the commitment to be 100% digitally enabled [14] sits alongside the Mayoral manifesto to provide all under-25s, disabled people and over-75s with the skills, connectivity, and technology to get online[15].

As a result of the pandemic and rapid move to digital by default, there has been a significant rise in research and insight showcasing the digital divide. Digital exclusion affects many people; those on low incomes, those living in social housing, people living with disabilities, people in rural areas and people for whom English is not their first language, as well as other marginalised groups. Whilst all these factors are important indicators as to who is likely to be digitally excluded, age remains the biggest indicator[16]. It is estimated that 11 million people (20%) of the UK population lack basic digital skills. In Greater Manchester, as many of 1.2 million residents[17] are estimated to be limited digital users as a result of exclusion or personal preferences, with a substantial proportion of these being people in later life.

Throughout the pandemic and due to repeated lockdowns, there has been an increase in the use and provision of digital services, and some permanent moves to

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[10] NHS Long Term Plan 2019
[11] Build Back Better: our plan for growth (March, 2021)
[12] Transforming public services, using technology and digital tools and approaches, Local Government Association (2014)
[13] The future of fixed telephone services, policy positioning statement OFCOM (2019)
[14] Greater Manchester Digital Inclusion Agenda - collaborating to fix the digital divide, cited https://www.greatermanchester-ca.gov.uk/what-we-do/digital/digital-inclusion-agenda/ accessed 28.04.22
[15] Greater Manchester Strategy 2021-2031
[16] A blueprint to fix the digital divide, The Good Things Foundation (September 2021)
[17] New Digital Inclusion Taskforce launched to tackle the digital divide across Greater Manchester, https://www.gmcvo.org.uk/news/new-digital-inclusion-taskforce-launched-tackle-digital-divide-across-greater-manchester accessed 28.04.2022

digital-only services. Many social, cultural, and economic activities have transitioned to online platforms[18], such as for booking appointments or tickets, while many Covid-related initiatives such as booking and recording tests were also provided digital-first. In the knowledge that older adults were those most affected by digital exclusion, the Greater Manchester Ageing Hub worked with system partners, including the University of Manchester, to deliver printed resources aimed at older people through the Keeping Well at Home (and subsequent Keeping Well this Winter) campaigns during the pandemic.

The campaign was evaluated during the summer of 2021 (for full report see here) and included a postal survey sent to older people across Greater Manchester who had received copies of the Keeping Well booklet. In addition to questions about the booklet content, residents were also asked about use of the internet and preferences for paper or digital resources. Almost 500 survey responses were received with 86% of the respondents being aged 70 years and over at the time of the questionnaire. Of those aged 70 and over, 56% did not have access to the internet; this figure increases to 61% for over 80-year-olds.

The top 5 most frequently reported reasons for not having access to the internet were *'have no computer', 'just not interested', 'don't know how to use the internet', 'worry personal details will be stolen', and 'too difficult for me'*. When asked how older adults would prefer to receive health and well-being information, 93% of the over-70-year-olds who provided an answer said they preferred to receive paper-based information through the post. The evaluation challenged the growing trend towards communicating just through digital channels and emphasised the need for tailored paper-based material for older adults. The evaluation revealed that not everyone is online and those older people who are online do not necessarily access health information digitally. Therefore information, support and services must be made available in an offline format and proactively disseminated to reach those who otherwise would not have access to it.

Building on this work, towards the end of 2021, researchers from the National Institute for Health Research Applied Research Collaboration (ARC-GM) Healthy Ageing theme at the University of Manchester began working on a project to gather insight around factors that may contribute to older adults (75+) digital participation in GM. This was directly aligned to the ambitions of the GM Digital Inclusion Action Network, chaired by the Mayor, with a view to enabling a greater understanding of digital inclusion and exclusion of older residents.

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[18] Bridging the divide: tackling digital inequality in a post-pandemic world, Fabian Society, April 2022.

Project Overview

The project sought to gain insight into factors that might have had an impact on older adults' access to, and experience of, digital public services during Covid-19; this was undertaken in two phases. Firstly, via a rapid review which integrated the latest evidence from a broad range of sources and summarised key issues regarding older adults' digital skills, internet use, non-use and disengagement. The review spotlights implications for older people from increased digitalisation in three key areas of society: ***health and care services, financial services and public services***. For more information and findings from this initial phase please see Older People's Access to Digitalised Services - a rapid review and accompanying presentation Factors impacting on older people's (75+) access/experience of digitalised public services during Covid-19.

Secondly, a series of interviews were undertaken with a range of older adults aged 75+ years and with digital community support workers based in GM, to explore issues around digital participation. The aim of the second phase of the study was to understand what factors might have prompted an older adult to begin to participate digitally, and to understand both the barriers and enablers that might impact on older adults' access to, and engagement with, digital public services. Full details of the study design can be found in Appendix 1.

Summary of Findings – Qualitative Data Collection (Phase 2)

26 interviews were conducted in total; 24 with older adults aged 75+ (which included 2 pilot interviews), and 2 with community digital support officers. 14 of the 24 (58%) respondents were female and the mean (average) age of respondents was 81 years (range 75 to 91 years); 23/24 (96%) of the respondents were white, 1 respondent was of South Asian background; the number of older adults by GM geographical area is as follows: Trafford (7), Stockport (6); Rochdale (6), Manchester (5); interviews lasted on average 23 minutes (range between 8min – 60 min).

Of those respondents who were either participating digitally or who owned hardware (20/24), over half (11) preferred to use tablets / iPads (often with smartphone use for outside the home), a quarter preferred laptops (5), 2 respondents used smartphones only, and 2 preferred desktop computer use.

Six themes were identified as being key in understanding issues around motivation, engagement and participation for our sample of older adults; 1) ***Initial motivation to participate digitally, 2) Narrow use and restriction of activity online, 3) Public services and freedom of choice, 4) Impact of digital participation on well-being,***

5) The 'last generation' 6) Making digital accessible. These themes are discussed in further detail below.

Key Themes

1. Initial motivation to participate digitally

Family and friends: social connections

Of those older adults who were online, what the interviews revealed quite clearly was that this, often recent action, stemmed from a specific need that acted as the motivator to get online. Given the period in which the research was conducted, and the impact of the Covid-19 pandemic, it was not surprising to hear that one of the major motivators related to maintaining social connections and gaining skills to be able to connect with family and friends in other parts of the world.

In addition, family and friends were often responsible for gifting the hardware in the first place and this acted as the impetus to participate digitally; see Box 1.

"I wanted to be able to see my family who live in Belgium... and I haven't seen them for over two years now. And I have a grandson who was 12, 11 or 12 when I last saw him" (Female, 91 years, Rochdale)

"Well, I think that's (benefit of being online) vital really. It's kept me alive in that, you know, I feel as if I'm speaking to people. It's company there. I'm never isolated because I can always get in touch with somebody. So, to me, it has literally been a lifeline" (Female, 82 years, Trafford)

"But then two days before Christmas I gets a parcel, a brand new laptop from my daughter in Australia, via Amazon" (Male, 76 years, Rochdale)

"My grandson bought me an iPad when he joined BA as cabin crew and was going all over the world and wanted to show me places" (Female, 82years, Trafford)

Box 1 – Example quotes – 'family and social connections'

Convenience during lockdowns

There was also the need, and the convenience, of being able to access certain services during lockdown; in particular, ordering prescriptions and shopping online; see Box 2.

"That's the most brilliant thing I've ever used, Amazon. You don't even have to go outside the door"   (Female, 75 years, Stockport)

"And with ordering the prescription, if I didn't do it over the internet, I would have to go to the doctor's surgery which is a bus ride away" (Female, 88 years, Manchester)

Box 2 – Example quotes – 'convenience during lockdown'

2. Narrow use and restriction of activity online

In their research, Ofcom categorises internet use among adults in the UK as either 'broad', undertaking between 10-15 activities, 'medium' users, undertaking between 5-9 activities or 'narrow' users, undertaking between 1-4 activities[19]. Older internet users are more likely to be narrow users with over half (54%) of those 75+ engaging in only one to four activities[20]. Many of the older adults we interviewed would be classed as narrow users in this sense. It became clear during the interviews that once the initial need had been met and they had gained the necessary skills to complete an activity, older people were often not interested, or were somewhat reluctant, to undertake additional tasks and activities online. The interviewees were happy to maintain the skills and knowledge gained to undertake the tasks or activity that initially prompted them to get online; see Box 3.

"I wouldn't use it for much really. I'm not ambitious about it. I have done what I wanted to do and anything else that I gained, it's a bonus" (Female, 91 years, Rochdale)

"I: Are there any tasks that you haven't yet done online that you think you might want to try or you want to do in the future?

R: No, because I can use the computer and I can use the phone and the tablet for anything that I personally need to do" (Male, 76 years, Rochdale)

"I: And are there things that you would want to do, that maybe you don't yet know how to do, or you'd need some support to be shown how to do it?

R: I don't think so. I think I do what I need to do…" (Female, 75 years, Stockport)

Box 3 – Example quotes – 'focused internet use'

In addition to being comfortable with their specific use of the internet, many of the older adults had specific tasks they would undertake online; this was the case especially for tasks such as online banking or shopping. For example, in terms of online banking, many told us that they were happy to log on and view their balance, but they stopped short of undertaking any transactions via banking apps – it was used strictly for monitoring purposes. The reasons older adults gave us for using online banking in this manner included a concern about having personal details 'out there'; of pressing the wrong button and sending the money to the wrong place; and of a fear of being a victim of scams. Often older adults told us they didn't feel confident enough in their skills and ability to perform such tasks; see Box 4.

"No, I won't do finance at all, PayPal or anything, I really don't trust it because there are so many scams around, erm, I just think it's too easy, if you press the wrong

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[19] Ofcom (2019) Adults' media use and attitudes. https://www.ofcom.org.uk/research-and-data/media-literacy-research/adults/adults-media-use-and-attitudes

[20] file://nask.man.ac.uk/home$/Downloads/GT-DN-UK-Graphics-7283_Digital_v2VL.pdf

[21] Bridging the divide: tackling digital inequality in a post-pandemic world, Fabian Society, April 2022. https://fabians.org.uk/wp-content/uploads/2022/04/Bridging-the-Divide-web-file-Fabian-Society.pdf

button and its gone to Timbuktu, no I definitely won't have anything to do with online banking, and it's a shame because I know that I would shop online and it would save a trip to the Post Office or the bank or whatever, but I just wouldn't trust it…" (Female, 79 years, Manchester)

R…I know I've got the banking online on the tablet if I want to use it for transactions, but I'm just quite happy seeing what I've got at the moment. I don't really feel confident enough to do transactions. I always worry, god if I do something wrong, I'm in trouble.

I: That's what I was going to say, you're worried that you might press the wrong button or send it somewhere where…?

R: Absolutely, yeah" (Female, 76 years, Stockport).

"I just feel as though I don't want to be divulging too much information about myself to the wide world, if you know what I mean" (Female, 87 years, Rochdale)

Box 4 – Example quotes – 'restricting activities online'

In our interviews with community digital support officers, fear and concerns around the safe sharing of personal information online was highlighted as a key barrier to engagement with older adults. In particular, the reporting of media stories highlighting scams and frauds was deemed to be unhelpful in overcoming this barrier. The community digital officers were aware of the need to inform people of the potential risks, but "*more positive campaigns about (the benefits of) using the internet (for older people) are needed*" as the negative stories reported on television deters older adults from benefitting from the services that are available online (Digital support officer 2). The word 'scam' really *"puts fear into older persons"* and the media *"cherry pick"* the very worst scams to report to the point that people are convinced that these are happening on their very doorsteps – "*…and this no joke, I have had people say to me that they think there are people outside their house on a laptop in their car, you know they are parked on the street trying to use their Wi-Fi to scam them. That sort of thing*" (Digital support officer 1).

3. Public services and freedom of choice

It was anticipated at the start of the fieldwork that the interviews would explore older adult's access to, and experience of, digital public services and how the Covid-19 pandemic might have affected this. What the interviews revealed however, was that there was very little in the way of interaction with public services online. Respondents were not motivated to get online in the first place to access public services, and once online, they did not tend to use these services. The one exception to this appears to be ordering prescriptions. When asked why they preferred to order prescriptions online, some of our older adults commented that the system is "*straightforward to use*" and that they "*find it very useful*" to be able to

order online: some noting that if they didn't do it online it would involve them going to the surgery "*which is a bus ride away*".

When asked about the prospect of more public services (for example, blue badge applications, passport applications, driving licenses, benefit applications etc.) going online, the majority of respondents – both those who use the internet and those who do not – were in consensus that digital shouldn't be the only option provided by organisations to access a service for a variety of reasons; see Box 5. This echoes the recommendations put forward in the Keeping Well at Home Evaluation and as a key issue highlighted in the Phase 1 Older People's Access to Digitalised Services – A rapid review that public communications should be as inclusive as possible as a 'digital by default' approach excludes large numbers of our population.

"No, what I do is there's usually a telephone number – sorry, I – well, sometimes there's a telephone number. The jabs that I had, it was telling me to go online, that's an example, and I phoned up my doctors surgery and said, look, I can't go online, right, so they did the appointment for me. And also I had a bit of an argument with Boots and other stores like Boots because the flow thing, you know the flow thing, you've got to go online although you didn't get any because they were sold out, they were out of them all the time…

I: Oh, the tests.

R: Yeah, yes, and I said, it's just ridiculous, nobody thinks about the older people" (Male, 83 years, Trafford)

"R: Personally I don't think you can beat seeing the doctor face to face, they can pick up on your body language, colour of your skin. I think there's lots of things that you can pick up on face to face. So, I do think seeing the doctor face to face is essential for the majority, I really do. I think going online for some things is good, but I do think if you're not very sure about what you're doing, I think…I would imagine it could cause a lot of stress, if there's no alternative.

I: So, you feel like maybe there should always be an alternative?

R: Oh, yeah, definitely. I don't think people should be pressurised into feeling their only option to get help or complain or get things done is by going online. Because for a start a lot of people haven't got computers. So, that would leave it open that you've got to ask someone for help or someone who has a computer, ask them to do it for you. I think it's a wonderful thing, saves a lot of time, but I do think this computerisation of society has a downside" (Female, 76 years, Stockport)

Box 5 – Example quotes – 'digital not the only option'

4. Impact of digital participation on well-being

Social interaction. For some respondents who were not digitally engaged and had no interest in getting online, social connections and social interaction were cited as a reason not to engage digitally; see Box 6. Although an initial motivator for some,

other respondents spoke about how too much digital participation had led to a loss of social interaction; see Box 7.

> *"No, I just think I've never been interested. I feel that if I did use something I'd be on my own doing it, and I don't like being on my own. Years ago I had one of these knitting machines and I had it for a while, and I hated it because it meant I was sat on my own knitting, and I don't want to do that. I like to go out and meet people while I can"* (Female, 90 years, Manchester).
>
> *"This is the problem, lots of people don't talk anymore. They know…they don't know any other way of corresponding, getting in touch with people. I mean they go on the internet. They text, they don't talk….I mean you go out for a walk and you can more or less guarantee at least 50 per cent of people walk around with their phone"* (Male, 83 years, Stockport)

Box 6 – Example quotes – 'loss of social interaction' (unengaged older adults)

> *"What I don't like is they're always on it. They come and I say, right, put your phone away, because they sit there looking at their phone all the time, don't they?*
>
> *I: Yeah.*
>
> *R: I think its spoiled sociability. I think it's horrible the way they're all on their phone"* (Female, 81 years, Stockport)
>
> *"And last week, I was sat on the train, … and every person in that carriage was looking at a phone …. Every single…at one time there'd have been somebody reading the paper, a couple of women that travel together, talking, you know, and somebody else up there chatting. There wasn't one sound in that carriage, because everybody was looking at a phone, without exception.*
>
> *I: And do you feel that's a bad thing then, that people are not chatting and…?*
>
> *R: Oh, I do, yeah. Sometimes, I think, you know, down the road, I think some of these kids won't even know how to speak their own name"   (Female, 75 years, Stockport).*

Box 7 – Example quotes – 'loss of social interaction' (engaged older adults)

Physical and mental well-being. There were also instances wherein the respondents spoke about digital participation in relation to aspects of physical and mental well-being. For example, for some, not using online services, e.g. to make a GP appointment, was seen as positive in that they had to get '*out of the house*' and in doing so, had the benefit of getting '*a little bit of exercise*'. For others, there was the acknowledgement of the advantages of being able to shop online during lockdowns, but now that restrictions had lifted, they had reverted to their preference to shop in person. Again, participants often stating that going out was beneficial to them in terms of their health and well-being and getting '*a bit of exercise*'; see Box 8. Other respondents talked about how it was sometimes '*too easy*' to depend on the internet

to find out information that they couldn't immediately call to mind, and this was spoken about in terms of brain health and keeping the mind active; see Box 8.

> *"I: So, in terms of doctors appointments and things, you can still get to the surgery or you could ring. Is that something that you prefer to do?*
>
> *R: Yes, I can ring on my landline and talk to a receptionist, or just toddle myself down to the surgery and go face to face with them, you know.*
>
> *I: Yeah, yeah.*
>
> *R: Not that I would get an appointment any quicker with the doctor but, you know.*
>
> *I: Yeah, it doesn't stop you from getting an appointment.*
>
> *R: No, no. And it gives me a little bit of exercise" (Female, 79 years, Trafford)*
>
> *"R: I've gone back to going out because you get a little bit of exercise, you know. So yeah, I don't shop for groceries online anymore, no, I always go to the shop" (Male, 76 years, Trafford)*
>
> *"…a couple of days ago, it sounds ridiculous this … I thought, what's the name of that pub at the top of Lancashire Road? I mean, what the hell I thought about that for, and I could not for the life of me, and I thought, no, Susan, remember it, because you do know it. And this morning, it's come to me, The Hinds Head it's called.*
>
> *I: Okay, so you resisted the urge to find out?*
>
> *R: I did, yes, I did. I thought, no, that's too easy" (Female, 75 years, Stockport)*

Box 8 – Example quotes – 'physical and mental well-being'

5. The 'last generation'

The pandemic and its successive lockdowns have moved much public and social activity online. Data[21] reveal that in terms of 'hard' exclusion (e.g. never having used the internet or having no internet access), the changes driven by the pandemic have improved this situation for some groups (general population). However, in terms of improving the more 'soft' areas of exclusion (e.g. improving digital engagement, skill level or confidence), the pandemic has done little to close the digital divide, particularly for older adults. During the course of the interviews, many older adults, particularly those not online, spoke in terms of generational issues and how they felt they might be the 'last generation' to experience difficulty with digital participation; see Box 9. It was not clear whether they attributed these feelings to the impact of the pandemic as such, or to the impact of a more general trend towards digitalisation over a greater time period. However, the rapid development of technology combined with an individual's changes in physical health has been shown to worsen feelings of

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[21] Bridging the divide: tackling digital inequality in a post-pandemic world, Fabian Society, April 2022. https://fabians.org.uk/wp-content/uploads/2022/04/Bridging-the-Divide-web-file-Fabian-Society.pdf

being unable to keep up or feeling too old to embrace the new technology among older adults[22]. It therefore seems plausible to suggest that the rapid increase in digitalisation during the pandemic may have exacerbated these feelings of being left behind. It is important to note that participant's perception that all younger people are fluent technology users is inaccurate and may be driven by a broad range of factors including media representation, ageism and other social constructs related to digital inclusion and exclusion.

> *"But I do think that we're the last generation, almost the last generation that this will affect. Because from being babies now they have iPads now and what-have-you, don't they? It's just second nature to them. It puts you to shame when you watch them" (Female, 81 years, Stockport)*
>
> *"R: well, do you know what, to be honest with you, I could say I'm at the end of a generation. Because if you think of the youngsters today now and you think of…like my sons have no problem with this, that's another generation, and then the one below that is the youngsters, yeah, this will never happen again…*
>
> *I: Do you think it…?*
>
> *R: …it's unlucky, I'm at the end of a generation" (Male, 83 years, Trafford)*
>
> *"The youngsters, from school onwards, they know nothing but the internet. So everything is being geared towards them. And we older people, in my generation, have had to start learning various things which become harder and harder. It's second nature to younger people, to the 30s, 40s" (Male, 83 years, Stockport)*

Box 9 – Example quotes – 'the last generation'

6. Making digital accessible

For those adults who were online and participating digitally, the interviews discussed a number of barriers and facilitators that might require consideration in order to keep older adults engaged. Most of these are very practical considerations; many of which have been recommended in a recent piece of work around 'Doing Digital in Later Life'[23]. In particular, older adults told us having someone who is patient with them as they got to grips with tasks online was extremely important; also, being able to write instructions down and being shown the same task numerous times was important. Older adults valued the one-to-one support given to them but stressed this needed to be ongoing support, noting that sometimes, they would "get the hang of" one task (for example shopping online) only to find that the next time they log on to that website, the landing page may have changed and this would 'throw them off' and they unsure whether they could continue as they had been shown; see Box 10.

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[22] Jari Pirhonen, Luciana Lolich, Katariina Tuominen, Outi Jolanki, Virpi Timonen, "These devices have not been made for older people's needs" – Older adults' perceptions of digital technologies in Finland and Ireland, Technology in Society, Volume 62, 2020, https://doi.org/10.1016/j.techsoc.2020.101287
[23] Doing Digital in Later Life (May 2022) The Good Things Foundation/GMCA

> *"I'd love someone to sit and show me so I can write it down and if I get stuck I know how to do it myself"* (Female, 82 years, Trafford)
>
> *"She writes things down for me, because I can't always remember what I've been told. If I've got it there in black and white then I can follow it. It does help"* (Female, 76 years, Manchester)
>
> *"Yeah, sometimes it doesn't click immediately and you need them to go over it again. So you need somebody who's got a little bit of patience"* (Male, 78 years, Trafford)
>
> *"…I could do this before and now I'm having too many problems. And it's the same with…so what it is is what they call navigating the website becomes more difficult when they change the format, and that I find very, very annoying."* (Male, 75 years, Manchester)
>
> *"You know, the system I have for my laptop, when they start changing things I get very annoyed and I think, oh, I've got to figure out how to get out of that or whatever it is, yes…I'm just getting really annoyed when I have to figure out how all of these things work again."* (Female, 76 years, Manchester)

Box 10 – Example quotes – 'making digital accessible'

In addition to covering practical issues around barriers and enablers, we also asked respondents about any physical impairments that might currently (or potentially in the future), make digital participation difficult. Arthritis, cataracts, Parkinson's, diabetes and tremors were all listed as having an effect on current internet use. In terms of future impact, whilst acknowledging uncertainty about how this could develop – "my eyes are not great. Yeah, I don't know how that's going to go" (Female, 76 years, Manchester) - many of the respondents were quick to point out potential solutions to overcome these; for example, some had already been shown how to locate and use the microphone function in Google assistant; how to use predictive text, and how to increase the font size of the text on the screen. Many of the respondents had already taken these issues into consideration when deciding on type of device to use. Over half preferred to use tablets and this was for a number of reasons, including their portability – "*I also like the fact that I can have it on my knee in the lounge or the chair that I'm in*" (Female, 82 years, Trafford) and ease of use, for example, being able to put the tablet on a stand instead of having to hold it, as you would with a smartphone – "*the other one that she brought was an old one and it was heavy and I couldn't hold it because you had to hold it like a mobile phone, so that meant that I wasn't using it as much. But this one's got a stand with it. It's a bigger one, with the stand with it*" (Female, 87 years, Rochdale).

Discussion and Recommendations

The above discussion has focused on 6 themes that our interviews identified as being key in understanding both the motivation and levels of digital participation and engagement for the older adults included in this project. In the course of the interviews, we also covered many issues that have been highlighted in the existing literature (and therefore we believe there is no need to repeat here) which continue to be important areas when it comes to understanding digital participation and older adults; for example, barriers around cost[24], skills and confidence [25] [26] and the importance of continued support.[27] [28]

One of the key insights identified from speaking to these over-75-year-olds is that it is actually very difficult to categorise them as one type of user versus another. Research conducted by the Good Things Foundation and the Centre for Ageing Better[29] offers a useful way to attempt to understand the different 'types' of older adult in terms of digital participation – as either 'Engaged', 'Disheartened', 'Transitional' or 'Uninterested' (see Older People's Access to Digitalised Services - a rapid review for more information). A large proportion of older adults interviewed for this study could be classed as digitally 'engaged' in the sense that they were keen to go online and felt capable of learning and had many of the skills deemed 'essential'[30] for digital participation, however, it was not possible to map these older adults to one 'type' as there was often an overlapping of categories (particularly 'Engaged' and 'Disheartened') which required a more nuanced understanding of what digital participation means for some of our older adults (see Box 11 for examples). During discussions around the motivations behind getting online for our older adults, (particularly during the pandemic), the initial 'engagement' was evident; however, this engagement for many appeared to ebb away and subsequently, many of them fitted the descriptions for other categories, e.g. 'disheartened' users. While many of our older adults admitted a perceived value to accessing the internet and participating digitally (i.e. 'Engaged'), often a lack of confidence, or a lack of support, or a fear of sharing information online would result in them disengaging from internet

[24] AgeUK Briefing Paper
Digital inclusion and older people – how have things changed in a Covid-19-19 world? (2021) https://www.ageuk.org.uk/latest-press/articles/2021/nearly-two-million-over-75s-in-england-are-still-digitally-excluded--in-a-Covid-19-19-world/
[25] https://www.ageuk.org.uk/globalassets/age-uk/documents/reports-and-publications/age_uk_digital_inclusion_evidence_review_2018.pdf
[26] Ofcom. 2021. Digital Exclusion Survey 2021. https://www.ofcom.org.uk/about-ofcom/latest/media/media-releases/2021/digital-divide-narrowed-but-around-1.5m-homes-offline
[27]https://www.onlinecentresnetwork.org/sites/default/files/a6_your_guide_to_helping_older_people_use_the_internet.pdf
[28] https://ageing-better.org.uk/sites/default/files/2018-05/The-digital-age.pdf
[29] I Am Connected: new approaches to supporting people in later life online, Centre for Ageing Better / Good Things Foundation, 2018 file://nask.man.ac.uk/home$/Downloads/cfab_report_v4_0.pdf
[30] https://www.lloydsbank.com/assets/media/pdfs/banking_with_us/whats-happening/210923-lb-essential-digital-skills-2021-report.pdf

use and not taking full advantage of services available to them (e.g. restricted use of online banking), this often led to them becoming 'Disheartened'.

Understanding that many older adults will not 'fit' into one category highlights the need for a more individualised and nuanced approach to tailoring digital support services.

Jane is 82 years old and has been online for the last 8 years, ever since her grandson bought her a tablet to keep in touch when he moved overseas.

Jane uses the tablet to FaceTime family, to read emails and to look at her bank balance online (but not undertake any transactions) – she feels like she *"muddles through"*.

Jane acknowledges that she struggles to learn to do new things and whilst her family will help, she is frustrated they tend to do the task for her, instead of showing her what to do – *"they have no patience with me"*

Jane does see a value to being digitally engaged, but lacks confidence and doesn't know where else to go for one-to-one support – *"I go onto Google... look at John Lewis... I struggle with scrolling through things... I don't think I get that right sometimes. And it just irritates me. I think, oh gosh. And I'm useless at, that's when I think, I'm useless at this, you know"*

Ian is 83 years old and lives on his own. He pays for internet connection at home, mainly for the football. He owns a tablet which can only be used at home, although rarely uses it. He admits he would like a Smartphone for when he is out and about, but says they are *"quite expensive"* and *"don't think much benefit to me"*.

He uses his tablet to read emails that are sent to him, but rarely sends emails. He admits he wouldn't purchase anything online as he doesn't know how to use it for shopping, but regularly provides his card details over the phone in order to make purchases.

Has never been on a course or had any digital support; previous attempts at logging into websites have proved *"frustrating"* as he has difficulty remembering passwords and finds the small windows of time given to log in and never long enough / he gets frozen out. This makes him disengage from trying.

Ian admits goods are probably cheaper online, but is reluctant to explore further due to past frustrations. He has support from sons if issues arise with internet connection at home.

Box 11 – Examples of overlapping categories of digital participation – 'Engaged' and 'Disheartened'

Although many of the older adults we interviewed felt they may be the last generation to experience difficulty with digital participation, we know that this is not the case. Large numbers of under 25 year olds, disabled people and 'younger' older adults still experience digital exclusion; the digital divide remains wide for many groups in society.

Much remains to be considered when developing policy and practice solutions to ensure digitally inclusive and accessible services. The rapid shift to digital services both throughout the pandemic but also as a driving force for future public services, National Health Service transformation, economic growth and related opportunities are examples of where the needs and preferences of older people must be thought through. Mitigation against digital exclusion features in one of the five strategic priorities to reduce health inequalities across England[31] and as such, it is vital that the experience and preferences of residents from across the life course are taken into account.

This study highlights a number of digital technology features that have delivered positive outcomes for people aged 75 and over. Amongst those we interviewed, there was a preference towards using tablets as well as a willingness to order

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[31] NHS 2021/22 Priorities and operational planning guidance: Implementation, March 2021

prescriptions online and do online shopping. Shared learning across public institutions on aspects of digital technology transformation that have delivered successfully for the over-75s would be beneficial. For example, what can be learnt from experience of ordering prescriptions online that could inform other public service digitalisation infrastructure and processes? There is also the importance of ensuring digitalised services are fully accessible to all including those living with long term health conditions which may impact on their ability to use digital devices (e.g. arthritis) or access content easily (websites, text, etc.). The recently published Doing Digital in Later Life [32] aligns with the findings of this research, offering practical guidance on ways in which to best address some of these issues.

When considering the wider impacts of digital technology transformation, older adults limited use of other online activities such as banking and concerns over data protection were also amplified by lack of confidence and skills. Added to this were the needs of older people to get out and to socialise, with health-related appointments, shopping and banking forming part of how participants stayed active and well in their communities. Virtual platforms provide a very limited 2D view of a person and their circumstances, for example, regular non-digital appointments and services may result in non-identified, sudden weight loss or cases of elder abuse. As such it is critical that people are encouraged to leave their homes and are able to access and attend face-to-face appointments.

Although this research was relatively small in numbers, it does focus on older people who are aged 75+ (average respondent age 81 years), who are typically under-represented and seldom heard especially in digital arenas. From the interviews it appears that the most important message is one of choice, that those aged 75 and over are not digitally homogenised but rather require a range of options that will enable them to engage in ways that work best for them.

Recommendations

- Over-75-year-olds are not an homogenous group, therefore the importance of providing public services access both digitally, but also inclusively with non-digital options being available, is vital to ensure digital inequalities are not further exacerbated.

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[32] Doing Digital in Later Life (May 2022) The Good Things Foundation/GMCA
[33] QSR International Pty Ltd. (2020) NVivo (released in March 2020), https://www.qsrinternational.com/nvivo-qualitative-data-analysis-software/home

- Building confidence in online activities is essential and includes activities such as claiming pensions and banking. This should include the delivery of task focussed support to develop skills; this needs to be repeated in line with technological developments.

- The role of the communications and messaging around digital technology use needs to be addressed effectively. Communications should focus on tackling older people's concerns over scams, data protection as well as redressing the young-age bias in technology advertising.

- Consideration of the impact of digital technology on other policy ambitions is vital. For example, strategic objectives to enable older people to be more active or approaches to reduce violence in the home may be compounded by a shift to digital only appointments.

- Further learning across the realm of digital technology provision to understand what works could inform future development of accessible digitalised services, in particular further understanding of acceptance and use of online prescription ordering in over-75s.

Future research should investigate experiences of older adults from minority ethnic groups as whilst we aimed to be as inclusive as possible in this research, recruitment during winter months was particularly challenging. It would also be advantageous to look more closely into the impact of sensory changes that can occur with age on digital inclusion, insight into preferences and experiences of older adults living with hearing or visual disabilities would be of interest.

Appendix 1 – Phase Two Study Design

Study design: semi-structured qualitative interview

Ethics approval was obtained from a University of Manchester research ethics committee (Ref: 2021-12638-21093).

Sampling, recruitment and data collection: Primary data collection was undertaken with 2 groups of older adults in GM; 1) those who were participating (to varying degrees) in digital activities and were enrolled in a local programme of learning and support, and 2) older adults who were not engaged digitally, either through choice or because of a lack of opportunity / skills / services. In addition to interviewing older adults about their digital participation, a small number of interviews were undertaken with community workers / leaders in order to learn from the approaches they used to continue to engage with their communities, particularly during covid-19.

Purposive and convenience sampling were used to identify and recruit these participants to the study. Recruitment was via a number of third-party organisations affiliated to the GMCA Ageing Hub. As a direct response to the pandemic, the Ageing Hub set up weekly meetings with key ageing stakeholders in GM in order to share insight and make sure they were working together to do whatever they could to help older adults in GM during that time.

Data were collected via semi-structured interviews with a topic guide that was developed from the key literature that informed the rapid review and from input from the project team.

All interviews were virtual (by telephone or other remote means agreed with participants) at a time convenient to them; participants gave informed consent before data collection. Data was collected between October 2021 and Feb 2022.

Data Analysis: Interviews were audio-recorded, transcribed and exported to NVivo 12 Pro software for data management. Initial thematic codes, were identified from the transcripts and indexed to develop analytical categories; these categories were reviewed and refined by the interviewer and second researcher, and any ambiguities in the coding framework were reconciled by thorough discussion. All interviews were then fully coded using NVivo 12 for qualitative analysis.