



Highlights on Internet and Medical Alert Device Use in Texas

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Background

The Texas Department of Aging and Disability Services (DADS) provides long-term services and supports for the aging and for persons with cognitive and/or physical disabilities in Texas. According to the Aging Services Technology Study submitted to Congress in 2012, using technologies for these populations can help improve health outcomes and also help them live independently. There is a growing body of research that associates the role of technology with independence, better health outcomes, lack of isolation, and also feelings of empowerment. A study submitted to Congress in June 2012 indicates that use of aging services technologies (ASTs) can help improve health outcomes, preserve individuals' ability to live independently in their homes and communities, improve care coordination, and reduce the cost of care¹. As smartphones, computers and internet devices become the norm for communication among a growing share of society older people with and those with disabilities may become isolated if they do not have access to such devices. The internet is also widely used to implementing some tools designed specifically to help the aging and persons with disabilities remain independent. Older individuals and those with disabilities can perform many tasks without leaving their homes if they are connected to the Internet.

This data comes on the heels of the recently released report of the President's Committee for People with Intellectual disabilities. The report titled "Leveling the Playing Field: Improving Technology Access and Design for People with Intellectual Disabilities" describes the critical and increase role of technology in enabling individuals with intellectual disabilities (ID) to "have greater control over their own lives and to experience the full benefits of citizenship." The three main recommendations in the report are:

- To make technology more usable and accessible for individuals with ID through increased federal research and incentives to product developers to create technology for this population;
- To strengthen federal policies to ensure individuals with ID have equal access to everyday technology;
- To increase the availability and affordability of such devices through policies and research².

DADS funded a module on technology use in the 2014 Texas Behavioral Risk Factor Surveillance System (BRFSS)³. The results of the survey were released recently and some of the highlights are presented here.

DADS funded questions in the 2014 BRFSS

The "core" BRFSS asked if the respondent uses the internet. The 6 DADS funded questions were asked of those who said they used the Internet. They are:

1. Earlier you said that you had used the Internet in the past 30 days. How many minutes or hours do you spend on the Internet in a typical week?
2. What activities do you do on the Internet?
3. Do you personally own a device that can connect to the Internet? (Probe: computer, tablet, smartphone).
4. What is the main reason you do not own a device that can connect to the Internet?
5. Do you own a device that allows you to push a button to get help or medical assistance in an emergency? (This question was asked of those ages 60 and older and/or those who said they had a disability).
6. Why do you not own a device that allows you to push a button to get help?

Here are some highlights from the survey. Please also note that the analysis is a snapshot in time and covers the period in which the survey was conducted. The survey was conducted between January and December, 2014.

Internet use

- Almost 4 out of five adult Texans had used the Internet in the past 30 days.
- 62% of Texans aged 60 and older had used the Internet in the past 30 days.
- 61% of adult Texans who have a disability⁴ had used the Internet in the past 30 days.

Table 1: Texans who had used the Internet in the past 30 days

	Percent	95% CI (Lower)	95% CI (Upper)	Sample Size
Yes	79.1	77.9	80.1	11378
No	20.9	19.9	22.1	3599
Total	100			14,977

(CI = confidence interval. Please see Endnote 5 for explanation)

Table 2: Texans who had used the Internet in the past 30 days by age

Age group	Percent	95% CI (Lower)	95% CI (Upper)	Sample Size
18-59	84.2%	82.9%	85.4%	6899
60 and above	61.8%	59.5%	64.0%	4345

Table 3: Texans who had used the Internet in the past 30 days by disability status⁴

Age group	Percent	95% CI (Lower)	95% CI (Upper)	Sample Size
Has disability	60.6%	57.9%	63.2%	2392
No disability	85.1%	83.9%	86.2%	8695

Time spent on the Internet (Asked of those who said they use the Internet)

- 12% spent less than half an hour.
- 28% spent fifteen hours or more.

Table 4: Time spent on the Internet in the past week

	Percent	95% CI (Lower)	95% CI (Upper)	Sample size
30 minutes or less	12.4%	10.8%	14.2%	613
31 minutes to less than an hour	8.3%	6.7%	10.1%	281
1 to <3 hours	16.2%	14.4%	18.2%	777
3 to <5 hours	8.4%	7.2%	9.7%	450
5 to <10 hours	15.3%	13.4%	17.4%	671
10 to <15 hours	11.8%	10.3%	13.4%	585
15+hours	27.7%	25.4%	30.1%	1282
Total	100%			4659

Activities done on the Internet

- 48% said they used the Internet for email.
- 33% said they used the Internet for news or entertainment.
- 29% shopped on the Internet.
- A quarter said they performed online banking.
- 17% connected to friends and family thorough Skype, Google-Friends, FaceTime, etc., via the Internet
- 16% said they searched for health- and health-related information on the Internet.
- 42% used the Internet for social media activities.
- More than half said they searched for general information in the Internet.

Table 5: Activities done on the Internet*

	Percent	95% CI (Lower)	95% CI (Upper)	Sample size
Send and receive email	48.3%	45.7%	50.9%	2734
Read the news/for entertainment	32.9%	30.5%	35.4%	1584
Shopping	28.6%	26.3%	31.0%	1429
Online banking	24.0%	21.9%	26.2%	1257
Connect with family and friends through Skype, Google, friends, FaceTime, etc.	16.8%	14.9%	18.9%	723

	Percent	95% CI (Lower)	95% CI (Upper)	Sample size
Search for health and health-related resources	15.6%	13.9%	17.5%	796
Attend webinars and podcasts	20.5%	18.9%	22.1%	1794
Social media	42.3%	39.8%	44.8%	1813
Search for general information	51.1%	48.6%	53.7%	2659
Play games	19.0%	17.0%	21.2%	894
Manage Investments	8.0%	6.7%	9.4%	418
Education/school-related	2.9%	2.1%	4.1%	101
Business/work-related	7.3%	6.2%	8.7%	336
Other**	1.9%	1.3%	2.8%	95

*Total adds up to more than 100% because a person may perform more than one activity.

**Other activities include religion and charity, coupons, ancestry/genealogy, making appointments, etc.

Ownership of devices that can connect to the Internet

- 83% said they owned a device that could connect to the Internet.
- Of the remaining 17% who did not personally own an Internet-enabled device: One in three said it costs too much, one in four said it is too hard to use or they do not know how to use it, and a little over one in three said they did not need it or want it.

Table 6: Person owns a device that can connect to the Internet

	Percent	95% CI (Lower)	95% CI (Upper)	Sample Size
Yes	83.5%	82.0%	85.0%	5085
No	16.5%	15.0%	18.0%	1399
Total	100%			6484

Table 7: Main reason the person does not own a device that can connect to the Internet*

	Percent	95% CI (Lower)	95% CI (Upper)	Sample Size
Cost too much/Too expensive/Can't afford	33.1%	28.7%	37.9%	361
Too hard to use/Don't know how to use	24.0%	19.8%	28.6%	289
Don't need or want	37.3%	32.9%	41.8%	615
Other	5.6%	4.0%	7.8%	86
Total	100%			1351

*(Asked of those who said "no" to owning an Internet-enabled device)

Ownership of medical alert device

This question was asked of those aged 60 and over and/or persons who had a disability regardless of age.

- 12% owned a device that allows them to push a button to call for help in a medical or other emergency.
- Of those who did not own such a device, 77% said they did not need it, 13% said it costs too much or they cannot afford it, and 3% said it is too hard to use or they don't know how to use it.

Table 8: Person owns an emergency/medical alert device*

	Percent	95% CI (Lower)	95% CI (Upper)	Sample Size
Yes	11.9%	10.2%	13.9%	530
No	88.1%	86.1%	89.8%	3405
Total	100%			3935

*Only individuals aged 60 and over and/or those who said they had a disability regardless of age were asked if they owned a device that would enable them to get help in an emergency.

Table 9: Reason person does not own an emergency/medical alert device*

	Percent	95% CI (Lower)	95% CI (Upper)	Sample Size
Don't need or want	77.3%	74.3%	80.1%	2574
Cost too much/Too expensive/Can't afford	13.4%	11.3%	15.9%	422
Too hard to use/Don't know how to use	2.8%	1.5%	5.3%	56
Other	6.4%	5.2%	7.9%	223
Total	100%			3275

*(Asked of those who said "no" to owning a medical alert device)

Endnotes:

1. <http://aspe.hhs.gov/daltcp/reports/2012/ASTSRptCong.shtml>
2. <http://www.acl.gov/programs/aidd/Programs/PCPID/docs/PCPID-2015-Report-to-President.pdf>
3. The Texas Behavioral Risk Factor Surveillance System (BRFSS), initiated in 1987, is a federally supported landline and cellular telephone survey that collects data about Texas residents regarding their health-related risk behaviors, chronic health conditions, and use of preventive services. The survey is conducted every year and asks questions of adults ages 18 and older. Public and private health officials at the federal, state, and local levels rely on the BRFSS to identify public health problems, set priorities and goals, design policies and interventions, as well as evaluate the long term impact of these efforts. See <http://www.dshs.state.tx.us/chs/brfss/>
4. A person has a disability if they answered “yes” to any of the following five questions:
 - a) Are you blind or do you have serious difficulty seeing, even when wearing glasses?
 - b) Because of a physical, mental, or emotional condition, do you have serious difficulty concentrating, remembering, or making decisions?
 - c) Do you have serious difficulty walking or climbing stairs?
 - d) Do you have difficulty dressing or bathing?
 - e) Because of a physical, mental, or emotional condition, do you have difficulty doing errands alone such as visiting a doctor’s office or shopping?
5. Confidence intervals (Sampling Error). Sampling error refers to random variation that occurs because only a subset of the entire population is sampled and used to estimate the finding for the entire population. It is often called “margin of error” in popular use, and is expressed as the “plus or minus” term. In this report, sampling error has been expressed as confidence interval bounds. The 95% confidence interval (calculated as 1.96 times the standard error of a statistic) indicates the range of values within which the estimate will fall 95% of the time if the researcher were to calculate the statistic (e.g., a percentage) from an infinite number of samples of the same size drawn from the same base population. For example, an estimate of 94.3% with a 95% confidence interval between 93.3% and 95.2% means that we can say with 95% confidence that the estimated value of 94.3% falls between 93.3% and 95.2% in the actual population.