## INTRODUCTION

In the very early days of the COVID-19 pandemic, AARP fielded two short surveys designed to capture midlife and older adults' knowledge and use of telehealth services, and found that one in five (21\%) adults age 50-plus reported that they had used telehealth services in the previous month (March 2020). ${ }^{1}$ Being interested in seeing whether - and to what extent - the use of telehealth services might have changed in two years, AARP fielded a short survey among U.S. adults ages 50 and older between February 24 and March 4, 2022. In this fielding, with a modification in question wording to align with the duration of the pandemic, we found that half ( $51 \%$ ) of adults age 50 -plus said they or a family member had used telehealth services in the previous two years. Telehealth certainly appears to be here to stay.

## KEY FINDINGS

Interest in using telehealth services holding steady from April 2020. About one-third (32\%) of U.S. adults age 50 -plus report being extremely or very interested in using telehealth services for themselves or for a loved one, a figure that is essentially unchanged since April $2020(30 \%)$ when we last asked about telehealth use.


Interest in using telehealth services varies by gender and race/ethnicity. Women age 50 -plus are more likely than men ( $17 \%$ vs. $10 \%$ ) to say they are extremely interested in using telehealth for themselves or a family member. Additionally, Black, non-Hispanic adults age 50-plus are more likely than their White, non-Hispanic and Hispanic counterparts to express the same level of interest in using telehealth ( $33 \%$ vs. $11 \%$ and $14 \%$ ).


[^0]Telehealth use common, albeit with differences by age. Half ( $51 \%$ ) of adults age 50 -plus say they or a family member have used telehealth in the past two years, with those ages 50-64 more likely than those ages 65 and older to have done so ( $56 \%$ vs. $46 \%$ ).

While there are no racial/ethnic differences in reported telehealth use, men age 50-plus are more likely than women age 50 -plus to say they have not used telehealth in the past two years ( $48 \%$ vs. $39 \%$ ).


## Routine doctor's visits top reason for using

 telehealth services, noted by nearly seven in ten (68\%) of those who have used them. More than four in ten telehealth users report using the service to renew prescriptions ( $47 \%$ ) and discuss a new medical issue (42\%), while about half as many use it for diagnosing an illness (22\%) or securing care for a loved one (17\%).

Six in ten telehealth users report no barriers to use. When asked what some of the barriers were that they experienced, one-third (32\%) cited a concern that the quality of care might not be as good with telehealth visits as with in-person visits. One in eleven (9\%) said they were concerned about the possibility of medical errors, while about half as many mentioned uncertainty about whether their doctor offers telehealth ( $5 \%$ ), not having a computer (4\%), not knowing how to use telehealth (4\%), concerns about confidentiality of health information (4\%), and not having access to high-speed internet (3\%).

| Barriers to use of telehealth? $(\mathrm{n}=586)$ |  |  |
| :---: | :---: | :---: |
| Concerned that the quality of care is not as good as with in-person visits |  | 32\% |
| Concerned about the possibility of medical errors | 9\% |  |
| Not sure that my doctor's office offers tele-health services | 5\% |  |
| Don't have a computer | 4\% |  |
| Don't know how to use telehealth | 4\% |  |
| Concerned about my health information remaining confidential | 4\% |  |
| Don't have access to highspeed internet service | 3\% |  |

One-third of adults age 50-plus say they are extremely or very likely to use telehealth services in the future for at least some medical appointments. Notably, adults age 65 and older are more likely than their younger counterparts to say they are not very likely to use telehealth services in the future ( $29 \%$ vs. $22 \%$ ).


Expected likelihood to use telehealth services in the future for at least some medical appointments varies by race/ethnicity. Black, non-Hispanic adults age 50plus are more likely than their White, non-Hispanic or Hispanic counterparts to report it extremely likely that they will use telehealth services in the future ( $27 \%$ vs. $14 \%$ and $9 \%$ ). Hispanic adults age 50 -plus are also more likely than White, non-Hispanics to say they are very likely to use such services in the future ( $27 \%$ vs. 14\%).


## IMPLICATIONS

Telehealth has provided a way for individuals and their families to continue to receive needed medical care during the COVID-19 pandemic while remaining safely in their homes. It appears that telehealth is likely to continue to remain an important tool in the health care delivery tool kit - at least for those with computers and high-speed internet access. Continuing to keep an eye on its use (and challenges to its use) will remain critical to ensuring that midlife and older adults receive optimal health care.

## SURVEY RESPONDENT DEMOGRAPHICS

$n=1,149$ adults age 50 and older

| Demographic Variable | Weighted |
| :---: | :---: |
| Age |  |
| 50-64 | 53\% |
| 65 or older | 47\% |
| Gender |  |
| Men | 47\% |
| Women | 53\% |
| Race |  |
| White, non-Hispanic | 71\% |
| Black, non-Hispanic | 11\% |
| Other, non-Hispanic | 1\% |
| Hispanic | 12\% |
| Asian, non-Hispanic | 4\% |
| 2+, non-Hispanic | 3\% |
| Hispanic Origin |  |
| Yes | 12\% |
| No | 88\% |
| Education |  |
| Less than high school | 10\% |
| High school graduate/equivalent | 30\% |
| Vocational/technical/some college | 25\% |
| Bachelor's degree | 19\% |
| Graduate degree | 15\% |
| Marital Status |  |
| Married | 56\% |
| Not married [Net] | 44\% |
| --Widowed | 7\% |
| --Divorced | 18\% |
| --Separated | 8\% |
| --Never married | 9\% |
| --Living with partner | 2\% |
| Household Income |  |
| Less than \$30,000 | 22\% |
| \$30,000-\$59,999 | 26\% |
| \$60,000-\$99,999 | 27\% |
| \$100,000 or more | 25\% |

## METHODOLOGY

The data included in this report are drawn from the Telehealth Redux study which was administered via mixed mode (online and phone) February 24 to March 3, 2022 with a total sample of 1,149 adults ages 50 -plus. This national survey was conducted for AARP using NORC at the University of Chicago's Foresight 50+ Consumer Omnibus. All data are weighted to the latest Current Population Survey (CPS) benchmarks and are balanced by gender, age, education, race/ethnicity, and region. The margin of error for the national survey is $\pm 4.05$ percentage points. (Totals may not sum to $100 \%$ due to rounding.) For more information on the methodology or the survey, contact Teresa A. Keenan at tkeenan@aarp.org


[^0]:    'Teresa A. Keenan, Ph.D. Views on Telehealth. Washington, DC: AARP Research, June 2020. https://doi.org/10.26419/res.00388.001

