

Disability Voices: Digital Divide Report

August - September 2023



Acknowledgements

The staff and leadership of Healthwatch Cumberland would like to thank all of the people who contributed to this project by sharing their personal experiences, either by completing a case study or partaking in a focus group.



About Healthwatch

Healthwatch Cumberland (HWC) is the local health and social care champion. Independent of all services, Healthwatch is in place to engage with local people, communities, and neighbourhoods listening to their feelings, wishes and experiences of using health and social care services.

Healthwatch work to reduce inequalities and barriers to services by seeking out the experiences of those who could be classed as seldom heard and sharing intelligence gathered to drive improvements.

Defined by the Health and Care Act 2012, our statutory role is to:

- Listen to people's needs and experiences of local health and social care services. Local Healthwatch make these views known to those involved in the commissioning and scrutiny of care services.
- Make reports and make recommendations about how those services could or should be improved to decision-makers on how to improve the services they are delivering, enacting positive change.
- Promote and support the involvement of people in the monitoring, commissioning and provision of local health and social care services.
- Provide information and advice to the public about accessing health and social care services and the options available to them.

To fulfil our statutory functions, Healthwatch undertakes a range of engagement from pop-ups in villages and towns, attending existing support groups and networks, running focus groups, and visiting services to see them in action (this is called Enter and View).

By law, there must be a Healthwatch in every local authority therefore Healthwatch are funded by and accountable to local authorities. Healthwatch England (HWE) acts as the national consumer champion for all local Healthwatch organisations, enabling and supporting HWC to bring important issues to the attention of decisions makers nationally. We do this by:

- Making the views and experiences of people known to Healthwatch England, helping us to carry out our role as national champion.
- Making recommendations to Healthwatch England to advise the CQC to carry out special reviews or investigations into areas of concern.

Contents

	Page(s)
Executive Summary	4
Introduction/Background	5
Methodology	5 – 6
Participant Demographics	7
'Warm-up' Question Analysis	8
Open Question Themes	9 – 11
Case Studies	12 – 15
Conclusion	16
Recommendations	16 – 17
Next Steps	17
Appendix A	18 – 19

Executive summary

The engagement for the Healthwatch Cumberland (HWC) 'Digital Divide' project ran from 1st August 2023 until 29th September 2023, and in total 57 people shared their experiences and feedback with Healthwatch. 44 people completed a case study, and HWC facilitated three focus groups to speak to a further 13 participants. The aim of this project was to understand the impact of the recent digital shift as a consequence of the Covid-19 pandemic, on the disabled community.

The main themes highlighted by this engagement were:

- Covid-19 pandemic increased the use of digital technology. Which was either viewed as a positive step towards inclusivity, or intensified inequalities faced by people living with disabilities.
- During the Covid-19 pandemic, several services moved to be solely accessible online.
- As a result of the Covid-19 pandemic many disability specific support groups ceased to function and have not restarted following the removal of lockdown restrictions.
- Digital technology has helped people to maintain relationships and connections with others.
- Medical appointments became more commonly online than pre-Covid-19, though a desire for face-to-face appointments remains.
- Many older participants mentioned that they rely on younger family members to help them with digital devices and technology when they need it.
- Online safety was voiced to be a concern.
- Digital technology and devices give opportunities and creates adaptations for those who need it.
- The flexibility that digital technology offers, is not always utilised by services.

Executive summary

- Digital technology can reduce geographical inequalities.
- Giving people a choice is important.
- For some people living with disabilities digital devices and technology can make their lives easier.
- Improvements are still needed to make devices and online services more user friendly.

As a result of gathering and analysing feedback from members of the public, particularly those who are living with an impairment, HWC has formulated a list of recommendations.

These recommendations apply generally across Cumberland and can be found in the conclusion section of this report.



Introduction/background

Between January and March 2023, Healthwatch Cumbria conducted the Disability Voices project. The project aimed to capture the voices of disabled people across Cumbria in order to understand their experiences of everyday life, the barriers they encounter, their frustrations or worries, and what changes they feel are needed to improve their lives.

In total, Healthwatch Cumbria engaged with 758 people across Cumbria, including disabled people, their carers, and professionals working with disabled people.

In the final finding report, it was outlined that further research was necessary to explore 'disabled people's experiences with technology'.

This came from conversations we had with people during the project that highlighted that they valued face-to-face services and were concerned about the growing need for internet access to book appointments, as well as people sharing that they felt excluded from services that involve using the internet or a smartphone.

"Everything is online and I don't have internet/smartphone etc, so being penalised for that."

"...I couldn't even tell you if there's a deaf group in Cumbria ... If you haven't got Facebook, how are you supposed to get enough information? Not everybody is digitally aware..."

Therefore, Healthwatch Cumberland (HWC) decided to look into this in more depth as part of its core work plan for 2023 – 2024.

It was highlighted during the Disability Voices project that there are challenges following Covid-19 in relation to the ever-increasing demand on accessibility to online and digital services. Therefore, HWC has deeper explored the impact of the recent digital shift as a consequence of the Covid-19 pandemic, on the disabled community.

'Warm up' Question Analysis

- **74%** of participants access the internet several times a day.
- **11%** of participants access the internet about once a day.
- **4%** of participants access the internet one or two days a week.
- **5%** of participants access the internet three to five days a week.
- **2%** of participants access the internet once every few weeks.
- **5%** of participants access the internet less than every few weeks.

- **95%** of participants have access to the internet at home.
- **4%** of participants do not use the internet.
- **2%** of participants have to go elsewhere to get online.

- **77%** of participants have access to a computer/laptop.
- **54%** of participants have access to a tablet.
- **74%** of participants have access to a smartphone.
- **56%** of participants have access to a smart TV
- **21%** of participants have access to a smart watch
- Other devices participants had access to include Alexa and game consoles.

- **60%** of participants were comfortable using the internet independently (with no support required).
- **25%** of participants were comfortable using the internet with some support.
- **9%** of participants were comfortable using the internet with lots of support.
- **4%** of participants were not comfortable using the internet.

'Warm up' Question Analysis

- **39%** of participants have used 'e-consult' or an equivalent to contact their GP.

- **30%** of participants have used the NHS app.

These insights show that the most common digital devices owned by participants are computers/laptops and smart phones.

Furthermore, the majority of participants use the internet as part of their daily lives, and most have access to it from their own homes. Over half of the participants felt comfortable using the internet independently, and another 34% were comfortable using it with some degree of support.

Despite this cohort of people being fairly comfortable with the internet and using digital devices, less than half use 'e-consult' or the NHS app, preferring to contact their GPs via the phone or in person

Open Question Themes

The aim of the question was to open-up the discussion with the participant, to give them space to share their personal experience in relation to using digital technology and understand the recent digital shift as a consequence of the Covid-19 pandemic.

Open Question: **“Since the Covid-19 pandemic, how have you been impacted by the increased usage of technology and ever-changing digital world?”**

From the conversations with the 57 participants the following themes emerged:

- During the Covid-19 pandemic, several services moved to be solely accessible online. This includes school, shops, support group sessions and medical appointments. While some services have returned to face-to-face delivery there are many that have not.
- Some participants mentioned that they have been ‘forced’ into online banking as their banks near them have closed.
- Participants explained that because of the Covid-19 pandemic many disability specific support groups ceased to function and have not restarted following the removal of lockdown restrictions.
- While school and some support group sessions continued online during this period, people mentioned that it was not the same and that it still felt isolating. It was highlighted that face-to-face was preferred in relation to social aspects.
- Participants shared that they felt that whilst not perfect, digital technology has helped people to maintain relationships and connections with others.
- Medical appointments became more commonly online than pre-Covid-19. Participants seemed to view online medical appointments negatively, as several mentioned that they felt important things could be missed if doctors cannot see for themselves and instead rely on the explanation provided by the patient. Hence, would like the option of face-to-face appointments.

Open Question Themes

- Many older participants mentioned that they rely on younger family members to help them with digital devices and technology when they need it. This raises the question of what happens for those who do not have a family network to rely on, reinforces the importance of digital training and support sessions.
- Online safety appeared to be a concern for people. It was mentioned that there are numerous different types of scams that people can be tricked into and that some of them have become very convincing, which causes worry. Carers said that they worry about those that they care for being a victim of online fraud or being misled, and therefore, losing confidence to use digital technology in response.
- The use of digital technology and devices “opens-up the world”. It gives opportunities and creates adaptations for those who need it, and this is no different for those living with a disability.
- Whilst digital technology can create a range of possibilities sometimes the options created are not utilised by services. A bonus of digital technology is that it allows for the element of flexibility, for example, if someone is not comfortable on camera they can do a telephone call instead of a video call, or if someone is unable to pick up a prescription in person, they could receive a digital copy. However, it was implied that the options are not always present even though they are possible, which causes restrictions.
- Another benefit of digital technology highlighted by participants was that it reduced the amount people need to travel for services as it can be online. This also means cost savings and more availability.
- It is important to give people a choice. Digital technology and devices mean that there are more options regarding accessing a service, receiving support, or being communicated with. It is not a one-shoe-fits-all situation, and people need to be treated individually based on their needs and wants.
- Inaccessibility is not always dependent on disability levels, as for several participants they are almost dependent on digital technology as it makes their lives easier. For some it gives them more independence in their lives.

Open Question Themes

- Participants stated that if you do not keep up with the ever-changing digital world, you can get left behind very quickly.
- It was pointed out that websites are not always user friendly (or smart phone friendly) which can cause issues. Particularly, when people are required to fill out forms online for medical (diagnosis, appointments) or financial (benefit and PIP forms) situations.
- There was a general feeling from the participants that the Covid-19 pandemic has forced society to progress into using digital technology more than ever, but there was a mixed response to this realisation. Some felt that it was a positive step towards further inclusivity, however, others felt that this just heightens inequalities faced because of the digital divide

Quotes from conversations with participants:

“What I have noticed as soon as Covid hit and the able-bodied people were not able to go out, they soon found a way to get everything online.”

“I’m self taught because when I was a kid, they didn’t teach it.”

“We never had things like this, I started off my education with chalk and a cloth, so it takes a lot of taking in that you can do all these things.”

“I feel like I’ve been pushed into being online, more due to lack of choice.”

“We have to use internet more and more. Covid forced us into it.”

“We just want options and choices when it comes to technology and accessing services.”

“I’m jealous because you [another member of the public] can do all of these digital things and I’m stupid.”

Open Question Themes

Ability Net: Computer Club session

Furthermore, as part of this project, HWC attended a support session hosted by Ability Net at Ewanrigg Community Centre called “Computer Club” to speak to some of the people in attendance (via short case studies).

These sessions provide support to those who attend with any IT tasks that they have; this can be from sending emails to getting support to set up accounts.

From the Healthwatch Cumberland visit it was evident that these groups provide a safe place for people to learn and access the support that they need, making a positive impact to people’s lives.

One attendee was at the session for support as she was writing an email to a family member who lives abroad:

“I’m just writing to my sister in Australia but my mouse has packed in, and it is a very old mouse.”

She said that instructions on the screen are often “gobbledygook” to her but when she shows the group facilitators at the sessions, they show her what she needs to do.

Another attendee explained when asked if he is comfortable using the internet on his own or with some support, that he:

“Can use it for what I want but if someone says, ‘do this’ I can’t do it without help.”

He shared that:

“If someone sends me an email, I can write a reply and click send but if someone told me to do something from scratch, I’d need someone at Ability Net to help me do it.”

Open Question Themes

A further attendee told Healthwatch Cumberland how she used to use technology all the time in her job, but now she struggles to keep up. The attendee explained that she finds the sessions at Ability Net helpful,

“If I’ve got a problem, like the other week, I had a problem with accessing Microsoft Edge because Bing kept going over it and I didn’t want Bing I just wanted Edge. So, it’s good if you’ve got an issue with something.”

These individuals’ comments highlight the importance that groups like Ability Net have in the community. They help to meet a support need that would be missing if they did not exist.

All the attendees voiced their appreciation of the group and the facilitators, and emphasised how important it was to them to have a place to go to access support when they need it.



Case Studies

All 57 participants experiences and stories were used in identifying the themes. Extracts from six of these conversations have been included in this report, to give an insight into some of the real personal experiences shared with HWC during this project.

Please note, all names have been changed to protect the identity of the participant.

Case study one

As a result of having Long-Covid Nicole (a woman, between 45 – 55) is living with absence of speech. This has significantly impacted her career as a conference speaker and social life, she has had to re-train and learn to rely on digital technology to help her get her 'voice' back in some capacity:

"Before Covid I worked as an international conference speaker in training/development for a charity. I also worked in an office and was part of the office community, actively participating in team meetings and events. A large part of my role was face to face coaching with staff members.

"I started working from home following a period of furlough during the start of the pandemic. I caught Covid in 2020 and was very unwell but avoided being hospitalised. During this period of sickness my voice weakened along with the other known symptoms of Covid. Now it's very painful to talk. My larynx has 'frozen'. I have been diagnosed with long-covid and muscle tension dysphoria.

"This means I have lack of energy, brain fog and no voice. Having no voice has affected my public confidence, so I don't often socialise with people because of the frustration of not being able to speak. I also feel very vulnerable being out in public as I don't have my voice to protect me. I am high-scoring extrovert and I really miss people.

"At first, I felt lost, afraid for my future. My career had always been based on my voice and I was reliant on being able to speak to do my job as I knew it.

"In June 2022, I retrained as an online training facilitator. So, I've learned how to build online courses using my conference materials. These are then delivered via an online platform, which can reach unlimited numbers. Next step is to train more people to be able to facilitate these courses themselves.

Case Studies

"I 'meet' with a small group of learners online to go through that weeks' coaching module. Without my voice I've learned how to be a different type of coach completely. I've learned the value in asking powerful questions.

"I extensively use the chat function during video calls, as well as the 'raise hand' function. I think I've become a better coach and teacher because I've been forced to consider each and every word I say.

"A headset with a good quality microphone is essential! Using optimised voice pick up on settings. I have also been given an NHS Speaking Aid which consists of a microphone and small amplifier, which is used in most conversations as I don't need to force a whisper.

"Another great invention is that I meet with my speech therapist on video call, which reduces travel and wait times. Online video call access has also opened the door to having my physical and emotional needs met out of area such as bereavement therapy.

"One thing I have realised is that most people hear that I'm trying to speak but don't actually listen to what I'm trying to say. In order for me to feel seen and heard I am reliant upon people being 'active listeners' when I'm communicating."

Case Study Two

Despite having the desire to use digital technology David (a man, between 45 – 55, living with cerebral palsy) has unfortunately not got the ability to do so. He feels that it means that he loses independence as he has to rely on others support, and questions if his social life has also been negatively impacted.

"I am able to work technology but due to my Cerebral palsy I can't use my hands and rely on support from the staff at my Day Centre to help. This limits access and my independence. It's very frustrating as I have a desire but not the ability.

"I rely on having access to a basic mobile phone to call a person at the GP, which means that I can't use the online options such as 111 online or NHS app.

"My social life has been the same [pre-Covid and post-Covid], but I do wonder how it may be different or better had I been able to access social media and online groups. Also, I was a 'shield-er' during the lockdown which furthered isolation and limited contact with the outside world.

Case Studies

I am grateful for the staff at the centre who take the time to help me, but this reduces independence further. Although how do you miss what you've never had?"

Case Study Three

Services being forced to go online, allowed people like Sandra (a female stroke survivor, between 55 – 64) to have more opportunities to access the specialist support she required that originally were inaccessible due to geographical disadvantages.

"Prior to Covid I had no access to Neuro-physio services as there are none within traveling distance from where I live.

"Covid meant that health professionals had to go online to continue working. This meant I was able to get the support I needed as location was no longer an obstacle.

"My Physio is based in Northampton, and I see him on Zoom every five weeks. I also access exercise classes via zoom.

"Travelling is no longer a barrier to services meaning a wider reach. During lockdown everybody got a taste of what it's like to have mobility issues and to be tied to their home.

"Socially I have my charity group which I am a facilitator and group ambassador, which also meets virtually. This gives me a sense of purpose as well fulfils my passion for helping others and chatting to like-minded people. Its inspiring and I get a lot out of it.

"Enabling others to move forward and encourage acceptance of technology and internet is key. It would be good if we could support people to feel safe and able to use the internet, it would give more independence in the long run.

"My life actually improved following the pandemic which says a lot about my quality of life before."

Case Studies

I am grateful for the staff at the centre who take the time to help me, but this reduces independence further. Although how do you miss what you've never had?"

Case Study Four

John (over 65, male, living with macular degeneration) highlights the benefit of technology but emphasises that there is a lack of assistance for people with disabilities in this area and the negative impact that this has.

"My first answer is I've benefitted from the increased usage of technology. I can get to places but there's thousands of people spread around the county and they're out of reach of NHS services, so the use of technology is vital but there's a lack of assistance for people with disabilities.

"What I think is needed is tailored training. For so many people in their sight loss journey, they're quite capable of using the internet. It's the people who didn't use a computer at work, perhaps in the retired generation, that need that bit of support. The local authority should be lobbied to offer training for disabled people in using technology that works for them.

"I happen to be a member of Blind Veterans UK, they give people a smart speaker, introduce people to Alexa and explain it, they'll train the person, spend some time with them to help them make the most of it. For people who can't use the screen it's fantastic.

"I believe that funding permitting, if local authorities linked-up disabled residents with technology like this that could benefit them, it would off-set some of the challenges of the area's rural isolation.

"It frustrates me that I meet people who are struggling, during the Covid period, I was only about to speak to people over the phone to train them on the eccentric viewing but because some of them have hearing loss as well, that was a struggle.

"We've got brilliant people in the system now, but they've got a lot to do, and they can only do so much, so what would be great is if their role was resourced so that some of this stuff could be provided to people who could benefit from these things.

Case Studies

“There are people in these situations, but they only have a commitment to provide up to six weeks of support so there needs to be a bit of an add on to what they’re allowed to provide.”

Case Study Five

Digital technology has been able to make services more convenient and enable further independence for people like Mary (woman, over 65 living with Cerebral palsy).

However, she had to rely on the knowledge she had from her working life to quickly adapt to the shift online brought around because of the Covid-19 pandemic.

“As someone who feels like I was written off in my 20’s due to my Cerebral palsy, it’s no surprise that people feel out the loop with technology.

“I retired around 10 years ago and I’m so grateful that I’d worked with computers, so when lockdown happened, I was able to adapt. If I didn’t have my knowledge from my working world, I would probably be scared of it and Covid would’ve been a very different experience for me.

“Facetime and messenger were a life saver for staying in touch with family and friends. I also relied on getting shopping delivered when it was ordered online.

“Due to my health, I really need to preserve energy and I like the idea of how convenient some options/services are. Having said that I would disagree with medical appointments being held virtually, I like to see my GP in person.

“I feel like there’s so much that would be missed if not in person. Also, my GP knows me which is helpful.

“I do however, receive online CBT with an ‘out of county’ provider which is incredibly helpful as it means less travel. It means I’m comfortable in my own home and takes less energy from me physically and emotionally.

“The impact that Covid had on me socially however was massive. Prior to lockdown I was very social and would attend Church weekly. This all changed and is not back to how it was. Throughout Covid my Church did operate virtually but I couldn’t work ‘Zoom’ so I was not able to engage.

Case Studies

“Since reopening in person, it’s just not the same. I think there’s still fear and anxiety.

“I am in the process of adapting and ‘future-proofing’ my home which means I’ve installed a stairlift and use Alexa around the house. I think it’s amazing, I feel safer, it saves me time and energy.

“I’m currently researching new ways to enable further independence.”

Case Study Six

People with disabilities are often required to use websites and online forms that have been designed without their needs being considered. For example, Julie (a woman, between 45 – 55 living with ADHD) describes the battle that she experiences when trying to use these online systems.

“I can use my computer independently, but my ADHD throws-up specific problems when using websites and booking appointments. I’m terrible at following instructions and reading emails, it’s almost like pretending you don’t have ADHD to do it, you can’t baby everyone but it’s like fighting against yourself.

“Online forms are a particular challenge and I have had to use them for both me and for my sons when trying to get an autism diagnosis.

“A lot of the ADHD diagnoses were done online as well. I could break into tears at the sight of a form, I could just cry. It was a bit of a pain because the set-up wasn’t very phone friendly.

“The kids all have a PC each, I’ve got a PC though at the moment I have an aversion to pressing the on button.

“I was referred to Psychiatry UK recently where I fill out forms to let them know how I am getting on with the medication but at one point, I scrolled down too many times and the page refreshed and lost my answers. These websites should take disabilities like ADHD into account when being designed.”

Conclusion

The aim of this project was to explore the impact of the recent digital shift as a consequence of the Covid-19 pandemic, on people living with disabilities.

Healthwatch Cumberland has done this through speaking to 57 people about their personal experiences on the topic.

It was acknowledged by participants that the Covid-19 pandemic forced society to become significantly more digital and quickly.

This received a mixed response, with many feeling that this shift was a positive step towards further inclusivity. But others felt that it actually left them more excluded and extended the inequalities faced by those living with a disability.

Thus, suggesting that the digital divide is a very real and crucial problem to tackle. The main themes highlighted by this engagement were:

- Covid-19 pandemic increased the use of digital technology. Which was either viewed as a positive step towards inclusivity, or intensified inequalities faced by people living with disabilities.
- During the Covid-19 pandemic, several services moved to be solely accessible online.
- As a result of the Covid-19 pandemic many disability specific support groups ceased to function and have not restarted following the removal of lockdown restrictions.
- Digital technology has helped people to maintain relationships and connections with others.
- Medical appointments became more commonly online than pre-Covid-19, though a desire for face-to-face appointments remains.
- Many older participants mentioned that they rely on younger family members to help them with digital devices and technology when they need it.
- Online safety was voiced to be a concern.
- Digital technology and devices give opportunities and creates adaptations for those who need it.

Conclusion

- The flexibility that digital technology offers, is not always utilised by services.
- Digital technology can reduce geographical inequalities.
- Giving people a choice is important.
- For some people living with disabilities digital devices and technology can make their lives easier.
- Improvements are still needed to make devices and online services more user friendly.
- From the experiences shared and the feedback received throughout this project HWC has formulated a list of recommendations, which apply generally across the Cumberland area.

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Reccomendations

- If they are not already, GPs should offer patients the option of method of appointment (online, telephone, or face-to-face).
- Social and support groups to advertise their support groups with details of if they are online or in-person and offer a variety whenever possible.
- More funding (from organisations such as the Local Authority) to go towards developing training and funding support groups to teach and help with digital skills (including online safety courses). Also, to support groups such as 'Ability Net' to continue to deliver their invaluable service.
- More funding to go to go on training up people to be 'Digital Champions' to provide support to those who need it (groups like 'Let's Go Digital' can provide this type of training).
- Promote and signpost the training and support groups that are available to help people living with disabilities to improve their digital skills.
- Increase public knowledge and raise awareness of online safety, including awareness of scams and what can be done to keep safe online.
- Health and social care services to take advantage of the opportunities that digital technology allows, for example offering out of area support online and flexibility.
- Employers in Cumberland, should consider offering hybrid working as a choice (if they do not already have it in place), as highlighted in the report that technology can actually make things more accessible for people with disabilities who struggle to leave the house.
- Health and social care services should undertake an audit, with the support of people with lived experience, of their online forms and websites to ensure that they are easy to use.
- Advertise the financial support that people living with disabilities can access to purchase digital technology/equipment that would improve their daily quality of life and support them in obtaining this support.
- NHS should promote 'e-consultation' and the 'NHS app' where appropriate.

Healthwatch's Next Steps

- Share the report and findings with our network (including key providers) to amplify people's voices and to highlight the recommendations.
- In approximately a year, to undertake a follow-up on this project to see how much has improved regarding the digital divide for people living with disabilities, in about a year.
- Also, explore further work with different seldom heard groups to see what impact the digital divide has had on them.
- To work with groups such as 'Ability Net' as well as those with lived experience, to co-produce some digital safety materials and potentially a small campaign around keeping safe online.
- Update our signposting information to include more digital support groups that are available to help people living with disabilities to improve their digital skills.
- Ensure that our signposting information includes phone numbers, email addresses and postal addresses wherever possible to allow people the choice of how to contact services that is best for them.
- Inform all GP practices (who are not already using) of the 'new' GP registration service and how this can be beneficial to both the GP practice and their patients (as it consists of simpler forms, available both online and as a paper copy).

Appendix A: Case Study/ Focus Group Questions

(NOTE: There was also an Easy Read version of these questions produced.)

1. What is your postcode?

2. How old are you?

- Under 18
- 18-24
- 25-34
- 35-44
- 45-54
- 55-64
- 65+
- Rather not say
- Other (please specify)

3. What is your gender?

- Women
- Men
- Non-binary
- Rather not say
- Prefer to self describe:

4. How would you describe your ethnicity?

5. Do you have a disability? Yes / No / Rather not say
If yes, what is the nature of your disability:

6. Are you a carer of someone with a disability? Yes / No / Rather not say
If yes, what is the nature of their disability:

7. How often do you access the internet?

- Several times a day
- About once a day
- 1 – 2 days a week
- 3 – 5 days a week
- Once every few weeks
- Less often
- Rather not say

Appendix A: Case Study/ Focus Group Questions

8. Do you have the internet at home, or do you have to go elsewhere to get online?

- I have internet at home
- I go elsewhere to get online
- I don't use the internet

9. Which of these devices do you have access to?

Device	Do you have access?	If yes, do you use?
Computer/ laptop	Yes / No	Yes / No
Tablet	Yes / No	Yes / No
Smart phone	Yes / No	Yes / No
Smart TV	Yes / No	Yes / No
Smart watch	Yes / No	Yes / No
Other :.....	Yes / No	Yes / No
None		

If you do have access and use these devices, what do you most commonly use them for?

10. Are you comfortable using the internet:

- Independently (no support required)
- With some support
- With lots of support
- No

Appendix A: Case Study/ Focus Group Questions

11. Do you use 'e-consult' (or an equivalent) to contact your GP? Yes / No
If yes, what is your experience? If no, why not?

12. Do you use the NHS app? Yes / No
If yes, what is your experience? If no, why not?

Case Study: This is an opportunity to capture the voice and to record a thorough account of this individuals experience of life in the digital age following the Covid-19 pandemic, focusing on health inequalities and the affect it has on individuals' independence.

13. Since Covid, how have you been impacted by the increased usage of technology and ever-changing digital world?





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