EDITORIAL ARTICLE

THE DIGITAL DIVIDE IN THIS AGING WORLD

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"It is not age that is at fault but rather our attitudes toward it"
Marcus Tullius Cicero

INTRODUCTION

The United Nations General Assembly has designated the period between 2021 and 2030 as the "Decade of Healthy Ageing". The main topics in this perspective are: Examining the perspectives of societies on the concepts of old age and aging, taking measures against age discrimination, developing the ability of the elderly to participate and contribute to the society and communities in which they live. Dissemination of opportunities, and also dissemination of the concept of age-friendly environment. Providing integrated care and basic health services that respond to the needs of elderly people and the provision of access to long-term care for elderly individuals who need it (1).

The key words at this point are "Healthy Ageing" and telemedicine practice areas for the elderly are being used more and more often.

TELEMEDICINE PRACTICE AREAS

Telemedicine practice areas are basicly;

1. Measurement and monitoring of life data-Weight, blood pressure, oxygen saturation, blood glucose, ECG, EEG, EMG, etc. The patient is monitored using devices that can be worn with accessories such as clothing or belts, watches, glasses.

2. Interactive systems-Computer-aided applications, sensors that warn against falls at home, phones that work with a sound sensor.

3. Devices that provide communication with medical personnel-Telephone, video conferencing, text messaging, etc (2).

General Advantages: The most effective telecare interventions are automatic monitoring of vital signs and telephone monitoring of nurses. It increases the chances of life in the home environment by providing ongoing support to patients and family members. Also

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reduces unnecessary hospitalizations and leads to a reduction in costs due to the absence of the need for transfers to the hospital. It can be useful not only for the elderly, but also for those who care for them. Health services are provided in a more affordable, accessible and convenient system (3).

General Disadvantages: The cost of using telemedicine systems can affect physicians. Incorporating telemedicine services into healthcare applications may require purchasing equipment. These practices are not completely suitable for the current health system or funding flow or reimbursement for now.Telemedicine applications may not always be covered by health insurance/ social security.

It may remain under cyber threats. In this context, data privacy and integrity should be taken into account in terms of security. Care should be taken when installing the software and operating system, and attention should be paid to using the necessary security programs.

As can be foreseen; telemedicine applications reduce face-to-face visits and interviews with physicians. It can cause important symptoms to disappear/be overlooked.

It is much more useful in the monitoring and treatment of ongoing, previously diagnosed conditions. If the patient is experiencing new symptoms, she/he should always see a physician. The telemedicine application is more useful in managing known problems rather than diagnosing new ones.

Also if the patient is experiencing unidentified symptoms, she/he should always plan to visit his physician in person. During a physical examination, these problems can be more easily evaluated and diagnosed. A patient experiencing an urgent health problem should always contact their doctor, relatives, or emergency response team (2).

Disadvantages for the elderly-Older people do not see the usage of technology as a very important and basic requirement. They do not feel strong/ adequate about the use of technology, and the elderly are relatively slow to adopt this new form of health. Seniors want to see telehealth as safe and reliable, and they need to believe that their personal health information will be kept confidential and secure. It is much more possible for them to try these applications with the recommendations of their physicians.

FACTS TO CONSIDER

Some elderly people prefer traditional visits to their doctor. These visits are the best and most reliable method for the diagnosis and follow-up of the disease. Telemedicine applications can provide a support in terms of personal health protection. According to some critics; telemedicine can negatively affect the continuity of elderly health and care.

Continuity of care requires the establishment of a long-term partnership with the patient's primary physician so that the full health history of the elderly patient and the full spectrum of health problems are known. Since telehealth is a relatively new field, data on its effectiveness are still limited.

From the perspective of elderly health, telemedicine can be used as a complement to the usual routine health practices.

TECHNOLOGY PLATFORMS

Existing technology platforms have become the only source of connection with the health system for many elderly people. All applications should be re-evaluated and restructured in terms of the use of older individuals. The unmet psychological, social or functional needs of older individuals can be monitored, problems can be detected without delay, possible complications can be prevented and hospital admissions can be controlled (2).

Shift to Focus on Digital Tools: During the pandemic process, many people have continued to socialize, work and access health services through digital tools. Except the seniors! In this context, a digital divide based on age has occurred (4).

Age-Based Digital Divide: This term identifies a long-standing disparity in access to new technology and the skills to take advantage of new technologies. The elderly have not been able to use most of the digital measures implemented to help people in the pandemic. They could not adapt to the changes in the world, and a "Digital Divide" formed.

Digital gap is a concept that "underlines the inequality" in access to new media and explains the differences between those who have access and those who do not, those who use information and internet technologies and those who do not.

It also refers to socioeconomic factors such as income, education, and differences between demographic factors such as gender, race, ethnicity, and age.

There are 3 digital divisions of different types:

1. "Global", which refers to the differences in internet access between industrialized and developing countries,

2. "Social", which refers to the gap between rich and poor people in terms of knowledge in each society,

3. "Democratic", which refers to the differences between those who use digital technology to participate in public life and to be included in the social sphere and those who do not (5).

Barriers: Barriers for older individuals who want to use digital technology can be summarised as;

1. Age-related disabilities; age-related issues such as visual impairment, problems with dexterity and mobility, difficulties in understanding and comprehension.

2. Technological features; usability problems associated with complex screens and small-point fonts, some technical concepts or system designs.

3. Attitude; the perception that digital technology is dangerous, very expensive, complex, confusing and very difficult to learn. Fear of choice, control, privacy issues, reduced social interaction.

4. Education and support issues; economic barriers to access to digital technology education and lack of educational opportunities.

5. Cost; inability to purchase, use or access technological products due to insufficient income (6, 7).

As age progresses, the ability to use new technology and familiarity decreases. From this point of view "Technical Obstacles and Psychological Barriers" are defined.

Technical Obstacles: The inability to use small phones comfortably, and distinguish images, the inability of elderly people with vision problems to read texts and the difficulty to use a keyboard due to physical disabilities.

Psychological Barriers: Seniors don't trust themselves and they think that new communication technologies is for young people and also they have prejudices against this technology. They have the idea that is injurious to the privacy of personal information of interception, and they have the fear of being ridiculed (8).

DIGITAL NATIVE/ DIGITAL IMMIGRANT

As is known; the older age group was not born into a digital society or environment. For this reason, they are disadvantaged compared to the younger generation in terms of relations with digital devices and are defined as "Digital Immigrants" in the literature. According to digital natives, they are unfamiliar with the technical and social structure of computer and internet technologies. Although they do not know the digital language, they had to learn

and adopt it. Today, they have to be able to take advantage of the opportunities provided by visual and auditory media and not be subjected to virtual exclusion. It should also be taken into account that education serves as an important catalyst for such skills.

DIGITAL EQUALITY FOR ALL AGE GROUPS

The main theme of the 1st October "International Day of Older Persons" 2021 has been announced by the United Nations as "Digital equality for all age groups". The Covid-19 pandemic, in which many services, especially health, are accessible via digital systems, has made the process even more complicated and difficult for the elderly who cannot access these services (9).

In this regard issues that need to be prioritized are:

1. Emphasizing issues such as availability, access, capacity development, infrastructure and renewal of digital opportunities in public and private areas,

2. Discrimination for the inclusion of the elderly in all these processes, etc. combating prejudices that cause situations,

3. Making full use of digital technologies in order to fully achieve the sustainable development goals,

4. Establishment of the necessary policies and legal frameworks to ensure the privacy and security of the elderly who use digital environments,

5. To support the continuation of the studies in the field of digitalization on the basis of human rights.

These applications offer a number of options for maintaining health and making care easier and more accessible. The older age group should be encouraged to use social media, communicate by phone and video links. In this way, social isolation will be prevented and cognitive stimulation will be provided (10).

The Voice of Older Persons: The issue of digitalization of services has been raised by the voice of older persons AGE platform Europe in Nov, 2022. In the declaration "Everyone has the right to access quality basic services, including water, sanitation, energy, transport, financial services and digital communications," was said (11).

Given the pace of changes in the digital technology sector, it is difficult to know what kind of tools will be used in the next 20 years! The educational background and financial situation of internet users and non-users also play a key role in unequal access to technologies. Older people are less capable due to the fact that their access to education and lifelong learning in digital environments is ignored. A question has been raised: Isn't this lack of interest also the result of an "Internalized Ageism"?

Ageism / Age Discrimination: Ageism is a key barrier affecting the design, adoption and use of digital technology. In the context of digital technology ageism takes place on 3 levels: 1-Macro (design and policy), 2-Meso (social and organizational environment), 3-Micro (individual). All three of these levels interact and influence each other (12).

Last Words

A paradigm shift is needed. Questions that need to be answered are:1-What digital technologies do the elderly want and need? 2-What is the ability of the elderly to use digital technology? 3-Are the elderly included in the design process of digital technology and related policies? The elderly should definitely take place in all these processes (12).

The key message for socially healthy, successful, productive and active aging is: Don't plan "for" the elderly, plan "together" with the elderly. Because only they know what they're going through!

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