

Bridging the Digital Divide for Seniors

**Technological Barriers Among Older Adults in Alameda County,
California**

Community Impact Project Research Paper

District 1 Summer Internship Program

I. Introduction

Over the past decade, essential services once conducted in person, such as scheduling a doctor's visit, applying for public benefits, or simply keeping in touch with family, have increasingly moved online. For most working age adults, this shift has meant convenience. For many older adults, it has meant something closer to exclusion. This paper examines whether senior citizens in Alameda County District 1, and in the city of Fremont specifically, are being left behind as healthcare, government services, and everyday life become more dependent on digital tools, and what practical steps the County and local organizations can take to close that gap.

This research was conducted as part of the Community Impact Project for the District 1 Summer Internship Program under Supervisor Haubert.

II. Background and Literature Review

A. Defining the Digital Divide

The term digital divide refers to the gap between individuals who have reliable access to digital devices, high speed internet, and the skills to use them, and those who do not. For older adults, this gap is not just about owning a device. It also includes comfort navigating unfamiliar interfaces, confidence protecting personal information online, and the availability of someone to ask for help when something goes wrong. Researchers who study aging and technology note that the consequences of this divide include reduced access to essential services, greater social isolation, fewer opportunities to build new digital skills, and difficulty using telehealth for remote medical care.

B. The Shift to Digital First Services

The COVID-19 pandemic accelerated a shift that was already underway, as patient portals replaced phone scheduling, benefit applications moved to county websites, and everyday communication moved to text and video calls. County level researchers in Alameda County have specifically identified this shift as having exposed and worsened pre-existing gaps in access to digital resources for older adults and people with disabilities, since so many senior support services depend on the internet to be usable at all.

III. Local Context: Alameda County and Fremont Demographics

Understanding the scale of this issue locally requires looking at who District 1's senior population actually is. According to the U.S. Census Bureau, 13.6 percent of Fremont residents are age 65 or older, translating to roughly 31,000 to 32,000 older adults living in the city. Fremont's population is also unusually diverse, as nearly 63 percent of residents identify as Asian and about half of all residents are foreign born, which means digital literacy programs in the city cannot assume English is every senior's first language.

This diversity matters directly for digital access. Alameda County's own countywide research has found that race, ethnicity, and language access are closely tied to internet and device access, even after accounting for income, meaning that a one size fits all approach to digital inclusion is unlikely to reach every senior in a city as demographically varied as Fremont.

IV. Methodology

This project used a combination of secondary research and primary interviewing. Secondary sources included the Alameda County Council for Age-Friendly Communities' 2022 Older Adult Digital Needs Assessment Survey, which drew 1,413 countywide respondents age 50 and older plus a supplemental 63 respondent Latinx Community Survey, along with U.S. Census Bureau demographic data for Fremont and published program descriptions from Alameda County's Area Agency on Aging and comparable county level digital inclusion initiatives.

For the primary research component, I conducted an in-person interview with a staff member at a senior living community in Fremont to gather a frontline perspective on the barriers seniors face day to day. Because this project is ongoing, this paper presents one completed staff interview as an initial case study. Additional interviews with seniors, caregivers, and community organizations are planned for the remainder of the project timeline to meet the five to ten interview benchmark set out in the original proposal.

V. Findings

A. County-Wide Data on Digital Access

The 2022 Alameda County digital needs assessment remains the most detailed local dataset on this issue. Income was the single strongest predictor of digital access. Ninety percent of older adults earning over \$2,000 per month had weekly internet access, compared to only 68 percent of those earning below that threshold. Forty-five percent of survey respondents reported monthly incomes of

\$2,000 or less, and more than half of all responses were returned on paper rather than online, itself a sign of limited digital access among the survey population. Comfort with telehealth also dropped significantly among respondents age 75 and older compared to younger respondents, even though telehealth has become a standard way to access medical care.

Smartphones were the most common device across all income levels, but access to tablets, laptops, and desktop computers, which are often better suited to tasks like reading dense government forms, was far less consistent, particularly for Black and Latinx respondents. A supplemental survey of 63 Latinx older adults found only 48 percent had weekly internet access, compared to 63 percent of Latinx respondents to the general survey, and comfort with telehealth decreased sharply with age within this group. The same countywide research included focus groups with staff at long term care facilities, who described technology as critical for keeping residents connected to family, especially at the end of life, but noted that most residents needed direct staff assistance simply to operate a tablet.

B. Existing Support Programs

Alameda County is not starting from zero. The county's Area Agency on Aging and the Age-Friendly Council's Digital Inclusion Workgroup have already proposed treating internet access as a public utility for older residents, funding devices with accessibility features such as larger screens and voice activated software, and training digital navigators, meaning community health workers who help seniors get online and use telehealth or benefits websites. As a point of comparison, Los Angeles County's Aging and Disabilities Department runs a similar model called Delete the Divide, which by the end of 2024 had placed digital assistants in senior centers and libraries and distributed 234 free iPads with two years of data service to program graduates. Programs like this suggest that a hands on, device plus training approach is replicable and could be scaled or adapted within District 1.

C. Interview Findings

To connect these countywide statistics to a real, local perspective, I interviewed Seema Tuli, a staff member at Priya Living, an independent senior living community located in Fremont. Seema works directly with residents on a daily basis and was able to speak to what the digital divide actually looks like inside a senior community, rather than only in survey data.

According to Seema, seniors have a hard time using technology and frequently ask staff for help, but staff cannot always assist because doing so would violate

residents' privacy. She said she wishes there were more resources available in public, communal areas of the community.

Seema's account adds an important, practical detail that the countywide survey data does not fully capture. Even when a senior lives somewhere with staff present every day, help is not automatically available, because staff face real privacy and liability constraints around handling residents' personal accounts, passwords, and medical information. Her comment that she wishes for more public area resources points toward a specific, low cost solutions, like shared, supervised technology stations or scheduled drop in help sessions in common spaces that would not require staff to individually manage private data.

This observation lines up closely with the county's own focus group findings from long term care facility staff, who separately reported that residents typically need direct, hands on assistance to use even simple devices. Taken together, both sources point to the same underlying problem of seniors often being only one step away from being able to use technology confidently, but that step, a knowledgeable person willing and permitted to sit down and walk them through it, is frequently missing.

VI. Discussion: Recurring Themes

Three themes recur across both the countywide data and the Priya Living interview. The first is that access is necessary but not sufficient. Owning a smartphone, which most seniors across income levels now do, is not the same as being able to confidently use it for telehealth, benefits applications, or scam avoidance. The gap is as much about skills and support as it is about hardware.

The second theme is that privacy rules can unintentionally block help. Formal caregiving environments like Priya Living are bound by reasonable privacy and liability standards that prevent staff from assisting with personal accounts, which means the people seniors see every day are often not the people who are allowed to help them, and outside, neutral resources are needed to fill that gap.

The third theme is that income and language remain the sharpest dividing lines. Both the general survey and the Latinx Community Survey confirm that lower income seniors and seniors from certain racial and ethnic groups consistently have less access to devices and less comfort with telehealth, which is especially relevant in a city as diverse as Fremont.

VII. Recommendations

Based on the research and interview findings above, this project proposes several recommendations for District 1. The County and local senior communities should establish supervised, drop in technology help stations in public common areas of senior living communities and senior centers, staffed by trained volunteers or interns rather than facility employees, in order to avoid the privacy conflict Seema described. The County should also expand and publicize existing digital navigator and device distribution programs specifically within Fremont, modeled on peer county programs such as Los Angeles County's Delete the Divide initiative.

Outreach and translated materials should be prioritized for lower income and Latinx senior populations, who the county's own data shows have measurably lower internet and device access than other groups. This project also recommends creating a single, plain language print and web resource, the community resource guide originally proposed for this project, that lists local technology assistance programs, telehealth how to guides, and scam avoidance tips, sized for distribution through senior centers and libraries. Finally, the County should continue funding in person and phone based service options for seniors who are not able to move to digital tools, so that digital inclusion efforts expand access rather than replacing the option to be helped in person.

VIII. Limitations and Future Research

This paper draws its primary, local evidence from a single staff interview rather than the five to ten interviews with seniors, caregivers, and organizations set out in the original project proposal. Seema's perspective, while valuable, reflects the staff side of one senior living community and should not be generalized to all of District 1's seniors. The next phase of this project will focus on scheduling additional interviews directly with senior residents at Priya Living and at other District 1 senior centers, in order to hear firsthand from older adults themselves rather than only from the staff who support them.

IX. Conclusion

The data is consistent. Alameda County's older adults, and Fremont's in particular, are not uniformly left behind by digitalization, but a meaningful and identifiable share of them are, disproportionately those with lower incomes, those from certain racial and ethnic communities, and those over 75. The interview conducted for this project suggests the barrier is often not a lack of willingness to learn, but a lack of an available, permitted person to ask. District 1 already has a foundation of county level programs and policy recommendations to build on.

What remains is translating those countywide recommendations into visible, local, easy to find resources, delivered in public spaces, in plain language, and in the languages Fremont's seniors actually speak.

References

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