

## Views of Telehealth Services Among Black Adults Ages 50 and Older

Insights from a series of focus groups and a national survey



### Access to telehealth services is common for most Black adults ages 50 and older...

Roughly three-quarters (73%) of Black adults ages 50 and older report that their medical provider offers telehealth services, while about one-fifth (18%) are not sure. When it comes to the type of service available to them, seven in ten (73%) of those who have access to telehealth through their providers say that both video and audio options are available, while one in eight (16%) report only having access through the telephone.

### ...as is health insurance coverage for those services.

Among those with telehealth services available through their medical providers, two-thirds (67%) report that their current health insurance plan pays for these services, but three in ten (30%) are not sure. As was noted in a series of focus groups on the topic, many said they were surprised that their copays for telehealth were comparable to an in-person visit and having health insurance doesn't preclude receiving unexpected bills for service.



**Recent survey findings suggest while most midlife and older Black adults see the benefits of telehealth, many also believe these services are best used for “routine” tasks such as prescription refills and getting answers to simple questions.**



***“I’ve tried telehealth once. I won’t do that again. If I ever see a doctor, whether I do telehealth or go in person, it costs the exact same thing. I would rather have someone see me, touch me, poke me, take a measurement, do all of that stuff, so I feel better about paying them...”***

***– (40-54, non-tech-savvy participant)***

## **Telehealth is seen as tops for prescription refills, quick check-ins, and...**

Many Black adults ages 50 and older say they would be most likely to opt for a telehealth visit over an in-person one if they needed a prescription refill (57%), to ask a simple question (56%) or faced difficulties in getting an in-person appointment (55%) or getting to the facility (53%). Other reasons for opting for telehealth include using it for a follow-up visit (48%), discussing medication options (41%), dealing with an existing health condition (34%), saving money (31%), or reporting vitals (29%). Additionally, one-quarter (24%) say they would use telehealth if they couldn’t find alternative caregivers for a loved one and one-fifth (20%) would use it for a mental health visit. However, seven percent say they would never opt for telehealth over an in-person visit.

**7%**

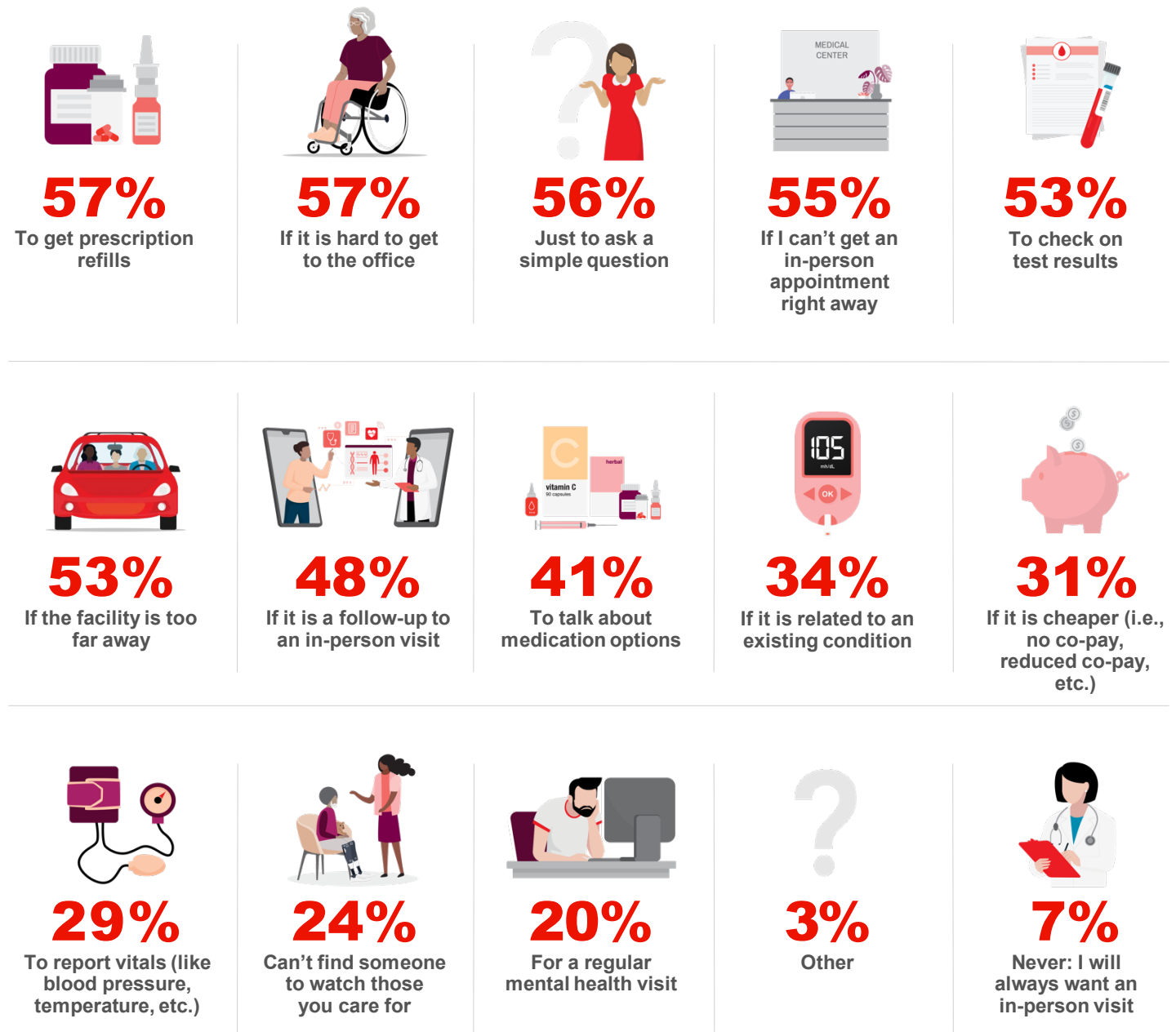
***of Black adults ages 50 and older say they would never opt for a telehealth visit over an in-person one.***

***“I have an appointment with my doctor on Friday. I was supposed to go in. I’ve been doing a lot of driving this week. I was thinking to myself, ‘I don’t want to drive on Friday because LA traffic is horrible.’ I’m like, ‘Can I do it through Zoom?’ They were like ‘Yeah, let’s do it through Zoom’.”***

***– (55-plus, tech-savvy participant)***

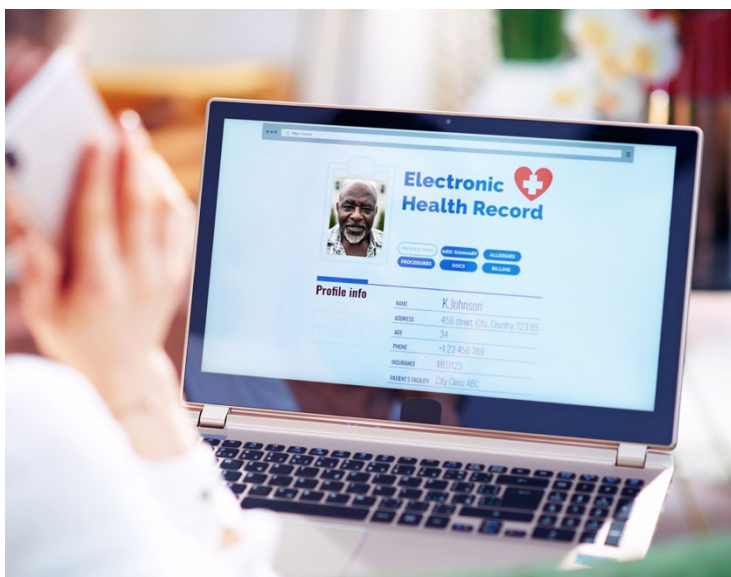


Reasons to opt for a telehealth visit over an in-person visit  
Among Black adults



Convenient? Yes...but what about other considerations?

Roughly four in ten (42%) Black adults ages 50 and older say that telehealth visits are better than in-person ones when it comes to convenience, but far fewer consider telehealth visits superior when it comes to personal safety (24%), comfort (12%), or privacy (12%). Similarly, in focus groups on telehealth, reservations about the use of technology were commonly cited, with concerns primarily focused on privacy, security, and the potential of being taken advantage of. Notably, in these groups, those with the most use and comfort with technology appeared to be the least concerned about privacy, security, and the potential of being scammed.



***“There are so many predators out there. There are so many perpetrators. You have a lot a bad people online now. They’re stealing your identity.”***

***55-plus, non-tech-savvy participant***

## **Providing a “personal touch,” diagnosis accuracy, thoroughness, and quality of care give in-person visits the edge over telehealth.**

Seven in ten (70%) Black adults ages 50 and older consider in-person visits superior to telehealth when it comes to the “personal touch” while nearly two-thirds (63%) say the same thing about diagnosis accuracy. Half (or more) agree that in-person visits are superior to telehealth in terms of thoroughness (59%) and overall quality of care (54%), while roughly four in ten give higher marks for in-person visits for comfort (44%), the amount of time spent with the healthcare provider (43%), keeping one’s information safe (41%), personal safety (41%), and privacy (38%). Only about one-quarter (26%) rate in-person visits better in terms of convenience.

***“I’d rather see the person so they can hear me and understand what my needs are. Sometimes, if they were on the phone, they’d have other things going on at the same time. It was ‘Yes, yes.’ I didn’t have their full attention.”***

***– (55-plus, non-tech-savvy participant)***







**Comparison of telehealth vs. in-person visits on several dimensions**  
*Percentage who say in-person visits are better, among Black respondents*

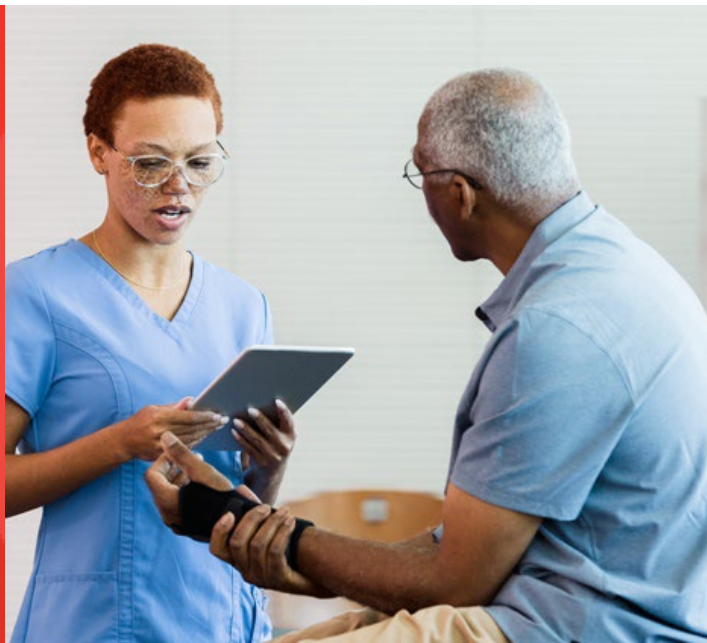
<b>70%</b> Providing a personal touch	<b>63%</b> Diagnosis accuracy	<b>59%</b> Thoroughness	<b>54%</b> Overall quality of service	<b>44%</b> Comfort
<b>43%</b> Amount of time spent with healthcare provider	<b>41%</b> Keeping your information safe	<b>41%</b> Personal safety	<b>38%</b> Privacy	<b>26%</b> Convenience

**Although telehealth has its place, the preference for ensuring a personal connection remains.**

Roughly eight in ten Black adults ages 50 and older agree that telehealth has its place (80%), is best with a known provider (77%), and has made it easier to seek out health care (76%). However, two-thirds also agree that telehealth takes away the personal aspects of a healthcare visit (66%), six in ten (58%) agree that there is an increased chance of misdiagnosis and misinformation with telehealth, and half (51%) agree that telehealth makes sense only in a situation such as the COVID-19 pandemic. About four in ten (42%) agree that telehealth takes the focus off the patient.

Focus group participants also underscored this preference for developing and maintaining close relationships with a health care provider, with many noting that they went back to in-person, face-to-face appointments as soon as possible after the pandemic due to the trust they had in their doctor. For them, in-person visits meant enhanced communication, personalization, and (the resumption of) continuity of care.

*“My husband won’t do telehealth. He wants to go in. He wants his doctor. He doesn’t even really like PA’s. He wants his doctor.”*  
55-plus, tech-savvy participant



### Views on statements about telehealth Among Black respondents

■ Strongly or somewhat agree    ■ Strongly or somewhat disagree

**80%** VS **18%**

Telehealth has its place, but it should not be the primary way to interact with their healthcare providers

**77%** VS **19%**

Telehealth is best with your known healthcare provider rather than a new healthcare provider

**76%** VS **22%**

Telehealth has made/can make it easier for to seek out health care when you need it

**66%** VS **33%**

Telehealth takes away the personal aspects of a healthcare visit

**58%** VS **37%**

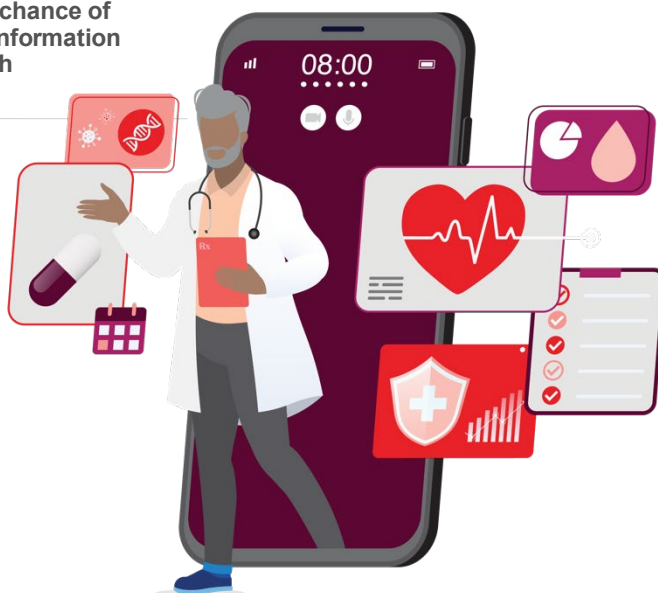
There is an increased chance of misdiagnosis and misinformation with telehealth

**51%** VS **47%**

Telehealth only makes sense when there is a situation like the pandemic

**42%** VS **55%**

Telehealth prevents providers from giving patients their undivided attention

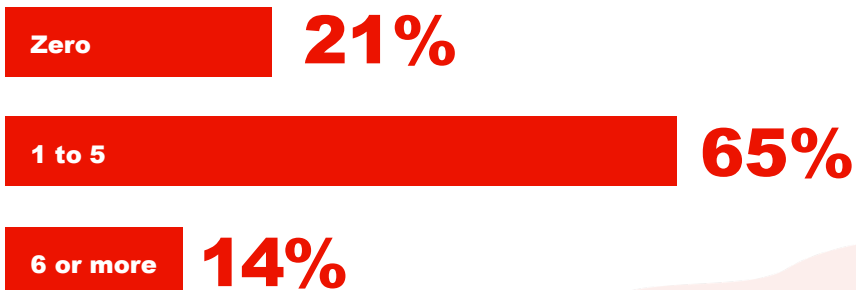


## For those with access to telehealth services, usage and satisfaction is high.

Nearly two-thirds (65%) of Black adults ages 50 and older who have access to telehealth services have used them 1 to 5 times in the past year, while one in seven (14%) percent have used them 6 or more times. Among them, more than half (55%) say they have been very satisfied, while nearly four in ten (38%) say they have been somewhat satisfied. In contrast, seven percent report being somewhat or very dissatisfied with their telehealth experience.



Number of times healthcare services have been used in the past 12 months  
*Among Black respondents with telehealth services available*



## Implications

Four years after the rapid uptick in telehealth usage that was noted during the COVID-19 pandemic, it appears that telehealth is now considered as a useful tool by most Black adults ages 50 and older, with high levels of access, usage, and satisfaction. But, while telehealth is seen as a convenient alternative to in-person medical visits for simple, somewhat routinized tasks such as prescription refills and quick check-ins after previous appointments, there remains a strong preference for the sense of personal connection that seems only available through face-to-face, in-person interaction with one's health care provider.

## Methodology

**Focus Groups:** In fall 2023, a series of 12 focus groups was held with U.S. adults ages 40 and older. Each group included 6 to 8 participants and were mixed by age (40-54 and 55-plus); self-identified race/ethnicity (Black, Hispanic, White); location (urban, suburban, and rural); health insurance (with and without access to telehealth); and other standard demographics. Six groups were done by video and six by telephone. The video groups were done with broadband users and participants comfortable with technology and telehealth. The telephone (non-tech) groups were done with those who did not use broadband and/or participants uncomfortable with technology and telehealth.

**National Survey:** The 2024 Telehealth survey was conducted by phone and online from January 18-23, 2024, with a total sample of 1,774 adults ages 50-plus (including oversamples of n=452 African American/Black respondents and n=440 Hispanic/Latino respondents). This survey was conducted using NORC at the University of Chicago's Foresight 50+® Panel which is designed to be representative of the U.S. household population. All data are weighted by age, gender, and race according to the most recent Census population statistics. The margin of error for the general population survey is  $\pm 3.43$  percent. The margin of error is  $\pm 6.08$  percent for the Hispanic/Latino sample and  $\pm 6.66$  percent for the African American/Black sample.



For more information on the methodology, Teresa A. Keenan at [tkeenan@aarp.org](mailto:tkeenan@aarp.org) or Cheryl L. Lampkin at [clampkin@aarp.org](mailto:clampkin@aarp.org).  
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