

Parents' Perceptions, Preferences, and Satisfaction with Teletherapy for Speech-Language Pathology Services during the COVID-19 Pandemic

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DOI: <https://doi.org/10.52403/ijshr.20220421>

ABSTRACT

Background: COVID-19 pandemic has resulted in the reduction of in-person speech and language therapeutic services and a considerable increase in tele practice.

Objective: The study aimed to understand the parents' preferences, opinions, satisfactions and difficulties with regard to teletherapy for speech language pathology services.

Method: A 19-item questionnaire on Teletherapy satisfaction and preferences was completed by 50 parents of individuals with disabilities. The individuals were receiving therapeutic services for a variety of communication disorders. The results obtained were analysed descriptively.

Results: The majority of the parents were highly satisfied and reported tele practice to be very effective in improving the speech and language skills of their children. Majority of parents also reported to have better communication with clinician, and to have a better understanding of goals in Teletherapy. On the other hand, the responses were mixed when questioned about their preference and their child's preference for in-person therapy services over Teletherapy. Major difficulties reported by parents were network connectivity, and holding the child's attention. Marked differences were observed in parents' perceptions with respect to the child's age and disability.

Conclusion: Though parents found Teletherapy to be effective, their preference for Teletherapy services over in-person speech and language

therapeutic services were mixed. And parents perceived Teletherapy as a best service delivery model during the current COVID-19 pandemic.

Key words: Teletherapy, In-person Therapy, Speech Language therapy, Covid-19, Efficacy

INTRODUCTION

The onset of the Covid -19 pandemic has impacted people with disabilities in several ways. In-person therapeutic services have been suspended, and schools for children with special needs have been closed. Teletherapy services have become popular, and is being widely used to compensate for the lack of in-person services. Telepractice is the use of technology to provide speech-language services to clients at a distance by connecting clinicians and clients.¹

Earlier studies comparing the effectiveness of tele practice to in-person services have found tele therapy services to be equally efficient and thus a promising method for speech and language therapeutic services for school age children.² Teletherapy has also been reported to be effective for parent-implemented intervention for children with autism spectrum disorder.^{3,4} Furthermore, previous studies have reported on speech language pathologists' favourable attitudes toward Teletherapy.⁵ On the other hand, very few

studies have examined parents' satisfaction, preferences, and difficulties with Teletherapy services. A study by Lam JHY et al., 2021⁶ among Hong Kong Chinese parents reported that although Teletherapy had high efficacy they believed that Teletherapy services were less effective when compared to in-person services.

Parents on the other hand, play a crucial role in children's intervention, especially during the pandemic. Positive perceptions may in turn be related to better involvement of families in Teletherapy and thus better outcomes for children. Understanding parental perceptions can also guide in making future adoptions and modifications in Teletherapy.

With the pandemic to last for a few years, Teletherapy may continue to be the primary service delivery model. Due to scarcity of speech language pathologists in India, most speech language therapeutic services are limited to urban areas. As a result, Teletherapy services may continue to be widely used even after the end of the pandemic. As a result, it is critical to understand family's preferences and satisfaction with Teletherapy, as these factors play a key part in the intervention's overall success.

AIM

The study aimed to understand the parents' preferences, opinions, satisfaction and difficulties with regard to teletherapy for speech and language pathology services.

METHOD

In July, 2021, 72 parents whose children were receiving institutional based teletherapy were contacted over telephone. 53 parents agreed to participate in the survey. The individuals with disabilities were aged between 3-28 years (Mean age = 8 years), and were receiving teletherapy for a variety of communication disorders, including stuttering, speech sound disorders, and Language disorders. Parents of children with co-morbidities including Autism spectrum disorder, Attention deficit

hyperactive disorder, and cerebral palsy were also included in the survey.

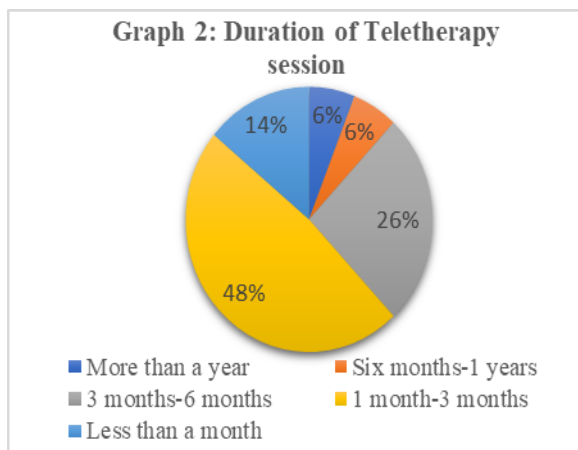
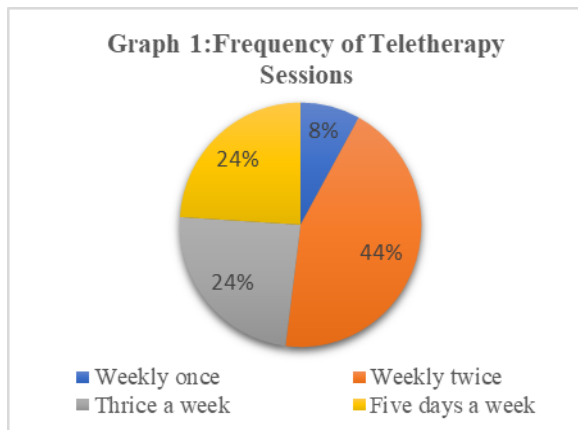
The survey consisted of 19 questions. And was divided into 4 sections, namely (1) Frequency and duration of teletherapy and their appropriateness; (2) Parental perception of Efficacy of Teletherapy; (3) Preference for Teletherapy as compared to in-person services (4) Barriers, advantages, and changes they wish to see in Teletherapy. The questionnaire was validated by 5 speech language pathologists with over 7 years of experience and necessary changes were incorporated. Sections 1 and 4 consisted of open-ended questions. Questions in the sections 2 and 3 were based on 5-point Likert- scale, which ranged from 1 (i.e., strongly disagree) to 5 (i.e., strongly agree). The questionnaire was developed using the template available in google forms. The survey took approximately 10 minutes to complete. The forms were analysed for completeness, and the results were analysed descriptively.

RESULTS

Teletherapy has significantly replaced in-person therapy services during the pandemic. In order for it to be successful, the parents/caregivers' perceptions, and feedback must be taken into account, so that appropriate modifications can be made.

Frequency and duration of teletherapy and their appropriateness

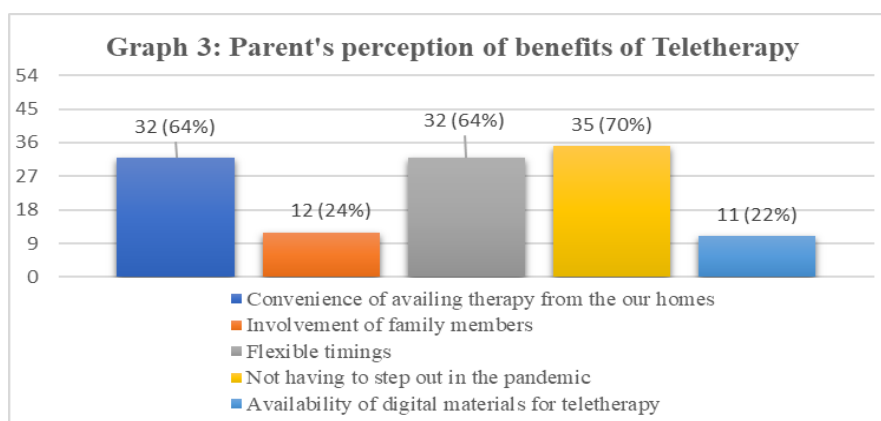
Most parents reported of their child receiving teletherapy twice a week, followed by both five days a week and thrice a week and a small proportion reported to receive therapy once a week (Graph 1). Most parents reported of their children attending teletherapy, for a duration of 1 month to 3 months, followed by 3 months to 6 months (Graph 2). And majority found the frequency (72%) and duration of teletherapy (80%) to be very appropriate.



Parental perception of Efficacy of Teletherapy

The vast majority of Parents/ Caregivers had a favourable perception of Teletherapy, agreeing that it is successful in improving a child's speech and language

Barriers, advantages, changes they would like to see in Teletherapy



According to parents, the greatest hurdles to teletherapy were network connectivity, keeping the child's attention, and having therapy materials available at

abilities (38/50,76%), that they understand the teletherapy goals (45/50, 90%), and that the goals meet their child's needs (36/50,72%). On the whole, they expressed high levels of satisfaction with Teletherapy (Mean:3.9). Parents, on the other hand, revealed mixed feelings about their child's enjoyment of teletherapy, with 56 % indicating that their children enjoy it.

Preference for Teletherapy Vs in-person Speech and Language therapy services

When parents were asked about their preference for teletherapy over in-person services, the responses were mixed: parents' preference for Teletherapy (48% agreed, 22% neutral, 30% disagreed) and the child's preference for Teletherapy (28% agreed, 28% neutral, 44% disagreed), better understanding of speech and language skills (36% agreed, 28% neutral, 36% disagreed), better communication with clinician (29/50, 58%). In addition, opinions on the overall effectiveness of Teletherapy vs in-person therapies were varied (30% agreed, 30% neutral, 40% disagreed). But parents strongly reported (96%) that Teletherapy was the best service delivery model during the pandemic situation.

home, followed by the availability of gadgets and a lack of expertise about gadget use. Teletherapy was deemed beneficial by parents because it eliminated the need to

leave the house during the pandemic, provided flexible scheduling, and allowed family members to participate (Graph 3). According to the parent's, better network connectivity at the clinician's end, might be highly advantageous.

DISCUSSION

This study examined parents'/ Caregivers' perceptions of Teletherapy efficacy and their preferences towards Teletherapy during the COVID-19 pandemic. We found that the majority of the parents of individuals with variety of communication disorder across a wide age range (3 years-28 years) were highly satisfied and accepted teletherapy to be a very effective mode of intervention.

The majority of parents reported of their children attending teletherapy since the past 1 month to 3 months. This could be attributed to increased awareness about Teletherapy and also increased acceptance, as compared to the previous year. As the pandemic is expected to last for a few years, parents have slowly come to accept that this may be the best choice of intervention in light of the pandemic. The frequency of Teletherapy, which was frequently twice/thrice a week, was highly rated by the parents. This could be because in-person therapies were provided with the same frequency and duration, allowing individuals to take advantage of alternative therapeutic services on alternate days and time for home practise. The goals of therapy were reported to be well-understood by the parents, showing that there was effective communication between the professionals and the parents.

The majority of the parents reported Teletherapy to be highly effective in improving the speech and language skills of the children during the pandemic. Similar outcomes with Teletherapy have been reported in systematic reviews for a variety of communication disorders across different age groups.⁷⁻⁹

Despite the positive responses to the efficacy of Teletherapy, parents' preferences

for in-person therapy and Teletherapy were mixed. Lam JHY et al., 2021⁶ found similar results among parents in Hong Kong. In-person services may be advantageous for several reasons. Firstly, it allows for better observation of visual clues such as facial expressions and body language, as well as nonverbal communication abilities. Secondly, during Teletherapy sessions, children's attention may be limited. Thirdly, Teletherapy necessitates a greater level of parental involvement. Lastly, it restricts the parent-support contacts that in-person services can deliver.

Parents preferred in-person services despite the fact that Teletherapy was very effective and had various advantages over in-person services. As a result, whenever feasible, one-on-one therapy, home-based intervention, and hybrid intervention must be made available. Moreover, during the pandemic, parental support group can be organised via online modes.

Despite the fact that institutional-based speech and language therapy services served all age groups, this study focused on a small sample size with a narrow age range of 3 to 28 years. Replicating this study with a larger sample size would provide more statistical power as a basis for validating the findings.

CONCLUSION

Following the COVID-19 pandemic, Teletherapy service delivery have been widely used to serve children with speech and language disorders. Parents perceived Teletherapy to be highly effective and best mode of service delivery during the pandemic. Hence Teletherapy may be used to supplement in-person services whenever required.

Acknowledgement: None

Conflict of Interest: None

Source of Funding: None

Ethical Approval: Approved

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How to cite this article: Arunachalam A S, Balambigai N. Parents' perceptions, preferences, and satisfaction with teletherapy for speech-language pathology services during the COVID-19 pandemic. *International Journal of Science & Healthcare Research*. 2022; 7(2): 145-149. DOI: <https://doi.org/10.52403/ijshr.20220421>
