Benefits and Challenges of Telehealth Feeding Intervention for Autistic Children

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Background

- Eating and mealtime challenges are common in autistic children (Leader et al., 2020), with limited access to intervention (Dahl-Popolizio et al., 2020; Fleet et al., 2022; Hines et al., 2019).

- COVID-19 required a rapid shift of intervention from in-person to telehealth (Abbott-Gaffney et al., 2022; Hoel et al., 2021).

**Study Purpose:**

- Examine OTPs’ perceptions of transitioning to a telehealth delivery model due to COVID-19
- Considering the impact on intervention accessibility, challenges, and benefits for families
Feeding Intervention

Engaged Eaters Program

Pre-intervention

Caregiver-mediated Intervention

24 intervention visits & 8 caregiver modules

Post-intervention

Collaborative goal setting

- Intake Assessments (stress, efficacy, feeding challenge, demographics)
- Family mealtime observation
- Structured caregiver-child feeding and play interaction
- Caregiver interview

- Repeat all assessments, observations, and interview
- Goal evaluation
Methods

Engaged Eaters Program (EEP):
EEP-Telehealth (n = 13)
EEP-In-Home (n = 14)

Descriptive Analysis of Participant Characteristics and Demographics

Semi-Structured Interviews with Occupational Therapists delivering EEP-In-Home and EEP-Telehealth

Integration of Participant Descriptive Statistics and Interview Thematic Analysis
Results - Participant Demographics

Significant differences in rurality and distance from the research center were identified for families in the telehealth group.
Results - Interview Themes

➢ Confirmed increased accessibility with telehealth delivery

➢ Identified **areas to consider** for implementing telehealth interventions for autistic children
Results - Interview Themes

Building Relationships and Communication

➢ "Developing rapport takes longer on Telehealth."

Context on Clinical Reasoning

➢ "Strict boundary around a Telehealth session."

Practitioners’ Experience

➢ “I felt like I was sitting on my hands.”
Results - Interview Themes

Increased accessibility for participation
➢ “They just would not have been able to access the service if we weren't doing Telehealth.”

Engaged caregivers as facilities
➢ “It really empowered some parents.”
Results - Interview Themes

Technology troubles and internet issues
➢ "Almost feels like a game of telephone."

Loss of physical tools and environmental context
➢ "You lose a lot of your toolbox."

Missing telehealth sessions
➢ "It doesn't feel as significant."

Child engagement on a screen
➢ "It takes a lot of sustained attention."
Discussion

Telehealth offers increased accessibility to feeding interventions for autistic children.

- Telehealth delivery can improve **equity & access** to needed OT services, particularly speciality services
- Telehealth can **increase caregiver engagement** in caregiver-mediated interventions
- **Unique strategies** are needed to **engage child and caregiver** via Telehealth
Implications for Occupational Science

• **Mealtimes are important family occupations** that need further investigation across populations

• **Telehealth can increase access** to needed, specialized therapy and related services
  - Understanding practitioners’ occupations can support training and adaptations required (Telehealth + Hybrid)

• Caregiver-mediated interventions via telehealth can increase caregiver engagement
  - Understanding why and what works for which parents is needed


Questions for Discussion

1. How can we further develop telehealth services to facilitate access to occupation-centered interventions for underserved populations in access to technology resources?

2. What are important person and environment factors that should be considered when negotiating telehealth vs. to in-home interventions for families?

3. How can occupational science support systematic access to multi-modal intervention development?