RESEARCH ARTICLE

Psychosocial experiences of selected pediatric occupational therapists in the Philippines on the shift to Telehealth Practice during the COVID-19 pandemic

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ABSTRACT

Background: At the beginning of the COVID-19 pandemic, healthcare professionals including pediatric occupational therapists (OTs) mandatorily had to shift to the practice of telehealth in the absence of a safe inperson setup caused by the outbreak.

Objective: This study aims to determine the psychosocial experiences encountered by selected pediatric OTs in the Philippines brought by the shift to telehealth practice during the COVID-19 pandemic.

Methodology: Purposive sampling was used in the study to gather six (6) licensed pediatric OTs who provide occupational therapy (OT) services via telehealth in the Philippines, and the respondents were not personally connected to any of the researchers. A semi-structured one-on-one interview with the participants through a Zoom call was conducted to obtain their psychosocial experiences. A thematic analysis was used and four (4) themes emerged by the end of the study: consequences of the shift to telehealth practice, changes during telehealth provision, increased resilience, and increased psychological strain.

Conclusion: In conclusion, the transition to provision of telehealth services to pediatric clients has challenged the practices of the selected pediatric OTs in terms of preparing for the session, where one of the main prevalent concerns was toward collaboration and communication with the caregivers; conducting of telehealth sessions, where communication interruption was one of the main concerns; and in ethical considerations, where OTs made it a point that they rectified ethical dilemmas amidst telehealth provision. These experienced challenges also included increased workload and psychological distress, while improved occupational balance and adaptability were most commonly experienced by OTs.

Keywords: COVID-19 Pandemic, Occupational Therapy, Pediatric Occupational Therapists, Telehealth, Psychosocial Experiences

Introduction

The Coronavirus (COVID-19) pandemic has brought various challenges to every person, from different aspects of their health to their psychosocial well-being. Healthcare providers are at risk of developing mental health disorders [1]. Negative effects on psychosocial well beings such as stress, fear, anxiety, symptoms of depression, lack of sleep, and burnout were prevalent in healthcare providers during the COVID-19 pandemic [2].

Upon the onset of the COVID-19 outbreak in the country, the practice of occupational therapy (OT) in the country was

significantly affected. Imposed lockdowns and community quarantines were established country-wide to limit the spread of the virus, challenging the Philippine health care system [3]. With this, Filipino occupational therapists (OTs) have to bridge the gap in the hindered ability of the practitioners to provide OT sessions, and this was done through implementation of telehealth [4]. Telehealth in pediatric practice is considered an effective way to deliver therapy services during the COVID-19 pandemic [5]. In the Philippines, the majority of the workforce of OT practice in the pediatric cluster, with 224 OTs working for pediatric-psychiatric clients and 376 OTs working for pediatric-neurodevelopmental clients [6].



Despite perceived benefits of telehealth practice, there are also challenges or obstacles affecting telehealth practice [7]. The shift to telehealth both has its advantages and disadvantages implied on the practitioners, the clients, and the whole process of service provision, including that of the preparation and conduction of telehealth sessions, as well as the ethical considerations that practitioners should continually abide by. Due to this sudden shift to telehealth sessions, several unforeseen changes have been encountered concerning the provision of telehealth services to the pediatric population that significantly influence the psychosocial wellbeing of the pediatric OTs. According to Ito & Ishioka [8], the increase in workload and the fear of being exposed to the virus while conducting face-to-face sessions during the COVID-19 pandemic were associated with the psychological effects on the OTs, such as anxiety, depression, and insomnia. The study focuses on determining psychosocial experiences, which are defined as the experiences caused by environmental and/or biological factors on the social and/or psychological aspects of an individual [9]. This study is used to describe how the shift to telehealth services during the COVID-19 pandemic affected the psychological and social well-being of pediatric OTs. These are a variety of factors such as the quality of life, stigma, and mental health outcomes like depression, anxiety, posttraumatic stress, and mood disorders in relation to the external environment of an individual [10].

With this, the researchers decided to have an in-depth understanding of this phenomenon and to expand their knowledge on the psychosocial experiences of the pediatric OTs through utilizing a phenomenological research design. This type of research design aims to focus on understanding and describing the experiences of involved individuals in a particular phenomenon which, for this study, aims to determine the psychosocial experiences encountered by selected pediatric OTs in the Philippines brought by the shift to telehealth practice during the COVID-19 pandemic. Specific objectives of the study would be to identify the challenges encountered by pediatric OTs in terms of preparation for telehealth sessions, conducting telehealth sessions, ethical considerations, and to determine how these encountered challenges affect their psychosocial well-being.

This study will be of great benefit to the pediatric OTs, as it will give them an overview of the challenges and experiences commonly encountered by other people in their occupation in the Philippines, and how it can significantly influence their psychosocial well-being during the provision of telehealth services. Stakeholders, such as employers in the rehabilitation facilities, can be guided to balance out and give

consideration to the distribution of pediatric clients to OTs providing OT services via telehealth setting.

This study will also help employers gain insight about the challenges that OTs have been going through that could allow them to create policies that will benefit both OTs and clients. Future pediatric OTs can also benefit from the study as it will provide them insight about the challenges that they could experience which would help them come up with solutions for a better and more proactive response.

Methodology

Prior to the data gathering and implementation of the research, the study underwent significant technical and ethical review by the Independent Ethics Review Panel in the Department of Occupational Therapy of De La Salle Medical and Health Sciences Institute, and was thereafter approved for implementation. The study also follows the WMA Declaration of Helsinki prior to data gathering.

Participants

The population for this study consisted of six (6) licensed pediatric OTs in the Philippines who provide telehealth services amidst the pandemic. Participants were gathered with the use of a purposive sampling method, as the researchers were looking for specific OTs who have had specific experiences and qualities fitting the criteria that would be more suitable for the study. Through this, the researchers were able to gain responses from a small amount of participants who fit the inclusion criteria, which included a registered occupational therapist in the Philippines who willingly participated in the study. The participant provides pediatric telehealth services since the emergence of COVID-19, has adequate experience in in-person practice of pediatric OT before shifting to telehealth, and provides in-person pediatric OT services at the same time as the provision of telehealth services. These inclusion criteria will indicate that the participant had adequate knowledge and significant experience pertaining to a particular phenomenon, and were able to provide reliable responses and data for the study. As for the exclusion criteria, the following were established: current status being an OT intern and possessing an expired PRC professional occupational therapy license.

Instruments

The study adapted the guide questions from the study of Delos Reyes *et al.* [7] entitled "Experiences of Filipino Pediatric Occupational Therapists in Batangas City on



Telehealth" wherein the researchers were given approval by the aforementioned author to adapt the guide questions from his study. The guide/prompt questions were then modified to align them with the focus of this study, which highlights the psychosocial experiences of selected pediatric OTs in the Philippines regarding the sudden shift to telehealth practice during the COVID-19 pandemic. After the adapted guide questions were modified, face validity and content validity were done with the following professionals: registered OTs in the psychosocial cluster, registered OTs with strong research backgrounds, and registered psychometrician/s (Appendix A).

Procedure for Data Collection and Analysis

A semi-structured interview through Zoom video communications was done to gather the needed data from the six pediatric OTs from Luzon, Visayas, and Mindanao. The interview was conducted in a mixture of Tagalog and English. However, during the post-interview, the researchers were not able to provide a debriefing session to the respondents. Thereafter, a video and audio recording were used, transcribed, and translated with the approval from the respondents to be used for data gathering, extraction, and analysis. Conclusively, the Braun and Clarke thematic analysis was used wherein transcription, familiarization, coding, deriving and defining themes, and writing up the final analysis and description of findings were done in the study to identify commonly recognized themes and patterns to answer the research questions.

Results and Discussion

This chapter presents the psychosocial experiences encountered by selected pediatric OTs in their practice of

telehealth in the course of the COVID-19 pandemic. During the one-on-one semi-structured interview with the participants, the languages used during the interview were English and Tagalog.

Results

Four (4) themes emerged after analyzing the statements made by the chosen pediatric OTs: consequences of the shift to telehealth practice, changes during telehealth provision, increased resilience, and increased psychological strain. Each theme has its corresponding codes derived from the transcribed data. In coming up with the themes and codes for the results of this study, the transcribed data was set by labeling data extracted with relevant codes, making note of any potential patterns or connections between items that might inform subsequent theme development. In addition, the researchers utilized inductive manual coding, which means that the responses of the six (6) respondents were highlighted according to their main thought, created their specific extracted meanings, and provided codes and themes to discern a pattern in order to make a generalization. Once the theme has been identified and approved by the majority of the researchers, frequency of appearance was noted as well as how important a certain code is to answer the research question.

Discussion

Theme 1: Consequences of Shift to Telehealth Practice

Change in work demand

The increase in work demand for OTs due to the transition to telehealth was often not met by sufficient compensation which is a source of frustration to practitioners. [1] According to selected pediatric OTs, this is the most prevalent change

Theme 1: Consequences of Shift to Telehealth Practice					
Changes in work demand	Changes in client handling		Work communication with colleagues		
Altered psychological state					
Theme 2: Changes during Telehealth Provision					
Preparing	Conducting		Ethical Considerations		
Collaboration and Communication with the caregiver	Communication interruption		Rectified ethical dilemmas		
Theme 3: Increased Resilience					
Improved occupational balance		Increased adaptability			
Theme 4: Increased Psychological Strain					
Increased workload		Increased psychological distress			



they have experienced as it gives rise to stronger collaboration between the parents and the therapist in preparation for the materials needed for each session. This has also prompted the respondents to prepare ahead of time in comparison to face-to-face therapy sessions wherein the materials are already available inside the clinic. Telehealth services at home can also present challenges beyond technology, such as inappropriate equipment, insufficient infrastructure, and noise. Additionally, unfavorable physical conditions such as cramped living spaces, lack of privacy, and the presence of others can also be an issue. [2]

"... telehealth needs extra effort compared to clinics, as for material preparation ..." (R4)

Changes in client handling

Pediatric OTs have experienced changes in terms of client handling. Given that they only interact with their client virtually, the majority have experienced limitations in building rapport, providing physical cues during intervention sessions, and observing their client's performance in their occupations. Despite the limitations experienced by the selected pediatric OTs, there are also positive changes in client handling, including the client's caregivers becoming more engaged in client management during sessions which helps improve their awareness of their child's behavior and their overall relationship with them. In another study, parents also reported that they had a greater grasp of their child's needs and how each member of the family might help satisfy those needs [3].

"... you get to engage more the caregivers in their role in managing their child..." (R1)

Altered psychological state

This was experienced in the form of anxiety, doubts, stress, mental fatigue, and burnout. Many Filipino OTs are still experiencing different levels of emotional distress over the shift from in-person therapy to teletherapy [4]. Furthermore, professionals in healthcare are prone to developing mental health disorders, and women healthcare professionals and those living in high-risk locations may experience worse outcomes in terms of their psychological health [5]. OT services involve therapeutic skills which were difficult to translate virtually to the children and their caregivers. This presented a challenge to the therapists as they have limited input compared with in-person sessions, frustration with Zoom, fatigue and technical difficulties mid-session,

adjustment period of the child in a new learning environment, and the uncertainty of telehealth itself.

"It became a bit frustrating in my end because let's say there's an instance wherein the child suddenly has a tantrum, you won't be able to do anything except stay there, you watch" (R4).

"... there's always that doubt if am I doing or am I giving the best practice or am I giving the best management for the child given the limitations and restrictions ..." (R5)

Work communication with colleagues

In the aspect of work communication with colleagues, there are positive and negative experiences encountered by pediatric OTs. Positive experiences include being able to collaborate with other therapists by providing insights and sharing their concerns regarding telehealth for them to be able to adapt better in the telehealth setup. They were also able to collaborate with their colleagues in exploring different telehealth platforms, and their knowledge about telehealth also increased by attending webinars and observing other OTs conducting telehealth sessions.

"...you can also ask for help from others because your coworkers are also experiencing the same, so you can easily ask for their insights and regarding my concerns about telehealth..." (R1)

"... Of course, I tried to learn about it more so at that time PAOT was giving webinars on telehealth, so I'm joining, and then I also joined the telehealth session by the senior OT from one of my clinics ..." (R6)

Negative experiences are difficulties in communicating with their colleagues and observing, gathering, and relaying client information.

"...In terms of meeting with other therapists, now there is none, it's either you chat or have a Zoom meeting to ask tips before going to telehealth, but mostly chat..." (R6)

Theme 1 discussed the consequences brought by the shift to telehealth practice, which included the changes in work demand and client handling which had undergone a massive shift, implying the need for an increase in collaborative efforts with the therapist in terms of preparing the materials needed for the session, and in engaging the parents in the OT sessions of their children. Furthermore, the adoption of



telehealth services in OT practice has resulted in altered psychological states and mixed experiences of work communication among the pediatric OTs. While providing telehealth, OTs have reported experiencing anxiety, doubts, stress, mental fatigue, and burnout. However, telehealth has also enabled OTs to collaborate with other therapists and provide valuable insights for adapting to this new setup. Despite these positive experiences, the use of telehealth has also presented challenges in communication, observation, and the sharing of client information among colleagues.

Theme 2: Changes during Telehealth Provision

Collaboration and communication with the caregiver

In terms of preparation, the communication between the primary caregiver and therapist is crucial, especially for children under 10 years, for a successful telehealth session [6]. Primary caregivers help the therapists in supporting and facilitating activities in telehealth sessions. However, based on the gathered data, collaboration and communication with the caregiver was an evident change during telehealth provision. This is due to the need to walk the caregivers through the platform, needed materials, establishment of purpose, and activity setup prior to the session.

"Sometimes parents cannot follow it (instructions), maybe they are too lazy to read through the documents. So, sometimes instead of going directly to the activities, I still need to instruct them." (R2)

"Not all parents before are okay with technology, there are some that find it difficult even in creating a Zoom account so you need to teach them" (R3)

Communication interruption

In conducting the session, changes mostly faced by the therapists included interruption in communication, which was briefly defined as a "barrier" to the implementation of telehealth services [7]. This includes difficulties that involve the use of technology, e.g., slow internet connection, environmental setups, and camera angles. These changes are known to bring a negative impact on the flow of the appointment, effectiveness of intervention, and patient and therapist satisfaction [8].

"Very challenging is the internet connection. There are times when I open boom cards, we are taking so long to finish, it does not... it does not open on the screen, so once it happens it really consumes time." (R2) "Technical difficulties like the internet, sometimes the connection is something that you can't really control. Sometimes, it's either my connection is bad or the client's connection is bad." (R5)

Power outages also contributed to the interruption of communication and service provision, as most devices and wifi routers depend on electricity to function.

"If there is no electricity, it is a challenge especially if the battery of the gadgets were not charged." (R3)

Furthermore, microphone, speaker, and camera issues also bring a negative impact during synchronous sessions as such hinder effective evaluation of child performance.

"It's just a little bit more difficult if you're working with a handwriting goal and then I cannot see the client's work unless I position the camera in the best way possible to see the client's writing stroke." (R6)

Rectified ethical dilemmas

The therapist must ensure that the platform for telehealth must be secure, dependable, and adaptive to avoid ethical challenges. The therapist should inform the patients of their privacy choices to protect their data and prevent sensitive personal information from being leaked [9]. In terms of ethical considerations done by the respondents during implementation of telehealth sessions with their pediatric clients, there were no noted experiences of ethical dilemmas. As stipulated in provided guidelines on the utilization of Telehealth (PAOT, 2020), OTs are ensuring the application of ethical and confidential measures, *e.g.*, screening the clients whether or not they are fit for telehealth, asking permission to record sessions, and ensuring that the environment for conducting telehealth is private and secluded.

"I always make sure that when I'm conducting my therapy session, it's always in a secluded area where no one's around like a clear background so that what's going to happen in the session is just between me and the client. So I haven't really had an issue with that." (R5)

"I don't record at all. If I do take pictures, I will ask permission and I will send it also to the parents via the clinic.... During the session, I make sure that there will be no people who would suddenly appear in order to protect the identity of the patient." (R6)



Theme 2 discussed the changes experienced by the pediatric OTs in the provision of telehealth services. These changes mentioned are external factors that may affect in maximizing the 1-hour session for pediatric clients or may not affect depending on the preparedness and troubleshooting of the therapist. Since the delivery of telehealth is through technological devices, problems occur such as lack of knowledge and skills in the chosen platform, technological issues and resources, which adds to the demand to communicate and collaborate with the caregivers.

Theme 3: Increased Resilience

Increased occupational balance

Based on the experiences encountered by pediatric OTs, the shift to telehealth practice has a great impact on their work-life balance which surpasses the need to adapt to changes brought by the COVID-19 pandemic, such as managing and delegating time to accomplish several tasks in response to the changes that occurred. Respondents have ascertained that time management is a vital component in providing treatment services and improving their occupational balance during the COVID-19 pandemic.

"...time management and mindset in a way, you voluntarily accepted the job without being forced so you really have to be professional since you accepted it in the first place and so you have to do it" (R4)

"...the only way you really find support is really through chatting or video call, it's a good thing that even though we were locked in our homes or confined in our home at least there's a way to communicate with each other" (R6)

Increased adaptability

Pediatric OTs had eventually learned to appreciate and acknowledge the positive prospect of telehealth in regard to their psychosocial well-being. Resiliency led them to accept changes that challenge them to think more critically, adjust to diversities in telehealth services, and apply intervention strategies to themselves. Along with that, increased support from the respondents' social network is a primary factor that helped them to effectively engage in and perform their work, thus increasing their adaptability. Other professionals did the same in terms of providing a window for coping, engagement in routines, continuing communication with other people, and reflection which was also done by the respondents of this study [10].

"... It's easier for us to adjust since we have perk. I've been practicing in Batangas for full time since I started work and we have network. It's a good thing for a profession, although we're a small community we are intact." (R3)

"...It opened you to new changes, I was able to push myself to do things that are beyond my capabilities during Zoom or when making GIFs" (R4)

For Theme 3, it is evident that having a good social support system is also vital to OTs, as this helps them feel motivated and have someone they can talk to in their work. There is also increased work-life balance such as managing and delegating time which helped them to improve occupational balance during COVID-19. Furthermore, although the respondents experienced difficulties with the sudden shift to delivering OT services to patients, it also helped them to learn new skills and bring out their full potential as OTs, which made them more adaptable in delivering services to their patients.

Theme 4: Increased Psychological Strain

Increased workload

This factor has been noted to be a concern due to the extra effort they need to make to fill in the disparities during telehealth provision during the pandemic. Considering the current situation where lockdowns are imposed nationwide and in-person service provision is limited, the majority of the people, including medical professionals, are confined to their homes and work is being done at home. This results in increased psychological strain, including a lack of boundaries between work and personal matters, heavier burden on task preparation for telehealth sessions, accumulation of tasks that leads to finishing a month's worth of tasks all at once. This was also notable in another study where evidence showed that increased workload is prevalent during this time of the pandemic as a result of the constant need to do work, along with occupational stressors, including being on standby at all times and adjusting their work time [11].

"...tasks were much heavier, and the burden of the task of telehealth preparation afterward." (R5)

"I guess a little effect is it took a lot more of my time and that there is blur between boundaries of work and relaxing" (R6)

"I guess one of the negative things is that you are always online, you have to be always online, you have to be always on the screen" (R5)



"..that is what's difficult, you have to do [a month's worth of work] all at once." (R1)

Increased psychological distress

Pediatric OTs are still prone to facing challenges concerning negative realizations regarding their professional expertise. This led them to experience stress, anxiety, and sometimes overthinking due to the novelty of the mode of service delivery and its usage in OT. Medical professionals also continuously experience pressure in working with this new set-up of providing therapy to their clients, which affects their overall psychosocial well-being [12]. As the respondents emphasized, there is tremendous pressure due to several factors, such as not being as structured with client decking. Also, some participants reported experiencing nervousness by just thinking of the activities provided to their clients and being doubtful of the service they are providing.

"I always overthink whether this practice is good for me or not, or is this practice really beneficial to conduct." (R2)

"Things happen, I question if I'm a good OT. Sometimes my services get invalidated, sometimes I also reassess myself..." (R2)

"...as a professional, it kind of takes a toll on you like how you don't want to question yourself, but at the same time, you can't avoid it." (R3)

"It was stressful at the beginning because it was all very uncertain." (R3)

"...I was challenged as an OT, still deliver and give quality healthcare therapy even through telehealth and not inperson..." (R6)

"I think there's always that doubt that am I doing or am I giving the best practice or am I giving the best management..." (R5)

To correlate the four identified themes, pediatric OTs encountered challenges/difficulties in the shift to telehealth practice, as there are changes from in-person therapy sessions to be addressed. In terms of preparing sessions, the therapists are needed to collaborate and communicate with the caregiver to prepare for a successful conduct of the session. It is deemed challenging, as some caregivers still need to be walked through the activities and assisted with the platform. In conducting the telehealth session, technological

issues, such as in internet connection, electricity, and use of devices, have an impact on the flow and effectiveness of synchronous sessions. Despite the shift to telehealth practice, therapists are able to ensure applying the ethical and confidential measures which follows the guidelines on the utilization of telehealth from the Philippine Academy of Occupational Therapists (2020). These challenges/difficulties have an equivalent increased workload that also contributes to the psychological distress of OTs. They are forced to adjust to the new mode of therapy provision within a short period which led to instances of doubts and hesitations in their professional competency, specifically in the efficacy and quality of services they provide, and increased workload as telehealth demanded more time to spare from the therapists prior and after the session, which led one to experience burnout. Nonetheless, pediatric OTs were able to apply coping techniques such as application of time management strategies to themselves, which contributed to their ability to manage their time effectively and become more flexible with the changes in providing OT services through telehealth. The overall consequences of the shift to telehealth practice to pediatric OTs are change in work demands as it requires extra effort to provide services, experiencing stress, burnout, anxiety and frustration in the process of service provision via telehealth, limited patient handling, and change in work communication with colleagues.

These results led the researchers to provide the following recommendations, such as conducting programs that help therapists to better cope with the experience of frequent anxiety, fear, burnout, and doubts in professional competence, which is reflected in this research as a negative experience of selected pediatric OTs in the Philippines.

In line with this study, future researchers can conduct further studies on the psychosocial well-being of OTs and how it affects their performance in different areas of occupations. Furthermore, future researchers are recommended to implement studies regarding the occupational balance of OTs, including how they are able to manage this despite the increasing demand and changes in telehealth provision. In addition, future researchers are recommended to further investigate the effect of the psychosocial experiences encountered by selected pediatric OTs on the shift to telehealth to the psychosocial well-being of the stakeholders.

It is also recommended that OT educators can integrate telehealth into student curricula and implement current trends in the profession that can potentially shape students to be flexible healthcare practitioners who can cope in



various settings. For the employers, it is recommended to provide leisure programs to pediatric OTs to alleviate the psychological distress that they are experiencing during the time of the COVID-19 pandemic.

Lastly, it is recommended to target different populations of OTs to gather more insight about their psychosocial experiences in providing OT services through telehealth as there are possibilities that there would be a variation of experiences encountered by OTs that provide services in a different OT setting.

Conclusion

Pediatric OTs in the Philippines experienced changes and challenges in their conduct of practice due to the shift to telehealth practice in the midst of the COVID-19 pandemic. These include changes such as consequences in the shift to telehealth, changes in telehealth practice, resilience, and psychosocial strain. A marked negative impact of change due to shift to telehealth has changed the participant's work environment which resulted in the following: increased workload, change in client handling, work communication with colleagues, increased workload, and psychological distress on the well-being of selected pediatric OTs in telehealth was recognized. Nevertheless, there are still noteworthy positive effects, as reflected by improved occupational balance and adaptability despite the adjustments in the provision of OT services in these trying times.

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APPENDIX

Appendix 1. Approved Table of Objectives and Questions.

PSYCHOSOCIAL EXPERIENCES OF PEDIATRIC OCCUPATIONAL THERAPISTS IN THE PHILIPPINES ON THE SHIFT TO TELEHEALTH PRACTICE DURING THE COVID-19 PANDEMIC

Introductory Questions Disclaimer: These questions are not part of the tool to be validated • How long have you been practicing OT in telehealth practice? (Ilang and are not meant to answer the objectives of the study. taon na po kayo nagpa-practice bilang occupational therapist?) How do you define telehealth/ telemedicine? (Ano ang depinisyon The purpose of asking introductory questions to the respondents ng telehealth o telemedicine para sayo?) is for the researchers to establish the respondent's profile. Gauging the background or profile of the respondent is important as this will highlight their experience or level of expertise in the profession. In getting to know the specifics of their practice, it would help determine a marked difference in psychosocial experiences, especially in the transition from onsite to telehealth setting. Statement of the Problem **Objectives** Questions 1. What are the psychosocial To determine the psychosocial In terms of social aspect, what experiences have you experiences encountered by experiences encountered by encountered after shifting to telehealth practice during the pediatric occupational therapists pediatric occupational therapists COVID-19 pandemic? brought by the shift to telehealth in the Philippines brought by the Ano anong mga karanasan sa aspetong social ang inyong practice during the COVID-19 shift to telehealth practice during naranasan nang lumipat kayo sa pagbibigay serbisyo sa pandemic of COVID-19 pandemic. pamamagitan ng telehealth sa kalagitnaan ng pandemiyang COVID-19? In terms of psychological aspect, what experiences have you encountered after shifting to telehealth practice during the COVID-19 pandemic? Ano anong mga karanasan sa aspetong psychological ang inyong naranasan nang lumipat kayo sa pagbibigay serbisyo sa pamamagitan ng telehealth sa kalagitnaan ng pandemiyang COVID-19? In terms of social aspect, what were the changes you observed when you shifted to telehealth from in-person services? Ano ang mga pagbabago na iyong naobserbahan sa pagbibigay ng serbisyo sa Telehealth practice at in-person services sa social na aspeto? What are the advantages and disadvantages of Telehealth practice? Ano ang mga advantages at disadvantages ng Telehealth practice sa social na aspeto? In terms of psychological aspects, what were the changes you observed when you shifted to telehealth from in-person services? Ano ang mga pagbabago na iyong naobserbahan sa pagbibigay ng serbisyo sa Telehealth practice at in-person services sa psychological na aspeto? What are the advantages and disadvantages of Telehealth practice? Ano ang mga advantages at disadvantages ng Telehealth

practice sa psychological na aspeto?

Statement of the Problem	Objectives	Questions
2. What are the challenges encountered by pediatric occupational therapists on the shift to telehealth practice during the COVID-19 pandemic in terms of the following: Preparation for a telehealth session Conducting telehealth Session Ethical consideration	terms of preparation for telehealth sessions, conducting telehealth sessions, and ethical	 Are there any challenges/ difficulties you encountered in the shift to telehealth practice during the COVID-19 pandemic in terms of Preparing for the Telehealth Session? What are the challenges/ difficulties you encountered? Mayroon ba kayong hinarap na mga hamon sa paghahanda para sa telehealth session nang lumipat ka sa pagbibigay ng serbisyo sa pamamagitan ng telehealth sa kalagitnaan ng COVID-19 pandemic? Ano ang mga hamon na iyong hinarap? Ano ang mga hamon sa paghahanda para sa telehealth session ang iyong hinarap nang lumipat ka sa pagbibigay ng serbisyo sa pamamagitan ng telehealth sa kalagitnaan ng COVID-19 pandemic? Are there any challenges/ difficulties you encountered on the shift to telehealth practice during the COVID-19 pandemic in terms of Conducting a Telehealth session? What are the challenges/ difficulties you encountered? Mayroon ba kayong hinarap na mga hamon sa pagsasagawa ng telehealth session nang lumipat ka sa pagbibigay ng serbisyo sa pamamagitan ng telehealth sa kalagitnaan ng COVID-19 pandemic? Ano ang mga hamon na iyong hinarap nang lumipat ka sa pagbibigay ng serbisyo sa pamamagitan ng telehealth session ang iyong hinarap nang lumipat ka sa pagbibigay ng serbisyo sa pamamagitan ng telehealth sa kalagitnaan ng COVID-19 pandemic? Are there any challenges/difficulties you encountered on the shift to telehealth practice during the COVID-19 pandemic in terms of Ethical Consideration? What are the challenges/ difficulties you encountered? Mayroon po ba kayong hinarap na mga hamon sa pangkalahatang pagsasaalang-alang ng Etika nang lumipat ka sa pagbibigay ng serbisyo sa pamamagitan ng telehealth sa kalagitnaan ng COVID-19 pandemic? Ano ang mga hamon na iyong hinarap? Ano ang mga hamon sa pangkalahatang pagsasaalang-alang ng Etika, ang iyong hinarap nang lumipat ka sa pagbibigay ng serbisyo sa pamamagitan ng telehealth sa kalagitnaan ng COVID-19 pandemic?
3. How was the psychosocial well-being of pediatric occupational therapists affected by these challenges?	To determine how the challenges encountered by pediatric occupational therapists on the shift to telehealth practice during the COVID-19 pandemic affect their psychosocial well-being.	 How was your psychosocial well-being affected by these challenges, particularly the positive and negative effect on your functioning as an individual and to society? Ano-ano ang mga positibo at negatibong epekto na naidulot sa iyong psychosocial well-being bilang indibidwal at miyembro ng lipunan ng mga pagsubok na iyong nabanggit? How was your social health affected by these challenges that you have mentioned earlier? Paano naapektuhan ng iyong mga nabanggit na pagsubok sa telehealth ang iyong social health? How was your mental health affected by these challenges that you have mentioned earlier? Paano naapektuhan ng iyong mga nabanggit na pagsubok sa telehealth ang iyong mental health?