Pediatric Physiotherapy from a Caregivers Lens: A Case Study

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Rationale: As a fresh graduate from physiotherapy school, my understanding of pediatric intervention was heavily influenced by exercises and protocols from well referenced books to target motor milestones. However, clinical practice taught me to view children holistically in the context of their family and life situations. This helped me broaden my outlook to using play as a medium, thinking beyond motor milestones and partnering with caregivers in intervention. This study explores caregivers' perception and experience about physiotherapy intervention.

Objective: To explore a caregiver's understanding of physiotherapy intervention received at a Child Development Center (CDC) based in Mumbai, India using a case study.

Method: The mother (primary caregiver) of a child, diagnosed with Global Developmental Delays receiving physiotherapy intervention at the CDC for one year was interviewed. The child received twice a week intervention with each session being one-hour long. Every session was divided into two parts: i) 50 minutes of working with the child using neuro-developmental principles, ii) last 10 minutes of discussion with the caregiver regarding the session and formulating a home program. A semi-structured interview in Marathi was undertaken to gather data which was video recorded. The data was transcribed verbatim and translated to English. Thematic analysis was employed to identify themes emerging from the interview.

Results: The themes were:

Physiotherapy-Motor and more: The caregiver experienced a shift in understanding of physiotherapy intervention, moving from addressing only motor development to targeting child development as a whole.

Playfulness and physiotherapy: Using playfulness in intervention influenced the child's development across all domains, including motor, cognition and communication.

Joining hands with caregivers: The therapist's technical expertise in neuro-developmental principles knowledge of child development and clinical reasoning skills along with the caregiver's observations, creativity in using home environment enabled the therapist-caregiver partnership. The caregiver identified this partnership as a crucial component of intervention.

Learnings: The caregiver voiced the need to have more home-visits and discussions post the session. Limited resources like time, materials to read and availability of other family members need to be considered.

Conclusion: The caregiver and I identify playfulness, moving beyond motor milestones and working closely with the caregivers as significant aspect of intervention influencing child development. It will be helpful to explore this further with other caregivers.