



Building and Maintaining Rapport with Parents: Does Telepractice Interfere?

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Over the years I have offered many *It Takes Two to Talk*® programs, and the foundation of every program was building a strong relationship with the parents. I have always known that establishing a connection with parents leads to a sense of trust that allows for collaboration, which is critical to the success of parent-implemented language intervention.

Last year, when I came to work at The Hanen Centre, I was asked to offer an online *It Takes Two to Talk* program. Of course, I was excited to be a part of this ground-breaking venture! But as the program start date approached, I became skeptical about building this important parent-clinician connection online, despite research consistently demonstrating the effectiveness of telepractice (Douglas, Nordquist, Kammes & Gerde, 2017; Ingersoll & Berger, 2015; Snodgrass, Chung, Biller, Appel, Meadan & Halle, 2017; Boisvert & Hall, 2014).

Setting out on my journey into the world of telepractice as a skeptic was a challenge. But along the way I was fascinated to learn I was not alone in my concerns. Clinicians across disciplines reported similar doubts about building connections via telepractice (Simpson & Reid, 2014; Tucker, 2012a). Given this common concern, I thought I'd share my journey into the world of telepractice and align it with current research. Specifically, we will be looking at why it's important to be connected to parents and whether it's possible to build this parent-clinician connection online.

Why does building a connection with parents matter?

A connection, or rapport, is an essential part of intervention, which emerges as a result of both individuals feeling supported by one another within the interaction (Tickle-Degnen & Rosenthal, 1990). According to Ebert (2018), the relationship formed between the clinician and the parent can significantly influence the outcome of intervention. In other words, stronger relationships between SLPs and parents increase the likelihood of positive intervention outcomes for young children (Ebert, 2018; Dobransky & Frymier, 2004). For example, parents are typically responsible for bringing young children to therapy sessions and for supporting the achievement of therapy goals outside of sessions. It's no surprise that if parents don't build a strong relationship with the clinician, they may be less likely to bring the child to therapy and to implement the strategies taught within these sessions at home.

We can increase positive outcomes for young children in intervention by:

- **fostering a sense of mutual respect** – this occurs when both the parent and clinician view one another as contributing members in the intervention process (Millar & Rogers, 1976). By including parents in this process, we are helping them to feel empowered to support their child.
- **building mutual warmth and trust** – this results in both the parent and the clinician setting positive expectations for one another, but also displaying comfort and confidence in one another to achieve these expectations (Millar & Rogers, 1976).

Developing rapport via telepractice: Is it possible?

Historically, communication through technology including email, text messages, and even the telephone, have often been regarded as a difficult way to interpret the true meaning of a message. These misunderstandings likely occur because we are unable to observe the nonverbal cues that offer insight into how someone might be feeling, apart from what they might be saying (Murphy & Rodriguez-Manzanaraes, 2012). It may also be more challenging to convey warmth and understanding when inherently there is a sense of distance being online (Murphy & Rodriguez-Manzanaraes, 2012). Given these challenges, it's easy to see why some SLPs may feel that building and maintaining rapport would not only be challenging online, but perhaps even impossible (Mashima & Doarn, 2008; May & Erickson, 2014).

Research shows that...

Contrary to popular belief, relationships developed through telepractice are similar to those developed in person (Freckmann, Hines & Lincoln, 2017; Hines, Lincoln, Ramsden, Martinovich & Fairweather, 2015; Akamoglu et al., 2018; Day & Schneider, 2002). Several researchers found similar results including:

- Day and Schneider (2002), who found that the medium of intervention, whether face to face, video conference or telephone, did not significantly differ in the development of rapport.
- Freckmann et al., (2017) found similar results when comparing overall perception of rapport building practices between SLPs offering telepractice compared to SLPs offering in-person intervention. Results indicated no significant differences in either medium of intervention on the development of rapport.

So, yes, it's possible to develop rapport via telepractice, but is it different than building and maintaining rapport in person?

Given the differences in how both verbal and nonverbal communication can be interpreted in different mediums, it's important to consider how rapport might be developed via telepractice. I learned a lot about building rapport from running my first online *It Takes Two to Talk* program. Most importantly, I learned that you still do the same things you do in person, but more of it! For instance, after each online group session I would contact each parent who appeared to have difficulties filling out the home plan within the session. When it comes to in-person group sessions, we often move about the room, checking in with each parent as they fill out the home plan right in the session. But online, it's a little more challenging to do this individually, so I find myself spending more time checking in with parents outside of set session times.

A study by Akamoglu et al., 2018 found similar findings when they compared SLPs' perceptions of the development of rapport in telepractice to in-person services. The study included 15 SLPs who offered telepractice services, 5 of which offered both in-person and telepractice services in the US. Each SLP completed a questionnaire and an online interview answering open-ended questions related to the development of rapport.

Results indicated that in-person and telepractice involve essentially the same components in the development of rapport (Akamoglu et al., 2018).

One notable difference reported when developing rapport in telepractice is the need for greater flexibility. This is to allow for many opportunities to foster open communication and maintain a connection to the parents. This is done by

offering a variety of mediums of communication (i.e. text messages, telephone calls, emails) and flexibility to communicate outside of set session times (Akamoglu et al., 2018; Murphy & Rodriguez-Manzanaraes, 2012; Sucala et al., 2013). In my own experience when offering online *It Takes Two to Talk* programs, staying connected to the families outside of therapy sessions was crucial in ensuring parents felt supported, even without my physical presence. Some ways I stayed connected to the parents during the online *It Takes Two to Talk* program included calling each parent to check in on progress throughout the program, emailing parents before and after a group session to offer reminders of session dates/times and next steps, including any necessary documents they may need.

For example, in a recent online group session, one of the parents chose an activity that would be challenging for their child to engage in. Since online group sessions offer little privacy to speak with parents individually, I made sure to phone this parent after the session to discuss their home plan in greater detail. Given that I called outside of set session times, I was able to have a longer discussion with the parent to help them to identify alternative activities should the one chosen not work out as planned with their child. By being flexible and staying in frequent contact with families, there seemed to be less distance between us and more opportunities for individualizing the intervention plan to each child in the group. Establishing frequent contact through many mediums seems to encourage parents to stay connected and provides parents with ample opportunities to voice concerns and progress when they needed to.

Participation and telepractice

Another interesting difference between telepractice and in-person services when it comes to offering Hanen programs is the level of participation for some parents. To my surprise, parents attending the online version indicated that they likely would not have participated as much in an in-person program as they did in an online format. Interestingly, Day and Schneider (2002), had similar findings in that participants demonstrated greater participation online in comparison to in-person sessions. I was interested in how parents thought about this and one of the parents who attended the *It Takes Two to Talk* online reported feeling less pressure to participate online given the perception of distance between us! She went on to say this perception of distance made her feel “safe” and more inclined to be open and participate within the session.

The Bottom Line

In parent-implemented language intervention, we rely on parents to be active participants in order for the intervention to be successful. But we have to start by establishing a warm, trusting and respectful relationship with them. Despite my initial skepticism, my journey into the world of telepractice taught me that connecting with the parents in my program can be established and maintained via telepractice, as long as we put in the extra effort to be flexible outside of set sessions.

If you're considering offering telepractice, we plan to launch the *It Takes Two to Talk* program online to members very soon! We will provide training to those of you eager to offer your own online *It Takes Two to Talk* program. We also have plans for More Than Words® and Target Word™ programs to follow. I hope that if you have concerns about telepractice like I did, that a little insight into my journey will encourage you to dive into it and give it a try!

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About The Hanen Centre

Founded in 1975, The Hanen Centre is a Canadian not-for-profit charitable organization with a global reach. Its mission is to provide parents, caregivers, early childhood educators and speech-language pathologists with the knowledge and training they need to help young children develop the best possible language, social and literacy skills. This includes children who have or are at risk for language delays, those with developmental challenges such as autism, and those who are developing typically.

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