Benefits of online healthcare if one has a disability

Georgia Vine

As a teenager with Cerebral Palsy I often found that I had few people around to relate to. At this age, we want to connect with people who see the world from our own viewpoint, so I started to connect with people online via charities and I had a special connection with CP Teens UK.

Being involved with CP Teens UK and connecting with other disabled people, locally, nationally and recently internationally via online communities has really helped my confidence and changed my perception of my disability for the better. I really wanted an opportunity to share that sense of community and purpose with others so now I am an ambassador for CP Teens UK, this involves cohosting events and writing regular guest blog for them.

Having the help and support of CP Teens UK and the wider disabled online community has enabled me to be where I am today (a student at Sheffield Hallam University studying a BSc (hons) degree in Occupational Therapy).

Although it is important to say that many people have missed vital face to face contact, some disabled people have found that online appointments have suited their complex needs much more. This is because at times going to appointments can be quite stressful for a disabled person and can result in a lot of fatigue. As someone who has attended a lot of appointments in my life, I can say that there have been many times that the time spent travelling was much longer than the appointment itself.

To attend a face-to-face appointment, an enormous amount of energy and effort is required. When I was younger the preparation for the appointment would cause both physical and mental strain as that 1-hour appointment could take up to 3 and 4 hours. Getting up, getting ready, travelling there and back as well as the appointment itself is exhausting, physically and mentally, not to mention the transport and costs. On multiple occasions there have been times where I have not had the energy to go back to school and carry on with my day. If some of these appointments had been online, I would have had a lot more energy to go about my normal day.

I am aware that face-to-face contact cannot be replaced completely, and not every appointment can be done online. I would like to think that if I was under a professional’s care for a long period of time at some point, I would like the opportunity to physically meet them. I am also aware that even in the 21st century technology has its flaws and is not always 100% reliable. I have spent most of my life working on a computer and I still stumble.

Over the years, I have had many hands-on appointments with physiotherapists and occupational therapists that would not have worked virtually online. For example, they would not have been able to get a feel of how my muscles work and an online wheelchair assessment or kitchen assessment certainly would not have gone well.

However, we need to take this opportunity to be person centred, and explore if the option of virtual appointments could be offered for some appointments. If I had been given the choice, I would have leapt at an online appointment as it would have fitted in with my busy life a lot easier, and would have left me with the energy to continue with my day.

My suggestions

► Young people should be given the option of an online appointment.
► The disadvantages of an online appointment need to be discussed with the young person.
► Recognition that a mixture of online and face-to-face appointments should be an option for young people with a chronic illness.
I believe that healthcare professionals should give young people the option of a virtual appointment if possible, as choice and control are incredibly important, and provide more opportunities for people with complex needs to make their own decisions over their lives.

Twitter Georgia Vine @GeorgiaVineOT

Contributors GV, BSc (hons) Occupational Therapy at Sheffield Hallam University Follow: @GeorgiaVineOT visit: www.notsotherriblepalsy.com or email: georgia@notsotherriblepalsy.com

Funding The authors have not declared a specific grant for this research from any funding agency in the public, commercial or not-for-profit sectors.

Competing interests None declared.

Patient and public involvement Patients and/or the public were not involved in the design, or conduct, or reporting, or dissemination plans of this research.

Patient consent for publication Not required.

Provenance and peer review Commissioned; internally peer reviewed.

Open access This is an open access article distributed in accordance with the Creative Commons Attribution Non Commercial (CC BY-NC 4.0) license, which permits others to distribute, remix, adapt, build upon this work non-commercially, and license their derivative works on different terms, provided the original work is properly cited, appropriate credit is given, any changes made indicated, and the use is non-commercial. See: http://creativecommons.org/licenses/by-nc/4.0/.

ORCID iD
Georgia Vine http://orcid.org/0000-0002-9038-3142