Child-Physician Rapport at a Neurodevelopmental Clinic: In the Eyes of the Beholder

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BACKGROUND

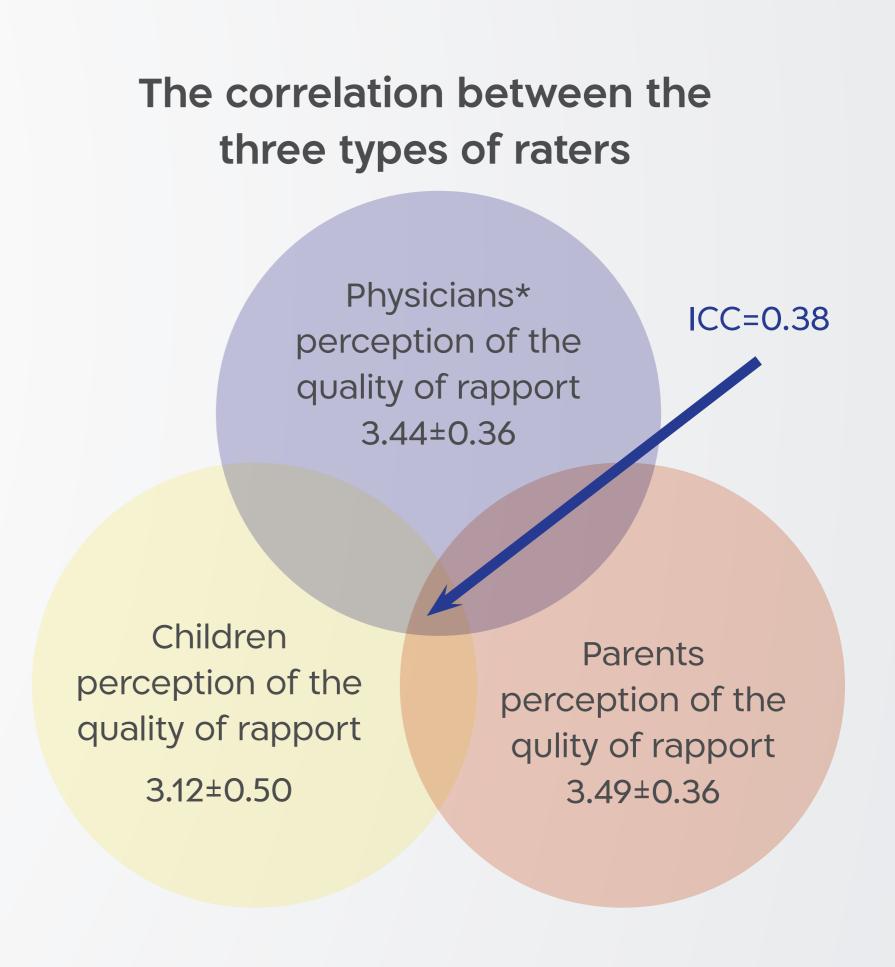
Worldwide, person-centered care (PCC) has become a major health policy principle and goal alongside a growing emphasis on the importance of participation rights and effective communication for individuals' cooperation and adherence to recommended interventions. Yet little is known about children's experience during neurological and/or developmental assessments and its effect on their cooperation. The current study aimed to examine children's perceptions of rapport establishment in a medical context and compare it to their parents' and physicians' evaluations of the children's experience in a clinical setting.

Methods

■ One hundred and two children and adolescents (aged 6.05–16.86 years, M = 9.63, SD = 2.42; 71.6% males) with neurological and/or developmental diagnoses completed the CHARM-C Questionnaire and Cooperation Scale immediately after neurological and/or developmental assessments at an HMO's child development center. In parallel, the children's parents and pediatricians completed the CHARM-A Questionnaire regarding the children's experience of rapport (a total of 306 questionnaires). The pediatricians and parents rated the children's level of cooperation.

Results

■ On average, children rated the rapport above average (M ± SD = 3.12 ± 0.50, Range 1–4), yet lower than parents' (3.49 ± 0.36) and physicians' (3.44 ± 0.36) evaluations of the children's sense of rapport in a clinical setting. The correlation between the three types of raters was low (ICC = 0.38). The children's and physicians' evaluations of rapport (but not the parents') were positively associated with the children's cooperation during



the examination (p < 0.01). No differences were noted regarding the perception of rapport between different age groups, gender, or assessment/follow-up examination, or among children with different neurodevelopmental diagnoses.

Discussion

- The evaluations of children with neurological and/or developmental disabilities of their experiences in medical encounters are valuable and cannot be replaced by parents' or physicians' evaluations.
- Consideration should be given to understanding children's experiences and facilitating their input in medical encounters.

Rapport building rated by the child

Child cooperation evaluation rated by the physician

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