

p-ISSN : 2788-5070 | e-ISSN : 2788-5089

DOI(Journal): 10.31703/gpessr
DOI(Volume): 10.31703/gpessr/.2024(VII)
DOI(Issue): 10.31703/gpessr.2024(VII.III)



VOL. VII, ISSUE III, SUMMER (SEPTEMBER-2024)

GPSSR

GLOBAL PHYSICAL EDUCATION & SPORTS SCIENCES REVIEW

HEC-RECOGNIZED CATEGORY-Y



Double-blind Peer-review Research Journal
www.gpessrjournal.com
© Global Physical Education & Sports Sciences Review

Article Title

Knowledge, Attitude, and Expectations of Tele-rehabilitation Among Physical Therapists of Peshawar

Global Physical Education & Sports Sciences Review

p-ISSN: 2788-5070 e-ISSN: 2788-5089

DOI(journal): 10.31703/gpessr

Volume: VII (2024)

DOI (volume): 10.31703/gpessr.2024(VII)

Issue: III Summer (September 2024)

DOI(Issue): 10.31703/gpessr.2024 (VII-III)

Home Page

www.gpessrjournal.com

Volume: VII (2024)

<https://www.gpessrjournal.com/Current-issues>

Issue: II-Spring (June-2024)

<https://www.gpessrjournal.com/issue/9/3/2024>

Scope

<https://www.gpessrjournal.com/about-us/scope>

Submission

<https://humaglobe.com/index.php/gpessr/submissions>

Google Scholar



Visit Us



Abstract

Tele-rehabilitation is a component of telemedicine that focuses on delivering rehabilitation services to individuals in distant areas. It has been recognized as an effective alternative healthcare delivery model during the COVID-19 pandemic, and numerous studies have highlighted its viability in providing rehabilitation services to patients. To assess the knowledge, attitudes, and barriers, a cross-sectional study was carried out among physical therapists in various settings within Peshawar. A total of 117 participants, both male and female, were selected using convenient sampling methods. The study was conducted over six months, with data collection taking place within one month.

Keywords: Knowledge, Attitude, Expectation, Tele-rehabilitation

Authors:

Haseeb Afridi: (Corresponding Author)

Lecturer, Faculty of Life and Allied Health Sciences,
Muslim Youth University, Islamabad, Pakistan.
(Email: afriidih1998@gmail.com)

Saman Ali: Teaching Assistant, Department of Rehabilitation Sciences, Rehman Medical Institute, Peshawar, KP, Pakistan.

Habiba Ali: Visiting faculty, Institute of Health Sciences, Khyber Medical University, Peshawar, KP, Pakistan.

Raheela Khan: Teaching Assistant, Department of Rehabilitation Sciences, Rehman Medical Institute, Peshawar, KP, Pakistan.

Pages: 21-27

DOI: 10.31703/gpessr.2024(VII-III).03

DOI link: [https://dx.doi.org/10.31703/gpessr.2024\(VII-III\).03](https://dx.doi.org/10.31703/gpessr.2024(VII-III).03)

Article link: <http://www.gpessrjournal.com/article/A-b-c>

Full-text Link: <https://gpessrjournal.com/fulltext/>

Pdf link: <https://www.gpessrjournal.com/jadmin/Auther/31rv1oLA2.pdf>



Citing this Article

Knowledge, Attitude, and Expectations of Tele-rehabilitation Among Physical Therapists of Peshawar							
03	Author	Haseeb Afridi Saman Ali Habiba Ali Raheela khan			DOI	10.31703/gpessr.2024(VII-III).03	
	Pages	21-27	Year	2024	Volume	VII	Issue III
Referencing & Citing Styles	APA 7 th	Afridi, H., Ali, S., Ali, H., & khan, R. (2024). Knowledge, Attitude, and Expectations of Tele-rehabilitation Among Physical Therapists of Peshawar. <i>Global Physical Education & Sports Sciences Review</i> , VII(III), 21-27. https://doi.org/10.31703/gpessr.2024(VII-III).03					
	CHICAGO	Afridi, Haseeb, Saman Ali, Habiba Ali, and Raheela khan. 2024. "Knowledge, Attitude, and Expectations of Tele-rehabilitation Among Physical Therapists of Peshawar." <i>Global Physical Education & Sports Sciences Review</i> VII (III):21-27. doi: 10.31703/gpessr.2024(VII-III).03.					
	HARVARD	AFRIDI, H., ALI, S., ALI, H. & KHAN, R. 2024. Knowledge, Attitude, and Expectations of Tele-rehabilitation Among Physical Therapists of Peshawar. <i>Global Physical Education & Sports Sciences Review</i> , VII, 21-27.					
	MHRA	Afridi, Haseeb, Saman Ali, Habiba Ali, and Raheela khan. 2024. 'Knowledge, Attitude, and Expectations of Tele-rehabilitation Among Physical Therapists of Peshawar', <i>Global Physical Education & Sports Sciences Review</i> , VII: 21-27.					
	MLA	Afridi, Haseeb, et al. "Knowledge, Attitude, and Expectations of Tele-Rehabilitation among Physical Therapists of Peshawar." <i>Global Physical Education & Sports Sciences Review</i> VII.III (2024): 21-27. Print.					
	OXFORD	Afridi, Haseeb, et al. (2024), 'Knowledge, Attitude, and Expectations of Tele-rehabilitation Among Physical Therapists of Peshawar', <i>Global Physical Education & Sports Sciences Review</i> , VII (III), 21-27.					
TURABIAN	Afridi, Haseeb, Saman Ali, Habiba Ali, and Raheela khan. "Knowledge, Attitude, and Expectations of Tele-Rehabilitation among Physical Therapists of Peshawar." <i>Global Physical Education & Sports Sciences Review</i> VII, no. III (2024): 21-27. https://dx.doi.org/10.31703/gpessr.2024(VII-III).03 .						





Title

Knowledge, Attitude, and Expectations of Tele-rehabilitation Among Physical Therapists of Peshawar

Abstract

Tele-rehabilitation is a component of telemedicine that focuses on delivering rehabilitation services to individuals in distant areas. It has been recognized as an effective alternative healthcare delivery model during the COVID-19 pandemic, and numerous studies have highlighted its viability in providing rehabilitation services to patients. To assess the knowledge, attitudes, and barriers, a cross-sectional study was carried out among physical therapists in various settings within Peshawar. A total of 117 participants, both male and female, were selected using convenient sampling methods. The study was conducted over six months, with data collection taking place within one month.

Authors:

Haseeb Afridi: (Corresponding Author)

Lecturer, Faculty of Life and Allied Health Sciences, Muslim Youth University, Islamabad, Pakistan.

(Email: afridih1998@gmail.com)

Saman Ali: Teaching Assistant, Department of Rehabilitation Sciences, Rehman Medical Institute, Peshawar, KP, Pakistan.

Habiba Ali: Visiting faculty, Institute of Health Sciences, Khyber Medical University, Peshawar, KP, Pakistan.

Raheela Khan Teaching Assistant, Department of Rehabilitation Sciences, Rehman Medical Institute, Peshawar, KP, Pakistan.

Keywords: [Knowledge](#), [Attitude](#), [Expectation](#), [Tele-rehabilitation](#)

Contents

- [Introduction](#)
- [Digital World](#)
- [Covid Pandemic](#)
- [Material and Methods](#)
- [Results](#)
- [Discussion](#)
- [Conclusion](#)
- [References](#)

Introduction

Tele-rehabilitation (TR) is an extension of telehealth, using telecommunication technology to deliver rehabilitation services remotely using technologies like smartphones, computers, and social media accounts i.e. Facebook Messenger, Google Hangouts, Skype, and email (Sidelil et al., 2021). For the American Telemedicine Association, it is the provision of

rehabilitation services using information and Communication technologies to children and adults by a range of professionals is changing the rehabilitation environment and services. Some of these services are therapeutic interventions, distant monitoring of progress, education, consultation, training, and networking for individuals with disabilities (CE et al., 2021). TR offers affordable and quality rehabilitation



services irrespective of time, space, and place. It can be a substitute for individuals with disabilities who cannot physically go to rehabilitation centers. In fact, the future of tele-rehabilitation (TR) appears to be rosy because of its flexibility, remote accessibility, and cost-effectiveness. Telemedicine offers both patients and their professionals chances to consult with the most experienced practitioners globally.

In this age of global digitalization, there is a clear impact on all spheres of life because of new innovations. The healthcare system is also shifting towards a new media system to provide its services and its administration as Tele-media. Also pandemic caused radical impacts on all sides including health care where physical contact between patient and Therapist was prohibited which badly impacted Physical Therapy practices. Therefore, there is a requirement to introduce tele-rehab concept in our society. PTs are the primary health care providers so their awareness about tele-rehabilitation is of utmost significance. Along with this, the research will depict gaps that exist between the perceived and actual knowledge of TR among Physical Therapists and its application for transferring their services through newer channels anywhere at any time at minimal cost in order to provide safety and treatment to the patients in every difficult environment.

Digital World

Technological revolutionary progress has brought about many changes in all sectors. I.e. application of information technologies in the healthcare and medical sectors held a strong potential for enhancing the quality and efficiency of work performed by medical organizations (UNIT & Telemedicine, 2002). Tele-rehabilitation (TR) is one of the newly developed areas of progress in telemedicine (Bashshur et al., 2009). It allows individuals with disabilities to access health advice, appraisal, and therapy from professionals all over the globe. Technological developments, for example, the inclusion of a 3D visual reality system in combination with sophisticated sensor systems that capture minor departures from the standard during appraisal and therapy have assisted in avoiding some of these perception barriers (Aloyuni et al., 2020).

Telehealth is practiced in Pakistan with zero effect on the healthcare system. Telehealth was started as a pilot program in Pakistan in 2001 by the Commission on Science and Technology for Sustainable Development in the South (COMSATS) at Gujar Khan. In 2004 COMSATS established a second telehealth center at Skardu in partnership with the Canadian

International Development Research Center. In 2011 COMSATS established a third telehealth center in Zhob, Baluchistan.

The World Health Organization (WHO, 2014) formulated a global action plan on disability for 2014–2021 in order to guarantee the availability of rehabilitation services and health care for individuals with disabilities, particularly in developing nations. The WHO estimated that although nearly 27 million individuals in Pakistan have a disability, only 23 physical medicine specialists are practicing in Pakistan.

Approximately 70% of the population of Pakistan is based in rural regions. However, just 22% of Pakistani doctors are living in rural settings. This can be beneficial for rural regions that lack primary health care and rehabilitation facilities.

In recent years, the rehabilitation system of Pakistan has been enhanced to a certain degree and is more effective compared to other SAARC nations. Yet in rural communities, the employment of tele-rehabilitation remains to be further taken into consideration and is also weakly connected with the acute care system of the country. Therefore, there exists a strong impulse to implement tele-rehabilitation programs in Pakistan.

Covid Pandemic

Coronavirus disease (COVID-19) has transformed numerous elements of individuals' lives and compelled governments and health authorities to put in place preventive measures, like social distancing to reduce the risk of exposure (Albahrouh & Buabbas, 2021). The World Health Organization (WHO) has advised running only critical rehabilitation services while limiting non-essential services to prevent harm during the COVID-19 pandemic (World Health Organization, 2020). In order to get over this condition, a regulatory body for physical therapy called the World Confederation for Physical Therapy (WCPT), in collaboration with the International Network of Physiotherapy Regulatory Authorities, recommended the use of tele-rehabilitation (TR). The compulsory social distancing during COVID-19 has rendered tele-rehabilitation the most appropriate way to provide medical services and prevent infection. According to the findings of recent systematic reviews, remote therapy by digital means must be taken into account as an alternative to normal face-to-face interventions (Cottrell et al., 2016).

The research was done in Nigeria in the year 2021 that proved that a majority of the respondents 43%

had average awareness and 41% of respondents had a higher awareness level about tele-

rehabilitation, which revealed most of the participants possessed good knowledge(2). Research conducted in Kuwait indicated that tele-rehabilitation was viewed as a suitable alternative to provide healthcare to patients in the context of the COVID-19 pandemic by the majority of the respondents 86.8%. Despite limited information and communication technology (ICT), 89% of the respondents indicated readiness to integrate tele-rehabilitation into their traditional practice (Albahrouh & Buabbas, 2021).

Over the last few years, the rehabilitation system of Pakistan improved to some extent and is more developed than other countries in the SAARC region(Khan et al., 2016). Yet, in rural communities, the application of tele-rehabilitation still requires further consideration and is also not well linked with the acute care system of the country (Zahid & Atique, 2016). Therefore, there is a great impetus for starting tele-rehabilitation programs in Pakistan. The health care system is shifting its system to a new media system to provide its services and its management as Tele-media. Even the pandemic had the worst impact in all areas including health care where physical contact between Therapist and patient was prohibited which worst impacted Physical Therapy practices. So there is a requirement to introduce the tele-rehab concept in our society. In addition to this, the research will show the gaps that exist between the perceived and actual knowledge about TR among Physical Therapists and its use for the transfer of their services through newer modes everywhere at any time at a low cost to ensure patient safety and treatment in every challenging environment.

Material and Methods

Table I
shows Demographics of participants

Variables		Frequency(percentage)
Gender	Male	66(56.4%)
	Female	51(43.6%)
Qualification	BSPT	2%
	DPT	65%
	MSPT	29%
	RMI	26(22.2%)
	KMU	48(41%)
Graduated from institutes	NORTHWEST	9(7.7%)
	MMI	14(12%)
	NCS	3(2.6%)

A cross-sectional design was employed while carrying out this research among clinical physical therapists employed in public and private institutions of Peshawar from August 2022, after obtaining ethical approval from institutions. Confidentiality, privacy, and anonymity of participants were ensured through written and signed informed consent. A convenient sampling technique was employed to choose 117 participants via Epi sample size calculator taking into account the population response rate of 90%, confidence interval of 95%, and 10% non-response rate. Data were gathered from clinical physical therapists who were employed in various hospitals in Peshawar and were willing to be part of the study. Information was gathered by applying a standard questionnaire containing a total of 36 questions of which 10 questions were related to awareness 19 questions were related to attitude and 7 questions were related to expectations towards tele-rehabilitation, on the basis of a 5-point Likert scale. Score 1 was awarded for possessing poor knowledge and score 5 was awarded for those possessing good knowledge of TR. Reverse scoring was applied to questions 12, 23, 24, 25, 26, 27. The cut-off score for knowledge, attitude and expectations was (0-50%) low score, (51-75%) average score and (76-100%) high score.

Results

The total sample size of study was 167 and the number of responses received were 117. Data was collected from clinical Physical Therapist of government and private institutes of Peshawar through a standardized semi structured questionnaire.

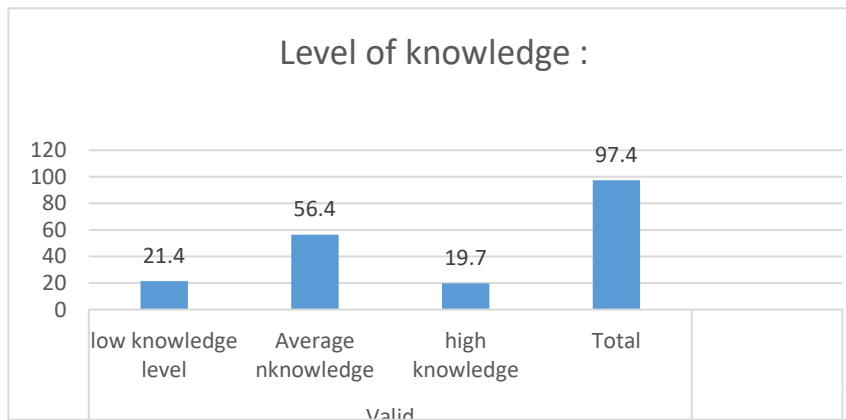
For normality of age, the Shapiro-Wilk test was used showing that data was not normally distributed. The mean age of participants was around 26.4 (SD±5.97). The demographics of the participants are listed below:

Among 117 participants n=67(57.3%) were aware of tele-rehabilitation. Most of participants were aware through internet n=26(22.2%) followed by use in hospital/practice n=22(18.8%) then lecture, workshop and seminar n=12(10.3%) followed by school or other sources n=7(7%).

In total 117 participants, n=25(21.4%) participants had low knowledge, n=56(56.4%) participants had

average knowledge while n=23(19.7%) had high knowledge regarding tele-rehabilitation. The cut-off value for the level of knowledge was (0-50%) for low knowledge, (51-75%) for average knowledge and (76-100%) were considered to have high knowledge, which means most of the participants had average knowledge regarding telerehabilitation.

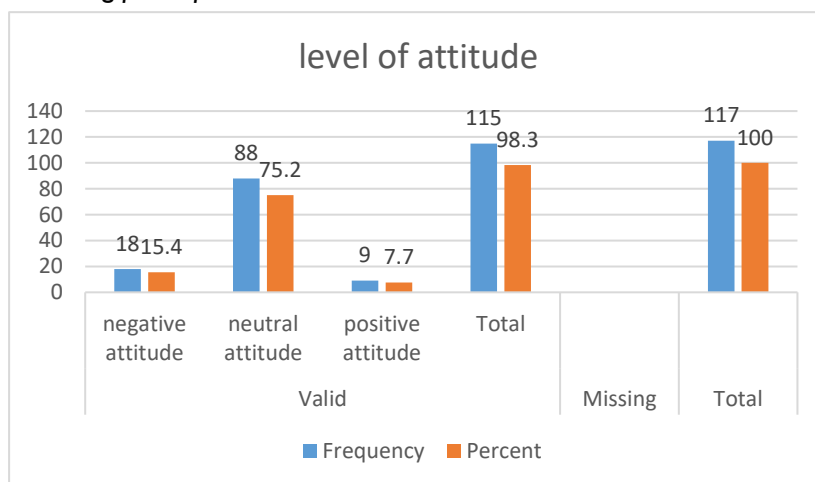
Figure 1
shows the level of knowledge



Among 117 respondents those with negative attitudes were n=18 (15.4%), while most of the participants showed neutral attitudes n=88(75.2%) and some of the participants showed positive attitudes n=9(7.7%)

towards tele-rehabilitation. Most of the participants n=92(78%) had low expectations, n=11(10%) had neutral expectations while n=14(12%) had high expectations regarding tele-rehabilitation.

Figure 2
shows the level of attitude among participant



The association between levels of knowledge with gender and years of experience, graduated from institute, qualification of participants shows no significant association. There was significant association between attitude and gender of participant as male

showed more positive attitude than female. The association of attitude between years of experience, qualification, graduated from different institutes was not significant.

Discussion

The application of information technology within the health care system is affected by numerous issues. Among others, human factors like users' attitudes and knowledge about technology are of significant concern. The objective of our study was to identify the level of knowledge, attitude, and expectations of tele-rehabilitation among Physical Therapists of Peshawar. The findings of our study indicate that a majority of the respondents had intermediate knowledge of tele-rehabilitation. The majority of the participants were aware of tele-rehabilitation through the Internet, then hospitals/practice lectures/seminars/workshops, and schools.

Participants who were not aware of tele-rehabilitation were either because they did not practice it, or were not included in the curriculum, due to technical issues. Our study also investigated physical therapist attitudes and it was positive towards telerehabilitation. Comparable research was conducted to determine awareness and attitude towards tele-rehabilitation among health professionals in provinces of Saudi Arabia to which the majority of physical therapists replied. The findings of that research indicated that participants were aware enough of TR, while the majority of participants exhibited a positive attitude towards TR (Aloyuni et al., [2020](#)).

Another research was conducted in Nigeria to assess the awareness, attitude, and expectation towards TR the findings of which showed that the majority of respondents were aware of TR whereas the primary source of respondents' awareness was school followed by lectures, workshops, and seminars. The majority of the respondents who stated that they were unaware of tele-rehabilitation mentioned lack of information and teaching tele-rehabilitation in the school curriculum as the reason, whereas some respondents stated that they had not observed tele-rehabilitation in practice. (74.5%) of the participants had a favorable attitude towards the implementation of TR and (71.5%) of the respondents believed that TR as a trustworthy service would be implemented in every hospital whereas (76%) indicated that the updates of each session must be sent to patients/clinician to facilitate the use of TR. (83%) respondents indicated that TR would be made a part of the university curriculum and different academic mediums like workshops, and seminars (2).

The rest are due to current research founded on gender division which indicated the total of male respondents was (56.4%) and female respondents

were (43.6%) in which there was no significant relationship (p-value 0.53) between gender and knowledge level. These results were comparable with a study conducted in Nigeria there was no gender association found for knowledge and attitude towards TR (2). In comparison research conducted in Ethiopia had high results of male physical therapists with a response of approximately (74.1%) compared to females (25.9%) with a (p-value of 0.000) indicating that these findings were not congruent to our study (Biruk & Abetu, [2018](#)).

The correlation between the level of qualification with the level of knowledge revealed (p-value 0.229) and attitude (p-value 0.6) was not significant with (p-value of 0.809) consistent with the study in North West Ethiopia which illustrated that there was no correlation between the level of qualification with knowledge and attitude towards TR (Biruk & Abetu, [2018](#)).

The (p-value of 0.26) association between attitude and years of experience indicates no association whereas the (p-value of 0.25) association between attitude and years of experience also indicates no significant association as expected by the study of Ethiopia with (p-value of 0.008) for attitude but not consisted with (p-value 0.000) for attitude (Biruk & Abetu, [2018](#)).

There was no correlation between a degree of awareness (p-value 0.9) and attitude (p-value 0.277) with participants of graduates of different institutes.

Our data was only collected from clinical physical therapists of Peshawar and also because of the limitation of time and agreement of participants, we could not further study the results, which is the limitation of this study. Also, we were unable to identify the barriers to using tele-rehabilitation. So more studies should be conducted for the same. Since our data was collected only from Government and Private clinical setups' physical therapists, more research is needed that can evaluate the knowledge, attitude, and expectations of academic physical therapists and physical therapy students so that we can draw our findings to the whole population.

Conclusion

From this research, we conclude that most of the physiotherapists who were employed in various healthcare hospitals had intermediate awareness, attitude, and expectations towards tele-rehabilitation whereas some of the physiotherapists had poor awareness, attitude, and expectations towards it. The male Physical therapists were more aware, attitudinal,

and expecting towards TR compared to females. The source of knowledge of Physical Therapists is because of their contact with it in their work environments. Although some of them revealed high knowledge due to the internet. The people who have no knowledge were because it was not observed in practice, not taught in the curriculum, and technical problems.

Since our information was gathered from clinical physical therapists of Peshawar alone and also owing to time constraint and participant's consent we were not in a position to pursue further outcomes, which is the drawback of this study.

Also, we were unable to find the barriers to implementing tele-rehabilitation. Therefore further studies should be conducted for this reason.

The research has future applications for which students of all institutes should be informed about the awareness of tele-rehabilitation and how it is applied in working environments. Since more skills and awareness are needed for its utilization and implementation, seminars should be organized for more awareness concerning telerehabilitation. It must be taught as part of the curriculum so the students are familiar with it and also clinical settings should be provided with digital tools, for that purpose various seminars or workshops should be organized. Since our data was gathered only from Government and Private clinical setups' clinical physical therapists, more research is needed which might evaluate the knowledge, attitude, and expectations of academic physical therapists and physical therapy students so that we can generalize our findings to the entire population.

References

- Albahrouh, S. I., & Buabbas, A. J. (2021). Physiotherapists' perceptions of and willingness to use telerehabilitation in Kuwait during the COVID-19 pandemic. *BMC Medical Informatics and Decision Making*, 21(1). <https://doi.org/10.1186/s12911-021-01478-x>
[Google Scholar](#) [Worldcat](#) [Fulltext](#)
- Aloyuni, S., Alharbi, R., Kashoo, F., Alqahtani, M., Alanazi, A., Alzhirani, M., & Ahmad, M. (2020). Knowledge, Attitude, and Barriers to Telerehabilitation-Based Physical Therapy Practice in Saudi Arabia. *Healthcare*, 8(4), 460. <https://doi.org/10.3390/healthcare8040460>
[Google Scholar](#) [Worldcat](#) [Fulltext](#)
- Bashshur, R. L., Shannon, G. W., Krupinski, E. A., Grigsby, J., Kvedar, J. C., Weinstein, R. S., Sanders, J. H., Rheuban, K. S., Nesbitt, T. S., Alverson, D. C., Merrell, R. C., Linkous, J. D., Ferguson, A. S., Waters, R. J., Stachura, M. E., Ellis, D. G., Antoniotti, N. M., Johnston, B., Doarn, C. R., . . . Tracy, J. (2009). National Telemedicine Initiatives: essential to healthcare reform. *Telemedicine Journal and e-Health*, 15(6), 600–610. <https://doi.org/10.1089/tmj.2009.9960>
[Google Scholar](#) [Worldcat](#) [Fulltext](#)
- Biruk, K., & Abetu, E. (2018). Knowledge and Attitude of Health Professionals toward Telemedicine in Resource-Limited Settings: A Cross-Sectional Study in North West Ethiopia. *Journal of Healthcare Engineering*, 2018, 1–7. <https://doi.org/10.1155/2018/2389268>
[Google Scholar](#) [Worldcat](#) [Fulltext](#)
- CE, M., TA, B., CT, S., B, A. A., Fatoye, C., Maikudi, L., & Fatoye, F. (2021). Awareness, attitude and Expectations of physiotherapy students on telerehabilitation. *Medical Science Educator*, 31(2), 627–636. <https://doi.org/10.1007/s40670-021-01234-w>
[Google Scholar](#) [Worldcat](#) [Fulltext](#)
- Cottrell, M. A., Galea, O. A., O'Leary, S. P., Hill, A. J., & Russell, T. G. (2016). Real-time telerehabilitation for the treatment of musculoskeletal conditions is effective and comparable to standard practice: a systematic review and meta-analysis. *Clinical Rehabilitation*, 31(5), 625–638. <https://doi.org/10.1177/0269215516645148>
[Google Scholar](#) [Worldcat](#) [Fulltext](#)
- Khan, F., Amatya, B., Sayed, T., Butt, A., Jamil, K., Iqbal, W., Elmalik, A., Rathore, F., & Abbott, G. (2016). World Health Organisation Global Disability Action Plan 2014–2021: Challenges and perspectives for physical medicine and rehabilitation in Pakistan. *Journal of Rehabilitation Medicine*, 49(1), 10–21. <https://doi.org/10.2340/16501977-2149>
[Google Scholar](#) [Worldcat](#) [Fulltext](#)
- Sidelil, H., Demissie, A., Debalke, G., Tilahun, B., Fikade, B., & Hailegebreal, S. (2021). Attitude towards tele rehabilitation-based therapy services and its associated factors among health professional working in specialized teaching hospitals in Amhara region, Northwest Ethiopia, 2021. *Research Square (Research Square)*. <https://doi.org/10.21203/rs.3.rs-929351/v1>
[Google Scholar](#) [Worldcat](#) [Fulltext](#)
- UNIT, I., & Telemedicine, M. (2002). *17BEBME6E02 Telehealth technology: Objectives: The student should be made to. In Health*, 54.
[Google Scholar](#) [Worldcat](#) [Fulltext](#)
- World Health Organization. (2020). *COVID-19: Operational guidance for maintaining essential health services during an outbreak—Interim guidance*, 25 March 2020. <https://www.who.int/publications/i/item/WHO-2019-nCoV-essential-health-services-2020.2>
[Google Scholar](#) [Worldcat](#) [Fulltext](#)
- Zahid, Z., & Atique, S. (2016). Telerehabilitation services in Pakistan: A rehabilitation professional's perspective. *Studies in Health Technology and Informatics*, 225, 901–902.
[Google Scholar](#) [Worldcat](#) [Fulltext](#)