



OPEN ACCESS

EDITED AND REVIEWED BY
Reuben Escorpizo,
University of Vermont, United States

*CORRESPONDENCE
Ana Paula Scoleze Ferrer
✉ ana.ferrer@hc.fm.usp.br

RECEIVED 05 June 2023
ACCEPTED 18 July 2023
PUBLISHED 16 August 2023

CITATION
Ferrer APS (2023) Editorial: International Youth
Day – pediatric rehabilitation from a global
health perspective.
Front. Rehabil. Sci. 4:1234982.
doi: 10.3389/freesc.2023.1234982

COPYRIGHT
© 2023 Ferrer. This is an open-access article
distributed under the terms of the [Creative
Commons Attribution License \(CC BY\)](#). The use,
distribution or reproduction in other forums is
permitted, provided the original author(s) and
the copyright owner(s) are credited and that the
original publication in this journal is cited, in
accordance with accepted academic practice.
No use, distribution or reproduction is
permitted which does not comply with these
terms.

Editorial: International Youth Day – pediatric rehabilitation from a global health perspective

Ana Paula Scoleze Ferrer*

Faculty of Medicine, University of São Paulo, São Paulo, Brazil

KEYWORDS

disability, rehabilitation, inclusion rehabilitation-, childhood disabilities, chronic disease, music-based interventions, health coaching, telerehabilitation

Editorial on the Research Topic

International Youth Day - pediatric rehabilitation from a global health perspective

The World Health Organization (WHO) defines rehabilitation as “a set of interventions designed to optimize functioning and reduce disability in individuals with health conditions in interaction with their environment” (1). Globally, approximately 2.4 billion people are estimated to benefit from rehabilitation (2).

The demand for pediatric rehabilitation is growing, following an increase in the prevalence of chronic diseases in this age group, particularly in those patients classified as “children with special health needs” (3). In the United States, approximately 15%–20% of children with special health needs require rehabilitation (4, 5).

The benefits of rehabilitation are not only limited to the affected individuals but also extend to the society, as it promotes faster recovery, prevents complications, decreases chances of hospitalization, shortens the duration of hospitalization, favors the development of autonomy, and facilitates community participation, academic activities, return to work, and increased productivity (1, 2). In pediatric patients, these benefits are essential for their overall development and social participation and, in turn, improvement in their quality of life and that of their families.

According to the WHO, global rehabilitation needs have not been met because of multiple factors, including lack of public policies, low availability of resources, less investment, scarcity of technological resources, and a low number of qualified professionals (2). Thus, it is fundamental to conduct research and disseminate strategies aimed at making these services more accessible, qualified, and adaptable to the needs of the population.

The topic “International Youth Day—Pediatric Rehabilitation From a Global Health Perspective” brings forth a series of publications addressing this relevant theme from different perspectives. The topic ranges from local experiences of specific interventions for children with chronic conditions to tools aimed at ensuring the quality of remote care and telerehabilitation services. Furthermore, it introduces a platform that can support the management of resources at the health system level.

Sampaio reported experiences with a hospital humanization program using music for therapeutic rehabilitation and promotion of the well-being of children with chronic conditions and that of their families. The scope of music therapy has been proven; for

example, it is an adjuvant therapy for patients with autism spectrum disorder (6). Despite growing evidence of the benefits of music therapy, there are limited publications on “how” music can be incorporated into pediatric rehabilitation. Thus, **Sampaio’s** article is interesting because it describes experiences that can be developed by other professionals who have some training in music, since there is a shortage of music therapists in most countries, making this practice more accessible and applicable in other contexts.

Difficulty in accessing rehabilitation therapies is one of the main problems reported by the WHO, particularly in areas outside large urban centers. Offering remote services via telerehabilitation minimizes this disparity in the geographical distribution of available professionals and services (7). Particularly after the pandemic, remote access to health resources has become widespread, facilitating the performance of different rehabilitation modalities by people in need of isolation, with mobility issues due to health conditions, and/or socioeconomic reasons. Thus, online rehabilitation services ensure access to resources, favor continuity of care, allow remote monitoring, and encourage the active participation of patients and their families. However, to guarantee the quality and effectiveness of these services, it is essential that some assumptions are evaluated: safety, efficacy, quality of care, patient/family and provider satisfaction, costs, access and availability of services (7, 8).

Two articles on this topic have presented tools to ensure the quality of remote rehabilitation services. One article by **Ogoursova** described TelereHUB-CHILD, an online tool that translates and updates existing knowledge in telerehabilitation, which facilitates evidence-based decision-making by health professionals, helps train parents, family members, and patients, and identifies gaps in existing knowledge. This report also described the steps involved in the development of this tool, which incorporates technological advances into care offered and includes the participation of the main stakeholders involved.

Owing to difficulties in access to and delays in receiving specialized care, health coaching programs have been disseminated to facilitate accessibility, but is very important to evaluate their effectiveness. Another study by **Ogoursova et al.** described the CO-FIDEL program, a tool which evaluates the fidelity of Bright coaching, a Canadian program aimed at remotely supporting caregivers of children with suspected or delayed (9). Authors also assessed the viability and user satisfaction with the CO-FIDEL, providing data for developers of health coaching programs.

References

1. World Health Organization. *Rehabilitation in health systems*. Geneva: World Health Organization (2017). p. 77.
2. World Health Organization. Rehabilitation. (2023). Available at: <https://www.who.int/news-room/fact-sheets/detail/rehabilitation> (Cited 2023 May 21).
3. McPherson M, Arango P, Fox H, Lauver C, McManus M, Newacheck PW, et al. A new definition of children with special health care needs. *Pediatrics*. (1998) 102:137–40. doi: 10.1542/peds.102.1.137
4. Cohen E, Berry JG, Sanders L, Schor EL, Wise PH. Status complexicus? The emergence of pediatric complex care. *Pediatrics*. (2018) 141:S202–11. doi: 10.1542/peds.2017-1284E
5. Azar R, Doucet S, Horsman AR, Charlton P, Luke A, Nagel DA, et al. A concept analysis of children with complex health conditions: implications for research and practice. *BMC Pediatr*. (2020) 20(1):1–11. doi: 10.1186/s12887-019-1898-4

Hanson et al. conducted a descriptive and analytical study on the provision of mental health services for pediatric patients with disabilities. Since there is a growing demand for these services, and difficulties in access are observed in most countries, the study results can help healthcare managers identify the available services and streamline their provision.

Considering the importance of pediatric rehabilitation for the patients, their families, and society and the high rates of unmet needs (10), the topic “International Youth Day—Pediatric Rehabilitation From a Global Health Perspective” addresses various aspects related to the implementation of the WHO Rehabilitation 2030 initiative, translating practical experiences that can be applied in health care and supporting the formulation of public policies aimed at improving access to rehabilitation services.

Author contributions

The author confirms being the sole contributor of this work and has approved it for publication.

Acknowledgments

I would like to express my gratefulness to all the authors who proposed their work, all the researchers who reviewed the submissions to this Research Topic, and support from Frontiers Submissions Office.

Conflict of interest

The authors declare that the research was conducted in the absence of any commercial or financial relationships that could be construed as a potential conflict of interest.

Publisher’s note

All claims expressed in this article are solely those of the authors and do not necessarily represent those of their affiliated organizations, or those of the publisher, the editors and the reviewers. Any product that may be evaluated in this article, or claim that may be made by its manufacturer, is not guaranteed or endorsed by the publisher.

6. Geretsegger M, Fusar-Poli L, Elefant C, Mössler KA, Vitale G, Gold C. Music therapy for autistic people. *Cochrane Database Syst Rev.* (2022) 5(5):CD004381. doi: 10.1002/14651858.CD004381
7. Shem K, Irgens I, Alexander M. Getting started: mechanisms of telerehabilitation. In: Alexander M. editor. *Telerehabilitation: Principles and Practice*. Philadelphia: Elsevier (2022). p. 5–20.
8. Alexander J. Pediatric telerehabilitation. In: Alexander M. editor. *Telerehabilitation: Principles and Practice*. Philadelphia: Elsevier (2022). p. 351–61.
9. Majnemer A, O'Donnell M, Ogourtsova T, Kasaii B, Ballantyne M, Cohen E, et al. BRIGHT coaching: a randomized controlled trial on the effectiveness of a developmental coach system to empower families of children with emerging developmental delay. *Front Pediatr.* (2019) 7:332. doi: 10.3389/fped.2019.00332
10. Graaf G, Gigli K. Care coordination and unmet need for specialised health services among children with special healthcare needs in the USA: results from a cross-sectional analysis of the national survey of children with special healthcare needs. *BMJ Open.* (2022) 12(11):e063373. doi: 10.1136/bmjopen-2022-063373