Brief Report: Disparities in Telehealth Utilization for DBP Assessments by Preferred Family Language: A DBPNet Study

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Objective: Owing to the coronavirus disease 2019 (COVID-19) pandemic, many developmental-behavioral pediatric (DBP) practices adopted telehealth for care delivery. However, telehealth access and use for families with a preferred language other than English (PLOE) is an equity concern. Therefore, our study objective is to compare rates of telehealth utilization and visit completion by preferred family language among patients seen for DBP assessments during the COVID-19 pandemic.

Methods: We completed a descriptive chart review using electronic health record data at 4 academic DBP practices to examine visits for patients up to 5 years seen for new-patient appointments between April 2020 and April 2021. We compared rates of in-person and telehealth visits by preferred family language and visit outcome (completed or missed).

Results: A total of 3241 visits were scheduled between April 2020 and April 2021; 48.2% were for in-person and 51.8% for telehealth. Families reported the following languages: 90.5% English, 6.2% Spanish, and 3.3% other language. Missed visits accounted for 7.6% of scheduled visits. The relative percentage of in-person versus telehealth visits varied significantly by site ($p < 0.001$) and preferred family language ($p < 0.001$). English-speaking patients had 2.10 times the odds of being scheduled for telehealth compared with patients with PLOE, adjusting for site. Statistically significant differences were not found for visit outcome (completed or missed) by visit type (in-person or telehealth) ($p = 0.79$), including after accounting for PLOE status ($p = 0.83$).

Conclusion: At the height of the pandemic, most English-speaking families were scheduled for new DBP evaluations by telehealth, but fewer families with PLOE were. Attention to language to ensure telehealth access equity is critical.

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