“There’s an app for that”:
Clinician perspectives on the iPad as an intervention tool for children
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Background

• Any form of electronic communication can have a positive effect on language and literacy development in children (Watt, 2010).

• Computer technology has been reported to promote social interaction, which is important for the development of language (Watt, 2010).

• Technology can provide children with high degrees of stimulation (Roberts & Foehr, 2008), allowing them to receive information from multiple sources.

• Technology can also provide opportunities for automatic feedback and intensive practice (Bosseler & Massaro, 2003).

iPad, iPod Touch, iPhone

• These are multi-touch graphical user interface devices which allow the user to download and use a variety of applications.

• The iPad is compact, but large enough to be easily operated by children or adults with disabilities.

• The touch screen format of the applications is more natural than using an input device such as a mouse.

• May be an innovative way to provide therapy to children and adults with communication disorders. However, the availability of evidence to support it’s use must be considered.

Methods

• Three groups of speech-language pathology participants: 1) experienced speech-language pathologists (n = 8), 2) recent graduates (n = 8), and 3) graduate students (n = 13).

• Participants were involved in 3 aspects of the study: initial focus group, learning session, and final focus group.

Discussion and Conclusion

• A number of positive features of the iPad make it beneficial for clinical practice.

• Ratings of how well Apps align with best practice principles were consistent with participant’s overall impressions.

• Majority of Apps reviewed received ratings of ‘Strongly Agree/Agree’ and ‘Neutral’.

• Caution is needed when interpreting this data as participants discussed reservations regarding the use of the selected Apps.

• It is recommended that clinicians critically evaluate Apps based on best practice principles.

Selected References


