

Parents' Perspective on Effects and Benefits of "Brighter Minds" Cognitive Training Program: Results from an Online Survey in India

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Abstract

We assessed parents' experience and satisfaction with the "Brighter Minds" program, a cognitive training for children between 5 and 15 years of age, offered over eight weekends for a total of 30 hours. A cross-sectional, online survey was administered randomly to 100 parents between March and June 2017. 71 parents responded: more than 80% reported improvements in various cognitive traits i.e. focus, planning, emotional stability, memory, comprehension, empathy, expression, self-confidence and calmness. Highest improvements were reported for comprehension (93%) and Planning and Preparation (92.9%). The older children (11 - 15 years) showed greater improvements in focus, planning, emotional stability, self-confidence and calmness than younger ones; similarly, girls performed better than boys in planning, emotional stability and self-confidence. About 50% of parents reported that they were extremely satisfied, and 62% were extremely likely to recommend the program to others. The parents' feedback from the study provides valuable insights into redesigning and shaping cognitive programs for children.

Keywords

Cognitive Training, Brain Training, Parental Satisfaction, Customer Satisfaction

1. Background

Brain training programs make up a million-dollar industry that aims to enhance, rehabilitate or maintain cognitive function. However, there still exist mixed views in the scientific community concerning the efficacy of brain training programs (Simons et al., 2016) especially in the case of children (Jedlicka, 2017).

While several studies show the benefits of brain training in enhancing various cognitive functions following a brief period of training (Rabipour & Davidson, 2015) there is a lack of consistent evidence to support the very claims that these programs are built upon (Rabipour & Raz, 2012), for example on how cognitive training effects transfer to real-life functioning (Jedlicka, 2017). In addition to this, there are very few studies that look at parent reported changes in behaviour following cognitive training (Jedlicka, 2017).

Parental satisfaction is an essential component of any evaluation of early intervention services (Konstantina et al., 2014). Despite this, parental views are rarely taken into consideration while assessing program effects (Lanners & Mombaerts, 2000). According to McNaughton (1994), it is important to examine parental satisfaction as they have major control and responsibility when it comes to their child's development, hence their decisions concerning success and failure should be of utmost importance; their participation can be increased by making them a part of evaluative decision making. Consumer satisfaction is largely determined by the level of fulfilment of expectations by the service provided (Suchanek, Richter, & Kralova, 2017). Furthermore, the relationship between customer satisfaction and quality of service has been researched extensively over the past few years (Waseem, Chhapra, & Bhutto, 2014). According to Sureshchandar et al. (2002), the two are positively correlated; customer satisfaction provides important feedback on the quality of the service (Bradic, Kosar, & Kalenjuk, 2013). Any improvement or modification of the existing program can be objectively assessed after understanding how the customer perceives the service to be (Vukosav, Bradic, & Blagojevic, 2009). Satisfied customers are also likely to engage in positive word of mouth advertising by sharing their experiences with others (Richins, 1983).

Within India, there is growing interest within the public to avail brain training programs to enhance cognition in children. Several programs are available in the market in response to this need and "Brighter Minds" is one among them. Preliminary anecdotal reports and qualitative exploration with few children and parents revealed that children showed changes in traits such as focus, retention, comprehension, empathy, intuition, observation, self-confidence and emotional stability. Apart from this early study there has been no formal evaluation of the service. An evaluation was undertaken later in the year 2017 of a large scale program in South India to study the generalized effects of the program on children. The current study preceded the evaluation to understand the parents' experience, observations and satisfaction with the program. The feedback was important to refine and improve the offering to the children, as a part of program delivery.

Thus, the current study presents the results of a preliminary investigation into customer satisfaction with the cognitive training program. Its specific objectives were to: 1) ascertain whether parents were observing changes in their children; 2) assess the extent of perceived overall satisfaction with the training program; 3) estimate the likelihood of them recommending the program to others; and 4)

obtain general feedback about the program in order to improve the quality of the service provided.

2. Method

2.1. Study Design and Participants

The study employed cross-sectional survey design, administered randomly to the parents of the children that underwent brighter minds training program. 300 children had completed training and a third of them received email invitations to participate in the survey.

2.2. Intervention

The training program is offered to children in the age group of five to fifteen years, and aims to enhance cognitive functioning through activities such as relaxation, breathing, brain exercises and music entrainment, etc. The program is offered in different modalities, as paid programs to those who can afford, and as free-of-charge programs to children from rural, lower socio-economic strata by mobilization of funds through the corporate social responsibility (CSR) partners and donors. The program runs for 30 hours, offered typically over eight weekends. Theoretically, it is hypothesized that the interventions enhance neuroplasticity in the brain to build and strengthen new habits and skills (Brighter Minds, n.d.). The children enrolled in the program are encouraged to continue practicing these skills during weekdays so as to allow their brains to stay wired in order to sustain the new skills that are learnt during the training.

2.3. Tools

A survey questionnaire, constructed on the online Google survey format (free version) was developed to obtain feedback about the program. The survey was designed by a team that comprised of a psychology intern, trainer and a researcher. Questions for the survey were generated based on preliminary anecdotal evidence and consultations with parents and children that revealed changes in certain cognitive and emotional traits.

The survey consists of three sections. The first section includes questions asking demographic details that included age, gender, town/city of location and when and where the child attended the Brighter Minds Training. The second section included questions about the changes particular to selective cognitive and emotional traits that parents observed in the children. Respondents indicated the degree to which they agree or disagree with each item using a five-point Likert scale of 5 to 1 where 5 is “totally agree”, 4 is “partially agree”, 3 is “neither agree nor disagree”, 2 is “partially disagree” and 1 is “totally disagree”. The third section consisted of questions on frequency of practice and the last time the child practiced. In addition to this, parents were asked whether they were satisfied with the program and if they would recommend the same to others. The survey also included open ended questions to provide respondents with

the opportunity to provide feedback, suggestions and comments in order to refine the program delivery process.

The tool was first pre-tested on a small sample of subjects before using in the survey. This helped to rephrase certain questions to improve the accuracy and consistency of responses.

2.4. Data Analysis

Data analysis was carried out using the Statistical Package for Social Sciences (SPSS-V.25) in order to understand the proportion of children in whom parents observed a particular change in specific cognitive and emotional domains.

Since a very small proportion of parents disagreed either partially or totally, they were clubbed under the category of “disagreed”.

Data was further analysed to check for any association between the outcomes of the study and characteristics such as age, gender, location, regularity and continuity of practice at homes. 2×2 tables were constructed and two sided, Pearson’s chi square tests were used to compare proportions. All those that reported “totally agree” and the remaining (partially agree, neither agree nor disagree, partially disagree, totally disagree) formed two groups and they were analysed by age (5 - 10; 11 - 15 y), gender (girls; boys), location (tier 1; tier 2 towns), regularity (once every week: rest) and continuity of practice (practiced during the last fortnight of the data collection; rest). The purpose of this analysis is to see possible associations of the highest improvements, reported.

Data was also analysed to see association of improvements with satisfaction, and subsequently with likelihood to recommend program to others.

3. Results

3.1. Response Rates

A total of seventy-one parents completed the survey out of 100 parents. Of their children, 39 (54.9%) were boys and 32 (45.1%) were girls. 40 (56%) were in the age group of 5 to 10 years. 55% responses were from tier one cities such as Bangalore, Hyderabad, Pune, Noida and Chennai and remaining (45%) were from tier 2 cities¹. 61% (43) parents reported that their children practiced regularly i.e. at least once every week, and 68% (48) reported that their children were currently practicing i.e. practiced during the last two weeks of the data collection.

3.2. Cognitive and Emotional Changes

Table 1 presents the response of parents for each outcome that they were asked to observe in their child. More than 80% of parents reported that they observed improvements in their children; more than 50% parents were in total agreement. Highest improvements were reported for comprehension (93%) and planning and preparation (92.9%).

¹Tier 1 cities in India have more than a million population, and are metropolitan. Tier 2 towns have population size between 300,000 to 1 million.

Table 1. Changes observed in the children as reported by parents.

Change	Partially Agree (P)	Totally Agree (T)	Agree (P + T)	Disagree
My child is able to remain focused on important tasks for prolonged time	39.4	50.7	90.1	9.9
My child is able to do better planning and preparation for important tasks	39.4	53.5	92.9	7.1
My child is emotionally more stable. I notice reduced anger and reactivity	40.8	46.5	87.3	12.7
My child's ability to remember information & tasks has improved	25.4	66.2	91.6	8.4
My child's comprehension ability has improved. He or she can better understand instructions, abstract ideas, subtler messages from stories, etc.	25.4	67.6	93	7.0
My child's academic performance in the school has improved as noticed in improved grades or teacher feedback	26.8	56.3	83.1	16.9
I find my child is able to better understand me and my feelings	21.1	67.6	88.7	11.3
My child is better able to express his or her feelings	29.6	59.2	88.8	11.2
My child is more confident in challenging circumstances than before (exams, performance and presentations, unexpected events etc.)	25.4	57.7	83.1	16.9
My child is generally calm and relaxed more than before	35.2	47.9	83.1	16.9

3.3. Analysis of Outcomes by Select Characteristic

Table 2 presents analysis of changes by certain demographic, training and practice related characteristics. The outcomes of the study did not vary significantly by location (tier 1 and 2 towns; tier 1, defined as the metro cities with population more than one million and tier 2, defined as towns with 300,000 to 1 million population) but did vary with respect to the age and gender of the children. Parents reported higher improvements for focus, planning, emotional stability, self-confidence and calmness among elderly children (>10 years). Girls were reported as showing greater improvements in planning and preparation, emotional stability and self-confidence than boys. It was also found that, the children that practiced regularly and during the time of survey (indicating continuity of practice) were reported to better express their feelings than others.

3.4. Parents' Satisfaction and Likelihood to Recommend Program

Table 3 presents findings about parents' satisfaction and likelihood of recommending program to others. A high proportion of parents that participated in the survey reported that they were satisfied with the program and are likely to recommend the same to others. About 50% reported that they were extremely satisfied and 62%, that they are extremely likely to recommend the program to others. Parents that reported highest changes were also the ones that reported

high satisfaction levels; this was consistent across all outcomes and was highly significant. 70% of parents that reported high satisfaction were also highly likely to recommend the program to others. **Table 4** presents satisfaction reported for each outcome as well as association of satisfaction to likelihood of recommending program to others.

3.5. Parent Feedback

Feedback and comments provided by parents to the open ended questions were categorised as “General”, that did not feature under any specific category; “Measurement related”, those related to observation or measurement of change, and “Practice/Follow up related”, those related to follow up practice at home beyond the initial training.

Table 2. Analysis of study outcomes by key demographic and training related variables.

Outcome	Location		Age		Gender		Regular Practice		Current practice	
	Tier 1 (39)	Tier 2 (32)	5 - 10 y (40)	11 - 15 y (31)	girls (32)	boys (39)	yes (43)	no (28)	yes (48)	no (23)
Focus	46.2	56.3	40.0	64.5**	59.4	43.6	53.5	46.4	52.1	47.8
Planning and preparation	51.3	56.3	42.5	67.7**	68.8	41.0**	58.1	46.4	58.3	43.5
Emotional stability	38.5	56.3	35.0	61.3**	59.4	35.9**	46.5	46.4	47.9	43.5
Memory	56.4	78.1 [†]	68.0	65.0	71.9	61.5	65.	67.9	68.8	60.9
Comprehension	61.5	75.0	68.0	67.7	71.9	64.1	62.8	75.0	66.7	69.6
Academic performance	48.7	65.6	55.0	58.1	68.8	46.2 [†]	53.5	60.7	56.3	56.5
Empathetic	61.5	75.0	60.0	77.4	71.9	64.1	69.8	64.3	75.0	52.2 [†]
Expression	51.3	68.8 [†]	55.0	64.5	59.4	59.0	69.8	42.9**	68.8	39.1**
Self-confidence	61.5	53.1	45.0	74.2**	71.9	46.2**	60.5	53.6	62.5	47.8
Calm/ relaxed	46.2	50.0	38.0	61.3**	56.3	41.0	53.5	39.3	50.0	43.5

* $p < 0.1$; ** $p < 0.05$.

Table 3. Parents’ satisfaction and likelihood of recommending program to others.

	Parents’ Satisfaction		Likelihood to Recommend		
	N	%	N	%	
Extremely satisfied	35	49.3	Extremely likely	44	61.9
Quite satisfied	27	38.0	Very likely	22	30.9
Somewhat satisfied	5	7.0	Somewhat likely	4	5.6
Neither satisfied nor dissatisfied	4	5.6	Not likely	1	1.4
Total	71	100	Total	71	100

Table 4. Association of parents' satisfaction with improvements.

Outcome	Of parents who reported highest improvements, those that reported highest satisfaction		Of parents who reported lesser level of improvements, those that reported high satisfaction	
	Sample	%	Sample	%
Focus	36	77.8	35	20.0***
Planning and preparation	38	71.1	33	24.2***
Emotional stability	33	69.7	38	31.6***
Memory	47	61.7	24	25.0**
Comprehension	48	60.4	23	26.1**
Academic performance	40	62.5	31	32.3*
Empathetic	48	60.4	23	26.1**
Expression	42	69.0	29	20.7***
Self-confidence	41	63.4	30	30.0**
Calm and relaxed	34	67.6	37	32.4**

Likelihood of recommending program by satisfaction level		
	Highly satisfied parents	Less satisfied parents
High likelihood to recommend	31 (70.5%)	13 (29.6%)***

*** $p < 0.001$; ** $p < 0.01$; * $p < 0.05$.

3.5.1. General Feedback

These were largely how parents felt about the program. Some comments (*verbatim as reported*) include:

“Good development in education field”.

“Keep up the good work, by carving better personalities of children you are also contributing towards a better tomorrow for society.”

“I found BM program is helping my daughter in dealing with all sorts of situations and her IQ level has also been increased. She has become closer to my heart ...”.

3.5.2. Measurement Related

Some of the responses included:

“Need to have clarity regarding how to observe changes in our child in various aspects during or after training.”

“It's hard to measure the improvements as given in the questionnaire above specially when the children practice once or nil at home.”

3.5.3. Practice/Follow up Sessions

Since training is conducted only on weekends, a majority of parents felt that more number of follow up sessions should be conducted. Some of the comments included: *“It would be nice if kids had follow up sessions once in a while”* and

“Children need more follow up sessions to gain confidence ...”. In addition to this, parents asked for suggestions on how to make their children practice at home.

Few parents felt the program did not yield the desired result. Examples include: *“we could not focus on child’s practice and his attendance due to his illness and our issues at home front ...”* and *“My son needs little more help to build his confidence ... and also one more thing to motivate him for regular practice ...”*.

4. Discussion

Customer satisfaction is growing in importance because it is being recognised as a foundation for important quality improvement initiatives (Powers & Valentine, 2009). Customer satisfaction is typically measured with the help of surveys (Peterson & Wilson, 1992) and the present study made use of similar format to assess parental views on the training program. The quantitative results revealed that a high proportion of parents who participated in the survey observed improvements in emotional and cognitive traits indicating that the program is effective from their perspective. The parents also reported high levels of satisfaction and likeliness to recommend the program to others, indicating high levels of acceptability of the program. The results of the present study are consistent with previous studies which refer to parents being satisfied, in general with early intervention services (Wolery & Bailey, 1984; Konstantina et al., 2014). The satisfaction seems to be the result of the changes they observed in their children.

The findings also showed that the program effectiveness did not vary greatly by location. The analyses of subsamples by age and gender did reveal some interesting associations. For example, older children showed greater changes in “focus”, “planning”, “emotional stability”, “self-confidence” and “calmness”. This may mean that the program is more effective amongst the older children for some outcomes and needs further exploration as it gives crucial insights to the program designers to fine-tune the programs and make them age appropriate. The girls were observed to make greater strides in relation to “preparation and planning”, “emotional stability” and “self-confidence”. This finding has potential implications in Indian context and other low and middle income settings where adolescent girl education, life-skills, gender equality and women empowerment are of high relevance to influence the sustainable development and economy of the region (RIS, 2016). Can training programs such as brighter minds provide answers in these complex situations where increasingly more investments are made to find effective and scalable solutions. Another interesting finding is that “expression of feelings” seems to be associated with regularity and continuity of practice, as those that were trained in the past and continued to practice showed greater changes than the others. This possibly indicates that some of the deeper changes such as “expression of inner feelings” which are also connected with self-confidence, take more time than others. This is another area

that demands further exploration.

It was also found that parents that showed high levels of satisfaction about the training program also reported highest improvements in their children and expressed high likelihood of recommending the program to others. While it is possible that the changes in the children could have led to higher levels of satisfaction among the parents; there is also a possibility that their parents were already motivated and thus ensured adequate practice and interest among the children which could have led to the changes seen. Thus, parent's motivation to ensure child's interest and compliance seems to be a major factor (Brighter Minds, 2018). It is well documented that the strongest influences on childhood behaviour is the family setting, which is largely a function of the interactions that occur between the parent and child (Rabipour & Raz, 2012). Parents tend to play an important role in the motivational development of children and shape early achievement related perceptions (Lazarides, Harackiewicz, Canning, Pesu, & Viljaranta, 2015).

The open ended questions provided at the end of the survey gave parents an opportunity to share their views and concerns regarding the training program. In general, it was found that parents were satisfied and have shown acceptance of the program. They have also indicated their challenges in ensuring follow up and practice at homes which informs program deliverers to explore strategies that can help parents in engaging children at homes.

5. Limitations

The survey was conducted in a short period of time to get a dipstick measure of what parents are observing and feeling. This was important from program delivery point of view. While this has fulfilled the need to a great extent, there are a few limitations that need to be addressed in the next phase of research. The tool was pre-tested on a small sample to refine the questions in order to ensure accuracy and consistency of the responses. However, for future studies, testing reliability and validity of the tool on a larger sample would be helpful. This was not possible in this study due to time and logistic related constraints. There are also mixed views about testing reliability and validity of a tool in the context of assessing subjective outcomes (Elasy & Gaddy, 1998). This study can pave way for future studies to strengthen knowledge gaps in these areas. The survey was sent to about 100 parents out of whom 71 responded. Previous studies have shown that response bias may have a significant impact on customer satisfaction surveys, leading to an overestimation of the level of satisfaction in the overall customer population (Powers & Valentine, 2009; Wolery & Bailey, 1984). In the current study, the non-response may be due to multiple reasons; they may not have found time for survey or felt it is important, or did not see the changes that others saw. This is an important group to talk to and understand, which may provide critical information to program organizers for further refinements of the program.

An ideal research design to test effectiveness of program is randomized controlled trial design. The current survey is based on parents' subjective feedback. While this provides critical information, it should be complemented with objective assessments, and laboratory diagnostics as appropriate, to correlate outer changes with the inside. In the past decade, we have seen an explosion of knowledge related to brain neuroplasticity changes and it may be worth exploring in a small sub sample of children in collaboration with neuro-imaging agencies and scientists.

Several insights and learning from the current study such as associations of outcomes with age, gender, practice are worth exploring further. Particularly the impact of these interventions to address self-confidence and emotional stability in children, and then paving way to empowered communities with reduced gender disparities can be explored through implementation research design. A long term cohort study to understand how changes sustain and what additional changes are possible, can fill gaps in the existing knowledge base with regards to effects of cognitive training programs.

6. Conclusion

The study clearly gives an indication of how parents perceive and what they observe in their children as a result of cognitive training. Here, they not only report that the program is effective, but also show high levels of satisfaction and acceptance. Parents are opening up to explore additional options in the early childhood period to enhance cognitive capacities of their children.

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Conflicts of Interest

The authors declare no conflicts of interest. The sponsor had no role in study design, data collection and analysis.

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