

Video call in telegram

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By Rebecca Linke, Senior Associate Editor, Computerworld | Telegram Logo Lifestyle (Image credit: Chris Wedel/Android Central) Telegram has finally added the ability to make group video calls to its mobile and desktop apps. Group video calls are limited to the first 30 people who join a voice chat. The latest Telegram update also adds animated backgrounds, message animations, and more. Telegram, which is one of the best Android messaging apps, is rolling out a new update that finally lets users turn voice chats in any group into group video calls. The feature is now available on all devices — including tablets and desktops. Telegram says group video calls will “bring voice chats to a whole new level, ready for online classes, business meetings and family gatherings.” Source: Telegram (Image credit: Source: Telegram) Although there is no limit on the number of people that can join an audio call, video is currently available only for the first 30 participants. However, Telegram is working on increasing this limit “soon.” To begin a group voice chat, open the three-dots menu in the profile of any group where you are an admin and tap the “Voice Chat” button. Once users join and turn on their cameras, you can tap on any video to make it fullscreen. Users can also choose to share their screen during a group call by tapping on the “Share Screen” option from the three-dots menu. Group video chats have been optimized for both portrait and landscape orientation on the best Android tablets. Once you open the side panel, you can see a split-screen view of the video grid, along with a list of participants. On desktop, group chats open in a separate window and offer a selective screensharing feature, making it possible for you to broadcast an individual program instead of the entire screen. The latest Telegram update also makes it the first messaging app to offer animated backgrounds for chats. You can access animated backgrounds by heading over to Chat Settings > Change Chat Background on Android devices. You can even create your own animated backgrounds and share them with friends and family. WhatsApp is most widely known as an instant messaging platform, but the popular app can also be used to make video calls. Whether you want to video-call one person or a group of people, WhatsApp makes doing both easy. That said, it might not be immediately obvious how you can make a video call in WhatsApp, so this article explains what you need to do. It covers making a video call in WhatsApp and also making a group video call. The article covers both iOS and Android. Contents How to make a video call in WhatsAppGroup video calls Also, check out our guide on group calls, if you’d like to learn more about how to make normal group calls on WhatsApp. How to make a video call in WhatsApp There are two ways to make a video call in WhatsApp. The first involves going to the Chats tab, and the second involves going to Calls. Both are straightforward. Here’s the Chats method, which is recommended for calling people who you’ve already added called/chatted with on WhatsApp. First, go to WhatsApp > Chats. Next, tap on the contact you’d like to call (this assumes you already have an ongoing chat with them). Once you’ve entered your chat with your desired contact, tap the Video call icon in the top right corner of the screen (it looks like a video camera). Now just wait for your callee to pick up. This method applies to both Android and iOS, even if WhatsApp has a different layout on each system (e.g. the Chats and Calls tabs are at the bottom of the screen on iOS, and at the top on Android). Alternatively, you can go to the Calls tab to make a video call. Once in Calls, tap the New call icon (it looks like a phone receiver with a plus sign next to it), which you’ll find in the top-right corner on iOS and in the bottom-right corner on Android. Pressing the New call icon will bring up your contacts. Tap the Video call icon next to the desired contact to begin your video call. Group video calls Making a group video call on WhatsApp is very much like making a normal video call, although there’s one important twist. If you have an existing WhatsApp group you’d like to call, you can go to your Chats tab and tap on your chat with the desired group. From there, simply tap the Video call icon as normal. Alternatively, if you’d like to create a new group to video call, you should go to the Calls tab. Tap the New call icon (again, top right in iOS, bottom right in Android). Then tap New Group Call. This lets you add up to seven contacts to the group call (obviously these have to be contacts who use WhatsApp). Once you’ve added the desired contacts, tap the Video call button at the top-right corner of the screen. Lastly, you can also create group video calls on the fly, by adding extra people to an ongoing video call. When in a video call, simply tap the Add participant icon in the top-right corner of the screen (tap on the middle of the screen if you don’t see this at first). This lets you choose a contact to add. Once you’ve found a new contact, tap Add. Editors’ Recommendations Prior to the pandemic, telehealth felt a little like a pipe dream—even if your medical provider offered it, your insurance company might not have offered coverage. Then the United States was hit by COVID-19, and telemedicine skyrocketed. Now if you start feeling achy and notice you have a sore throat, you can call your doctor’s office and schedule a video or phone appointment. You no longer need to sit in a waiting room among other coughing, sniffing patients; you can have a virtual consult with your medical provider and get a prescription sent to your pharmacy in the time it would’ve taken you to get dressed and pull out of your driveway. Perhaps the biggest benefit of the telehealth explosion: With the pandemic continuing into 2021, virtual medicine allows you see your providers without leaving your home. No more worries about masking up and social distancing to prevent the spread of infection. “The quote I like to cite is that we advanced 10 years in telehealth progress in the course of 10 weeks, and it’s pretty accurate,” Colin Banas, MD, chief medical officer of health care software company DrFirst, which helps connect patients to health care providers, tells Health. “I think a lot of this would have taken a lot longer had it not been for the crisis.” Telemedicine is clearly a hit with patients. In April, 44% of Medicare primary care visits were done via telehealth, compared with less than one percent (0.1% in February before the COVID-19 public health emergency, according to the US Department of Health and Human Services. Both rural and urban counties nationwide saw upticks in telehealth adoption and usage, and even after Medicare resumed in-person primary care visits last May, demand for telehealth stayed steady. One 2020 report from the health care network Doximity estimated that 20% of all medical visits last year were conducted via phone or video. “What we saw during COVID was a real shift from the in-person visit to the phone visit and video visit with patients,” Mary Oseid, senior vice president of regional strategy and operations of Dartmouth-Hitchcock Health, a health system in New Hampshire, tells Health. “We did that out of necessity—we closed our hospitals, but we still needed to care for our patients, so we started seeing them through these other means. And we’re seeing that continuing.” It’s no surprise, then, that the business side of telehealth is also booming, with companies in the sector reporting rapid growth and a meteoric rise in revenues. Teladoc Health, a telemedicine and virtual health care company that was clocking for more than 20,000 virtual medical visits per day in the US prior to the pandemic, saw visits in the first quarter of 2020 shoot to 2 million, a 92% increase. San Francisco-based telehealth platform 1Life Healthcare reported a 25% increase in membership during the same period. While telemedicine isn’t new, this widespread use of it—and the development of new technologies that expand its capabilities—are changing the way medicine works. Here’s what wellness currently looks like, and what the future might hold, in the telemedicine era. Previously, health care was time-consuming: You had to get to your provider, sit in a waiting room, and then watch the clock tick away in the exam room. The process could be frustrating, especially if you knew you had something straightforward that could be solved by a quick prescription. Telehealth, on the other hand, can reduce a routine visit to exactly what you want: one-on-one time with your doctor. “Over the holidays, I had vertigo, and I didn’t want to leave the house,” Oseid says. “I was sick, I felt crummy, and telehealth was a great opportunity for me to see my provider at home and be comfortable.” Telehealth also comes in handy for people with chronic conditions, who often need regular in-person visits with multiple doctors. “My quarterly oncology appointment usually takes half a day between travel time, bloodwork, two injections, and a conversation with my oncologist,” says Sally Wolf, a wellness entrepreneur in New York City who is living with metastatic breast cancer. “During COVID, most of the doctor discussions were moved to telehealth, so the only things that required an in-person visit were the bloodwork and injections, thereby minimizing my time inside the facility.” It’s especially convenient for parents who may not want to talk to a sick kid to a medical facility. Jamie Hickey recalls how nice it was to keep his 9-year-old daughter at home for a telehealth visit when she had a cold last year. “She’s sitting on the couch, relaxing,” says Hickey, a barista and founder of a coffee e-commerce platform who lives in Aston, Pennsylvania. “I get her when the doctor comes on, he talks to her, figures out the symptoms, and I talk to the doctor, and it’s done. I never have to leave or take her out into the cold.” Telehealth isn’t limited to virtual doctor visits. Advances in technology mean there are now apps and gadgets that allow doctors to monitor bodily functions from a patient’s computer or phone. This means that a person who is immunocompromised, for example, might be able to stay out of the doctor’s office, and someone who doesn’t have the time to come in for regular appointments could check in at regular intervals from their living room. “You can monitor people’s blood sugar remotely, and people have home blood pressure cuffs,” Spencer Kroll, MD, PhD, an internal medicine specialist in Morganville, New Jersey, tells Health. “There are devices that can attach to your smartphone to assess your heart function and heart rhythm.” Soon, it may not even be medically necessary for a provider to be present for some routine physical examinations. Telemedicine company Eko makes technology that allows doctors to monitor heart sounds, lung sounds, and ECG readings from afar. With this kind of tech, you can imagine a future where an off-site doctor listens to a nursing home resident’s lungs, for example, while an on-site nurse holds a telehealth-friendly stethoscope to their chest. Prior to COVID, insurers were reluctant to cover video or telephone mental health services. Seeing a therapist meant traveling to and from an office, assuming there was a mental health professional within a reasonable distance from your home. Now it’s possible to see a therapist via video call, and that’s changed the game. With the elimination of travel and the availability of good providers no matter where you’re located, anyone can seek help and do it regularly and efficiently. It also makes the experience extremely private, for those who feel there’s a stigma around needing mental health help. The availability of telehealth therapy—along with the stress of the pandemic and fallout from the 2020 election—has led to a crush of demand. Ginger, a company that offers text-based teletherapy, reported in September that usage of their text-based mental health coaching was up 159%, and virtual therapy and psychiatric services surged 302% compared to pre-pandemic numbers. “I think that’s one of the areas that will never go back to having in-person care be the default way of getting care,” Lisa Ide, MD, chief medical officer for Zipnosis, a health care technology company, tells Health. “I do not see patients being willing to come in person when they’ve had the convenience of getting that kind of care from home.” This is a biggie, because insurers have historically been reluctant to cover telehealth appointments. But during the pandemic, they broadened coverage and widely reimbursed for telemedicine visits. In August, the nonprofit group FAIR Health—which helps people understand insurance and health care costs—reported a 5,680% growth in telemedicine claims to private insurers over the prior year. “The biggest insurer is Medicare, and they have really signaled their intent to make this part of their payment methodology,” Oseid says. “And the insurers are following suit in a lot of cases.” Anthem, for instance, is boosting physician availability through its telemedicine service, LiveHealth Online. And Aetna expects to continue to cover telemedicine visits after the pandemic ends. “Telemedicine has advanced five to seven years in the last several months,” says Ethan Slavin, a spokesperson for Aetna. “Aetna will continue to work with physicians and other care providers to support virtual care capabilities.” Some of what the future holds will depend on the outcomes for people receiving telehealth services—and that’s going to take some data crunching. Telemedicine companies will have to prove to insurers and health professionals that they’re providing quality care and that outcomes are positive for patients receiving it. And medical providers will have to be confident that they’re offering care that’s as good or better than traditional in-person medicine. “One of the things we’ve been missing because of the rapid uptick in need is any measurable evidence-based outcomes—being able to look at how we improve the actual care of our patients as well as the experience,” Julie Massey, MD, a principal with The Chartis Group, a health care advisory firm, tells Health. In other words, is it possible to quantify the improvement? Does telemedicine reduce the cost of care and increase access to providers? “We’re going to have to understand it and prove that demand,” Dr. Massey says. “[Insurance coverage] may not be quite the blanket that it is now.” This is important, because without insurance coverage, telehealth doesn’t work. If insurance companies won’t reimburse for services delivered via phone and video, medical providers have no reason to offer them—and patients would have to pay out of pocket, which would dissuade most consumers from using it. “When there is less or no reimbursement, there’s not a whole lot of incentive or drive to develop these programs,” Dr. Massey says. It’s not always easy to get to the doctor. This is especially true if you live far from the nearest providers, if you’re elderly with limited mobility, or if you don’t have the work flexibility to get to a doctor during the week. That’s where telehealth comes in: It can go a long way toward making medicine more accessible. “There are multiple people I’ve talked to who have never seen a doctor,” Glenn Cooreman, DO, a physician at Community Health of South Florida, which serves both metro areas and migrant communities in rural parts of the state. “Some of them can’t get to the clinic, and some people just don’t want to go to the clinic because they’re scared of the current pandemic and they just want to be evaluated over the phone.” Telehealth might be the tool that helps close the economic and racial gap in health disparities. Specialists can do video consults with doctors at resource-poor rural and community hospitals. Instead of an uninsured person going to the ER for something minor and waiting all day, they can schedule a video call or phone session with a medical provider in minutes. A parent making hourly wages wouldn’t have to take the day off work to bring a sick child to the doctor. And a person who lacks a ride to a provider’s office won’t have to forgo getting a troubling symptom checked out, so long as they have a phone. Considering all the stress screen time can cause and how remote it can feel, doctors and patients who use telehealth have reported something surprising: It seems to foster a more personal relationship with a patient, and that can make a virtual visit more productive. Being able to view a patient’s home environment can help a medical provider spot safety hazards, pinpoint things that may be aggravating a patient’s condition (like respiratory issues), and assess someone’s ability to perform activities of daily living like dressing and cleaning. Telehealth also makes it more likely that a family member can participate in the exam, when necessary, which improves compliance with medical directions. And “patients are more likely to be more comfortable, and this helps them relax for a better interaction with me,” Dr. Kroll says. Prior to the pandemic, you probably only saw your doctor in their office or hospital. With telehealth, you might be having a video call with your doctor while your children run through the room or your cat trots across your keyboard. Or you might be chatting with your medical provider and notice you like the same kinds of books, based on what you see on the shelf behind her. This brings an element of the personal to what was previously mostly a professional relationship. “I was quarantined with my daughter when she got COVID-19, so the two of us were in my master bedroom for two weeks,” Amy Witt, MD, a dermatologist with Derrow Dermatology in Maitland, Florida, tells Health. “I did my telehealth visits in there with her, which was a little awkward, but it was pretty cool that I was still able to do that, and most of my patients were very understanding.” Dr. Witt also points out that video calls currently provide a little more face-to-face than in-person visits, so to speak: “It’s one of the only times you see your patient without their mask, and they see you without your mask, so it’s nice.” Dr. Kroll appreciates the glimpse he gets into his patients’ lives, which he finds illuminating. “I’m a doctor in my 50s, and there are still some times when I’ll make house calls,” he says. “The adage has always been, ‘There’s no substitute for a house call,’ because you really get to see a patient in their own environment, and that provides an enormous amount of context. [Telemedicine] gives you a limited view of that, but it’s helpful.” The one caveat to this is that telehealth also seems to have given consumers another chance to multitask. One survey from DrFirst from October 2020 found that while 44% of Americans have used telehealth services during the pandemic, nearly three-quarters of men and 39% of women report multitasking during the visits—including surfing the web, texting, watching the news, and eating a snack. Insurance coverage is one moving part that can sink the promise of telehealth. Some experts think insurers will continue to cover it, although the extent of that coverage may change. Insurers have already begun pulling back coverage of telehealth for non-COVID issues: During the first part of the pandemic, some insurers waived the cost of copays, coinsurance, and deductibles for non-Covid telehealth visits. But many ended those waivers in the fall of 2020. Telehealth also isn’t appropriate for many health issues. You can’t take a urine sample or blood sample over the phone, nor can you have a comprehensive physical exam. A doctor watching for signs of subtle physical changes or abuse might miss them on a video call, where they mainly see their patient’s face. In the therapy field, while telemedicine provides a great deal of convenience, it’s not right for every client. “I have had children hang up on me, leave the room, and some even refuse to be on the camera,” Stacy Haynes, a therapist for children who lives in Turnersville, New Jersey, tells Health. “Working with children, I have found there needs to be a balance and a decision about who can participate in telehealth and who still needs to see a doctor face to face.” Other behavioral health specialists just dislike the method. “As a practitioner, I miss the in-person contact,” says Kelley Kitley, a psychotherapist in Chicago. “Especially in my field, where you want to see affect and body language.” Overall, telemedicine has seen a tremendous increase since the pandemic began, but experts aren’t certain how it will look once the United States is operating normally again. There are thoughts that while telehealth will continue, it won’t be the full-tilt operation it is right now—either from insurers or from providers themselves. “There probably will be somewhat of a scale back to encourage patients to come back, and making that decision is going to be on a case-by-case basis and disease-by-disease level,” Dr. Kroll says. “Once everyone is vaccinated and we’ve got herd immunity and society can open back up again, I think you’re probably going to see doctors scale back.” That said, even a scale-back will leave telemedicine in the US ahead of where it was pre-COVID, when insurers weren’t totally on board and consumers were concerned about privacy, among other issues. “Any increase will be a significant rate of improvement, because it was so minuscule previous to the pandemic,” Dr. Banas says. “Even if we pull back a little bit, we’re still going to be way above where we started.” To get our top stories delivered to your inbox, sign up for the Healthy Living newsletter

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