Becoming a sensitive communication partner

About this guide

This guide gives explores how to support a child with complex needs and visual impairment in developing early communication skills. Written by Caroline Knight, Speech and Language Therapist, this guide looks at the impact a visual impairment can have on communication and focuses on techniques and strategies for developing communication skills.

It is part of our **Complex Needs** series. At the end you will find the full series listed, and details of where to find them.

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1. Babies, communication and vision

New babies arrive armed with a wide array of behaviours. Initially these can be displayed indiscriminately and unintentionally. Caregivers, however, are drawn in to the infant and typically respond to these behaviours as if communication is taking place. They will give meaning to what is taking place and respond accordingly. An infant that cries is told: "Oh, you are hungry", and given a feed; one that kicks its legs may hear: "You are excited. You like your bath", and is then given the opportunity to experience bath time.

"My behaviours affect others"
With time, the child realizes that their behaviours are affecting those around them and they start to use the behaviours with the intention of influencing those around them. The child thus guides the caregiver with a combination of looks, movements towards objects, vocalizations etc.

Moving on to speech
The next development sees the child refine skills and use more systematic and symbolic ways of making their needs known, typically through speech. Importantly, this takes place within the context of the development of shared and joint attention, much of which is dependent on the shared sensory experiences of the infant and caregiver.
The interactive nature of communication means that the progress of the child is reliant on access to communication partners.

2. Communication and visual impairment

The use of vision plays a key role in these interactions in these early stages. In the absence of these key visual elements, the child with visual impairment can struggle to progress with their communication. How does the child know when their caregiver is attending to them? How do they develop shared attention when they have a very limited range of experiences in common with those around them?

The context as experienced or perceived by the child with visual impairment and complex needs may not match that of the caregiver who may not be able to or know how to respond appropriately.

For example, a sighted child may hear its mother shaking a rattle. The child may then move, look at the rattle and change its facial expression. The mother registers her child's interest and attention and continues to interact with the rattle, watching the baby and commenting on the reactions of the child. By contrast, a child with visual impairment may "still" as they attend to a sound and facial

expression may appear passive. The mother interprets these behaviours as a lack of interest and the interaction is not continued. This mismatch results in the child, already disadvantaged by the impact of their disabilities, having access to fewer and poorer communication exchanges on which to build their skills.

3. Communication techniques and strategies

By adapting and refining our communications, we can support the child in their communication development.
The following techniques and strategies have been found to be beneficial when laying down the foundations for communication and language development in children with complex needs and visual impairment.

Sharing the moment - multi-sensory interactions
Shared and joint attention are fundamental building blocks to a child's development. We need to consider what the child without vision is experiencing. We need to develop other ways of making and maintaining contact to compensate for the lack of eye contact and gaze.
Adults should consider the following and use them in their interactions to engage with the child:
- touch
- movement
- vibration
- rhythm
- smell
- place
- sound - voice, intonation
- sounds - environmental
- air currents.

Cutting out clutter
We need to be aware that stimuli (sound, smell etc) may occur naturally within the child's environment. While it is not possible or

useful to provide a sterile environment for a child, we do need to be aware of things competing for the child's attention. They will not be able to filter them out as we do, or they may be overwhelmed and shut down.

Creating structure and routine

Develop small routines when interacting with the child. In these interactions alert the child by using their name and touch in a consistent manner. Exchanges should include clear signals that show the beginning and the end.

Going slowly and noticing responses

It cannot be stressed enough that large amounts of time need to be built into these interactions. The pace should be such that it allows the child to process what it is experiencing and to organise a response. The adult also needs time as they will need to look at a variety of often very subtle responses from the whole child. The Affective Communication Assessment in "Communication Before Speech: Development and Assessment" (Coupe, O, Kane, J. and Goldbart, J. (1998) provides an excellent framework for this. It enables the identification of reliable responses or behaviours to events, people or other stimuli and the systematic ways in which a child responds and affects their environment. The authors also give guidance on how to reinforce these communication attempts and facilitate the movement from pre-intentional to intentional communication.

Intensive Interaction

Another approach, Intensive Interaction, develops pre-speech fundamentals at these early stages of communication development. The non-directive approach is built around interaction sequences that follow the lead of the individual (See www.intensiveinteraction.co.uk).

Setting the context

It is not just the face-to-face interactions in micro-routines that will promote a child's communication. Clear daily routines should be

established so that the child can gradually make sense of what could otherwise be chaotic and fragmented experiences.
Making the patterns, routines and sequences of life explicit to the child will increase the feeling of security. The child will be able to understand and learn about his experiences and develop anticipation of events. They will eventually also learn how to manage when things do not go as expected.

Using objects and signs
The use of object cues and Objects of Reference can be readily incorporated into daily routine to give extra information to the child. By consistently linking an object with an activity the object comes to represent that activity for the child. For example, a child can be given a particular spoon to hold and told "it's time to eat" just before a meal is served. Eventually the child makes the connection and they begin to anticipate their meal on being handed the spoon. Early communication through touch can be extended into on-body signing (see "Learning Together: a creative approach to learning for children with multiple disabilities and a visual impairment" (1992). The authors give clear guidance on creating a learning environment that promotes active exploration and communication.

4. Taking control

As the child continues to experience successful communication with partners who are sensitive to their needs they will begin to develop intentionality. As the world becomes clearer and more predictable they will be able to realise that they can also have an effect on those around them and will begin to take control.
Cause and effect can be explored and practices in many different ways:
- through work on a resonance board (www.lilliworks.com) in Intensive Interaction sessions
- making meaningful choices using Objects of Reference
- coactively signing to gain more of something (or perhaps a more motivating drive) to make something stop
- through technology such as switches.

5. Towards symbolic functioning and speech

Symbolic functioning can be developed through various ways. Exploration and experience with objects can lead to the use of Objects of Reference as a means of expressing a choice; signing also provides a shared means of communication. These should be accompanied by speech when used by the adult.
As a sensitive communication partner you will adapt your speech to meet the needs of the child:
begin with the child's name to alert them
- position yourself at the child's level
- make your voice interesting using rhythm and intonation
- use short clear phrases related to what the child is experiencing
- support key words (those that the child needs to understand) with relevant objects, signs etc
- use pauses to give child time to process
- value the child's turn in the interaction
- give feedback to the child to show how you are interpreting them.

In time the child may use vocalizations in a consistent way that can be interpreted to represent something. It is essential to give the child feedback on your interpretations so that these can be further expanded.

6. Communicating with a wider circle

As the child grows so will the opportunities for communication with a wider circle. The child will meet new communication partners who will not be tuned in to their idiosyncrasies and particular communication style.

Using a Communication Passport
One way of passing on what you have found out about the child's communication strengths is through a Communication Passport. These present the child in a positive light and reflect the

individuals' personality, their needs and what is important for them. In describing the child's most effective means of communication and how others can best communicate with them, the passport can ensure a consistent approach is taken by all who interact with the child.

Through encounters with sensitive communication partners the child will enhance their own communication skills and build their self-esteem. This will assist the children to take on an active role in their own communication development.

7. References

- Coupe, O, Kane, J. and Goldbart, J. (1998). Communication Before Speech - Development and Assessment (2nd edition). London: David Fulton
- Best, A. (1992) Teaching children with visual impairments. Milton Keynes: OUP
- Visit www.intensiveinteraction.co.uk.
- Visit www.lilliworks.com
- Lee, M., MacWilliam, L. (2002) Learning Together. RNIB
- Routes for Learning www.wales.gov.uk
- Ockleford, A. (2002) Objects of Reference. London: RNIB.

8. Further guides

The full **Complex Needs** series of guides includes:

- Special Schools and Colleges in the UK

Assessment
- Functional Hearing Assessment
- Functional Vision Assessment

Communication
- Becoming a sensitive communication partner
- Promoting communication with children with complex needs

- Alternative & Augmentative Communication (AAC)
- Using Touch with children with complex needs
- Objects of reference

In the classroom
- Developing Play
- Creative and Musical sessions for children with complex needs
- Sensory Stories
- Information Communication Technology (ICT) for children with complex needs
- Multi-sensory Learning Environments

The staff Team
- The role of the Intervenor
- The role of the QTVI and other professionals:
1) Best of Both: Visual impairment and Physiotherapy
2) Best of Both: Visual impairment and Occupational therapy
3) Best of Both: Visual impairment and Speech and language Therapy
4) Best of Both: Visual impairment and Specific medical needs and medication
5) Best of Both: Visual impairment and orthoptics (clinical and functional vision assessment)

Understanding complex needs
- Attachment, development and children with sensory needs
- Sensory Integration

In addition, you may also be interested in the following series of guides, all of which are relevant to children, young people and families:

- Supporting Early Years Education series
- Removing barriers to learning series
- Teaching National Curriculum Subjects series
- Complex needs series
- Further and Higher education series

We also produce a number of stand-alone guides, on a range of topics, which may be of interest, please contact us to find out what we have available.

All these guides can be found in electronic form at www.rnib.org.uk/guidanceonteaching For print, braille, large print or audio, please contact the RNIB Children, Young people and Families (CYPF)Team at cypf@rnib.org.uk or call on 0121 665 4235.

For further information about RNIB

Royal National Institute of Blind People (RNIB), and its associate charity Action for Blind People, provide a range of services to support children with visual impairment, their families and the professionals who work with them.
RNIB Helpline can refer you to specialists for further advice and guidance relating to your situation. RNIB Helpline can also help you by providing information and advice on a range of topics, such as eye health, the latest products, leisure opportunities, benefits advice and emotional support.

Call the Helpline team on 0303 123 9999 or email helpline@rnib.org.uk

If you would like regular information to help your work with children who have sight problems, why not **subscribe to "Insight",** RNIB's magazine for all who live or work with children and young people with sight problems.

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