SECTION 7: COMMUNICATION
Communication is a basic human right. Communication happens when we understand what is being said to us and respond and when we express our thoughts, needs and feelings so they can be understood. (Hesperian Health Guides)

Some of the ways we can communicate:

- Talking
- Smiling
- Pointing
- Laughing
- Facial expressions – grimace, pain, happiness
- Body movements
- Drawing
- Reading
- Writing
- Singing
- Use of computer, tablet or assistive device.

There are many reasons why we need/want to communicate:

- Establishing relationships and making friends
- Exchanging information, communicating ideas and giving directions
- Communicating needs and wishes
- Developing thinking skills e.g. helping us to remember, make plans, solve problems
- Becoming happy and successful members of our community

A child learns a language in steps:

- He hears words
- He understands and responds to words
- He uses words
- He thinks in words
- Then he can use a complete language with the community
**Promoting communication**

Every AHP has a part to play in promoting and supporting communication. To promote universal language and communication development, good practice leaflets can be downloaded from The Communication Trust [www.communicationtrust.org.uk](http://www.communicationtrust.org.uk) or from the resources listed below and modified for local structures and needs with the help of local colleagues. Key messages can be modelled, demonstrated or illustrated and used as wall displays or handouts.

When working in a low resourced country, find out about the local level of literacy and drawing style. It is always better to get a local person to draw pictures than draw them yourself.

**Reinforcing communication**

AHPs may also find themselves in situations where for example:

- Therapy or hygiene techniques need reinforcement
- Pupils would benefit from understanding routines or transitions.
- Behaviours, such as poor listening and attention, are reducing effective therapy,
- Parent/s carers have exercises or daily living routines to remember over several months

Simple visual cues and repetition make communication and therapy more effective. For example:-

- Putting a Hand Washing symbol near a tap
- Using lots of natural gesture
- Drawing (e.g. workshop tool storage or a bed-chair transfer sequence)
- Holding or demonstrating an object when talking about it in training
- Touching an arm that needs moving
- Giving choices using objects or photos/drawings

**Extra support for communication**

AHPs who may be working in situations without the support of SLT colleagues may come across children and adults who need extra support to communicate their needs perhaps because of
neurological impairment, visual impairment, hearing loss and/or learning difficulties.

Specific training or spending time with SLTs working in rehabilitation units or schools with pupils with complex needs and/or hearing loss prior to departure is invaluable if you think you may be working with people with communication difficulties. In the field, these contacts may be your source of help and support.

AHPs can ask for advice from CTI or MAITS or experienced SLTs working in the Region. MAITS is an international disability charity which improves access to healthcare and education services by providing capacity-building to health and education professionals working in the mainstream and disability sectors in under-resourced countries. MAITS can be asked if an expert Trainer is available to come out on a short term assignment to help you. This is most useful in situations where co-workers or communication partners can be trained too.

Where there is no SLT support, AHPs may investigate setting up extra supported communication systems in partnership with parent/s, carers, other professionals and the child or adult in need.

The following resources and considerations may be a helpful starting point.

- AHPs should take a holistic and functional view of communication. It needs to work for the individual or organisation. Always bear in mind the local culture and ensure resources are easily obtainable, inexpensive and replaceable.

  **Simple works best. Think no tech or low tech.**

- It is not generally recommended that AHPs in low resourced countries request, import or investigate HiTech communication aids as often electricity and batteries are expensive and limited. Maintenance may be very problematic leading to frustration, guilt and disappointment. As cheaper solar powered communication devices and Apps are produced, the situation may well change.

- Supported communication such as signing or communication board needs ‘everyone on board’ for it to work and usually takes time, hard work, reviewing, revising and patience for it to be effective.
Examples of Communication boards used in the Philippines.

When considering how to help, think about

- **How successfully the person**
  - Indicates their needs, wishes, likes and dislikes
  - Signals Yes/No
- Shows pain, hurt, distress or pleasure and enjoyment
- Understands the intention of others and can anticipate what may happen
- Shows their understanding and knowledge

- **How successfully other people**
  - Interpret the person’s words, vocalisations, body movements, gestures and behaviours.
  - Value and respond to the person’s existing communication methods

- Observe local ways of communicating and ask local colleagues for advice. For example, are there unacceptable gestures? How do people indicate an object? Pointing may be considered rude.

- Remember it is inappropriate to use UK Signing systems such as Makaton unless they have been specifically designed for a language or country.

- Look at the communication environment. Are noise levels too high? Do people give enough time for individuals to process information and respond? There are guidelines at [www.icommunicatetherspy.com](http://www.icommunicatetherspy.com)

- Explore how information is recorded and presented locally. In areas of low literacy there may be familiar visual strategies in place.

- Last but not least, find out about supported communication which is already being used locally by asking colleagues and contacting relevant organisations.

The following organisations and resources provide practical and functional suggestions:-

**International Society for Augmentative and Alternative Communication (ISAAC)**
[https://www.isaac-online.org](https://www.isaac-online.org)

**Communication Matters** www.communicationmatters.org.uk has useful booklets ‘Other Ways of Speaking’ and ‘Getting Started with AAC’ which include ‘Designing and using alphabet charts’ ‘Using low tech systems when pointing is difficult’ and ‘Using low tech systems’

**Royal National Institute for the Blind** www.rnib.org.uk has an Effective Practice Guide: Communication: Complex Needs

**The Total Communication Resource Pack** East Sussex County Council 2014

The book **Disabled Village Children** has visual examples of communication aids which can be used with individuals with normal hearing and communication difficulties as well as those
with hearing impairment (see Resources section)

**Let’s Communicate** (WHO Iris 1997), by Helen House and Jenny Morris, has a wealth of practical information on communication, assessment, goal planning, cerebral palsy, hearing loss and complex needs—a ‘must’ for AHPs. Free download.

[http://apps.who.int/iris/handle/10665/63851](http://apps.who.int/iris/handle/10665/63851)

**The Stroke Association** [www.stroke.org.uk](http://www.stroke.org.uk) has useful advice (e.g. Helping Someone with Communication Problems) that can be modified for partners/carers of adults with communication difficulties who have suffered head trauma. The advice may be equally applicable to children and young people.

**Action on Hearing Loss** [www.actiononhearingloss.org](http://www.actiononhearingloss.org) and **National Deaf Children’s Society** [www.ndcs.org.uk](http://www.ndcs.org.uk) both have information about being good communicators and listeners with hearing impaired people.

**Christoffel Blind Mission** [www.cbm.org](http://www.cbm.org) is an international development organisation committed to improving the quality of life of persons with disabilities in the poorest countries of the world.

**Deafness**

In low resourced countries, Deafness can have a devastating impact on the child / adult (affecting speech, language and communication, education, employment, mental health and quality of life).

According to WHO (February 2017)

- over 5% of the world's population has disabling hearing loss (328 million adults and 32 million children)
- 80% of people with moderate to profound hearing loss live in low - and middle - income resource countries
- Less than 3% of people with disabling hearing loss in low resource countries have a hearing aid
- More than 30 million hearing aids are needed annually in developing countries, together with services and staff to fit them, but current annual provision is less than 1 million (Holly Robinson 2016)
Where you can go for help (would depend on the locality and resources available):

- local deaf persons who are able to support, teach and provide insight into some challenges experienced by deaf people
- Interpreter / Communicator
- Families with deaf children
- National Association of the Deaf (or other group run by the deaf)
- 'Special Education programmes' or Schools for the deaf
- Audiologists, ENT and other health professionals (Hesperian Health Guides)

Helping Communication – Total Communication

The Total Communication approach explores and incorporates the use of a wide range of strategies to encourage / support what is easy, works well and can be adapted to suit the needs of the child / adult in their particular community:

- personal gestures
- objects
- pictures
- sign language
- lip reading
- finger spelling
- drawing
- reading
- writing

“Deafness is a community issue”

Holly Robinson (Yale Global Health Review 30 Oct 2016) observed that “By simply educating family members on the importance of developing communication with their deaf children, researchers observed a significant improvement in deaf children’s ability to engage with the community and participate in society. This has major implications for the mental health of the deaf, as it allows children to develop in a fully supportive environment.”
Useful Organisations/Resources

**Deaf Children Worldwide (National Children’s Deaf Centre)**

Sound seekers [www.sound-seekers.org.uk](http://www.sound-seekers.org.uk) currently has multiple projects in five African countries with an overriding aim of helping deaf people in some of the world’s poorest communities to learn and earn.

**Audiology Without Borders** (articles in the Hearing Journal).

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**Key Messages:**

- Communication is vitally important
- When using resources for communication: keep it simple.
  - Think no tech or low tech