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Effective Communication with Individuals with Disabilities

Poor communication can greatly impede high-quality healthcare for individuals with disabilities. As a care provider, improving your communication skills is pivotal for fostering a comfortable and supportive environment. This training will aid in understanding and implementing recommended practices for effective communication with people across diverse disabilities.

General Guidelines:

1. Talk to individuals with disabilities like you would talk to anyone else, using a conversational tone.

- Example 1: When speaking with a client with a disability, avoid raising your voice unnecessarily. Respect their intelligence and capability for understanding.
- Example 2: While conversing with a client who has visual impairment, don't be self-conscious about using phrases like "Do you see what I mean?". These phrases are a normal part of conversation.

2. Speak directly to the person with a disability rather than an accompanying person or caregiver.

- Example: If a client with a disability comes for an appointment with a friend, address your questions directly to the client, not the friend.

3. Always ask the person with a disability if they need help before you provide assistance.

- Example: If a client appears to be struggling with a task, rather than rushing to help, ask them if they would like assistance.

4. Adopt "people-first language," emphasizing the person before their disability.

- Example: Instead of referring to someone as "a disabled person," use the term "a person with a disability."

5. Make an effort to ensure you are at eye level with the client when communicating, making appropriate eye contact.

- Example: If a client uses a wheelchair, consider sitting down to converse at the same eye level.

Communication with People with Mobility Limitations:

1. Respect the personal space of an individual with a disability, which includes their mobility aids.

- Example: If a client uses a cane, wheelchair, or any other mobility aid, do not move or touch these aids without their permission.

2. Maintain eye level communication with individuals using a wheelchair or scooter.

- Example: During a conversation with a client in a wheelchair, sit down so you can make eye contact at the same level.

3. When giving directions, consider potential obstacles and the distance the person may need to travel.

- Example: If directing a client using a wheelchair to a nearby location, ensure to mention ramps, elevators, or any other accessible routes.

4. Offer to shake hands when greeting a person with a disability.

- Example: Even if the client has limited hand use or an artificial limb, they may still be able to shake hands. It's a universal sign of greeting and respect.

Communication with Individuals with Vision Loss:

1. Identify yourself when you approach a person with vision loss and introduce any accompanying persons.

- Example: When entering a client's room, say, "Hello, [Client's Name]. This is [Your Name], your caregiver for today. I have a trainee with me, [Trainee's Name]."

2. Ensure that a person's glasses or other visual aids are always within their reach.

- Example: Before starting a task or activity, check if the client's glasses are within their reach and ensure they are wearing them if needed.

3. Give clear and precise verbal directions and use touch cues when appropriate.

- Example: If guiding a client to a chair, lightly touch their arm and give specific directions such as "The chair is about two steps to your left."

4. Always announce when you are leaving the room.

- Example: Before leaving the client's room, say something like, "I am stepping out of the room now, but I will be back shortly."

Communication with Individuals with Hearing Loss:

1. Minimize background noise and distractions and confirm how the person prefers to communicate.

- Example: If having a conversation in a noisy environment, suggest moving to a quieter place to make communication easier for the client.

2. Always face the person and maintain eye contact when communicating.

- Example: When explaining a new medication regimen, sit facing the client and maintain eye contact. Use simple language and visual aids to ensure understanding.

3. Pause occasionally when speaking through a sign language interpreter to allow accurate translation.

- Example: If using a sign language interpreter during a client's appointment, pause frequently to allow the interpreter to accurately relay your messages.

4. Even if the person lip reads, face the person, maintain eye contact, and keep your mouth unobstructed.

- Example: If a client reads lips, avoid covering your mouth with your hands and maintain eye contact throughout the conversation.

Communication with Individuals with Speech Disabilities:

1. Be patient and give the individual ample time to communicate.

- Example: If a client with speech difficulties is trying to express something, listen patiently without trying to finish their sentences for them.

2. Pay undivided attention to the person and eliminate background noise.

- Example: In a one-on-one session, ensure distractions such as a loud television or radio are turned off to fully focus on the client's communication.

3. Ask the person the best way to use their communication device, if they have one.

- Example: If a client uses an electronic communication board, ask them to guide you on how best to understand their communication via the device.

Communication with Individuals with Intellectual, Cognitive, or Developmental Disabilities:

1. Treat adults as adults and adjust your communication style as necessary.

- Example: When explaining a new care plan to a client with cognitive disabilities, use simple, direct sentences and avoid using overly simplistic language.

2. Be prepared to repeat the same information in different ways and provide specific instructions.

- Example: When instructing a client on a new medication schedule, give specific instructions and repeat the information as necessary to ensure understanding.

Communicating with Non-verbal Individuals:

Engaging with non-verbal individuals presents unique challenges, but there are effective strategies for communication. Patience and understanding form the foundation of these interactions. Non-verbal cues like body language, facial expressions, gestures, or assistive technology often serve as vital communication tools for these individuals.

- 1. Pay close attention to the individual's non-verbal signals: Even though they do not speak, non-verbal individuals can communicate a wealth of information through their actions and expressions. For example, an individual might use specific gestures or movements to convey needs or feelings. A relaxed posture may indicate comfort, whereas tensed muscles could signal anxiety or discomfort.**

- Real-life example: A client may tap on their cup when they want a drink or lead you to a specific location when they need something there. Over time, you'll learn these individual signals and be able to respond more effectively.

2. Utilize assistive communication devices: Many non-verbal individuals use assistive communication devices to express themselves. These devices can range from simple picture boards to advanced speech-generating devices. Take the time to learn how the individual uses their device, and encourage its use in your interactions.

- Real-life example: A client may use a tablet with a communication app that allows them to select images or type out what they want to say. Ensure that this device is always available and operational during your interactions.

3. Engage in interactive activities: Non-verbal communication also includes activities that foster engagement and connection. For example, a shared activity such as a puzzle or game can provide opportunities for non-verbal individuals to express choices, preferences, or satisfaction.

- Real-life example: You might play a simple board game with the individual and encourage them to indicate their moves through pointing, nodding, or other non-verbal cues.

4. Allow ample time for response: It's crucial to be patient and allow extra time for the individual to respond. Even if they are using an assistive device, forming a response might take longer than it would in verbal conversation.

- Real-life example: When asking a client if they would like to go for a walk or stay indoors, give them plenty of time to respond using their preferred method of communication.

5. Confirm understanding: Since non-verbal communication can sometimes be open to interpretation, it's crucial to confirm your understanding. You could do this by repeating back or paraphrasing what you think the person is trying to convey and looking for a confirmation, such as a nod or a sign on their communication device.

- Real-life example: If a client points towards a bookshelf, you might say, "It looks like you're pointing towards the bookshelf. Do you want a book?" Then, wait for their confirmation.

Remember, non-verbal individuals, just like anyone else, have their unique ways of expressing thoughts, feelings, and needs. By learning and adapting to their communication style, you can ensure they feel heard, understood, and cared for.

****Scenario: Communicating with a Non-Verbal Child****

Sophie is a six-year-old girl who is non-verbal and diagnosed with severe autism. She is a new student at Sunshine Elementary School. Her teacher, Mr. Johnson, is trained in special education and understands the different strategies required to communicate with children who are non-verbal.

On Sophie's first day, Mr. Johnson is careful to welcome her warmly. He approaches her slowly and gently, understanding that sudden movements or loud sounds could startle her. Kneeling down to her eye level, he gives her a gentle smile and introduces himself using simple sign language which Sophie's parents had taught him during their introductory meeting.

To communicate the day's schedule, Mr. Johnson uses a visual schedule board with pictures indicating each activity. When it's time to transition from one activity to another, he points to the next picture on the board and mimics the action to help Sophie understand. For example, when it's time for art, he points to the picture of a paintbrush and paper, and then pretends to paint in the air.

Mr. Johnson also uses a picture exchange communication system (PECS) to allow Sophie to express her needs and wants. He keeps a binder with pictures of common items and activities, such as a drink, a snack, a book, or a toy. When Sophie wants something, she hands Mr. Johnson the corresponding picture from the binder. This system also helps Sophie to communicate her feelings, as there are pictures representing emotions such as happiness, sadness, and frustration.

Whenever Sophie gets overwhelmed, Mr. Johnson guides her to a quiet corner of the room with soft lighting and calming sensory items, giving her a safe space to self-regulate her emotions. He communicates this transition by showing her a picture of the quiet corner and walking with her to the area.

Over time, through Mr. Johnson's patient and consistent communication efforts, Sophie begins to feel comfortable in her new environment. She gradually becomes more engaged in class activities and even starts to initiate communication by pulling out PECS cards on her own.

This scenario demonstrates the importance of using diverse communication strategies, such as sign language, visual aids, and PECS, when engaging with a non-verbal child. It also emphasizes the significance of patience, respect, and understanding when interacting with individuals with special communication needs.

Communication with Individuals with Psychiatric/Mental Health Disabilities:

1. Use clear, simple communication and approach the person respectfully, just as you would anyone else.

- Example: When discussing a new therapy plan with a client who has a psychiatric disability, ensure your language is clear and respectful, and your attitude supportive.

2. Listen attentively and wait for the person to finish speaking.

- Example: During counseling sessions, patiently listen to your client and wait for them to finish their thoughts before you respond.

Remember, everyone's needs and preferences are unique. Take time to understand the specific needs of your clients, and adapt your communication style accordingly. Communication is a vital component of care; when done effectively, it fosters a positive relationship between the caregiver and the client and contributes significantly to quality care.

A few more real-life examples for reference:

1. ****General Communication with Persons with Disabilities:**** In a group discussion, Mark, who uses a wheelchair due to a spinal cord injury, raises a point. Even though his speech is slightly slurred, everyone in the group makes an effort to maintain eye contact with him while he speaks, showing their attentiveness and respect.
2. ****Mobility Limitations:**** As a physical therapist, Sarah always asks her patients with mobility limitations if they need help before she moves their wheelchairs or adjusts their crutches. She remembers one instance when she wanted to move a patient's wheelchair to a more convenient spot, but the patient preferred it left where it was.
3. ****Vision Loss:**** While volunteering at a local community center, Jack encounters a new member with vision loss. He introduces himself and verbally guides the individual to a free seat, describing the layout of the room in specific terms and distances.
4. ****Vision Loss:**** In a restaurant, a waiter notices that one of his customers is using a guide dog. Even though he loves dogs, he resists the urge to pet the dog without first getting permission from the owner.
5. ****Hearing Loss:**** As an HR manager, Linda regularly uses a sign language interpreter during meetings with an employee who is deaf. She makes sure to face the employee and speak directly to him, even though he's looking at the interpreter.
6. ****Hearing Loss:**** During a family gathering, Uncle Bob, who is hard of hearing, turns his hearing aid off due to the loud background noise. His niece takes him to a quieter spot and ensures he has his hearing aid on before continuing their conversation.
7. ****Speech Disabilities:**** As a teacher, Mrs. Johnson takes time to understand her student, Jake, who has a stutter. She patiently waits for him to finish his sentences without interrupting or finishing them for him.

8. ****Intellectual, Cognitive, or Developmental Disabilities:**** As a volunteer at a local daycare center for adults with developmental disabilities, Anna learns to communicate effectively with the attendees. She uses simple, concrete language and is patient when she needs to repeat instructions.

9. ****Intellectual, Cognitive, or Developmental Disabilities:**** A supermarket cashier provides clear and concrete instructions to a customer with intellectual disabilities about how to use the credit card machine, ensuring the customer comprehends each step before proceeding to the next.

10. ****Psychiatric/Mental Health Disabilities:**** As a mental health counselor, Tom makes sure to listen attentively to his clients, making eye contact, and allowing them to finish speaking before he responds. He's aware that his clients, like anyone else, can sense discomfort and strives to create a safe, respectful atmosphere.

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