

<p style="text-align: center;">Current Research Literature in Communication National Designated Expert Colin Griffiths, Dr Martine Smith and Caroline Dalton O'Connor.</p>

Research Update on Communication– Autumn 2008

Introduction:

The following is a selection of recent reading in the field of the communication of people with intellectual disabilities. The primary focus of the theoretical research presented here is that it has an application to practice.

It includes two recently published books as well as a selection of Irish and international research. This is the first in a regular selection from the communication literature. If anything interesting comes your way, please contact us at colin.griffiths@tcd.ie

1. Promoting Social Interaction for Individuals with Communicative Impairments: Making Contact.

Ed: M.Suzanne Zeedyk. (2008). London. Jessica Kingsley.

This book has three sections, these examine the biological origins of communication, the nature of communication impairments and approaches to how they may be overcome. Emphasis is placed on the communicative potential of babies from the outset. Communication is viewed as taking place in a context of trust and of mutuality. Different perspectives are demonstrated by the authors of the chapters the promotion of communication for people who are deaf /blind, on the autistic spectrum, have advanced dementia and also for those with profound learning disabilities is covered in some detail. The book also discusses the application of intensive interaction as a method of interacting with people who have major communication difficulties.

2. From Isolation to Intimacy: making friends without words.

Phoebe Caldwell and Jane Horwood. (2007). London. Jessica Kingsley.

Abstract.

This book looks at how people without disabilities may communicate with those who have intellectual disability or are on the autistic spectrum. The book is divided into two sections: the first part is titled 'Learning the skills of interaction' this section examines how people who mostly do not use language interact with those who are non disabled. Caldwell suggests that if you are on the autistic spectrum the world appears to you as wholly foreign and unpredictable, she also understands that the capacity of many people with severe intellectual disabilities to comprehend the world in which they live is very limited. The author explains some of her theories about why that is so in this section. In brief she suggests that the way to communicate with such people is to use their utterances and body language as the starting point from which to develop a conversation. This book relies on the description of multiple case studies which tell the stories of how she has worked with people on the autistic spectrum and with people with intellectual disabilities. The emphasis of the book is on methods of

making contact with people who have communication difficulties and to use that contact as a way of interacting with them on their terms and then of easing the anxiety that many suffer from in encountering the world around them.

Caldwell's thesis is summed up on page 144 where she says 'Whatever our state, we take it for granted that others experience the same as we do. It is one thing to be aware in our heads that another person's experience differs from our own, quite another to take this on board and understand what their experience feels like, how different their perceptions are in the flesh'. Caldwell thinks that we cannot communicate with people with autism or severe intellectual disability unless we try to see the world through their eyes. We can do this through closely watching the person we wish to communicate with through using imitation and intensive interaction as communication mechanisms that enable us to engage with others on their terms and to speak their language.

3. A Communication Training Programme for Residential Staff Working with Adults with Challenging Behaviour: Pilot Data on Intervention Effects.

Andy Smidt, Susan Balandin, Vicki Reed and Jeff Sigafos

Journal of Applied Research in Intellectual Disabilities. 2007. Vol. 20 [1]. pp16–29.

Abstract.

Background. Challenging behaviour often serves a communicative function. It therefore stands to reason that the residential staff working in developmental disability services require training to foster appropriate communicative interactions with adults with challenging behaviour.

Method. Eighteen members of staff working in three residential services participated in a 4 week communication training programme. The programme focused on staff attitudes to and beliefs about challenging behaviour, communicative interactions between staff and residents and working as a team. Objective measurements were made of the effects of the training programme on staff use of augmentative and alternative communication, praise and use of inappropriate language in a multiple-baseline design across three organizations. Changes in the rate of challenging behaviours among the residents were also evaluated.

Results. As staffs' use of AAC and praise increased, and inappropriate language decreased, there was some concomitant decrease in residents' levels of challenging behaviour; however, these results were not sustained in the long-term.

Conclusion. This pilot data suggest that an approach to staff training based on modifying attitudes and beliefs is potentially beneficial to both staff and residents.

4. A manifesto for the use of video in service improvement and staff development in residential services for people with learning disabilities.

W. Mick L. Finlay, Charles Antaki, Chris Walton.

British Journal of Learning Disabilities (2008). July 2008.

Abstract.

In this paper we argue that video recording of actual practice should be a central tool for organisations attempting to improve services for people with learning disabilities. Since an important site for the disempowerment of service-users is in everyday, mundane interactions with service staff, an approach to staff development is needed which allows workers to see what they actually do and how they might do it differently. Research illustrates that retrospective self-reports of what people habitually do cannot capture much of the important details of communicative interaction. We argue that video recordings are the best way of doing this, and provide examples from our own work of the type of benefits that can arise. Finally, we set out a set of guidelines for the use of video recording in reflective practice in services.

5. Long-term outcomes for individuals who use augmentative and alternative communication: Part III Contributing factors.

Shelly, K. Lund & Janice Light, (2007).

Augmentative and Alternative Communication, 1-13

Background: People with an intellectual disability who are non-verbal often rely on augmentative and alternative communication (AAC) to communicate in their day to day interactions with significant others. The attitudes and beliefs of professionals and family members can impact both negatively and positively on the capacity of people who use AAC to communicate.

Method: This qualitative study explored the impact of the attitudes of professionals on long term outcomes for young men with cerebral palsy (n=7) who use AAC to communicate. Semi-structured interviews were conducted with professionals (n=14) and family members and coding procedures were used to identify two main themes; factors which formed barriers to and supports for positive outcomes for people availing of AAC.

Results: Negative attitudes of professionals relating to the use of AAC and those individuals who used this form of communication were identified as a barrier to positive outcomes. Lack of adequate service provision was the most frequently mentioned barrier, including limited availability of local services, limited knowledge of and lack of collaboration amongst professionals and limited intervention goals. Limited knowledge and lack of preparation by professionals was linked to lack of collaboration amongst professionals. Positive outcomes were achieved where knowledgeable, competent professionals were willing to collaborate with all those involved and where appropriate training was provided for those who required it.

Conclusion: The authors concede that the study sample was a homogenous group, which limits the generality of the results, additional research is required to validate the

findings of this study. However, it can be concluded that appropriately trained staff, with positive attitudes towards providing communication supports for those who require them, who can co-operate inter-professionally have the capacity to ensure positive outcomes for people using AAC.

6. Communication among nurses and adults with severe and profound intellectual disabilities.

Denise Healy & Patricia Noonan Walsh (2007).

Journal of Intellectual Disabilities, vol.11 (2) 127-141.

Background: The aim of this study was to explore non-verbal communication strategies employed by nurses in residential services for people with a severe and profound intellectual disability.

Method: Using a triangulated approach, a purposive sample of staff nurses (n=10) were asked to identify a client within the service to form communication dyads. Interactions between staff and clients were videoed for ten minutes and analyzed for pre-defined verbal (n=8) and non-verbal (n=7) communication acts. Focus groups were conducted using a topic guide for 25-30 minutes with five staff in each group and individual interviews were also undertaken.

Results: Knowing clients well was essential to developing good communication strategies as well as having consistent staffing levels; however staff felt that a high staff-client ratio and time constraints had an impact on supporting communication. Overcrowding and lack of privacy made communication with clients difficult at times. Frontline staff also stated that residential environments did not afford clients enough opportunities to make choices. A mismatch between strategies used by staff to communicate and the needs of clients were identified where staff used complex sentences beyond the understanding of clients. When asked to predict skills used when communicating with clients, staff were more likely to apply these skills than predict them; asking questions was the most frequently used form of verbal communication, but only one staff predicted this as a preferred means of communication.

Conclusion: The important role of staff in providing communication supports is emphasized, professionals must recognize those who communicate non-verbally as equal partners in the communication process and match their communication strategies to the needs of people with an intellectual disability. Comprehensive assessments must be undertaken to identify the communication needs of this particular demographic population.

7. Communication quality indicators: A survey of Connecticut group home managers.

Evelyn, A. DeSimone & Paul, W. Cascella, (2005).

Journal of Developmental and Physical Disabilities, 17 (1), 1-17.

Background: The ‘*Communication Supports Checklist*’ (CSC) (McCarthy et al, 1998) (McCarthy et al, 1998) was used in this survey to evaluate group home managers’ perceptions of indicators of quality communication supports in group home settings for people with intellectual disability. The authors identified the perceptions of group home managers as important as these professionals are responsible for coordinating the provision of services for people with I.D.

Method: A random sample of group homes (n=60) was chosen, and surveys were posted to the group homes, with a response rate of 53.4% (n=34). In addition these group home managers were interviewed using questions based on the survey and the ‘CSC’ (McCarthy, et al, 1998).

Results: The results of the survey indicated that group home managers were very positive regarding the provision of communication supports, and that the degree of intellectual disability of residents was not a factor in providing communication supports. Three aspects of communication supports were rated especially high, indicating that they were viewed as important including: a philosophy of providing communication supports within services (85%); protection of communication rights (78%) and assessment of the communication needs of people with I.D. (77%). Environmental supports were rated as low (58%); suggesting that the physical and operational constraints in environments might prevent the development of communication supports. Two specific individual statements were rated especially low; staffs knowledge of AAC systems and devices and changing staffs’ methods of communicating. The results also indicated that direct care staff were responsible for implementing communication goals, in conjunction with speech and language pathologists. Despite group home managers’ reporting that communication goal processes were adequate, some had no communication goals in their group homes, and most managers reported that AAC devices such as picture boards were not used.

Conclusion: Overall, the results of the study indicated that while frontline staff recognize the importance of communication supports, such supports may not be provided on a day to day basis for people with intellectual disability. Physical and operational constraints, lack of resources, appropriately trained staff and a lack of commitment on behalf of service providers have been seen to limit the provision of communication supports for people with I.D.

8. Exploring visual-graphic symbol acquisition by pre-school age children with developmental and language delays.

Barton, Andrea, Sevcik, Rose, Ronski, Mary Ann. (2006).

Augmentative and Alternative Communication, 22 (1), 10-20.

Background: For children with severe intellectual disabilities and language delays, the ability to link a symbol to its referent may be a significant challenge. Where it is considered unlikely that speech will be functional, choices about the kinds of symbols to introduce, and how best to introduce them are core clinical decisions. One of the points of contention is whether symbols should have a transparent relationship with their intended referent (i.e., should look like the referent, or be easily guessable), or whether the arbitrariness of the symbol is unimportant in the symbol learning process. This study explored the abilities of children with severe intellectual abilities to learn

and use two different visual symbol sets, one considered abstract (lexigrams) and the other iconic (Blissymbols).

Method: The study provided four pre-school children with severe intellectual disabilities with observational experience in pairing a set of three Blissymbols and three lexigrams with their referents across eight intervention sessions in a four-week period. No requirement to use the symbols was introduced. Instead the participants had the opportunity to observe others pairing symbols with referents in a computer-based task, and were allowed to explore the task themselves. Comprehension and production of the symbols was assessed after two, four, six and eight computer sessions, and in a generalization session two weeks after intervention.

Results: All participants evidenced learning of the symbols via observational experience, with two participants learning all six symbols both in comprehension and production. The referents and symbols were all items that the children did not comprehend prior to the study. Performance on language measures prior to intervention correlated positively with symbol learning during intervention. No difference was found between learning of iconic and abstract symbols sets.

Conclusions: These preliminary findings suggest that the milieu of symbol introduction may be a more powerful influence on symbol learning than the symbol itself. The findings also point to the complexity of determining whether a symbol is arbitrary or iconic, from the perspective of an individual with a significant intellectual disability.