



Communication Land...Series

PURPOSE

The key to achieving effective communication with any person is for both parties to intentionally engage in the process and accept the responsibility for it. As a communication partner, one way to do this is to understand how specific conditions could be impacting effective communication. The goal of this series is to provide information on how each diagnosis could impact communication and offer strategies to support communicating well.

Remember, how each person is impacted will vary and effective communication access depends on each individual's unique needs.



Diagnoses Included:

- Alzheimer's Disease
- Angelman Syndrome
- Apraxia of Speech
- Attention Deficit Hyperactivity Disorder
- Autism Spectrum Disorder
- Cerebral Palsy
- CHARGE Syndrome
- Communication Disorder
- Conduct Disorder
- Cornelia de Lange Syndrome
- Cortical Visual Impairment
- Deaf-Blindness
- Fetal Alcohol Spectrum Disorder
- Hearing Loss
- Huntington's Disease
- Language Deprivation
- Parkinson's Disease
- Reactive Attachment Disorder
- Rett Syndrome
- Schizophrenia
- Sensory Processing Disorder
- Stroke
- Traumatic Brain Injury
- Usher Syndrome
- Visual Impairment

No matter the diagnosis, the following are helpful to consider:

- Make a plan for effective communication strategies with a team of family and support professionals.
- Expressive and receptive skills may differ.
- Know each individual's unique strengths and gaps and tailor your approach accordingly.
- Be patient.
- Behavior is communication.
- Regular exposure to language is essential.
- Offer opportunities to communicate as often as possible throughout the day.
- Familiar people and environments can improve the effectiveness of communication.
- Consider the effect of comorbid disorders such as anxiety.
- Visual schedules are helpful.



Please contact the Office of Developmental Programs, Special Populations Unit at RA-PWSpecialPopUnit@pa.gov with any questions.



Pennsylvania's leading source
of autism-related resources
and information.
877-231-4244

The ASERT Collaborative is funded by the Office of Developmental Programs, PA Department of Human Services.



Communication and Alzheimer's Disease

DEFINITION

Alzheimer's disease is a type of dementia that causes problems with memory, thinking, and behavior. Symptoms usually develop slowly and get worse over time, becoming severe enough to interfere with daily functioning.

Source: alz.org



HOW IT MAY IMPACT COMMUNICATION

- Communication can look different day by day and hour by hour
- Communication may be more effective during certain times of the day
- May need more time to process communication
- May lose train of thought
- May forget what was communicated minutes ago
- May have difficulty thinking of the words they want to say
- May communicate more through behaviors and touch rather than words
- May not be able to empathize and see others' perspectives
- Feelings of embarrassment, anxiety, fear, or depression may lead to social withdrawal



STRATEGIES TO SUPPORT COMMUNICATION

- Ask the person directly how to best communicate with them
- Sentences should be direct and short
- Don't assume the individual does/doesn't understand; this may fluctuate
- Tune into their facial expressions, body language, tone, and behaviors to recognize communication attempts and respond accordingly
- Use touch to make a connection
- Use senses such as scents to make connections to people and memories
- Remind the person of your name
- Get their attention by using their name before beginning a communication attempt (if possible, establish eye contact or give a touch cue)
- It's best for one person to speak at a time and avoid speaking above other noise
- Offer choices instead of open-ended questions
- Be aware of your facial expressions, tone, and body language
- Multiple approaches may be helpful - including notes, calendars, pictures, labels, and lists to support communication
- Don't comment on their repetition of phrases or questions



THE KEY to achieving effective communication with a person who has Alzheimer's disease is for the listener to intentionally

engage in the process and accept the responsibility for it. How an individual is impacted will vary and communication access depends on individual needs, looking different for each person.

 RA-PWSpecialPopUnit@pa.gov



Pennsylvania's leading source of autism-related resources and information.

877-231-4244

The ASERT Collaborative is funded by the Office of Developmental Programs, PA Department of Human Services.



Communication and Angelman Syndrome

DEFINITION

Angelman Syndrome is a severe neurogenetic disorder causing developmental delay, intellectual disability, speech problems, seizures (epilepsy), and problems with movement and balance (ataxia). It can look similar to other disorders such as autism, cerebral palsy, and Prader-Willi syndrome. Many of the characteristic features of Angelman syndrome result from the loss of function of a gene called UBE3A. Most cases of Angelman syndrome are not inherited, although in rare cases, a genetic change responsible for Angelman syndrome can be inherited from a parent.

Source: Angelman.org, globalgenes.org



HOW IT MAY IMPACT COMMUNICATION

- May have good receptive communication
- May have limited expressive verbal communication
- May be impacted by dyspraxia, causing initiations and responses to take longer than expected
- May have difficulty looking and listening or looking and touching at the same time (sensory processing differences)
- May experience frequent challenges knowing where their body is in space
- May have difficulty filtering out irrelevant input, lack of understanding what is important to attend to



STRATEGIES TO SUPPORT COMMUNICATION

- Use communication supports consistently across all settings
- Aided AAC supports, such as tablets and devices, have proven to be successful
- The person who is supporting the individual should use symbols for communication (such as pictures or objects) and pair them with words
- Allow for extra processing time
- Use shorter, more concrete sentences
- Offer choices instead of open-ended questions
- Use hand-under-hand (where they rest their hand on yours as you move), as opposed to hand-over-hand (where you move their hand for them)
- Model, model, model



THE KEY to achieving effective communication with a person who has Angelman syndrome is for the listener to intentionally engage in the process and accept the responsibility for it. How an individual is impacted by Angelman syndrome will vary and communication access depends on individual needs, looking different for each person.

 RA-PWSpecialPopUnit@pa.gov

Source: Angelman.org, globalgenes.org



Pennsylvania's leading source of autism-related resources and information.
877-231-4244

The ASERT Collaborative is funded by the Office of Developmental Programs, PA Department of Human Services.



Communication and Apraxia of Speech

DEFINITION

Apraxia of speech (AOS) is a neurological disorder that affects the brain pathways involved in planning the sequence of movements for producing speech. The brain knows what it wants to say, but cannot properly plan and sequence the required sound movements.

Source: nidcd.nih.gov



HOW IT MAY IMPACT COMMUNICATION

- Speech errors may be inconsistent
- Severity varies from person to person
- May have trouble saying words correctly and consistently
- Sounds, especially vowels, are generally distorted
- Longer or more complex words are usually harder to say
- Generally, language is understood better than it's expressed
- May speak at a slower pace
- Words/phrases that are difficult to say may be easier to say when used in everyday, familiar phrases



STRATEGIES TO SUPPORT COMMUNICATION

- Be patient - give the person plenty of time to process and communicate
- Create a relaxed, accepting environment
- Establish the topic so it's clear
- Ask close-ended questions (such as yes or no, or questions with choices) to clarify what was heard
- If you don't understand something, repeat what was understood or confirm what you think is correct, and then ask for clarification on the parts that are unclear
- Use multiple modes of communication to clarify information (pointing, natural gestures, objects)
- Provide communication supports (pictures, writing, gestures) if verbal speech is ineffective



THE KEY to achieving effective communication with a person with apraxia of speech is for the listener to intentionally engage in the process and accept the responsibility for it. How an individual is impacted by their verbal apraxia will vary and communication access depends on individual needs, looking different for each person.

 RA-PWSpecialPopUnit@pa.gov

<https://tactustherapy.com/what-is-apraxial>
<https://www.asha.org/public/speech/disorders/Apraxia-of-Speech-in-Adults/>
<https://www.nidcd.nih.gov/health/apraxia-speech>



Pennsylvania's leading source of autism-related resources and information.
877-231-4244

The ASERT Collaborative is funded by the Office of Developmental Programs, PA Department of Human Services.



Communication and Attention Deficit Hyperactivity Disorder

DEFINITION

Attention Deficit Hyperactivity Disorder (ADHD) is a neurodevelopmental disorder that includes both an inability to pay attention and an apparent need to be physically active. Impulsivity is also common. Other associated features may include low frustration tolerance, irritability, mood changes, and poor academic or work performance.

Source: Diagnostic and Statistical Manual of Mental Disorders, fifth edition



HOW IT MAY IMPACT COMMUNICATION

- Mild delays in language and social development are common
- Sustained periods of attention and effort are difficult; may get distracted during conversations
- Blurting things out, interrupting, talking a lot, or being loud are common
- Organization, including following a conversation, can be difficult
- Inability to pay attention or control impulsivity may lead to feelings of frustration
- High energy and rapid transitions can be exhausting or difficult to follow for communication partners



STRATEGIES TO SUPPORT COMMUNICATION

- Be supportive and avoid rejection
- Be patient; remember that the person has an underlying neurodevelopmental disorder and don't take it personally
- Use the person's name or a touch cue to gain attention before communicating
- Break extended dialogues into shorter conversations
- Refrain from directives; keep conversation fun and interesting
- Use fewer words; be clear and concise
- Use environmental reminders, such as structured routines and visual aids to support communication and retain information
- Support their need to be physically active



THE KEY to achieving effective communication with a person who has ADHD is for the listener to intentionally engage in the process and accept the responsibility for it. How an individual is impacted by ADHD will vary and communication access depends on individual needs, looking differently for each person.

 RA-PWSpecialPopUnit@pa.gov

adrc.org



Pennsylvania's leading source of autism-related resources and information.
877-231-4244

The ASERT Collaborative is funded by the Office of Developmental Programs, PA Department of Human Services.



Communication and Autism Spectrum Disorder

DEFINITION

Autism Spectrum Disorder (ASD) is a complex developmental disorder that can cause difficulty with how a person thinks, feels, communicates, and relates to others. A person with ASD may also engage in repetitive patterns of behavior and motor mannerisms, have restricted ranges of interest and/or inflexibility in adhering to routines or rituals.

Source: Paautism.org



HOW IT MAY IMPACT COMMUNICATION

- May experience difficulty with emotional regulation
- May struggle to understand others' beliefs, desires, and intentions; knowing that others have different thoughts than they do and being able to predict them
- May be unable to show empathy at appropriate times and accurately take the perspective of others into account
- May not understand non-verbal cues
- May not make eye contact
- May have difficulty understanding irony, sarcasm, joking, and figures of speech
- Too much information can lead to overload and no further information can be processed



STRATEGIES TO SUPPORT COMMUNICATION

- Use the person's name at the beginning, so it's clear you're addressing them
- Be aware of your environment - a noisy, crowded room may make communication difficult
- Don't ask too many questions, keep questions short and close-ended, and give a longer window to respond
- Be specific, e.g. "What did you order for lunch?" instead of "How was your lunch?"
- Don't rely on non-verbal cues, such as eye contact, gestures, and tone of voice
- Use concise sentences
- Be literal, e.g. "I'm joking" instead of "I'm pulling your leg"

Source: Paautism.org



Pennsylvania's leading source of autism-related resources and information.
877-231-4244

The ASERT Collaborative is funded by the Office of Developmental Programs, PA Department of Human Services.



Communication and Autism Spectrum Disorder



HOW IT MAY IMPACT COMMUNICATION

- Having language may not always equal understanding, especially when overly stressed
- May have restricted speech or no verbal communication
- May be stressed or uncomfortable with new people/environments



STRATEGIES TO SUPPORT COMMUNICATION

- Use communication aids such as pictures or objects
- Use a familiar person to facilitate communication



THE KEY to achieving effective communication with a person who has autism is for the listener to intentionally engage in the process and accept the responsibility for it. How an individual is impacted will vary and communication access depends on individual needs, looking different for each person.



RA-PWSpecialPopUnit@pa.gov

<https://paautism.org/resource/communication-works-both-ways/>



Pennsylvania's leading source of autism-related resources and information.
877-231-4244

The ASERT Collaborative is funded by the Office of Developmental Programs, PA Department of Human Services.



Communication and Cerebral Palsy

DEFINITION

Cerebral Palsy (CP) is a physical disability that affects movement and posture. Cerebral means having to do with the brain; palsy means weakness or problems with using the muscles. CP is caused by abnormal brain development or damage to the developing brain that affects a person's ability to control his or her muscles.

Source: cdc.gov



HOW IT MAY IMPACT COMMUNICATION

- The muscles around the mouth and tongue may be impacted, making speech difficult to produce and understand
- Coordinated breathing to support speech may also be challenging, making speech sound “breathy”
- May not produce sounds at all and might use alternative methods to communicate
- Use of hands can be impacted, affecting sign language use
- May need more time to expressively communicate or process what others say
- Conversations may occur at a slower speed
- Familiar people and environments can improve the effectiveness of communication
- Physical positioning may affect communication
- May impact vision and other senses, affecting social and receptive aspects of language



STRATEGIES TO SUPPORT COMMUNICATION

- Speak to them as you would anyone else
- Be an active listener when they are communicating
- Don't interrupt or finish their sentences
- Be patient – allowing plenty of time to process
- Ask them to repeat or say it a different way if you don't understand
- Repeat or rephrase if you are not understood
- If the person uses a wheelchair, be aware that the wheelchair is an extension of them - don't lean on it without permission
- If they use Augmentative and Alternative Communication (AAC), be open to utilizing it alongside of them
- Supported seating and/or supported head control may improve communication effectiveness



THE KEY to achieving effective communication with a person with CP is for the listener to intentionally engage in the process and accept the responsibility for it. How an individual is impacted by CP will vary and communication access depends on individual needs, looking different for each person.

 RA-PWSpecialPopUnit@pa.gov

<https://www.cerebralpalsyguidance.com/cerebral-palsy/living/daily-communication/>
<https://www.cerebralpalsy.org/information/communication/communicating-effectively>
<https://cerebralpalsy.org.au/services/resources/communication-and-language-development-for-children/>



Pennsylvania's leading source of autism-related resources and information.
877-231-4244

The ASERT Collaborative is funded by the Office of Developmental Programs, PA Department of Human Services.



Communication and CHARGE Syndrome

DEFINITION

CHARGE Syndrome refers to a specific set of birth defects, medical problems, and developmental issues that is extremely complex and differs from individual to individual. The letters in CHARGE stand for: Coloboma of the eye, Heart defects or malformations, Atresia or stenosis of the choanae (part of the nose), Restrictions of growth and/or development, Genital, urinary or kidney abnormalities, and Ear abnormalities including deafness and/or vestibular disorders.

Source: chargesyndrome.org



HOW IT MAY IMPACT COMMUNICATION

- Because of the wide variety of features seen in CHARGE, as well as the variations in severity for each of these combinations of features, communication will look different from person to person
- May lack access to visual and auditory information
- May use a variety of accommodations to support communication access
- Development of symbolic language (whether concrete or abstract) may be challenging
- May strongly rely on communication partners who are able to respond sensitively and in a way that is meaningful to them
- May have a delayed response time – this does not always mean that they do not want to communicate



STRATEGIES TO SUPPORT COMMUNICATION

- Find out which specific characteristics of CHARGE impact them and how
- Follow the individual's communicative lead
- Use a visual schedule to communicate about their day/activities
- Provide additional time to process and respond to communication
- Get the individual's attention before communicating with them (say their name or use an agreed upon touch cue)
- Provide many opportunities throughout the day to communicate
- Reduce background noise and visual distractions
- Communicate using the individual's strongest sensory channel (depending on how much hearing or vision they have)



Pennsylvania's leading source of autism-related resources and information.

877-231-4244

The ASERT Collaborative is funded by the Office of Developmental Programs, PA Department of Human Services.



Communication and CHARGE Syndrome



HOW IT MAY IMPACT COMMUNICATION

- May struggle to use senses together (listen while using vision, reaching while looking)
- Can become overstimulated and/or tired more easily because of the amount of work it requires to coordinate senses
- Inclusion of a concrete component (such as symbolic object systems, pictures, or picture symbols) will support communication
- Physical challenges may interfere with effective communication



STRATEGIES TO SUPPORT COMMUNICATION

- Use objects or real-life pictures (with contrasting backgrounds) to support communication
- Communicating within a familiar environment or with a familiar communication partner will be easier for the individual
- Tune into their facial expressions, body language, tone, and behaviors to recognize communication attempts and respond accordingly
- Provide sensory breaks, when necessary
- Use hand-under-hand when helping an individual touch/grasp something; respect their hands



THE KEY to achieving effective communication with a person with CHARGE syndrome is for the listener to intentionally engage in the process and accept the responsibility for it. How an individual is impacted by their CHARGE syndrome will vary and communication access depends on individual needs, looking different for each person.

 RA-PWSpecialPopUnit@pa.gov



Pennsylvania's leading source of autism-related resources and information.
877-231-4244

The ASERT Collaborative is funded by the Office of Developmental Programs, PA Department of Human Services.



Communication and Communication Disorders

DEFINITION

A communication disorder is an impairment in the ability to receive, send, process, and comprehend concepts or verbal, nonverbal, or graphic symbol systems. A communication disorder may be evident in the processes of hearing, language, and/or speech. A communication disorder may range in severity from mild to profound. It may be developmental or acquired. Individuals may demonstrate one or any combination of communication disorders.

Source: American Speech and Hearing Association



HOW IT MAY IMPACT COMMUNICATION

- Any or all of the 5 components of communication (voice, articulation, language, fluency, and hearing) could be affected
- When speech production is impacted, misunderstandings and frustrations can occur
- Language disorder can impact vocabulary and grammar use, leading to a decreased ability to converse
- May have word-finding issues, difficulties following instructions, or provide only limited details
- May have difficulty staying on topic
- Receptive and expressive skills may differ - for example, someone may speak well but not understand your speech, or vice versa



STRATEGIES TO SUPPORT COMMUNICATION

- Be patient and caring
- Give extra time for speech production and for processing
- Research the cause and age of diagnosis of the communication disorder to help determine best strategies to support the individual
- Know the individual's unique strengths and gaps, and tailor your approach accordingly
- Multiple approaches may be helpful - including visual aids, natural gesturing, use of sign language, or assistive technology
- Daily and constant exposure to language is important
- Avoid more than one person speaking at a time and speaking above other noises



Pennsylvania's leading source of autism-related resources and information.

877-231-4244

The ASERT Collaborative is funded by the Office of Developmental Programs, PA Department of Human Services.



Communication and Communication Disorders



HOW IT MAY IMPACT COMMUNICATION

- Social cues may be difficult to navigate, including turn-taking, eye contact, and interpretation of facial expressions and body language
- May have experienced embarrassment, trauma, or bullying that can lead to social withdrawal



STRATEGIES TO SUPPORT COMMUNICATION

- Avoid finishing a person's communication attempts, wait until they are finished, then repeat for clarification if needed
- Double check for understanding as the speaker and as the listener
- Avoid irony, sarcasm, joking, and figures of speech



THE KEY to achieving effective communication with a person who has a communication disorder is for the listener to intentionally engage in the process and accept the responsibility for it. How an individual is impacted by their communication disorder will vary and communication access depends on individual needs, looking different for each person.



RA-PWSpecialPopUnit@pa.gov

Source: www.asha.org



Pennsylvania's leading source of autism-related resources and information.
877-231-4244

The ASERT Collaborative is funded by the Office of Developmental Programs, PA Department of Human Services.



Communication and Conduct Disorder

DEFINITION

Conduct Disorders are mental illnesses defined by the Diagnostic & Statistical Manual-5 (DSM-5). They manifest as a pattern of behaviors that violate the rights of others and may involve difficulties with regulation of emotion. These behaviors are more frequent or more intense than developmentally appropriate. The causes of these disorders vary widely, including impulse-control issues, genetic disorders, mood disorders, and personality disorders.

Source: DSM-5



HOW IT MAY IMPACT COMMUNICATION

- When behaviors are active, effective communication may be difficult
- Communication may be marked with conflict and unpredictability
- Social cues may be difficult to navigate, like turn-taking in conversation, empathy, shared perspectives, etc.
- Verbal IQ can be impacted
- The person may misperceive the intentions of others
- Often accompanied by a communication disorder, as well as anxiety, ADHD, depression, or other disorders



STRATEGIES TO SUPPORT COMMUNICATION

- During times of heightened emotion, reduce communication to only a few words at a time
- Wait for a calm period to communicate more in-depth information
- Be aware of environmental triggers
- Become a detective; dig deep to find the underlying cause of a misunderstanding or misperception that might not make sense to you, but makes sense to the individual
- Clearly communicate about rules and consequences; be consistent



THE KEY to achieving effective communication with a person who has a conduct disorder is for the listener to intentionally engage in the process and accept the responsibility for it. How an individual is impacted by a conduct disorder will vary and communication access depends on individual needs, looking different for each person.

 RA-PWSpecialPopUnit@pa.gov



Pennsylvania's leading source of autism-related resources and information.
877-231-4244

The ASERT Collaborative is funded by the Office of Developmental Programs, PA Department of Human Services.



Communication and Cornelia de Lange Syndrome

DEFINITION

Cornelia de Lange Syndrome (CdLS) is a genetic disorder present from birth, usually not inherited. It is often due to an acquired change (mutation) in one of seven important developmental genes at or shortly after conception causing a broad range of potential physical, cognitive, and medical challenges. It typically affects: growth, with smaller body and head size; skeletal system, with smaller hands and feet or missing forearms and fingers; development, with delayed development, intellectual disability or learning disabilities; behavior, with ADHD, anxiety or autistic features; and internal body organs including the GI, cardiac, genitourinary, and neurologic body systems.

Source: www.cdlsusa.org



HOW IT MAY IMPACT COMMUNICATION

- Communication may be understood better than it's expressed
- Speech difficulties often occur due to abnormal muscle tone, high arched palate, small jaw, recessed jaw, or difficulty with fine motor coordination of muscles needed for speech
- Visual impairment is common
- Hearing loss is very common and occurs in 85-90% of individuals
- Difficulties with sensory processing are common; behavior may indicate sensory overload



STRATEGIES TO SUPPORT COMMUNICATION

- Get their attention before beginning a communication attempt (if possible, establish eye contact or give a touch cue)
- Direct attention to communication method – lips for speech, hands for signs/gestures, picture board or device for Augmentative and Alternative Communication
- Simplify language as appropriate and highlight key words through repetition and modeling
- Be patient – give the person plenty of time to process and communicate
- Tune into their facial expressions, body language, tone, and behaviors to recognize communication attempts and respond accordingly



Pennsylvania's leading source of autism-related resources and information.

877-231-4244

The ASERT Collaborative is funded by the Office of Developmental Programs, PA Department of Human Services.



Communication and Cornelia de Lange Syndrome



HOW IT MAY IMPACT COMMUNICATION

- Autism Spectrum Disorder, social anxiety, and mood disorders are common



STRATEGIES TO SUPPORT COMMUNICATION

- Be aware of your environment - a noisy, crowded room may make communication difficult
- High contrast colors, large print, braille, or other accommodations for vision loss may be necessary
- Speaking louder, facing the person, using sign language, or other accommodations for hearing loss may be necessary
- Multiple approaches may be helpful - including visual aids, objects, natural gesturing, use of sign language, or assistive technology



THE KEY to achieving effective communication with a person who has Cornelia de Lange syndrome is for the listener to intentionally engage in the process and accept the responsibility for it. How an individual is impacted will vary and communication access depends on individual needs, looking different for each person.

 RA-PWSpecialPopUnit@pa.gov

<https://www.cdlsusa.org/wp-content/uploads/2018/10/SPEECH-AND-LANGUAGE-ISSUES.pdf>
<https://www.cdlsusa.org/wp-content/uploads/2018/12/sensory-overview-presentation-compressed.pdf>
<https://www.cdlsusa.org/wp-content/uploads/2018/12/CdLS-lay-translation-FINAL-2.pdf>



Pennsylvania's leading source
of autism-related resources
and information.
877-231-4244

The ASERT Collaborative is funded by the Office of Developmental Programs, PA Department of Human Services.



Communication and Cortical Visual Impairment

DEFINITION

Cortical Visual Impairment (CVI) is a brain-based visual impairment where the eye itself is often healthy, but the eye's neurological connection to the brain doesn't work properly. Therefore, things that are seen are not processed effectively by the brain. There are 10 characteristics of CVI: color preference, need for movement, visual latency, visual field preferences, difficulties with visual complexity, need for light, difficulty with distance viewing, atypical visual reflexes, difficulty with visual novelty, and absence of a visually guided reach.

Source: <https://www.perkinselearning.org>



HOW IT MAY IMPACT COMMUNICATION

- Imitation and copying (gestures, body movements) may be difficult
- The ability to recognize faces or facial expressions may be completely or partially absent
- Detecting differences in textures of adjacent surfaces accurately may be impaired
- Fast movements within the visual field may be hard to detect
- May have challenges coordinating eye and hand movements, impacting gestures, pointing, and sign language
- Visual processing and communication may be more effective during certain times of the day
- May function more effectively in familiar and uncrowded environments when objects and people are clearly defined



STRATEGIES TO SUPPORT COMMUNICATION

- Get their attention before beginning a communication attempt (using a verbal or touch cue)
- Provide wait time to allow visual processing when something is presented, especially if it's coming in through competing sensory channels (e.g. looking at an item in a noisy room)
- Allow time to become familiar with a new environment
- Reduce visual distractions and background noise
- Slowly move communication supports (communication boards, pictures, objects)
- Use contrasting backgrounds to help images stand out; solid clothes or backgrounds are best
- Clearly mark changes in environment, such as steps or entrances, in the way that is most effective for that individual



Pennsylvania's leading source of autism-related resources and information.

877-231-4244

The ASERT Collaborative is funded by the Office of Developmental Programs, PA Department of Human Services.



Communication and Cortical Visual Impairment



HOW IT MAY IMPACT COMMUNICATION

- Often primary colors are more clearly seen and one specific color is visually preferred
- May have challenges recognizing specific pictures, shapes, symbols, or letters/words/numbers
- Faces are incredibly complex to process—don't expect those with CVI to tune into facial expressions (may look away while listening to someone talking)
- May be drawn to sources of light like a tablet/computer or lightbox to help see items better however bright lights or open windows may also be a distraction



STRATEGIES TO SUPPORT COMMUNICATION

- Provide large print or Braille supports for individuals who benefit from them
- Consider whether behavior is indicating difficulty seeing



THE KEY to achieving effective communication with a person who has CVI is for the listener to intentionally engage in the process and accept the responsibility for it. How an individual is impacted by their CVI will vary and communication access depends on individual needs, looking different for each person.

 RA-PWSpecialPopUnit@pa.gov



Pennsylvania's leading source
of autism-related resources
and information.
877-231-4244

The ASERT Collaborative is funded by the Office of Developmental Programs, PA Department of Human Services.



Communication and Deaf-Blindness

DEFINITION

Deaf-blindness is a rare condition in which an individual has combined hearing and vision loss, thus limiting access to both auditory and visual information. It may seem that deaf-blindness refers to a total inability to see or hear; however, the type and severity of vision and hearing loss differ from person to person. Deaf-blindness significantly impacts an individual's ability to access information, communicate, and interact with other people.

Source: nationaldb.org



HOW IT MAY IMPACT COMMUNICATION

- Deaf does not always mean fully deaf and blind does not mean fully blind - the individual may have partial access to visual and auditory information
- How they communicate may vary depending on their experience and level of hearing or vision loss
- The multiplied effects of vision and hearing loss occurring together impact every part of their life
- May use a variety of accommodations to support communication access (such as hearing aids, Cochlear implants, FM system, glasses, cane, etc.)
- Touch is a very important supportive sense to provide individuals access to their world



STRATEGIES TO SUPPORT COMMUNICATION

- Allow time and opportunity to develop trusting relationships; this is essential for communicating effectively with those who are deaf-blind
- Learn how much vision and hearing they have accessible to them; communicate using their strongest sensory channel
- Get their attention and identify yourself before beginning each communication attempt
- Identify people and topics clearly (instead of "she said" say "Julie said")
- Communicate in well-lit areas
- Reduce background noise in the environment
- Reduce visual distractions such as avoiding high traffic areas and/or too many bright colors
- Wear colors that contrast with your skin tone
- Have the individual's back to light source/ windows (reduce glare)

Source: nationaldb.org



Pennsylvania's leading source of autism-related resources and information.
877-231-4244

The ASERT Collaborative is funded by the Office of Developmental Programs, PA Department of Human Services.



Communication and Deaf-Blindness



HOW IT MAY IMPACT COMMUNICATION

- Depending on the vision and hearing losses, their experience of the world may extend only as far as their fingertips can reach
- Their concepts of the world depend upon opportunities for direct physical contact; they do not have the opportunity for incidental or indirect learning
- Social cues may be lacking and can impact things like turn-taking, understanding emotional cues, and building meaningful relationships



STRATEGIES TO SUPPORT COMMUNICATION

- Communicate using the individual's strongest sensory channel (depending on how much hearing or vision they have)
- Communicate at a close distance so your face and mouth are visible
- Use gestural, visual, and/or tactile supports
- Put an item or picture in front of a contrasting colored background when presenting it
- Utilize large print, Braille, or adapt daily living equipment if necessary
- Follow the individual's communicative lead
- Provide additional time to process communication
- Rephrase or repeat information, if needed; multiple exposures to information or new skills may be necessary
- Use hand-under-hand when helping an individual touch/grasp something; respect their hands
- Be consistent



THE KEY to achieving effective communication with a person with deaf-blindness is for the listener to intentionally engage in the process and accept the responsibility for it. How an individual is impacted by their combination of hearing and vision loss will vary and communication access depends on individual needs, looking different for each person.

 RA-PWSpecialPopUnit@pa.gov

www.intervener.org
www.nationaldb.org
helenkeller.org/hknc/search/communication
pattan.net/disabilities/deaf-blind



Pennsylvania's leading source of autism-related resources and information.
877-231-4244

The ASERT Collaborative is funded by the Office of Developmental Programs, PA Department of Human Services.



Communication and Fetal Alcohol Spectrum Disorders

DEFINITION

Fetal Alcohol Spectrum Disorders (FASD) result from exposure to alcohol during prenatal development. FASD can include significant defects in the brain, cardiovascular, and skeletal systems. The life-long consequences for the individual can include cognitive deficits and a variety of behavioral and social challenges.

Source: FASDG.org



HOW IT MAY IMPACT COMMUNICATION

- May have better verbal expressive communication than verbal receptive communication
- May have trouble recalling what others have said
- Generalizing may be a challenge (generalization is the transfer of what is learned in one setting or situation and applying it to another setting)
- May perseverate on recent or previous topics
- May have difficulty transitioning to a new subject
- May be sensitive to bright lights, crowds, and certain textures



STRATEGIES TO SUPPORT COMMUNICATION

- Use sensory support (visual, auditory, tactile)
- Use repetition; it is important due to the brain's working memory being affected
- Provide one direction at a time or break down tasks into steps
- Avoid irony, sarcasm, joking, and figures of speech
- Reduce stimuli in the environment; avoid fluorescent lights and use softer colors and sounds
- Ensure messages are communicated consistently across all settings
- Be supportive and avoid rejection
- Be patient; remember that the person has an underlying neurodevelopmental disorder and don't take it personally



THE KEY to achieving effective communication with a person who has FASD is for the listener to intentionally engage in the process and accept the responsibility for it. How an individual is impacted by FASD will vary and communication access depends on individual needs, looking different for each person.

 RA-PWSpecialPopUnit@pa.gov

Dan Dubovsky

<https://www.fasdfamilies.com>

<https://fasdsoutherncalifornia.org/special-issues/language-communication/>



Pennsylvania's leading source of autism-related resources and information.

877-231-4244

The ASERT Collaborative is funded by the Office of Developmental Programs, PA Department of Human Services.



Communication and Hearing Loss

DEFINITION

Hearing loss is a general category that includes people who are d/Deaf, hard of hearing, or deaf-blind.

Deaf- “We use the lowercase deaf when referring to the audiological condition of not hearing, and the uppercase Deaf when referring to a particular group of deaf people who share a language – American Sign Language (ASL) – and a culture.” Hard of Hearing- “Hard-of-hearing can denote a person with a mild-to-moderate hearing loss, or it can denote a deaf person who doesn’t have/want any cultural affiliation with the Deaf community, or both.”

Source: NAD.org



HOW IT MAY IMPACT COMMUNICATION

- Lack of access to auditory information
- May use a variety of accommodations to support communication access
- May need information rephrased or repeated
- Environmental noise can make communication more challenging
- Understanding visual information can be made more challenging if lighting is poor
- Sign language may be preferred
- Hearing loss can be invisible, leading to the assumption that a lack of response is rudeness or a behavior issue
- Some types of hearing loss aren’t always consistent throughout the day (it may not be “selective hearing”)
- Depending on access to education and language exposure, there may be gaps in common knowledge



STRATEGIES TO SUPPORT COMMUNICATION

- Ask the person how to best communicate with them
- Do not assume the individual can read lips
- Get their attention before beginning a communication attempt (if possible, try to establish eye contact or give a touch cue)
- Have one person speak at a time and avoid speaking above other noises
- Reduce background noise
- Face-to-face communication is most effective; Maintain eye contact and keep mouth visible
- Speak naturally, one person at a time
- Use multiple modes of communication to convey information (pointing, natural gestures, objects)
- Do not dismiss an individual with hearing loss by saying “never mind” or “I’ll tell you later”
- Wait to speak until the person is done signing



Pennsylvania’s leading source of autism-related resources and information.

877-231-4244

The ASERT Collaborative is funded by the Office of Developmental Programs, PA Department of Human Services.



Communication and Hearing Loss



HOW IT MAY IMPACT COMMUNICATION

- Hearing aids and cochlear implants assist hearing needs but do not offer normal perception of sound
- Listener fatigue is common
- May have anxiety that they are missing information resulting in withdrawal
- May have difficulty on the phone
- Familiar voices tend to be more easily understood
- May use various kinds of assistive technology



STRATEGIES TO SUPPORT COMMUNICATION

- If an interpreter is being utilized, speak to the person with hearing loss, not the interpreter
- Be patient – give the person plenty of time to process and communicate
- Use communication supports consistently across all settings, including hearing aids and cochlear implants
- Regular maintenance of hearing aids and cochlear implants, including charging batteries, is very important
- Make sure the person knows the topic of conversation and don't change topics unexpectedly



THE KEY to achieving effective communication with a person who is deaf or hard of hearing is for the listener to intentionally engage in the process and accept the responsibility for it. How an individual is impacted by their hearing loss will vary and communication access depends on individual needs, looking different for each person.

 RA-PWSpecialPopUnit@pa.gov



Pennsylvania's leading source of autism-related resources and information.
877-231-4244

The ASERT Collaborative is funded by the Office of Developmental Programs, PA Department of Human Services.



Communication and Huntington's Disease

DEFINITION

Huntington's disease (HD) is a fatal, genetic disorder that causes the progressive breakdown of nerve cells in the brain. It causes deterioration in a person's physical and mental abilities, usually during their prime working years (ages 30 to 50) and has no cure.

Source: HDSA.org



HOW IT MAY IMPACT COMMUNICATION

- May have difficulty with the physical production of speech
- May have chorea (brief, irregular movements) typically seen first in the fingers, hands, and face muscles
- May have difficulty putting thoughts into words
- May struggle to understand complex information
- May need more time to respond
- May have reduced short term memory skills
- Abilities may be unpredictable because deficits occur randomly with the progression of the disease



STRATEGIES TO SUPPORT COMMUNICATION

- Be patient – give the person plenty of time to process and communicate
- Tune into their facial expressions, body language, tone, and behaviors to recognize communication attempts and respond accordingly
- Get their attention before beginning a communication attempt (if possible, establish eye contact or give a touch cue)
- Speak at a slower pace
- Repeat or rephrase the message
- Offer choices instead of open-ended questions
- Reduce the number of times you change topics during a conversation
- Minimize distractions
- Recognize and use gestures and facial expressions
- Communicating for short periods of time may be better than sitting down for a long stretch because of the amount of energy it takes to communicate
- Multiple approaches may be helpful - including visual aids, objects, word/picture boards, or assistive technology



THE KEY to achieving effective communication with a person who has Huntington's disease is for the listener to intentionally engage in the process and accept the responsibility for it. How an individual is impacted by Huntington's disease will vary and communication access depends on individual needs, looking different for each person..

 RA-PWSpecialPopUnit@pa.gov

<https://huntingtonsdiseasenews.com/hd-symptoms-communication-problems/>
<https://www.hda.org.uk/getting-help/if-youre-a-carer/managing-communication-difficulties>
www.huntingtonsnsw.org.au



Pennsylvania's leading source of autism-related resources and information.
877-231-4244

The ASERT Collaborative is funded by the Office of Developmental Programs, PA Department of Human Services.



Communication and Language Deprivation

DEFINITION

Language Deprivation is a rare experience that occurs when access to linguistic input is severely limited or completely non-existent during a child’s developmental language learning period (typically before the age of five). Language deprivation can also occur in adulthood. This phenomenon is rare in the hearing world but is very common for people with hearing loss. Language Deprivation Syndrome is an array of symptoms that occur in other areas of cognitive, social, and developmental functioning due to the experience of language deprivation in childhood.

Source: CDC.gov



HOW IT MAY IMPACT COMMUNICATION

- Language development is delayed leading to impoverished vocabulary, grammar, and sentence usage
- Use of pronouns, agents of action, and receivers of action can be difficult to determine (who did what to whom?)
- Understanding of synonyms is impaired – for example, they know the word “happy” but not “glad”
- Theory of Mind (knowing that someone else has had a different experience and different thoughts and beliefs than your own) is impaired leading to difficulty explaining themselves or answer clarifying questions
- The ability to brainstorm, sequence a story in order, anticipate if/then consequences, or understand time may be challenging
- Misunderstandings are common and difficult to resolve
- Familiar people and environments can improve the effectiveness of communication



STRATEGIES TO SUPPORT COMMUNICATION

- Communicate with the individual as you would anyone else
- You may need to know the context of the topic or rely on a familiar person to help explain missing details
- Be patient – give the person plenty of time to process and communicate
- Tune into their facial expressions, body language, and behaviors to better understand them
- Check for understanding as both speaker and listener
- Use multiple modes of communication to clarify information (pointing, natural gestures, sign language, pictures, and objects)
- Avoid sarcasm, irony, and figures of speech
- May require a specialized interpreter and/or familiar communication partner for effective communication
- Daily and constant exposure to language is essential



Pennsylvania’s leading source of autism-related resources and information.

877-231-4244

The ASERT Collaborative is funded by the Office of Developmental Programs, PA Department of Human Services.



Communication and Language Deprivation



THE KEY to achieving effective communication with a person who has language deprivation is for the listener to intentionally engage in the process and accept the responsibility for it. How an individual is impacted by language deprivation will vary and communication access depends on individual needs, looking different for each person.

 RA-PWSpecialPopUnit@pa.gov



Pennsylvania's leading source of autism-related resources and information.
877-231-4244

The ASERT Collaborative is funded by the Office of Developmental Programs, PA Department of Human Services.



Communication and Parkinson's Disease

DEFINITION

Parkinson's Disease is a type of movement disorder that can affect the ability to perform common, daily activities. It is a chronic and progressive disease, meaning that the symptoms become worse over time. It is characterized by its most common motor symptoms—tremors (a form of rhythmic shaking), stiffness or rigidity of the muscles, and slowness of movement (called bradykinesia)—but also manifests in non-motor symptoms including sleep problems, constipation, anxiety, depression, and fatigue, among others.

Source: [Apdaparkinson.org](http://apdaparkinson.org)



HOW IT MAY IMPACT COMMUNICATION

- May have difficulty finding their words
- Speech may be unsteady and flat, breathy, deeper than before, or hoarse
- May not have typical nonverbal communication skills because of the disease affecting how they move their body
- Tremors, lack of coordination, muscle stiffness, etc. may affect handwriting and sign language usage
- May not recognize other's nonverbal expressions
- Feelings of embarrassment, anxiety, or depression may lead to social withdrawal
- May find it difficult to communicate while doing another task, such as walking



STRATEGIES TO SUPPORT COMMUNICATION

- Pencil grips or weighted pencils may help writing skills
- Face-to-face communication is most effective
- Be patient – give the person plenty of time to process and communicate
- Reduce stimuli in the environment
- Avoid more than one person speaking at a time and speaking above other noises
- Avoid irony, sarcasm, metaphors, figures of speech, and complex syntax
- Express and label emotions rather than relying on nonverbal cues
- Be willing to listen and help them to feel comfortable communicating
- Ask for repetition if you don't understand
- Using a video chat may be more effective than phone communication
- Share a little information at a time



Pennsylvania's leading source of autism-related resources and information.
877-231-4244

The ASERT Collaborative is funded by the Office of Developmental Programs, PA Department of Human Services.



Communication and Parkinson's Disease



THE KEY to achieving effective communication with a person who has Parkinson's Disease is for the listener to intentionally engage in the process and accept the responsibility for it. How an individual is impacted by Parkinson's will vary and communication access depends on individual needs, looking differently for each person.



RA-PWSpecialPopUnit@pa.gov



*Pennsylvania's leading source
of autism-related resources
and information.*
877-231-4244

*The ASERT Collaborative is funded by the Office of Developmental
Programs, PA Department of Human Services.*



Communication and Reactive Attachment Disorder

DEFINITION

Reactive Attachment Disorder (RAD) is a complex mental disorder that arises from a history of serious neglect and trauma. The person may exhibit difficulties with emotional affect, ability to connect with other people, and atypical responses to comfort (do not seek comfort from others and/or do not respond to comfort).

Source: Diagnostic & Statistical Manual of Mental Disorders, fifth edition



HOW IT MAY IMPACT COMMUNICATION

- The atypical ability to connect with people (or build attachments) has a serious impact on communication effectiveness
- May not respond or provide feedback or may be overly responsive
- It may be difficult to know if the person is following the conversation
- Conversations may occur at a slower speed or end unexpectedly
- Common conversational social etiquette may be missing or feel insincere
- Social cues are likely to be missed
- The communication style of a person with RAD may appear similar to someone with autism, depending on the person



STRATEGIES TO SUPPORT COMMUNICATION

- Be patient and understanding
- Remember that the person has experienced trauma
- Ensure your messages and behavioral/emotional responses are consistent in order to build trust
- Use direct responses/feedback instead of being vague (Say “Great job cooking dinner tonight” instead of just “great job”)
- Double check for understanding as the speaker and as the listener
- Working with the team of providers and significant people in their life is especially important so that everyone is on the same page with communication styles and behaviors that are appropriate and effective- Remember, each person is unique!



THE KEY to achieving effective communication with a person who has RAD is for the listener to intentionally engage in the process and accept the responsibility for it. How an individual is impacted by RAD will vary and communication access depends on individual needs, looking different for each person.

 RA-PWSpecialPopUnit@pa.gov



Pennsylvania's leading source of autism-related resources and information.
877-231-4244

The ASERT Collaborative is funded by the Office of Developmental Programs, PA Department of Human Services.



Communication and Rett Syndrome

DEFINITION

Rett Syndrome is a rare, genetic condition that affects nearly every area of functioning, including speaking, breathing, eating, and walking

Source: rettsyndrome.org



HOW IT MAY IMPACT COMMUNICATION

- Generally, language is better understood than its expressed
- Most do not use verbal language, or they use a limited amount of words
- Vocalizing, facial expression, touching, and intentional gazing are the more commonly used communication modes
- Hand function may be impaired, which may impact use of sign language
- May have involuntary hand movements
- Some individuals cannot produce sounds and use alternative methods to communicate
- Conversations may occur at a slower speed
- Familiar people and environments can impact the effectiveness of communication
- Communication skills will fluctuate based on internal and external factors



STRATEGIES TO SUPPORT COMMUNICATION

- Assume competence
- Invite them to be part of the conversation, even if they may not respond
- Tune into their facial expressions, body language, tone, and behaviors to recognize communication attempts and respond accordingly
- Building a relationship and becoming familiar with the individual's unique means of communication is essential
- Daily and constant exposure to language is important
- If they use a wheelchair, remember that it is an extension of them; don't lean on it without permission
- If they use Augmentative and Alternative Communication (AAC), be open to utilizing it alongside of them
- Get their attention before beginning a communication attempt (if possible, try to establish eye contact or give a touch cue)



Pennsylvania's leading source of autism-related resources and information.

877-231-4244

The ASERT Collaborative is funded by the Office of Developmental Programs, PA Department of Human Services.



Communication and Rett Syndrome



HOW IT MAY IMPACT COMMUNICATION

- May find it difficult to communicate while doing another task, such as walking



STRATEGIES TO SUPPORT COMMUNICATION

- Use multiple modes of communication to clarify information (pointing, natural gestures, pictures, objects, speech alongside AAC)
- Decrease motor demands as communication demands increase
- Minimize distractions
- Be patient – give plenty of time to process and communicate



THE KEY to achieving effective communication with a person who has Rett syndrome is for the listener to intentionally engage in the process and accept the responsibility for it. How an individual is impacted by Rett syndrome will vary and communication access depends on individual needs, looking differently for each person.

 RA-PWSpecialPopUnit@pa.gov



Pennsylvania's leading source of autism-related resources and information.
877-231-4244

The ASERT Collaborative is funded by the Office of Developmental Programs, PA Department of Human Services.



Communication and Schizophrenia

DEFINITION

Schizophrenia is a rare mental health disorder marked by thought disorders including delusions, hallucinations, disorganized speech, and language processing problems.

Source: *Diagnostic & Statistical Manual of Mental Disorders, fifth edition*



HOW IT MAY IMPACT COMMUNICATION

- Conversations may occur at a slower speed with longer response times
- Social skills may be impacted if they struggled to connect with peers throughout their development
- Unique ways of thinking can cause misunderstandings with communication partners
- Memory, language function, executive functions, and attention may be affected
- May have slower processing speeds
- May have difficulty understand others' intentions
- Communication style may be atypical or "quirky"
- Familiar people and environments improve the effectiveness of communication



STRATEGIES TO SUPPORT COMMUNICATION

- Speak to the individual as you would anyone else
- Be patient – give the person plenty of time to process and communicate
- Be understanding with social faux pas
- Be aware of the person's individual "red flags" that symptoms are recurring
- Be aware of triggers
- Be aware of your tone and mannerisms
- Consult with them and their providers to determine the best ways to respond when the person is showing symptoms
- Make your intentions clear to put them at ease, e.g. "Where are you going? I may want to come along" instead of "Where are you going?"
- Rephrase a question in more simple terms if understanding is impacted



THE KEY to achieving effective communication with a person who has schizophrenia is for the listener to intentionally engage in the process and accept the responsibility for it. How an individual is impacted by schizophrenia will vary and communication access depends on individual needs, looking different for each person.

 RA-PWSpecialPopUnit@pa.gov



Pennsylvania's leading source of autism-related resources and information.
877-231-4244

The ASERT Collaborative is funded by the Office of Developmental Programs, PA Department of Human Services.



Communication and Sensory Processing Disorder

DEFINITION

Sensory Processing Disorder is the inability to effectively process information from the senses (touch, hearing, sight, taste, smell, and movement), potentially resulting in sensory sensitivities, delays in motor skills, and problems with self-regulation, attention, and behavior.

Source: thespiralfoundation.org



HOW IT MAY IMPACT COMMUNICATION

- May be over or under reactive (hyper/hypo sensitive) to environmental factors (lights, sounds, smells, etc.)
- May need more time to process communication
- May struggle with social communication (eye contact, appropriate distance when talking to someone, turn-taking within a conversation)
- Behaviors may indicate discomfort or overstimulation
- May struggle to attend to or follow a conversation
- May be uncomfortable with touch or may seek more firm touch (deep pressure)



STRATEGIES TO SUPPORT COMMUNICATION

- Be familiar with each person's unique sensory preferences
- Be on the lookout for environmental factors impacting communication
- Minimize distractions and reduce stimuli in the environment
- Tune into their facial expressions, body language, and behaviors to recognize signs of over/under stimulation and respond accordingly
- Get their attention before beginning a communication attempt (if appropriate, try to establish eye contact or give a touch cue)
- Warn them of anticipated sounds
- Always use hand-under-hand when helping an individual touch/grasp something
- Provide conversational breaks or sensory breaks, when necessary



THE KEY to achieving effective communication with a person who has sensory processing disorder (SPD) is for the listener to intentionally engage in the process and accept the responsibility for it. How an individual is impacted by SPD will vary and communication access depends on individual needs, looking different for each person.

 RA-PWSpecialPopUnit@pa.gov

<https://www.dropbox.com/s/zy6c3vhrud49zoy/Adolescent-Young%20Adult%20SI%20Guide.pdf?dl=0>

<https://www.spdstar.org>

<https://www.fluenschildrenstherapie.com/sensory-processing-disorder/>

<https://childdevelopment.com.au/areas-of-concern/diagnoses/sensory-processing-disorder-spd/>



Pennsylvania's leading source of autism-related resources and information.

877-231-4244

The ASERT Collaborative is funded by the Office of Developmental Programs, PA Department of Human Services.



Communication and Stroke

DEFINITION

Stroke is an injury to the brain, caused by blockage or rupture of a blood vessel. As a result, oxygen supply is restricted, causing death of brain cells. A stroke can occur in any area of the brain, which will determine how the mind and body are affected. Stroke can also range in severity.

Source: stroke.org



HOW IT MAY IMPACT COMMUNICATION

- Aphasia is the most common result of stroke (difficulty talking, reading, writing, and understanding others when they speak)
- May have difficulty coordinating the muscles for speech or the muscles may have weakness or paralysis
- Stroke may impact expressive communication only, receptive communication only, or both
- Sustained periods of attention and effort may be difficult
- Blurting things out, interrupting, talking a lot, or other impulsive behaviors may occur
- Following a conversation, may be difficult
- May struggle to think of words and may have disorganized thoughts
- May feel frustrated, confused, afraid, exhausted, or angry
- Yes and no answers may be unreliable
- May speak or sign in ways that are unrecognizable
- May be highly sensitive to sound



STRATEGIES TO SUPPORT COMMUNICATION

- Be patient; allow extra time for the person to communicate their thoughts and understand yours
- Be willing to use gestures, communication charts, or assistive devices
- Use environmental reminders, such as structured routines and visual aids, to support communication and retaining information, if needed
- Music, art, photography, or other creative means of expression can be supportive
- Be face-to-face when speaking
- Have one person speak at a time and avoid speaking above other noises
- Be sure to confirm yes/no answers by rewording or paraphrasing
- Reduce distractions and background noise when communicating



Pennsylvania's leading source of autism-related resources and information.
877-231-4244

The ASERT Collaborative is funded by the Office of Developmental Programs, PA Department of Human Services.



Communication and Stroke



THE KEY to achieving effective communication with a person who has experienced a stroke is for the listener to be intentionally engaged in the process and accept responsibility for it. How an individual is impacted by stroke will vary and communication access depends on individual needs, looking different for each person.



RA-PWSpecialPopUnit@pa.gov

addrc.org
strokefoundation.au
stroke.org



Pennsylvania's leading source of autism-related resources and information.
877-231-4244

The ASERT Collaborative is funded by the Office of Developmental Programs, PA Department of Human Services.



Communication and Traumatic Brain Injury

DEFINITION

Traumatic brain injury (TBI) is a disruption in the normal functioning of the brain that can be caused by trauma, blow or jolt to the head, penetrating head injury, or violent movement of the brain.

Source: cdc.gov



HOW IT MAY IMPACT COMMUNICATION

- May have word-finding difficulty, poor sentence formation, and lengthy and often faulty descriptions or explanations
- Some people may have slurred or slower speech
- May have trouble reading facial expressions and body language
- May be distracted or have difficulty attending to information
- May need more time to process information
- Organizing thoughts may be difficult
- May be impulsive and have difficulty making decisions
- May have dramatic changes in frustration tolerance, patience, or behavior
- May struggle to plan and organize daily tasks, as well as communicate about those plans



STRATEGIES TO SUPPORT COMMUNICATION

- Avoid irony, sarcasm, joking, and figures of speech
- Be patient - give them plenty of time to process and communicate
- Minimize distractions and reduce stimuli in the environment
- Identify people and topics (instead of “she said” say “Julie said”)
- Limit the number of steps and length of steps when giving directions
- Stick to a routine
- Use visual schedules or calendars to support communication about events and activities
- Use tools to aid memory (sticky notes, highlighting important info, reminders around the house) in addition to verbal reminders
- Use a script of consistent, concrete phrases that are predictable to the individual (instead of “let me know when you’re ready to leave” say “we will leave here in 15 minutes”)
- Avoid commenting on their repetition of phrases or questions



Pennsylvania's leading source of autism-related resources and information.

877-231-4244

The ASERT Collaborative is funded by the Office of Developmental Programs, PA Department of Human Services.



Communication and Traumatic Brain Injury



THE KEY to achieving effective communication with a person who has a traumatic brain injury is for the listener to intentionally engage in the process and accept the responsibility for it. How an individual is impacted by their brain injury will vary greatly and communication access depends on individual needs, looking different for each person.



RA-PWSpecialPopUnit@pa.gov

<https://www.brainline.org/article/traumatic-brain-injury-cognitive-and-communication-disorders>
<https://www.icommunicatetherapy.com/adult-communication-difficulties-2/adult-acquired-communication-difficulties/traumatic-brain-injury-tbi/communication-difficulties-traumatic-brain-injury/>



Pennsylvania's leading source
of autism-related resources
and information.

877-231-4244

The ASERT Collaborative is funded by the Office of Developmental
Programs, PA Department of Human Services.



Communication and Usher Syndrome

DEFINITION

Usher Syndrome is a genetic disorder which includes both hearing loss and vision loss. Hearing loss may occur at birth or develop later and a gradually developing vision impairment is also present. The vision impairment is known as retinitis pigmentosa (RP), and it can eventually lead to total loss of vision. Some individuals also have balance issues. There are three clinical types of Usher syndrome, depending on severity of hearing and vision loss, age of symptom onset, and presence of balance challenges. There are also multiple subtypes of Ushers 1, 2, and 3.

Source: usher-syndrome.org



HOW IT MAY IMPACT COMMUNICATION

- Deaf does not always mean fully deaf and blind does not mean fully blind - the individual may have partial access to visual and auditory information
- May use a variety of accommodations to support communication access (such as hearing aids, Cochlear implants, FM system, glasses, cane, etc.)
- May need information rephrased or repeated
- Vision loss is progressive, so visual needs are likely to change over time
- Lighting is even more important at night, as night vision is the first to decline
- Typically, a gradual loss of peripheral vision will lead to tunnel vision
- Abrupt changes in lighting can be uncomfortable and disrupt communication



STRATEGIES TO SUPPORT COMMUNICATION

- Learn how much vision and hearing they have and communicate using their strongest sensory channel(s)
- Get their attention and identify yourself before beginning a communication attempt (if possible, establish eye contact or give a touch cue)
- In a group setting, raise your hand and allow time for them to locate who is communicating
- Communicate in well-lit areas
- Minimize visual and auditory distractions and reduce stimuli in the environment
- Have the individual's back to light source/ windows (reduce glare)
- Communicate at a close distance so your face and mouth are visible (unless the individual has tunnel vision)
- Use multiple modes of communication (natural gestures, pictures, and/or objects)



Pennsylvania's leading source of autism-related resources and information.
877-231-4244

The ASERT Collaborative is funded by the Office of Developmental Programs, PA Department of Human Services.



Communication and Usher Syndrome



HOW IT MAY IMPACT COMMUNICATION

- Tactile sign language may be used
- Touch is a very important supportive sense to provide individuals access to their world
- Social cues may be lacking and can impact things like turn-taking, understanding emotional cues, and building meaningful relationships



STRATEGIES TO SUPPORT COMMUNICATION

- Put items/pictures in front of a contrasting colored background
- Wear colors that contrast with your skin tone
- Use large print, Braille, or other accommodations as necessary
- Present items centrally (peripheral vision may not be accessible)
- Tune into their facial expressions, body language, tone, and behaviors to recognize communication attempts and respond accordingly
- Provide additional time to process communication



THE KEY to achieving effective communication with a person who has Usher syndrome is for the listener to intentionally engage in the process and accept the responsibility for it. How an individual is impacted by their Usher syndrome will vary and communication access depends on individual needs, looking different for each person.

 RA-PWSpecialPopUnit@pa.gov

<https://www.nidcd.nih.gov/health/usher-syndrome>

<https://www.usher-syndrome.org/what-is-usher-syndrome/frequent-questions.html>

<https://www.wsdsonline.org/wp-content/uploads/2012/05/EducAccommUsherFINAL2010.pdf>



Pennsylvania's leading source of autism-related resources and information.

877-231-4244

The ASERT Collaborative is funded by the Office of Developmental Programs, PA Department of Human Services.



Communication and Visual Impairment

DEFINITION

Visual impairment is a general term that describes a wide range of visual function, from low vision to total blindness. Low Vision is uncorrectable vision loss that interferes with daily activities. Total Blindness is the complete lack of light perception and form perception (approximately 15% of individuals with eye disorders).

Source: afb.org



HOW IT MAY IMPACT COMMUNICATION

- Blind does not mean fully blind - the individual may have partial access to visual information
- Socialization may be reduced - often must wait to be spoken to since they can't see who is near them
- Feelings of isolation can impact confidence
- Safety is a constant concern and new environments can be scary and overwhelming
- May not have access to visual elements of nonverbal communication, such as pointing and facial expressions
- What is learned through observation may be missed
- Day-to-day functioning and independence may be impacted



STRATEGIES TO SUPPORT COMMUNICATION

- Learn how much vision they have accessible to them and accommodate for it
- Identify yourself every time you speak - don't assume they recognize your voice
- Get their attention before beginning a communication attempt (if possible, say their name or give a touch cue)
- Identify people and topics clearly (instead of "she said" say "Tanya said")
- Always talk directly to the person, not their sighted companion (if they have one)
- Instead of nonverbal head nods, use verbal responses
- Verbally describe your actions and be specific
- Inform them when you are leaving the room or moving away
- Ask first if help is needed, e.g. "May I help lead you to the buffet?" instead of just guiding them
- Provide information in an alternative accessible way (audio, large print, Braille, and objects)
- Minimize distractions and reduce stimuli in the environment
- Never move an item without informing them or asking permission
- Do not touch or feed a guide dog without permission



THE KEY to achieving effective communication with a person with visual impairments is for the listener to intentionally engage

in the process and accept the responsibility for it. How an individual is impacted by a visual impairment will vary and communication access depends on individual needs, looking different for each person.

 RA-PWSpecialPopUnit@pa.gov



Pennsylvania's leading source of autism-related resources and information.

877-231-4244

The ASERT Collaborative is funded by the Office of Developmental Programs, PA Department of Human Services.