

# **Communicating with Children with Disabilities: Best Practice Guidance**



# Communicating with Children with Disabilities

Research tells us that children with disabilities are more likely to experience abuse and neglect than other children. The reasons for this are complex and can be attributed to a range of factors. Included but not limited to, a child's lived experience is more difficult to ascertain where there are communication difficulties; the presence of multiple carers increases the likelihood of a child coming into contact with a person who causes them harm; and the complexity of the professional network can create challenges in communication and information sharing within and between agencies. Therefore, ensuring that we can communicate regularly and consistently with our most vulnerable children is imperative.

This guidance has been developed for all professionals working with children with complex needs and disabilities. The aim is to improve practice by facilitating and recording participation when communicating with children.

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## One-minute Guide: What is the Children with Disabilities Service?

This [One-minute guide](#) provides information and details about the team, eligibility guidelines, referrals and parent carer needs assessment support.

## Why is it important to amplify the voices of our children?

Where a child has speech, language, and communication needs, including those with non-verbal means of communication and children who are deaf, appropriate arrangements should always be made to seek their wishes and feelings.



Effective communication is a two-way process, and it's crucial to support every child to express themselves. A child-centred approach can help achieve this goal and ensure that every child is involved, heard, and represented in decisions and choices about their lives.

It may be difficult to determine whether the child understands what is being said to them. Always assume that the child can understand you.

Regardless of ability, all children have their own unique perspectives and experiences. To build meaningful relationships and promote positive outcomes, we must listen to and understand their viewpoints. By conducting direct work, we can gain a deeper understanding of their daily life, hopes, dreams, and concerns, this allows us to provide more effective and tailored support. Empowering children helps them develop a sense of self and promotes better outcomes.

All children want to be accepted, feel heard and supported, this is a fundamental human right. Article 12 (United Nation Convention of the Rights of the Child) states that children have the right to express their views, feelings and wishes in all matters affecting them and to have their views considered and taken seriously.

The voices of the children with complex needs and disabilities must be at the centre of all safeguarding decisions, thereby ensuring that the welfare of the child is paramount. In all instances, children should be afforded the opportunity to communicate their opinions and to be involved in decision making regarding their care.

# Promoting Inclusivity: The Language you use matters

Being mindful of language is important for inclusivity. Identifying children with disabilities and complex needs as an individual rather than by their medical labels helps to understand the child's individual needs and lived experiences. Some children may not identify themselves as having a disability and may not want to be described as such. The child may use different terminology to describe their needs and identity. Professionals should ask children, and adults who know them best, what terms they should use when talking or writing about children.



## Guidance

### **Inclusive language: words to use and avoid when writing about disability**

## Behaviour is a form of Communication

All children are unique, and their diagnosis can affect them in different ways. It's crucial to understand that some children have complex communication needs that impact both their ability and their expressive (words to form sentences to communicate with other people), and receptive (understanding expressive language) communication. These needs can vary from children who are completely non-verbal and communicate through eye contact, gestures, sounds, and behaviour, to children who use symbols or other communication aids, and to those who use limited vocabulary. Everyone uses different communication methods to express themselves, such as waving to greet someone.

Identifying changes in a child's behaviour can be better understood if you observe them at different times of the day, in different environments and interacting with different people. For example, a child repeatedly pointing to a specific body part may be an indication that something is wrong.

Independent advocacy services should be considered for the child and their parents or carers. We all have a responsibility to ensure that all children's rights are advocated, and their voices are heard in safeguarding processes or decisions that affect their lives.



# Child Centred Approach

We recognise that seeking that views of children that use non-verbal communication can be more challenging for some practitioners. There are many methods that practitioners can use to be creative when working directly with children. These include pictures, easy read documents, flash cards, drawings and online resources specifically designed for children with disabilities. Identify whether a child has a communication passport from their parents, carers or school. This tool provides tailored recommendations about how best to communicate with the child from people that know them best. It also helps to provide a consistent approach with communicating with the child.

Some parents may require reasonable adjustments such as additional support or alternative formats to be used when working with them and their children. Where a child, or parent, uses English as an additional language the services of an interpreter should be sought. This is particularly important when sharing complex health/care information.

The Safeguarding Partnership have created useful practice guidance on [working directly with interpreters](#) and children and families.

Below are some key recommendations for safeguarding practice when working with children and their families:

- Speak directly to the child and use their name to indicate that the conversation is about them.
- Encourage and facilitate the child to be present and contribute during important meetings about their lives. This will support the child to feel included because they can listen and have an opportunity to contribute to decisions that affect them. “Nothing about me, without me.”
- Explain at the beginning of the meeting you are using a child centred approach by directing most of the conversation to the child. Be clear and encourage others present that they should use the same approach. Remind them that they will also have the opportunity to contribute.

## What to do if you are worried?

- Be curious, ask questions, explore your concern with the child, the family and other professionals
- Ask yourself: what is daily life like for the child? Would I recognise if they were happy, sad, worried?
- Talk to your child safeguarding lead
- Request support from [Surrey Early Support Service](#)
- If you feel risks are high and imminent call 999 and then call the [Children’s Single Point of Access \(C-SPA\)](#) on 0300 470 9100

# Recommendations for direct practice

In direct practice, professionals may struggle to communicate and identify safeguarding concerns with children with Complex Needs and Disabilities, particularly those with speech and communication needs. Misunderstandings of indicators of abuse or neglect may occur, if professionals attribute them to the child's health condition or disability. For example, a child attempting to disclose abuse may display inappropriate sexual behaviour or self-harm. If professionals miss the signs the child will not be protected efficiently.

Practitioners should ensure that they do not rely solely on the report of the person(s) providing primary care of the children. This includes parents or carers or professionals, particularly children living in residential settings. Speaking directly to the child and to all those involved in the child's care is key to effective safeguarding support. There should be clear recording about how their views were ascertained and their preferred communication methods.

Please find some [useful tips](#) when worked directly with children:

1. Reduce background noise and distractions.
2. Allow time to get to know the child.
3. Seek advice from others who know the child.
4. Establish if, and how, the child communicates 'yes' and 'no'. Use the same method of communication as others where possible, to minimise confusion
5. Observe – what does the child's body language communicate?
6. Use short sentences and simple language. Be creative – consider pictures, objects or natural gestures as cues to support the child with understanding what you are talking about.
7. When you ask a question, wait for a reply. It is essential to provide time for the child to process what they have heard and are given adequate time for them to respond.
8. Check your understanding with the child, or someone who knows them well.
9. When possible, talk to and get information directly from the child, and not only from their caregivers. Consider the words you use, the tone of your voice as well as your body language.
10. Be patient. Do not make assumptions. Confirm that you understand what the child has expressed, encourage them to use any resources to systems that they use to aid communication. Ask the child directly if you understood them correctly.

[Speak directly to children](#) alone to improve your skills with communicating with children. Change the order of choices to ensure that you have accurately understood the child.

## Every child communicates their thoughts and feelings

No report should state a child is unable to communicate or is non-verbal due to their disability or age. Always record how you have supported the child to express their wishes and feelings. Good practice includes seeing the child alone, and consistently capturing the child's likes, dislikes, beliefs, feelings and dreams. These should not be

overlooked due to the child's disability. The child's [communication profile](#) should be shared and championed with all people in their lives to ensure that everyone knows the child's preferences with communication. This should be reviewed alongside their development.

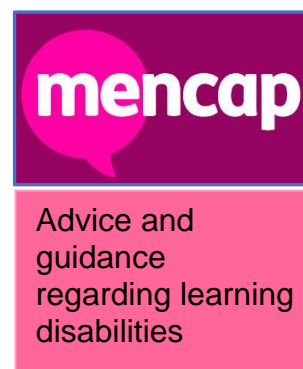
## Resources to Support Safeguarding Practice



Supporting young people with disabilities who are transitioning to adulthood including contact details for the Transition Team.



Safeguarding Children with Disabilities



Advice and guidance regarding learning disabilities



Surrey Early Support Service for young children with disabilities



Surrey and Borders Partnership NHS Trust has produced this video about making reasonable adjustments:



Children and Family Health providing NHS services for children, young people and their families across Surrey



SEND code of practice



Free online training: Communicating Effectively with Vulnerable Children and Young People



