



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
- Deaf-Blindness
- Post-Traumatic Stress Disorder (PTSD)
- Angelman Syndrome
- Disruptive Mood Dysregulation Disorder (DMDD)
- Reactive Attachment Disorder
- Apraxia of Speech
- Down Syndrome
- Rett Syndrome
- Attention Deficit Hyperactivity Disorder
- Dyslexia
- Schizophrenia
- Autism Spectrum Disorder
- Fetal Alcohol Spectrum Disorder
- Sensory Processing Disorder
- Borderline Personality Disorder (BPD)
- Hearing Loss
- Stroke
- Central Auditory Processing Disorder
- Huntington's Disease
- Stuttering
- Cerebral Palsy
- Idiosyncratic speech
- Tourette Syndrome
- CHARGE Syndrome
- Language Deprivation
- Traumatic Brain Injury
- Communication Disorder
- Limited English Proficiency (LEP)
- Usher Syndrome
- Conduct Disorder
- Long COVID
- Visual Impairment
- Cornelia de Lange Syndrome
- Multiple Sclerosis (MS)
- Cortical Visual Impairment
- Parkinson's Disease



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Communication Land...Series

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.



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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.

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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.

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Source: Angelman.org, globalgenes.org



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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](https://www.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.

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<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>



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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.

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addrc.org



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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



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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.

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



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Communication and Borderline Personality Disorder (BPD)

DEFINITION

BPD is a personality disorder marked by significant inability to regulate emotions, impulsivity, poor self-image, unstable relationships, and frequent mood swings. Individuals with BPD have a fear of abandonment or instability and may have difficulty tolerating being alone. Yet inappropriate anger, impulsiveness and frequent mood swings may push others away, even though they want to have loving and lasting relationships.

Source: Diagnostic and Statistical Manual of Mental Disorders-5



HOW IT MAY IMPACT COMMUNICATION

- May impact how they send and receive communication impacted
- May result in frequent unstable moods and/or dissociation which impacts ability to successfully interpret communication and respond.
- Frequent instability in relationships resulting in few people who know how to best support and interact with them.
- May have difficulty remembering interactions or conversations accurately
- May be hypervigilant around being abandoned resulting in withdrawals



STRATEGIES TO SUPPORT COMMUNICATION

- Provide consistent messages
- Be clear, use short sentences, and stay on one topic at a time.
- If it seems like there is a misunderstanding, ask
- Be aware of their mood and ability and choose the best time for effective communication
- Set and keep boundaries in communication related to topic, time limit, and message.
- Be honest and kind in communication.
- Check for understanding



THE KEY to achieving effective communication with a person with BPD is to consciously accept the responsibility for it. How an individual is impacted will vary and communication access depends on individual needs, looking different for each person.



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Communication and Central Auditory Processing Disorder

DEFINITION

Central Auditory Processing Disorder Otherwise known as, but is not limited to auditory processing disorder, language processing disorder, and auditory information processing disorder. It refers to deficits in the neural processing of auditory information in the central auditory nervous system, not due to higher order language or cognition. In other words, the disorder is not due to a hearing loss but how the brain has difficulty translating, discerning, and processing sound.

Source: American Speech-Language-Hearing Association



HOW IT MAY IMPACT COMMUNICATION

- May seem distracted or may have trouble paying attention
- May have difficulty following spoken directions or commands
- May be worse when feeling overwhelmed or tired
- May be ok at the beginning of the conversation but begin to struggle to keep up and eventually become overwhelmed
- May not 'hear' every word that is said or mishears what is said
- May have challenges multiplied when more than one person speaks
- Inconsistent or inappropriate responses
- May ask for things to be repeated and ask many questions, may say "huh" and "what" frequently
- May not realize how hard they are working to process sounds



STRATEGIES TO SUPPORT COMMUNICATION

- Minimize distractions and reduce stimuli in the environment
- Offer visual cues
- Use concise sentences. Avoid unimportant details
- Be literal, e.g. "I'm joking" instead of "I'm pulling your leg"
- Provide one direction at a time or break down tasks into steps
- Have one person speak at a time and avoid speaking above other noises
- Reduce distractions and background noise when communicating
- Slow down and pause between sentences
- Offer captions, written directions, and summaries
- Be patient – give them plenty of time to process and communicate



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Communication and Central Auditory Processing Disorder



HOW IT MAY IMPACT COMMUNICATION

- May have slower processing speeds; difficulty following and comprehending rapid speech
- May need longer to respond in oral communication situations
- Impacts reading, writing, and learning



STRATEGIES TO SUPPORT COMMUNICATION

- Check in to see if they are ready to listen to a long story or conversation
- Encourage the person to sit closest to the speaker
- Provide conversational breaks or sensory breaks, when necessary



THE KEY to achieving effective communication with a person with Central Auditory Processing Disorder is to consciously accept the responsibility for it. How an individual is impacted will vary and communication access depends on individual needs, looking different for each person.



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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.

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<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/>



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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)



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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.



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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



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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.



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Source: www.asha.org



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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.

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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



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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.

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<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>



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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



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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.

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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



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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.

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



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Communication and Disruptive Mood Dysregulation Disorder (DMDD)

DEFINITION

DMDD is a depressive disorder in children with age of onset prior to 10 years old. It is not diagnosed after 18 years old however it is characterized by frequent, age-inappropriate tantrums that are severe and are characterized by extreme verbal or physical irritability.

Source: Diagnostic and Statistical Manual of Mental Disorders-5



HOW IT MAY IMPACT COMMUNICATION

- When behaviors are active, effective communication may be difficult
- When presented with an emotional situation, they may be more likely to struggle with attending to what is happening.
- May not understand why they are irritable which can be frustrating
- May misperceive the intentions of others
- Social cues may be difficult to navigate, like turn-taking in conversation, empathy, shared perspectives, etc.



STRATEGIES TO SUPPORT COMMUNICATION

- Be aware of their triggers
- Be aware of their emotional state and decide if it is the right time to engage
- Provide time and space to process when they are having an outburst or is irritable/emotional.
- Provide clear and consistent expectations so they know what to expect
- Recognize they are frustrated too and may not be able to talk to you about it.
- Be patient and allow them to share thoughts/feelings/needs at their own pace
- Say their name first and wait for them to attend before proceeding.
- Reward communication attempts



THE KEY to achieving effective communication with a person with DMDD is to consciously accept the responsibility for it. How an individual is impacted will vary and communication access depends on individual needs, looking different for each person.

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Communication and Down Syndrome

DEFINITION

Down Syndrome, sometimes called Trisomy 21, is a condition where a person is born with an extra chromosome. This results in an array of physical and cognitive impacts, including a mildly or moderately low IQ, speech difficulties, and possible hearing or vision loss. The presentation of Down Syndrome can vary greatly by individual.

Source: cdc.gov, ndss.org



HOW IT MAY IMPACT COMMUNICATION

- Possible delays in language and social development
- May have difficulty paying attention or control impulsivity
- Sustained periods of attention and effort may be difficult.
- May blurt things out, interrupt others, talk a lot, self-talk, or be louder than others
- Organization, including following a conversation, can be difficult.
- Misunderstanding another person's meaning or intentions may occur
- May have difficulty brainstorming, sequence a story in order, anticipate if/then consequences, or understand time
- May have memory difficulties, especially short-term memory.



STRATEGIES TO SUPPORT COMMUNICATION

- Be supportive and avoid rejection.
- Talk about day-to-day topics and concrete ideas.
- Try to avoid sarcasm
- Remain physically close when communicating
- Use fewer words; be clear and concise.
- Use repetition.
- Have fun, be animated, use gestures!
- Avoid communicating in very loud environments or with too much background noise
- Use environmental reminders such as structured routines and visual aids to support communication and retaining information.
- Consider comorbid disorders, such as anxiety or autism, that may be impacting communication



THE KEY to achieving effective communication with a person with Down Syndrome is to consciously accept the responsibility for it. How an individual is impacted will vary and communication access depends on individual needs, looking different for each person.

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Communication and Dyslexia

DEFINITION

Dyslexia is defined as an unexpected difficulty in learning to read. Dyslexia takes away an individual's ability to read quickly and automatically, and to retrieve spoken words easily, but it does not dampen their creativity and ingenuity.

Source: The Yale Center for Dyslexia & Creativity



HOW IT MAY IMPACT COMMUNICATION

- Mispronounce familiar words
- Difficulty sounding out words
- May not associate letters with sounds
- May substitute words such as “stuff,” “thing,” “you know,” etc.
- Pauses, hesitates, and/or uses lots of “ums” and imprecise language
- May have trouble remembering dates, names, numbers, etc.
- Feelings of embarrassment, anxiety, or depression or experiences of bullying or other trauma may lead to social withdrawal
- Less likely to have fast responses in conversations; struggles when put on the spot



STRATEGIES TO SUPPORT COMMUNICATION

- Be patient and wait in silence – give the person plenty of time to process and communicate
- Don't interrupt or finish their sentences
- Don't assume the individual does/doesn't understand
- Tune into their facial expressions, body language, tone, and behaviors to recognize communication attempts and respond accordingly
- Offer assistive technology solutions like speech to text or text to speech software
- Speak in an unhurried way, the other person may feel its ok to do the same
- Verbal communication is best; when needing to use written words, use fewer words, be clear and concise
- Create a relaxed, non-judgmental environment
- Be encouraging and avoid rejection
- Know the individual's unique strengths and gaps, and tailor your approach accordingly



THE KEY to achieving effective communication with a person with Dyslexia is to consciously accept the responsibility for it. How an individual is impacted will vary and communication access depends on individual needs, looking different for each person.

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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.

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Dan Dubovsky

<https://www.fasdfamilies.com>

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



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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



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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.



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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..

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<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



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Communication and Idiosyncratic Speech

DEFINITION

Idiosyncratic speech or language occurs when the person uses standard words or phrases in an unusual, but meaningful way. In other words, the word used is part of the speaker’s native language however it is not typically associated with the word or phrase of reference. Idiosyncratic speech also includes pedantic speech, in which the child uses overly specific details and neologisms, or made-up words. As is a common characteristic of speech in individuals with Autism Spectrum Disorder (ASD), idiosyncratic language is described as stereotypical and inappropriate word use.

Source: Encyclopedia of Autism Spectrum Disorders



HOW IT MAY IMPACT COMMUNICATION

- Some words they use may only have true meaning to them and possibly those close to them
- May use made-up words
- May have difficulty adjusting vocabulary and tone based on the audience and/or situation
- May not know/use the standard, polite way to greet others, say good-bye, request something, etc.
- May not understand that not everyone has the same knowledge they have



STRATEGIES TO SUPPORT COMMUNICATION

- Be familiar with the true meaning of the words they are using
- Explain your meaning/understanding of the words they are using to ensure mutual understanding
- 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”
- Minimize interruptions of their speech
- Tune into their facial expressions, body language, tone, and behaviors
- Use a familiar person to facilitate communication
- Use communication aids such as pictures or objects



THE KEY to achieving effective communication with a person with idiosyncratic speech is to consciously accept the responsibility for it. How an individual is impacted will vary and communication access depends on individual needs, looking different for each person.

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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



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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.

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Communication and

Limited English Proficiency (LEP)

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 document is to provide information on how this could impact communication and offer strategies to support communicating well.

DEFINITION

Individuals who do not speak English as their primary language and who have a limited ability to read, speak, write, or understand English.

Source: www.LEP.gov



HOW IT MAY IMPACT COMMUNICATION

- Misunderstandings and frustrations can occur
- Individuals may have word-finding difficulty, limited details, and difficulties following instructions
- May need more time to process communication
- May need information rephrased or repeated
- Receptive and expressive skills may differ (someone may understand English well but not express English well)
- Social cues may be difficult to navigate, due to cultural differences
- Difficulties with figures of speech, puns, joking, or sarcasm are common
- May nod in agreement but not understand
- Linguistic isolation may lead to feelings of embarrassment, anxiety, fear, or depression, resulting in social withdrawal



STRATEGIES TO SUPPORT COMMUNICATION

- Efforts made to use the individual's primary language go a long way towards building trusting relationships
- Use their primary language (L1) to link to new English words or phrases (L2 or second language)
- Provide important documentation in their preferred language
- Be patient and caring
- Give extra time for processing/word finding
- Sentences should be direct and short
- Be familiar with the individual's fluency levels and tailor your language and approach accordingly
- Multiple approaches may be helpful - including visual aids, bilingual labeling, natural gesturing, writing it down, or assistive technology (such as a translation app)
- Double check for understanding as the speaker and as the listener
- Be aware of your facial expressions, tone, and body language
- It's best for one person to speak at a time
- If an interpreter is being used, speak to the person, not the interpreter

THE KEY: Remember, how each person uses and learns English will vary and effective access depends on each individual's unique needs.

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Communication and Long COVID

DEFINITION

Some people who have been infected with the virus that causes COVID-19 can experience long-term effects from their infection, known as post-COVID conditions (PCC) or long COVID. Post-COVID conditions can include a wide range of ongoing health problems; these conditions can last weeks, months, or longer. Symptoms vary from person to person but may include brain fog (cognitive and linguistic difficulties), fatigue, memory difficulties, difficulty breathing, tinnitus, taste and smell disturbances, depression, anxiety, and more. There is still much to learn, and research is on-going.

Source: CDC.gov as of September 2022



HOW IT MAY IMPACT COMMUNICATION

- May have difficulty thinking clearly, putting sentences or thoughts together, or tolerating long periods of interaction
- Difficulty with word-finding or slurring speech may occur
- May have memory difficulties
- Fatigue may impact attention span or ability to maintain interactions with others
- May struggle to read or stay on topic
- Symptoms may be difficult to pinpoint, hard to understand, or not appear on medical tests causing confusion and fear
- May have difficulty brainstorming, sequence a story in order, anticipate if/then consequences, or understand time
- Misunderstandings may be common and difficult to resolve
- May lead to isolating behaviors



STRATEGIES TO SUPPORT COMMUNICATION

- Expect them to be less active or less communicative than normal.
- Provide lots of wait time.
- Check for understanding and ask for clarification.
- Pay attention to the person's level of fatigue; give them breaks from interacting with others when needed.
- Help the person feel less confused and fearful by being patient and reassuring.
- Be cognizant and understanding of worsening medical conditions and possible new limitations.
- Ask if the person would like reminders about important tasks and events.
- Consider comorbid disorders, such as anxiety and depression, that may be impacting communication
- Familiar people and environments can improve the effectiveness of communication.



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Communication and Long COVID



HOW IT MAY IMPACT COMMUNICATION

- Symptoms may come and go over time without warning or reason
- Symptoms may especially impact a person's performance or tasks, especially at work



STRATEGIES TO SUPPORT COMMUNICATION

- Consider simple communication tools such as visual aids.
- May need new supports or accommodations to continue with typical tasks or work



THE KEY to achieving effective communication with a person with long COVID is to consciously accept the responsibility for it. How an individual is impacted by their symptoms will vary and communication access depends on individual needs, looking different for each person.



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Communication and Multiple Sclerosis (MS)

DEFINITION

Multiple Sclerosis (MS) is an unpredictable disease of the central nervous system that disrupts the flow of information within the brain, and between the brain and body. This causes symptoms such as numbness, tingling, mood changes, memory problems, pain, fatigue, blindness and/or paralysis. Everyone's experience and prognosis with MS is different and these losses may be temporary or long lasting. Most studies indicate 25 and 50% of people with MS report speech and/or voice changes over the course of their disease. In addition, cognitive changes that interfere with communication may occur in 30 to 60% of people with MS.

Source: National Multiple Sclerosis Society



HOW IT MAY IMPACT COMMUNICATION

- May have difficulty thinking of the words they want to say
- Some people may have slurred or strained speech
- Speech volume may be affected
- May have extra-long pauses between words or syllables of words
- May have trouble concentrating and paying attention
- Difficulty acquiring, retaining, and retrieving information
- May have difficulty processing sensory information including speech
- May have visual symptoms such as blurring, dimming, or loss of color vision
- Symptoms may change from one minute to another
- Stress and exhaustion can increase symptoms

STRATEGIES TO SUPPORT COMMUNICATION

- Give extra time to process. Some may find that the conversation goes too quickly that they cannot encode or understand the information fast enough.
- Limit distractions
- Slow down conversation, give more time between thoughts
- Repeat and verify
- Clearly identify people and topics e.g. instead of "she said" say "Lori said"
- Combine modes of communication; say it, show it, write it, etc.
- Use visual aids, checklists, reminders, and calendars
- Attempt one thing at a time; avoid doing two things at once such as eating and communicating
- Take a break and try again

THE KEY to achieving effective communication with a person who has MS is to consciously accept the responsibility for it. How an individual is impacted will vary greatly and communication access depends on individual needs, looking differently for each person.

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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



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



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.



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

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Communication and Post-Traumatic Stress Disorder (PTSD)

DEFINITION

PTSD is a trauma and stress related disorder caused by experiencing, witnessing, or learning about a traumatic event directly related to the person, or a loved one or close friend. A diagnosis of PTSD indicates a person is experiencing symptoms, because of the traumatic event. The symptoms intrude upon their everyday life and can include things such as distressing memories, flashbacks, dissociation, mood swings, and other disruptions to the person's typical physical, emotional, and psychological presentation.

Source: Diagnostic and Statistical Manual of Mental Disorders-5



HOW IT MAY IMPACT COMMUNICATION

- Trauma impacts the brain and can alter a person's ability to perform tasks such as effectively communicating
- May cause hypervigilance or paranoia potentially resulting in misinterpretation of what others are saying, thinking, or doing.
- If they dissociate, have flashbacks or experiences a trauma trigger, they may not be fully present or may not remember the interaction.
- May lead to increased isolation or avoidance of certain situations
- May respond in ways that do not make sense to us and it may be confusing for them as well.



STRATEGIES TO SUPPORT COMMUNICATION

- Ask the person how they best receive and share information
- Be patient, they may need information repeated due to managing symptoms. Do not say "You should remember" or "Don't you remember..."
- If it seems like there is a misunderstanding, ask the person what they think you said so you can both determine what was unclear.
- Give them time to process the information, do not jump to the next topic or answer for the person.
- Be aware of your non-verbal communication; your body language, facial expressions, and tone of voice
- Ensure you have their attention before speaking, "Hey Joe, can I talk with you for a minute?"

THE KEY to achieving effective communication with a person with PTSD is to consciously accept the responsibility for it. How an individual is impacted will vary and communication access depends on individual needs, looking different for each person.

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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.

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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)



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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.



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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.

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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.

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<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/>



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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



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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.

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*addrc.org
strokefoundation.au
stroke.org*



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Communication and Stuttering

DEFINITION

Stuttering, also known as Childhood-Onset Fluency Disorder, is a communication disorder involving disruptions, or “disfluencies,” in a person’s speech. The severity and patterns of stuttering varies from day to day.

Source: National Stuttering Association



HOW IT MAY IMPACT COMMUNICATION

- May experience:
 - repetitions (D-d-d-dog),
 - prolongations (Mmmmmilk),
 - blocks (an absence of sound), or
 - some combination of these
- May have extra-long pauses before speaking
- May substitute words and interjecting phrases such as “you know,” “well actually,” “um,” etc., and as a result, may create the false impression of being hesitant, uncertain, or confused
- May communicate more through behaviors than words
- Feelings of embarrassment, anxiety, fear, or depression may lead to social withdrawal
- Stuttering may increase when excited, tired or under stress, or when feeling self-conscious, hurried, or pressured
- May have secondary behaviors such as facial grimaces, jaw and head jerking, eye blinking, fist clenching, along with tension in face or body muscles while stuttering



STRATEGIES TO SUPPORT COMMUNICATION

- Wait in silence, the person may need more time to develop their response
- Minimize interruptions of their speech
- Don’t assume the individual does/doesn’t understand
- Tune into their facial expressions, body language, tone, and behaviors to recognize communication attempts and wait accordingly
- Don’t comment on their repetition of phrases or questions
- Speak in an unhurried way, the other person may feel its ok to do the same and help decrease stuttering



THE KEY to achieving effective communication with a person who stutters is to consciously accept the responsibility for it. How an individual is impacted will vary and communication access depends on individual needs, looking different for each person.

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Communication and Tourette Syndrome

DEFINITION

Tourette Syndrome is a neurological disorder characterized by sudden, repetitive, rapid, and unwanted movements and vocal sounds called tics. Tourette's is one of a group of disorders of the developing nervous system called tic disorders. Tics regularly change, varying in type, frequency, location, and severity – sometimes for reasons unknown and sometimes in response to specific internal and external factors. It often co-occurs with several other neurodevelopmental and neuropsychiatric conditions such as ADHD, OCD, and others.

Source: National Institute of Neurological Disorders and Stroke



HOW IT MAY IMPACT COMMUNICATION

- May experience simple or complex motor and or vocal tics
- May not be able to 'attend' to conversations during tics
- When excited or anxious, tics may be more prevalent
- Emotional overload is a common feature and may not be a conscious choice
- May have extra-long pauses before speaking
- May impact handwriting skills
- Feelings of embarrassment, anxiety, fear, or depression may lead to social withdrawal
- May have an intensification of tics when they suppress their them



STRATEGIES TO SUPPORT COMMUNICATION

- Wait in silence, the person may need more time to develop their response
- Minimize interruptions of their speech
- Tune into their facial expressions, body language, tone, and behaviors to recognize communication attempts and wait accordingly
- Don't intervene or interrupt tics and stay calm
- Be aware and mindful of the individual's triggers
- Offer fidgets or options for movement
- Consider visual aids so they don't have to use their voice in the moment of an eruption
- Whole body listening



THE KEY to achieving effective communication with a person with Tourette's is to consciously accept the responsibility for it. How an individual is impacted will vary and communication access depends on individual needs, looking different for each person.

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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](https://www.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



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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.

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<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/>



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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)



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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.

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<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>



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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.

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