

Appendix I: Positive communication

▶ **Who might find these principles useful?**

All staff.

Positive communication - some general principles

► **Before the meeting**

Acquire background knowledge of the disability of the person you are intending to meet. Discover as much as possible about the impact of the disability upon the individual.

Consider the needs of the individual when scheduling the meeting. If they are on medication, for example, it may mean that certain times of day are more difficult than other times. This is particularly the case for people with mental health problems, some hidden disabilities and some medical conditions.

➔ **Go to Hidden Disabilities; Mental Health Problems.**

Find out what is the preferred mode of communication for the individual is. This is especially important for sensory and speech impairments.

➔ **Go to Deaf/Hard of Hearing; Physical Disabilities; Visual Impairment.**

Be aware of the accessibility issues for the meeting venue, in relation to suitable parking, potential obstacles and the availability of adapted toilets. Select a suitable venue that offers adequate space, that is suitably lit, and noise free.

Provide clear and concise information in plain language about the meeting in advance (place, time, venue, directions, etc.). Give the names of all those attending, their areas of responsibility and the remit for the meeting. For some disabled people these instructions should clearly indicate the presence of any hazards.

Information should be available in an accessible format and if necessary in an alternative format as required by the individual.

➔ **Go to Preparing documents for printing, visual display and electronic dissemination.**

As an aide-mémoire confirm the meeting appointment with the individual in the days beforehand.

Consider the possibility that the individual may wish to attend the meeting with a friend, a helper or a professional support worker, such as a sign language interpreter.

Organise special reception arrangements if these are necessary.

Positive communication - some general principles

► **During the meeting**

On meeting the individual confirm with them their preferred mode of communication. This is especially important for those with sensory and speech impairments. If the individual has elected to attend the meeting with a third party (friend, helper or sign language interpreter, etc.) ascertain the role of that person within the communication.

➔ **Go to Deaf/Hard of Hearing; Physical Disabilities; Visual Impairment.**

Recognise that there may be sensitive issues relating to disability disclosure which can make the prospect of a meeting a daunting experience. With some disabled people, the fact of disability, an individual's past medical and mental history, and the arrangements made to meet their support needs, may have contributed towards experiences of discrimination, stigma and failure.

Individuals are more likely to share their concerns in an atmosphere conducive to openness and honesty. It is important to be open about institutional and staff uncertainties but also to recognize that the individual has their own concerns.

Discussing previous educational experience and recent effective coping and support strategies with the individual will help establish the appropriateness of any course of action.

With some disabilities, e.g., hidden disabilities, mental health problems and some physical disabilities, being aware of the individual's past medical history may give some indication of the likely pattern of their current and future needs in higher education study, assessment and support. This should not be used to restrict opportunity, but to support realism about the challenges faced.

➔ **Go to Asperger's Syndrome; Hidden Disabilities; Physical Disabilities; Mental Health Problems.**

In scheduling the meeting ensure that sufficient time has been allocated and that it includes opportunities for "time out", which is particularly important for those with sensory and speech impairment, some physical and hidden disabilities and mental health problems.

➔ **Go to Deaf/Hard of Hearing; Asperger's Syndrome; Hidden Disabilities; Physical Disabilities; Mental Health Problems; Visual Impairment.**

Positive communication - some general principles

Remember that the meeting is a two way process and that in circumstances where the individual is faced with a number of members of staff (tutors, disability officer, admissions tutor, accommodations officer, nurse, etc.) adequate opportunities must be made for the individual to question those present.

All staff present at the meeting should have taken the opportunity to acquaint themselves with the general principles of positive communication and the specific principles relevant to the individual they are meeting.

It is critical to remember that the individual is likely to be anxious and that the stress induced by the meeting can exacerbate some disabilities, such as Asperger's Syndrome, dyslexia, mental health problems, physical disability and hidden disabilities such as Myalgic Encephalomyelitis (M.E.), etc.

➔ **Go to Asperger's Syndrome; Dyslexia; Hidden Disabilities; Physical Disabilities; Mental Health Problems.**

Be prepared to make available detailed information to support the focus of the meeting. Some disabled people can only arrive at informed decisions if the information they need to do so is made previously available, e.g., for screen reading, or is on hand at the time to supplement their processing skills.

➔ **Go to Admissions; Lectures, seminars and tutorials; Fieldwork; Laboratories, workshops and other practice-based environments; Placement learning; Assessment.**

Keep a written record of the outcomes of the meeting and forward this to the individual as an aide-mémoire.

Make sure that all the information is available in an accessible format for the individual to take away from the meeting for later inspection.

➔ **Go to Preparing documents for printing, visual display and electronic dissemination.**

▶ **After the meeting**

If the meeting was an admissions or information interview, or subject to an evaluation as part of teaching and learning, seek feedback from the individual to support monitoring and staff development programmes.

Positive communication - specific principles

Asperger's Syndrome

Deaf/Hard of Hearing

Dyslexia

Hidden Disabilities

Mental Health Problems

Physical disabilities

Visual Impairment

Asperger's Syndrome

► Specific principles for positive communication

Although presently subsumed as a "Hidden Disability", this sub section on Asperger's Syndrome has been added in anticipation of changes to the UCAS coding for 2003. In future Asperger's Syndrome will be identified as a discrete field in the disability coding with other Autistic Spectrum Disorders.

People with Asperger's Syndrome have neurological differences which can become prominent during face-to-face meetings, such as:

- **difficulty in reading non-verbal cues**, e.g., body language and difficulty in determining proper body space
- **marked deficiencies in social skills**, e.g., gaze avoidance and on introduction turning away when meeting someone)
- **one-sided social interaction** that may be naïve and inappropriate
- **paucity of empathy**
- **clumsy and ill-coordinated movements** and odd postures
- **speech which is pedantic and monotonic**
- **obsessive routines** that may be preoccupied with a particular subject of interest which may have been learnt by rote
- **poor organisational skills**
- **being overly sensitive** to sounds, tastes, smells and sights, even sensory stimuli that others may not perceive
- **anxiety.**

Deaf/Hard of Hearing

► Specific principles for positive communication

▷ Before the meeting

Deaf people use a range of communication methods that may involve speech, sign language, finger spelling, expressions, residual hearing and writing, or a combination of these known as "open communication."

As part of the preparation it is imperative to know the preferred communication methods of the individual in advance.

Arrangements may have to be made to provide the following:

- a radio hearing aid
- a portable loop system
- a lip speaker
- a sign language interpreter.

If an interpreter is required and unknown to the individual it is imperative that they have a short time prior to the meeting, to resolve any issues related to the communication delivery.

▷ During the meeting

The importance of the venue

The venue for the meeting should be a room where:

- noise is minimal
- the light falls on the face of the meeting organiser
- seating is arranged so that the individual is not seated next to a window, which would put the meeting organiser's face in shadow
- there is room for the interpreter to be strategically placed for the individual to see them
- a flashing fire alarm should be fitted and clearly visible.

Key communication rules for meeting a deaf person with a sign language interpreter

- **the interpreter:** the role of the interpreter is to facilitate communication only and not to participate.
- **off task conversations:** never engage an interpreter in a conversation when they are communicating for the individual.

Deaf/Hard of Hearing

- **speed of speech:** use a normal rate of speaking, with natural breaks for pauses. A 10-15 minute break is necessary when giving large amounts of information.
- **allow time:** the process of translating requires time - the deaf person must be able to receive the information and to respond.
- **advance information:** provide information in advance of the meeting to the interpreter and if possible to the deaf person. Prior access to names and specific terminology will save time during the meeting.
- **clarification:** unfamiliar names or terminology which arise during the session could be written on a board for clarification.

Key communication rules for meeting a deaf person who is a lip reader

The individual may require technical support in the form of a radio hearing aid or a portable loop system in the room, to facilitate the use of the hearing aid.

Lip reading requires a high level of concentration and can be extremely exhausting, as much as three-quarters of lip reading is intelligent guess work and intuition, relying to some extent on contextual clues.

- **speak clearly** at a reasonable pace without shouting or over enunciating as this distorts sound and lip patterns
- **rephrase if necessary** rather than simply repeating words
- **check position and room lighting** as lips cannot be read at a distance or in a dim light
- **avoid nodding too much**, turning of the head or moving about the room
- **use facial expression and try to maintain eye-contact**
- **gain the individual's attention** before speaking
- **give a clear view of lips:** avoid covering the mouth with hands
- **make time adjustments** to allow the individual to adjust to unfamiliar lip patterns
- **remember that many sounds and words look alike on the lips**, e.g., t,d,n have the same configuration of the lips as do p,b,m.

Key communication rules for meeting with someone who is hard of hearing.

The individual may require technical support in the form of a radio hearing aid or a portable loop system in the room, to facilitate the use of the hearing aid.

Dyslexia

► Specific principles for positive communication

People with dyslexia are not a homogenous group. They are all individuals and the impact of their dyslexia will vary according to their degree of difficulty, the recency of their diagnosis, their particular strengths, their choice of study and their coping strategies.

When planning and undertaking a meeting it is vital to:

- **provide clear directions and instructions** on the place and time of the meeting. People with dyslexia will often forget dates and times of appointments and therefore need a written and/or verbal reminder.
- **use a quiet space** to help maintain concentration for the individual
- **keep the carrier language simple** so that additional energy is not wasted on unnecessary decoding
- **invite questions** to monitor full comprehension
- **write down important information** for the individual to take away
- **allow additional time** for the processing of information
- **encourage the use of a tape recorder** if the individual would like to use one.

Be aware that the person with dyslexia may experience increased anxiety at a meeting, exacerbated by a possible difficulty in absorbing verbal information or insecurity about their own verbal expression.

There may be those who need the supportive presence of a friend, colleague or partner at a meeting because of the tension engendered by the process.

Hidden Disabilities

► **Specific principles for positive communication**

"Hidden disability" covers a broad range of different disabilities such as, asthma, diabetes, epilepsy, Myalgic Encephalomyelitis (M.E.), and many, many others. It is important to obtain information on the individual's disability.

For some people with hidden disabilities the following issues may need to be given additional thought when organising a meeting:

- **the anxiety of self disclosure** may be specially acute
- **past medical history** and the frequency of episodes of ill health may cause cancellation
- **proximity to noises or atmospheric pollution** can create difficulties
- **the day-to-day effects of medication** may be detrimental
- **meetings are likely to be found to be additionally fatiguing**
- **offering to be flexible** and making alternative meeting times may be required
- **giving very clear information** on the purpose of the meeting prior to and during the meeting.

Mental Health Problems

► Specific principles for positive communication

The label of "Mental Health Problem" can be very all encompassing and often stigmatising. Being clear about what is meant by this term is fundamental to understanding the range of disabilities that may be grouped under it, for example, mood related disorders (depression), anxiety-related disorders (phobias, panic, post-traumatic stress, compulsive behaviour), psychosis (schizophrenia), eating disorders (bulimia, anorexia nervosa) and personality disorders.

For some people with mental health problems the following issues may need to be given additional thought when organising a meeting:

- **providing in advance a very clear resume** of the purpose of the meeting, the names of all those attending and their roles
- **previous experience of stigma and discrimination** in their life
- **the anxiety of self disclosure** may be specially acute
- **past medical history** and the frequency of mental health episodes may indicate the possibility of cancellation
- **fluctuations in concentration or mood**, confusion or disorientated thinking
- **self-perception** may not be the same as that of others
- **the day-to-day effects of medication** may be detrimental
- **additional fatigue** is likely to be caused by the meeting process
- **offering to be flexible** and making alternative meeting times may be required
- **providing quality written information** at the meeting for post-meeting uses is essential to support future action.

If an applicant attends a meeting and is unable to answer ordinary questions and is acting inappropriately, it might be appropriate to ask detailed questions about the applicant's medical history, and its impact on study and the study environment. Their responses may sustain doubts about their ability to cope with the higher education experience, and it is important afterwards to liaise with other services and external agencies to clarify the situation with the student's consent. This situation is delicate and needs careful management to avoid further adverse effect on the applicant's health.

Physical Disabilities

► Specific principles for positive communication

Ascertain the degree of personal independence of the individual in advance, e.g., will they:

- need special parking arrangements
- walk unaided
- manage steps or stairs
- require specialist seating
- use and require access for a wheelchair
- benefit from a meeting room on the ground floor with proximity to an accessible toilet.

Some individuals with physical disabilities may have communication aids, or use speech that may be difficult to follow, or attend the meeting in a wheelchair and/or come with a personal helper. Be prepared for these eventualities.

- **Enquire about the best format** for organising the face-to-face aspects of the meeting, taking into account the role of the communication aid, the position of the wheelchair and the presence of the personal helper.
- **Speak clearly and naturally** to avoid exaggerated, slow or loud speech.
- **If a personal helper is present** make sure that all communication is directed to the person with the disability and not through the third party (unless this is the wish of the disabled person).
- **If the individual is a wheelchair user** the meeting organiser should be sat at the same level. Do not lean on the wheelchair as it is likely to form part of the individual's personal space.
- **If the person with a disability has a communication aid** it is important to let them use this as a matter of course and not interrupt.
- **If the individual has a speech impairment** this may make communication difficult. Do not give the impression of understanding if you haven't. Being asked to repeat several times is likely to be a familiar experience for the individual, if they have chosen to be independent in this way. If there is still doubt about what is being said, the meeting organiser should clarify a statement by repeating it.
- **Schedule the meeting to take longer** and offer time out.

Visual Impairment

► Specific principles for positive communication

- **Prior to the meeting** the organiser should clarify with the individual their degree of loss of vision and ascertain whether they will be escorted to the meeting or be accompanied by a guide dog.
- **Letters and information to support the meeting** should be available in an appropriate form, depending upon the individual's preferred communication mode (i.e., Braille, large print, audio tape, etc.).
- **At reception** the individual should be met and escorted to the meeting room as required.
- **Be hazard aware.** If asked to guide a blind person to a destination, take the person's arm above the elbow, describe the route to be taken and detail any potential hazards, e.g., steps, corners and doorways. They may need to be guided to a suitable chair.
- **Lighting levels** need to be discussed with the individual and seating should be arranged with daylight behind the individual.
- **Contrasting colours** are helpful for those with low vision.
- **Introductions** should be made in a way that ensures that the individual is able to put a voice to a name.
- **Verbal indications** are necessary if any of the participants leaves or re-enters the room, or if joined by a third-party.
- **A guide dog** is highly disciplined and should not be distracted or petted when working. Only approach a guide dog with the owner's permission.

Additional sources of information

There are many organisations and publications dedicated to providing information and support for the full range of disabilities. A brief selection of publications is listed below. Details of some of the following texts are available at the world wide web sites listed in the next sub-section.

Publications

Asperger Syndrome, a practical guide for Teachers, (1998), Cumine, V., Leach, J., and Stevenson, G., David Fulton Publishers, London.

Breaking down barriers: access to further and higher education for visually impaired students, (1998), Jane Owen Hutchinson, Karen Atkinson and Jenny Orpwood, RNIB.

Deaf Students in Higher Education, (2001), Department of Student Support Services, Nottingham Trent University.

Dyslexic Learners, a holistic approach to support, (2002), The proceedings of a one-day conference on dyslexia support, De Montfort University, Leicester.

Dyspraxia, a guide for Teachers and Parents, (1997), Barrett, J., and Ripley, K., David Bulton Publishers, London.

Guidelines on student mental health policies and procedures in higher education, (2000), Ambrose, P., et al, Committee of Vice Chancellors and Principals.

Inclusive practices for students with disabilities: a guide for academic staff, (2000), Universities Disabilities Cooperative Project, Department of Education, Training and Youth Affairs, New South Wales, Australia.

Lifelong Learning, Summary Report of a project to discuss improving educational opportunities for people with sight problems, (2000), Cheryl McCandish, RNIB.

Panic attacks and how to manage them: A guide for Invigilators, (2000), Joanna Lester, University College Northampton.

Procedure for advising and managing a student in distress: A guide for Student Services and Information Centre staff, (2000), Joanna Lester, University College Northampton.

Supporting students with mental health difficulties: A guide for academic staff, (2000), Joanna Lester, University College Northampton.

Additional sources of information

World Wide Web Addresses

The following addresses provide access to the contact details for a small range of relevant organisations, many of which contain links to a large array of relevant world wide web links to other useful disability related organisations.

Action for M.E.

www.afme.org.uk

Association for Spina Bifida and Hydrocephalus (ASBAH)

www.asbah.org.uk

British Council of Disabled People

www.bcodp.org.uk

The National Autistic Society

www.nas.org.uk

British Dyslexia Association

www.bda-dyslexia.org.uk

Epilepsy Action

www.epilepsy.org.uk

Dyspraxia Foundation

www.emmbrook.demon.co.uk/dysprax/what.htm

Mental Health Foundation

www.mentalhealth.org.uk

MIND

www.mind.org.uk

O.A.S.I.S (On-Line Asperger's Syndrome Information Resources)

www.udel.edu/bkirby/asperger/index.html

Royal National Institute for Deaf People

www.rnid.org.uk

Royal National Institute for the Blind

www.rnib.org.uk

SKILL: National Bureau for students with disabilities

www.skill.org.uk

TechDis (For information on making electronic materials accessible)

www.techdis.ac.uk

University students with Autism and Asperger's Syndrome

www.users.dircon.co.uk/~cns/index.html

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