

Opening Doors – The Importance of Total Communication

Introduction

William is a student at Sunfield. He has a diagnosis of ASD and Seasonal Affective Disorder (SAD). The impact of SAD means that his ability to verbally communicate fluctuates throughout the year. This case study explores the strategies put in place to enable William to communicate effectively at all times, regardless of his mood cycle.

Background

William joined Sunfield in 2006, aged 10. His admission paperwork referred to variations in his ability to communicate throughout the year, and cycles of behaviour and anxiety, which were also witnessed by Sunfield staff, along with his limited ability to communicate effectively when experiencing high anxiety – an issue staff were concerned was resulting in further anxiety for William. William was diagnosed with SAD by Sunfield's Consultant Psychiatrist. This diagnosis enabled staff to develop strategies to support William and enable him to communicate more effectively throughout the year.

The Journey

Following William's diagnosis of SAD, the multidisciplinary staff team around him began to identify effective strategies which could be used to enable William to communicate, even during periods of high anxiety. It was identified that both expressive and receptive language fluctuated, and this needed to be managed to reduce William's anxieties and maintain his ability to communicate.

Staff developed a range of strategies, including visual resources, to support and maintain William's communication skills. The development of portable symbols enabled William to continue to use his voice in a range of settings, both on and off-site. This also increased his independence, as he didn't need to rely on staff 'speaking' for him.

The development of visual communication tools led to an increase in spontaneous use of language, as William became more familiar with a greater range of words, through the use of visual symbols. The visual strategies helped William to put words into context, which then assisted him in developing appropriate use of language in different situations. This meant that when William was in a cycle of low anxiety, he had a greater bank of verbal language to use. When in a cycle of high anxiety, he was able to use a wider range of visual prompts to communicate.

Another key area for the maintenance of William's communication skills was staff honouring his requests and choices. This enabled William to feel that he had control and could influence what happened in his daily life. This was an important strategy for the staff to maintain, to increase his confidence in his ability to communicate effectively, and reduce anxieties. During cycles of low mood, William began to demonstrate that he could still communicate meaningfully, even though the communication may not have been verbal.

Strategies used in Speech and Language Therapy sessions also added to the tools William could use to communicate. He began to demonstrate more independent choice making, and was able to maintain this skill during periods of high anxiety, through the use of visual aids. William's Speech and Language Therapist worked closely with care and education staff to ensure that these strategies were being used throughout William's waking day, providing him with a range of opportunities to make his voice heard.

The Conclusion

According to his annual review, *"William has managed to maintain his verbal communication in the educational setting throughout the year and his communications are becoming increasingly spontaneous and appropriate. He recently told a staff member that he didn't want to finish his work because he wanted to go for a walk. These types of communication are becoming more frequent, and we are actively encouraging him to clarify and justify his requests."* The multidisciplinary, individualised approach used to support William's communication skills has enabled him to continue to progress and develop his communication, despite the fluctuations in his anxiety levels. As a result, William no longer becomes withdrawn and non-communicative when in a cycle of high anxiety, as he is able to utilise other communication options to make his voice heard.