



Impairments & Disability

The following fact sheets are general resources to support people in their roles assisting people living with disabilities.

The information provided is not specific to any particular individual case.

For behaviour and communication tools for a specific case, speak to the person first or contact the parents, carers or health care professionals to obtain further details.

Fact sheets:

- Autism Spectrum Disorder
- Intellectual Disability
- Hearing Impairment
- Vision Impairment
- Down Syndrome
- Angelman Syndrome
- Attention Deficit Hyperactivity Disorder
- Oppositional Defiant Disorder

Autism Spectrum Disorder (ASD)

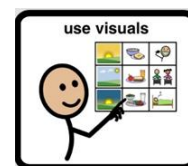
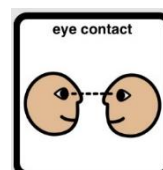
ASD is an impairment with social skills and communication. The person may have difficulty with social communication, social interaction and also have restricted or repetitive behaviours and interests.

People with ASD may have:

- Difficulty initiating social interactions, and responding to others.
- Understanding and using non-verbal communication such as eye-contact, gestures and facial expressions.
- Repetitive speech (echolalia), or repetitive movements such as spinning, flapping, flicking paper.
- A preference for certain routines, such as driving the same route, sitting in same spot.
- Unusual sensory interests including seeking out certain smells or tastes, or avoiding certain noises and environments.
- An associated intellectual impairment or learning difficulties.

Ideas for communication and engagement

- Gain the person's attention before speaking to them.
- Allow time for the person to process what you are saying, and to respond.
- If a person uses a voice output device, make sure you allow enough time for them to formulate a message. Don't try and guess or speak over the top of them.
- Use visual supports where possible, such as coloured pictures, signs and gestures or the written word, to help support what you are saying.
- Presume competence –assume the person can communicate and understand you.
- Talk directly to the person, not to their parent or carer.
- Build rapport by getting to know the person, their specific likes and dislikes.
- Be honest – if you can't understand what the person is trying to communicate, say so! Try different ways of communicating – use pictures, draw, write, or ask them to show you what they mean.
- Use positive statements e.g. "walk inside", instead of "don't run".



Intellectual Disability

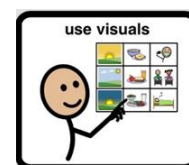
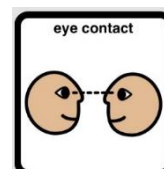
An intellectual disability is characterised by an IQ below 70 (the median IQ is 100), and significant difficulty with daily living skills. People with intellectual disability process information more slowly than people without an intellectual impairment, and require extra support to learn and achieve their full potential. Impairment may range from mild to moderate to severe.

People with an intellectual disability may have:

- Difficulty understanding new information.
- Difficulties with communication and social skills.
- Difficulty with self-care and daily living task.
- Difficulty understanding safety rules.
- Slower processing time.
- Difficulty in the sequential processing of information.
- Difficulties comprehending abstract concepts.

Ideas for communication and engagement

- Get the person's attention before speaking to them.
- Allow time for the person to process what you are saying, and to respond.
- If a person uses a voice output device, make sure you allow enough time for them to formulate a message. Don't try and guess or speak over the top of them.
- Use visual supports where possible, such as coloured pictures, signs and gestures or the written word, to help support what you are saying.
- Presume competence –assume the person can communicate and understand you.
- Talk directly to the person, not to their parent or carer.
- Build rapport by getting to know the person, their specific likes and dislikes.
- Be honest – if you can't understand what the person is trying to communicate, say so! Try different ways of communicating – use pictures, draw, write, or ask them to show you what they mean.
- Use positive statements e.g. “walk inside”, instead of “don't run”.



Hearing Impairment

A hearing impairment can be identified as a loss of function in the auditory system; or the loss of ability to hear.

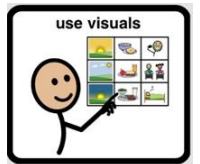
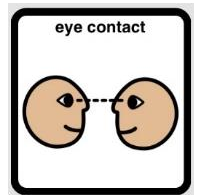
Some causes of hearing impairment include prolonged exposure to hazardous noises, loss of hearing since birth, ear infections, as well as unknown causes such as illness.

One of the main barriers identified for someone with a hearing impairment, is their ability to socialise. As there can be difficulties with general communication (unable to successfully hear a person trying to verbally communicate) this communication barrier can limit positive experiences of social interactions.

Other impacts from hearing impairments include; social isolation, negative self-image, exclusion as well as being unaware of social consequences. Some people with hearing impairment may also experience difficulty with balance and coordination.

Ideas for communication and engagement

- Gain the person's attention before speaking to them.
- Allow time for the person to process what you are saying, and to respond.
- Look directly at the person so they can read your lips and facial expression.
- Reduce background noise or other distractions.
- If a person uses a voice output device, make sure you allow enough time for them to formulate a message. Don't try and guess or speak over the top of them.
- Use visual supports where possible, such as coloured pictures, signs and gestures or the written word, to help support what you are saying.
- Build rapport by getting to know the person, their specific likes and dislikes.
- Talk directly to the person, not to their parent or carer.
- Be honest – if you can't understand what the person is trying to communicate, say so! Try different ways of communicating – use pictures, draw, write, or ask them to show you what they mean.



Visual Impairment

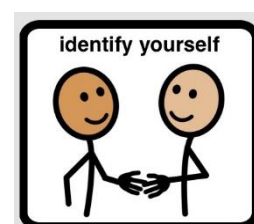
A person with a visual impairment has a decreased ability to see. Visual impairments can range from mild to severe, which tends to cause some form of disability. A person with low vision does have some useful vision, however their ability to do daily living and social tasks will be affected.

A person who is totally blind has no functional vision, and no light perception.

Due to having vision impairments, some individuals may miss out on being able to access information, have difficulty moving independently, and have less chances to participate in meaningful experiences.

Ideas for communication and engagement

- Identify yourself to the person so they know who they are speaking to.
- Allow time for the person to process what you are saying, and to respond.
- Continue to use body language. This will affect the tone of your voice and give a lot of extra information to the person who is vision impaired.
- Reduce background noise or other distractions.
- Build rapport by getting to know the person, their specific likes and dislikes.
- Talk directly to the person, not to their parent or carer.
- Use specific language when giving directions. For example, "the ball is near your left foot", rather than "the ball is over there".



Down Syndrome

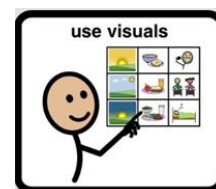
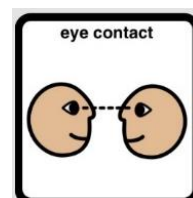
Down Syndrome is a common genetic condition caused by an extra chromosome 21. Down Syndrome (DS) is the most common cause of intellectual disability. Children with Down Syndrome will have delay in reaching some developmental milestones, with particular difficulty in speech and language development. Speech is often unclear, and someone with DS may be difficult to understand, especially to an unfamiliar listener.

People with Down Syndrome have some characteristic physical and facial features, and often experience some health and development challenges.

People with Down Syndrome generally need more support than most other people in order to achieve their potential. This will vary depending on the person's abilities- some will need very little support, while others may require a high level of support.

Ideas for communication and engagement

- Gain the person's attention before speaking to them.
- Allow time for the person to process what you are saying, and to respond.
- If a person uses a voice output device, make sure you allow enough time for them to formulate a message. Don't try and guess or speak over the top of them.
- Use visual supports where possible, such as coloured pictures, signs and gestures or the written word, to help support what you are saying.
- Presume competence –assume the person can communicate and understand you.
- Talk directly to the person, not to their parent or carer.
- Build rapport by getting to know the person, their specific likes and dislikes.
- Be honest – if you can't understand what the person is trying to communicate, say so! Try different ways of communicating – use pictures, draw, write, or ask them to show you what they mean.
- Use positive statements e.g. "walk inside", instead of "don't run".



Angelman Syndrome

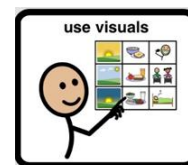
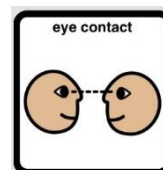
Angelman syndrome (AS) is a rare neuro-genetic disorder that occurs in one in 15,000 live births. It causes severe intellectual delay and developmental disability.

Characteristics of AS include:

- Severe developmental delay e.g. delays in sitting and walking, fine motor skills development and toilet training.
- Speech and language impairment - no or minimal use of spoken words, the receptive and non-verbal communication skills are usually higher than the expressive (verbal) ones.
- Movement or balance problems like jerky movements or lack of coordination when walking.
- Behavioural features – may include frequent smiling and laughter; apparent happy demeanor (although may not always be feeling happy).
- An easily excitable personality, often with hand flapping movements.
- May have short attention span or hyperactivity.

Ideas for communication and engagement

- Gain the person's attention before speaking to them.
- Allow time for the person to process what you are saying, and to respond.
- If a person uses a voice output device, make sure you allow enough time for them to formulate a message. Don't try and guess or speak over the top of them.
- Use visual supports where possible, such as coloured pictures, signs and gestures or the written word, to help support what you are saying.
- Presume competence – assume the person can communicate and understand you.
- Talk directly to the person, not to their parent or carer.
- Build rapport by getting to know the person, their specific likes and dislikes.
- Be honest – if you can't understand what the person is trying to communicate, say so! Try different ways of communicating – use pictures, draw, write, or ask them to show you what they mean.
- Use positive statements e.g. "walk inside", instead of "don't run".



Attention Deficit Hyperactivity Disorder (ADHD)

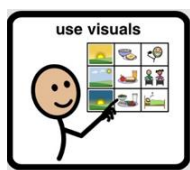
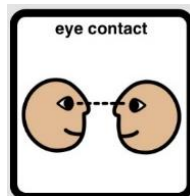
ADHD is a neurodevelopmental disorder that can cause significant emotional, social, and educational problems. ADHD begins at birth and in most cases persists to some degree throughout the lifespan.

The core features of ADHD include:

- Keeping attention on the task at hand and avoiding distraction.
- Getting started on tasks (procrastination).
- Maintaining mental effort to complete a task.
- Forgetting to do things.
- Losing or misplacing things.
- Being impulsive (acting without thinking things through).
- Difficulty planning and organising.
- Difficulty making good use of time (including being on time).
- Difficulty managing and regulating emotions.

Ideas for communication and engagement

- Gain the person's attention before speaking to them.
- Allow time for the person to process what you are saying, and to respond.
- If a person uses a voice output device, make sure you allow enough time for them to formulate a message. Don't try and guess or speak over the top of them.
- Use visual supports where possible, such as coloured pictures, signs and gestures or the written word, to help support what you are saying.
- Use visual schedules and rules to help the person organize themselves.
- Presume competence –assume the person can communicate and understand you.
- Talk directly to the person, not to their parent or carer.
- Build rapport by getting to know the person, their specific likes and dislikes.
- Be honest – if you can't understand what the person is trying to communicate, say so! Try different ways of communicating – use pictures, draw, write, or ask them to show you what they mean.
- Use positive statements e.g. "walk inside", instead of "don't run".



Oppositional Defiant Disorder (ODD)

Oppositional defiant disorder (ODD) is a childhood behaviour problem. A child with ODD won't do what people ask, and gets angry and aggressive when asked to do things. Oppositional children may refuse to comply as a way of expressing their frustration or anger, or a way of gaining control of their world.

A child with ODD may:

- Become easily angered, annoyed or irritated.
- Have frequent temper tantrums.
- Argue frequently with adults, particularly parents or carers.
- Refuse to obey rules.
- Seem to deliberately annoy or aggravate others.
- Have low self-esteem.
- Blame others for any accidents or bad behaviour.

Strategies for communicating with a person with ODD

- Give short, brief instructions, and offer limited choices e.g. would you like to play footy or cricket?
- Use praise to encourage positive behaviour, and try to avoid using negative consequences. Aim to give six positive comments for every negative comment or consequence. Look at using a structured reward system like a reward chart, points or pocket money for desired behaviour.
- Consider their point of view and try to avoid standoffs.
- Look for behavioural setting conditions and triggers. Setting conditions may make a behaviour more likely to occur, such as being hungry or tired. Triggers are specific events that occur immediately before a behaviour e.g. being told no, having a favourite item or activity taken away. Try and avoid the triggers where possible.
- Work collaboratively with the person's family and support team to have a consistent approach.

