

Helping Children to Improve their Communication Skills

Therapeutic Activities for Teachers, Parents
and Therapists

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Illustrations by Alice Harper



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Acknowledgements

During my years as a speech and language therapist I have collected many different games and activities from various sources. Some of them have been passed on to me by colleagues in teaching and therapy professions or by children in therapy groups; some came from books; many are adaptations of games I remember playing as a child; some are based on ideas presented on various professional training courses. So, once again, I would like to say a big thank you to everyone who has shared their favourite activities with me over the years and to all the children who have tried these out and who inspired so many of the adapted versions.

My thanks also to Alison Tempest, speech and language therapist and lecturer at De Montfort University, for her insights and encouragement and to Jane Serrurier, teacher and play therapist, for giving her time to numerous discussions about creativity and emotional well-being and for her guidance on adapting activities for different settings.

Note: The pronouns 'he' and 'she' have been used alternately throughout the book to refer to a child of either gender.

Part One

Theoretical and Practical Background

Introduction: Developing a Therapeutic Imagination

Communication is such a complex process that it is a wonder how any of us manage to develop the necessary abilities and skills required for successful social interaction. Even when such abilities and skills are in place, their effectiveness can so easily be disrupted by tiredness, illness, stress, or periods of heightened self-awareness and fluctuating self-esteem. This book offers a collection of ideas for games and activities to help *all* children develop their communication competence and thereby strengthen their social and emotional well-being and resilience. It is also a celebration of the skills and resilience that children develop in order to fulfil their communication potential. It is an acknowledgement of the power of language and the delight of words, of the wonderful instrument of communication that is our voice, the intricacies of muscle movement and coordination required for speech, the subtleties of facial expression and body movements involved in conveying complex messages to others. The ideas can be used in a variety of settings – for example, in the classroom or at home or as part of a general social skills group. However, for convenience and consistency, and because the needs of children with specific speech, language and communication difficulties are necessarily greater with regard to support, I have referred to ‘therapist’ and the therapeutic environment throughout Part One. Where a child has an identified communication disorder, the involvement of a speech and language therapist is recommended in order for appropriate assessment to take place and for the structuring of the activities in a way that is suitable for specific needs. The general principles referred to for supporting communication well-being and resilience are relevant for all of us, of course, whether we are parents who are concerned about our own children or practitioners working with children in teaching or therapeutic environments.

The impetus for the book arose from conversations with my colleagues (lecturers and therapists in practice) who are involved in training and supervising speech and language therapy students. We have all watched students engage with children in innovative and fun activities that are clearly effective in helping to

teach or reinforce appropriate use of skills. However, it is surprisingly easy for even the most innovative of ideas to lose some of their potential value because of the way in which they are delivered. Conversely, basic materials, often gathered from the immediate environment, which are used creatively, can be extremely effective. My colleagues and I joked about the possible title for this book: should it be 'Beyond the Beanbag' (which later became a chapter heading), or perhaps 'How to Survive without Minimal Pairs Cards'? But, of course, the point is that it is not the equipment that has potential to limit our therapeutic effectiveness, it is our own *therapeutic imagination* – the ability to 'imagine' what it might be like physically, emotionally and cognitively to be the child or adult with whom we are working; to use that ability to monitor and shape our interactions, and to think creatively and imaginatively about how we design and deliver our support.

Although therapy with children who have speech, language and communication needs (SLCN) is always child-centred and is increasingly based on working as part of integrated teams and within a collaborative framework, the need for evidence-based practice and recording of outcomes means that it can be a scary experience for students on placement to step beyond the safety of structured programmes of intervention and to utilise their creative talents. I would argue that it can often be equally as scary for the parents and carers who are encouraged to continue the therapy process at home, and is also often a challenge for more experienced therapists who find themselves devising programmes for others to carry out.

We also need to be aware that integrated working calls for therapy aims to be met in creative ways within curriculum activities. The themes and topics covered within the classroom should inform our therapy, as should the daily activities and interests of the child at home.

So, although this book offers a collection of ideas for supporting children who have SLCN, it is not a recipe book for therapy in the way that some old-fashioned cookery books gave very precise and detailed instructions and exact proportions of ingredients. Such books had the unfortunate potential to deskill completely those of us who, like me, were unsure of our own inventive abilities when it came to anything beyond a basic meal!

Instead, as with some of the more current cookery books which might refer to a 'slug' of olive oil, a 'dollop' of honey or a 'dribble' of vinegar, I would encourage you to view the concocting of sessions for each child and group of children as involving a large degree of creativity rather than being a precise science. Play is the natural medium of learning for children, and is the way in which they tend to express their feelings (Dwivedi 1993). I hope that the ideas presented here will encourage you to have the confidence to create and recreate each session

that you do and to have fun with therapy. Treat every session as unique and you will inject a dollop of therapeutic imagination that will undoubtedly engage and motivate the children with whom you work.

My aim throughout the book is to emphasise the importance of helping children to develop *communication well-being* (see Chapter 2). It is now recognised that there is a need to centre our understanding of children's speech, language and communication difficulties and needs on an understanding of the communication process as being pivotal to personal and social well-being, and that we should therefore give just as much or even more time to consideration of the wider impact of our work as we do to facilitating the learning of specific skills. The focus of Part One of this book is therefore firmly centred on methods of optimising the emotional environment for learning.

The activity ideas are based on a framework that distinguishes between three different layers of therapeutic effects, rather than one that highlights particular types of communication impairment or specific needs. I have not, for example, categorised any of the activities according to whether or not they would be useful for working with children with dyspraxia or voice or fluency difficulties, or children with autism and so on. This is because every child is unique in the pattern of his strengths and difficulties almost regardless of the type of communication impairment.

The framework that I propose below is intended as a way of emphasising the multilayered effect that participating in different therapy activities can have.

Foundation elements, core abilities and specific skills

There have been many studies indicating that speech and language therapy interventions have effects beyond the improvement of speech or language skills per se. For example, studies have indicated improvements in interpersonal relationships, play, use of coping strategies and reduction in parental stress (Robertson and Weismer 1999) and in self-confidence, enthusiasm for learning and a reduction in displays of frustration (Boyle *et al.* 2009)

When we help children to build communication skills, we are potentially having a profound effect on their long-term social, emotional, physical and cognitive well-being, perhaps more so than any research will ever be able to demonstrate. In other words, while helping children to develop and improve their speech and language abilities and skills, we are also inevitably helping them to 'become themselves'. This means that we can find ourselves working at more than one level simultaneously – for example, enhancing *core abilities* such as effective listening and observation in order to facilitate *specific skills* such as phoneme discrimination or recognition of facial expression; or teaching specific skills that have repercussions

for deeper *foundation elements*, such as helping a ten-year-old to finally master the production of certain phonemes that have previously been missing in his speech. As his confidence grows, he begins to join in more at school, starts to view himself as a successful communicator and is at last able to express his ideas without fear of ridicule. He begins to enjoy the communication process.

These three levels of effect are interrelated and interdependent, but each has a definite focus. Helping children to improve their speech, language and communication skills can therefore involve (and, I would argue, *should* involve) not only awareness of the interrelatedness of these levels but also a deliberate use of strategies which specifically target each one. Of course, there is also a developmental aspect to these levels, and the way in which I have distinguished the levels is not an exact science, but my suggestion is that mindful support for children of any age who have communication impairments will help to sow the seeds of future communication well-being.

Foundation elements

I have written elsewhere about the foundation elements for healthy self-esteem (see *Helping Children to Build Self-Esteem* (2nd edition) 2007, pp.24–5). I believe that we can view speech and language therapy activities as having an effect on these same seven elements, which, in turn, can be seen as further buffers against the stress of communication impairment. The seven foundation elements that I propose are listed below. The key features of these elements are based on cognitive processes, and involve *developing, knowing, recognising, believing, feeling and understanding*.

1. Self-knowledge

This is about finding out who 'I' am and where I fit into the social world around me. It involves:

- Understanding differences and commonalities – for example, how I am different from others in looks and character, or how I can have an interest in common with others.
- Knowing that I can sometimes behave in different ways according to the situation that I'm in and that I have many aspects to my personality.
- Developing and maintaining my personal values.
- Developing a sense of my personal history – my own 'story'.

2. Self and others

This involves:

- Understanding the joys and challenges of relationships: learning to trust and to cooperate with others; being able to see things from other people's perspective (empathy) and developing an understanding of how they might see me; learning respect and tolerance for other people's views.
- Developing and maintaining my own identity as a separate person while still recognising the natural interdependence of relationships and developing a sense of my family/cultural 'story'.
- Developing emotional intelligence – understanding my emotions and being aware of the ways in which I express them; developing a degree of emotional resilience; knowing that I can choose how to express my emotions rather than deny or repress them or act in an inappropriate way; recognising other people's emotions; distinguishing my feelings from those of others.

3. Self-acceptance

This involves:

- Knowing my own strengths, recognising what can't be changed and recognising areas that I find difficult and may want to work on. This includes accepting that it is natural to make mistakes and that this is sometimes how we learn best.
- Feeling OK about my physical body.

4. Self-reliance

This involves:

- Knowing how to take care of myself, both physically and emotionally.
- Building a measure of independence and self-motivation; believing that I have mastery over my life and can meet challenges as and when they arise.
- Reducing my reliance on other people's opinions and evaluations.

5. Self-expression

This involves:

- Understanding that my interactions reflect my beliefs about myself and about others.