

FACTFILE: GCSE HOME ECONOMICS: Child Development



Barriers to Communication

Learning Outcomes

Students should be able to:

- Identify barriers to communication.

Things you should know

Deafness – Some children are born with hearing impairment. Meningitis and other infections can also lead to permanent deafness.

More often, children are likely to suffer from temporary bouts of hearing loss as the result of a middle ear infection, commonly known as **glue ear**. Glue ear occurs when there is a buildup of fluid in the middle ear affecting children's ability to hear things clearly. According to the National Health Service in the UK, 1 in 5 children around the age of 2 will be affected by glue ear at any time and 8 in 10 children will have had glue ear at least once by the age of 10.

It is important to identify any hearing impairment early as it can affect children's ability to learn language, engage in conversation and make friends.

Common signs that a child may be having problems hearing:

- Delayed speech;
- Struggling to keep up with conversations;
- Becoming angry or frustrated because they're trying harder to hear;
- Turning up the volume on the television;
- Lack of concentration;
- Tiredness;
- Preferring to play alone;

- Difficulties with reading and learning;
 - Mishearing or mispronouncing words;
- (list compiled from www.nhs.uk and www.ndcs.org.uk).

Visual Impairment – This is a loss or partial loss of sight which cannot be corrected to the normal level. In children this would affect their ability to make eye contact and to respond to the non-verbal cues of others such as body language and facial expression. Learning to read and to write will have to take a different form for children with sight loss. (According to the Centre for Disease Control and Prevention (CDC)).

More common problems associated with vision development in young children:

A lazy eye, according to the National Health Service (www.nhs.uk) is a childhood condition where the vision in one eye doesn't develop properly. The child then begins to rely heavily on the 'good eye'.

The NHS recommends that children have an eye test between the ages of 3 and 4 as it is difficult to treat lazy eye after this. It is usually treated by the child wearing glasses. The glasses correct the vision of the poor eye and a patch worn over the good eye (or eye drops in the good eye to blur vision) will strengthen the poor eye.

Speech disorder

Apart from cleft lip or palate (birth defects which can be corrected with surgery), other forms of speech impairment will not become clear until a child begins to speak. The main forms of childhood speech impairment are:

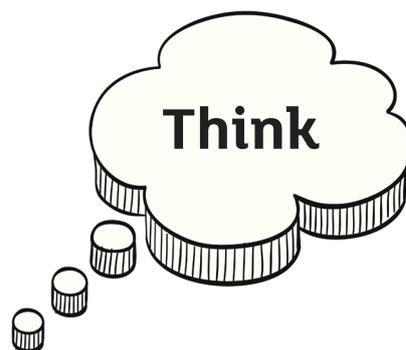
Stammering or stuttering – This usually occurs as children are learning to speak and according to the NHS the cause is still unclear. It is thought to be concerned with the wiring of that part of the brain dealing with speech and because the wiring of young children’s brains is still flexible and developing, they can grow out of a stammer. There is also thought to be a possible inherited from parents’ genetic connection.

Selective mutism – This is when a child is unable to speak in certain situations. It is usually the result of an anxiety or phobia of speaking in large groups, such as in nursery lessons. The child can speak freely to family members at home or to small groups of friends in the playground. “The expectation to talk to certain people triggers a freeze response with feelings of panic, rather like a bad case of stage fright, and talking is impossible.” www.nhs.uk

Communication skill level of parents, carers or family members

The chattiness of a child will depend a lot on their home experiences of speaking. If they have a chatty home where everyone takes time to talk they will be practicing their conversational skills. On the other hand, a child from a house where everyone is busy and rarely sit down to talk together will have less opportunity to practise language skills.

“The amount of rich conversation babies have with their carers is not related to class or wealth, but rather to the chattiness of the household. Anyone can give their baby a love of language if they just take the time to talk.” T. Livingstone, 2005 p149.



Thought shower the attributes of what you would consider a ‘chatty house’.

Discuss



Share your own experiences of any of the barriers to communication mentioned.

Activity



Do you agree with Tessa Livingstone’s statement above?

Outline why / why not?

Reference Materials

T, Livingstone; **Child of Our Time**. How to achieve the best for your child from conception to 5 years, London Bantam Press 2005 p149

<http://www.foundationyears.org.uk/>

www.ndcs.org.uk

www.nhs.uk

