



## 3 Part three: Strengthening your listening mindset

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Enabling decision-making by children and young people with speech, language and communication needs  
– a four part practice guide

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## About this practice guide

This is the third part of a four-part practice guide that offers guidance, tips and practice pointers for anyone seeking to actively involve a child or young person with speech, language and communication needs (SLCN) in making decisions about their lives.

The four parts are:

- > **Part one: Understanding the experiences of children with speech, language and communication needs**
- > **Part two: Why inclusive communication is everyone's responsibility**
- > **Part three: Strengthening your listening mindset**
- > **Part four: Working creatively with individual children**

The guide's primary focus is on helping practitioners to make sure that the voices of children and young people with SLCN are heard within assessment and review processes. It will therefore be of particular interest to social workers, independent reviewing officers, early help practitioners, SENCOs (special educational needs coordinators), special educational needs (SEN) caseworkers and children's advocates.

Part three provides guidance for practitioners on how to strengthen their listening mindset, including by exploring their own values and beliefs, adopting the social model of disability and using models of participation – in particular, Lundy's (2007) SPACE-VOICE-AUDIENCE-INFLUENCE model. These will be helpful in undertaking inclusive assessments and reviews with children and young people with SLCN. They can be applied by practitioners working in all settings.

## How to use this guide

We strongly recommend that you read all four parts of this practice guide in sequence. This will enable you to reflect on your own views and experiences and to think about the contextual landscape for children with SLCN before moving on to consider the range of ideas and tools for creative communication that are described in Part four. The guide includes reflective questions and exercises throughout.

The guide can support individual continuous professional development (CPD) and structured CPD within teams and organisations – for example, by asking practitioners to read each part and then participate in a reflective discussion session. Social workers can also write up their reflections to help provide evidence for Social Work England's **Professional Standard 4: Maintaining my CPD**.

### Note on terminology

Throughout the practice guide, we refer sometimes to 'children' and sometimes to 'children and young people'. No distinction is intended. Unless otherwise specified, all references to 'children' with SLCN include children and young people also. To maintain readability and conciseness, we don't use the full phrase 'children and young people' in every instance.

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## Part three: Strengthening your listening mindset

### Key points

- > Children with speech, language and communication needs (SLCN) are at heightened risk of being excluded from decision-making, despite their equal right to be involved.
- > Practitioners' lack of confidence in communicating with children with SLCN, and a tendency to underestimate children's ability to communicate, are important barriers to children's participation.
- > Children who aren't used to being given choices are likely to lack confidence at first. This should be understood as a symptom of their disempowerment rather than a reflection of their ability to participate.
- > As practitioners, our own attitudes and beliefs will play a significant part in determining the extent to which our day-to-day practice enables and empowers children with SLCN to participate in making decisions.
- > When practitioners and organisations adopt a relational approach to communication that is informed by the social model of disability, this helps to keep children's abilities and preferred communication methods visible within decision-making processes.
- > Lundy's SPACE-VOICE-AUDIENCE-INFLUENCE model of participation offers a valuable framework for helping practitioners ensure that the views of children with SLCN are listened to within their organisation. In particular, Lundy's model seeks to guard against 'tokenistic' participation.

### Our attitudes and beliefs matter

No practitioner sets out not to involve a child in their own assessment, nor to communicate poorly. Yet research evidence shows that children with SLCN are at heightened risk of non-participation (Franklin & Sloper, 2009; McNeilly et al., 2015; Mitchell & Sloper, 2011). In the face of multiple system pressures, the risk is that corners are sometimes cut (Taylor et al., 2016).

The evidence also suggests that some of the barriers children and young people with SLCN face in communicating with practitioners relate to workers' underlying assumptions or beliefs. For example, practitioners may:

- > fail to recognise the child's ability to communicate
- > be tempted to prioritise communication with the parent or carer
- > lack confidence in their own skills at communicating with children with SLCN (McNeilly et al., 2015; Prynallt-Jones et al., 2018; Taylor et al., 2014).

It's important to remember also that children who aren't used to being given choices or participating in decision-making are likely to lack confidence and skills at first (Raghavendra et al., 2012). Practitioners need to recognise this as likely a symptom of children's disempowerment and inexperience rather than a reflection of their abilities to communicate (Franklin, 2013).

Overcoming these barriers to children with SLCN participating in decision-making requires practitioners to reflect on and challenge common attitudes and assumptions around communication. These include an, often unconscious, belief that speech is the best or only way to communicate.

## A social model approach can help

The social model of disability can strengthen practitioners' commitment to ensuring that children with SLCN realise their equal right to have their views given due weight in decision-making (see 'Duties to involve children and young people in decision-making' on page 6 of Part two of this practice guide). This is because the social model of disability (see Box below) requires practitioners to move away from 'medicalised' models that conceptualise disability as a 'deficit'.

Instead, the social model encourages us to adopt an inclusive approach to communication by focusing on what disabled children and young people can do, rather than on the limitations imposed on them by society.

### The social model of disability

The social model of disability recognises that any impairments that children or young people have do not have to be disabling if those around them recognise and understand their needs and work to remove the barriers to their participation. Exclusion, discrimination and oppression are not inevitable, but are a consequence of the way society is run and organised.

In other words, people with impairments are 'disabled' by the social barriers that exclude and discriminate against them.

(Broach & Clements, 2020, pp. 5-7; Dickins, 2011, p. 2; Inclusion London, 2015; The Communication Trust, 2011, p.5)

Creative communication methods and practice pointers towards an inclusive approach to communication are explored in part four of this practice guide. However, an essential first step is for practitioners to reflect on their own assumptions, beliefs and values. This is because it is our own attitudes that largely determine the extent to which our practice enables and empowers children and young people with SLCN to participate meaningfully in decisions that are being taken about them and their lives.

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## Reflective exercise: Exploring your own values and beliefs

**STOP** Spend a few minutes reflecting on your own values, assumptions and beliefs around involving children and young people with SLCN in decision-making, using these questions as a guide.

- > How would you characterise the value of involving children and young people with SLCN in their assessments and reviews? What insights or new knowledge might they bring to the decision-making process?
- > Looking back, might you ever have thought of children and young people with SLCN through a 'deficit' lens, focusing on what they can't do rather than what they can? Is there anything you would do differently now – in particular, in relation to the social model of disability?
- > How do you feel about the transference of power that comes with allowing children and young people to determine how they want to communicate and engage?
- > How comfortable are you about being creative in how you approach communicating with and listening to children with SLCN? Is there anything you could do to improve your confidence in this area?

**THINK** of a child with SLCN that you know or are working with. Then answer the following questions:

- > What extra efforts have you made to include the experiences, views and beliefs of this child in your assessment or during their review meetings?
- > How are you ensuring you find space to consider this child's abilities as well as their disabilities?
- > What new and creative ways have you considered and/or tried using to help you meaningfully involve this child in decision-making?

**STOP** and **THINK**

- > As you answered these questions, did anything surprise you?
- > What new insights did you gain?
- > Identify up to three areas of practice where you now feel challenged to adapt your approach to involving children with SLCN.
- > Make a note of any ideas you have for addressing the challenges you have identified going forward.



## What does a listening culture look like? Some principles for good practice

Being willing to adapt our values and beliefs in response to a social model approach to communicating with children with SCLN is foundational to developing a listening culture that is inclusive of all children. Research also consistently tells us that:

- > Practitioners' communication skills and overall 'relational styles' matter (Ferguson, 2016, p. 289).
- > Developing effective communication skills that improve everyday interactions with children is an important component of professional education and practice (Lefevre, 2018; Ruch et al., 2017).
- > All children value trusting relationships with practitioners who are reliable and consistent and who keep the child 'visible' and at the centre of their practice at all times (Ferguson, 2016, 2017; Winter et al., 2017).

For children with SCLN, making sure that the child's preferred method of communication is also kept 'visible' within assessment and decision-making processes is arguably just as important. Explicitly valuing diverse forms of communication is integral to an inclusive listening culture, especially for children who rely on forms of augmentative and alternative communication (AAC).

Together, these findings enable us to develop a set of principles for good practice (see Box below).

### Principles for good practice

- > **Adopt the social model of disability:** Be willing to reflect on your own values and beliefs and adapt your practice in ways that contribute to the development of a listening culture that is inclusive of all children.
- > **Keep the child 'visible' and at the centre of practice:** Prioritise reliability and consistency in your working relationships with children, recognising that this is essential to gaining their trust.
- > **Recognise and explicitly value diverse forms of communication:** Keep the child's preferred method of communication 'visible' within assessment and decision-making processes.
- > **Focus on developing the skills and 'relational styles'** that foster effective communication and help to improve everyday interactions with children with SCLN.
- > **Take a holistic, inclusive approach to communication:** Make sure all children with SCLN have access to 'reasonable adjustments' (under the *Equality Act 2010* – see Part two of this practice guide), particularly those who rely on forms of AAC. This includes involving specialists with specific communication skills and those who know the child well.

(Ferguson, 2016, 2017; Lefevre, 2018; Ruch et al., 2017; Winter et al., 2017)

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## Can models of participation help?

Article 12 of the UN Convention on the Rights of the Child (UNCRC) states that children's views should be given 'due weight' in accordance with their age and maturity (United Nations, 1989). This requirement is also reflected in UK law and policy, including *Children Act 1989* and *Working Together* (HM Government, 2023) (see 'Duties to involve children and young people in decision-making' in Part two of this practice guide).

Article 12's emphasis on giving children's views 'due weight' in decision-making underlines the importance of adult decision-makers' obligations to involve children in that process. But it also acknowledges that the extent to which children's views are allowed to influence decision-making will vary according to their ability to understand the complexities and potential risks involved.

Various models of participation have been devised to try to help practitioners balance children's rights to participate in decision-making against the need to safeguard and promote their welfare. Almost all, including Hart's Ladder of Participation (Hart & UNICEF, 1997) and Shier's (2001) Pathway to Participation, view children receiving accessible information and being given opportunities to express their views and have them taken into account as a minimum starting point for their meaningful participation (Sinclair, 2004).

Most models also view children sharing power and responsibility for decision-making with adults as 'ideal', while acknowledging that this isn't always possible (Kirby et al., 2003). However, a key limitation is that these models are often difficult for practitioners to operationalise in their day-to-day practice (Sinclair, 2004). A further limitation is that the tendency to view children's participation as something that progressively increases devalues the views and contribution of children who may be less able to understand and articulate their views (Kirby et al., 2003). These limitations present particular challenges for practitioners in applying these models when seeking to ensure the participation of children with SLCN in decision-making (Franklin, 2013).

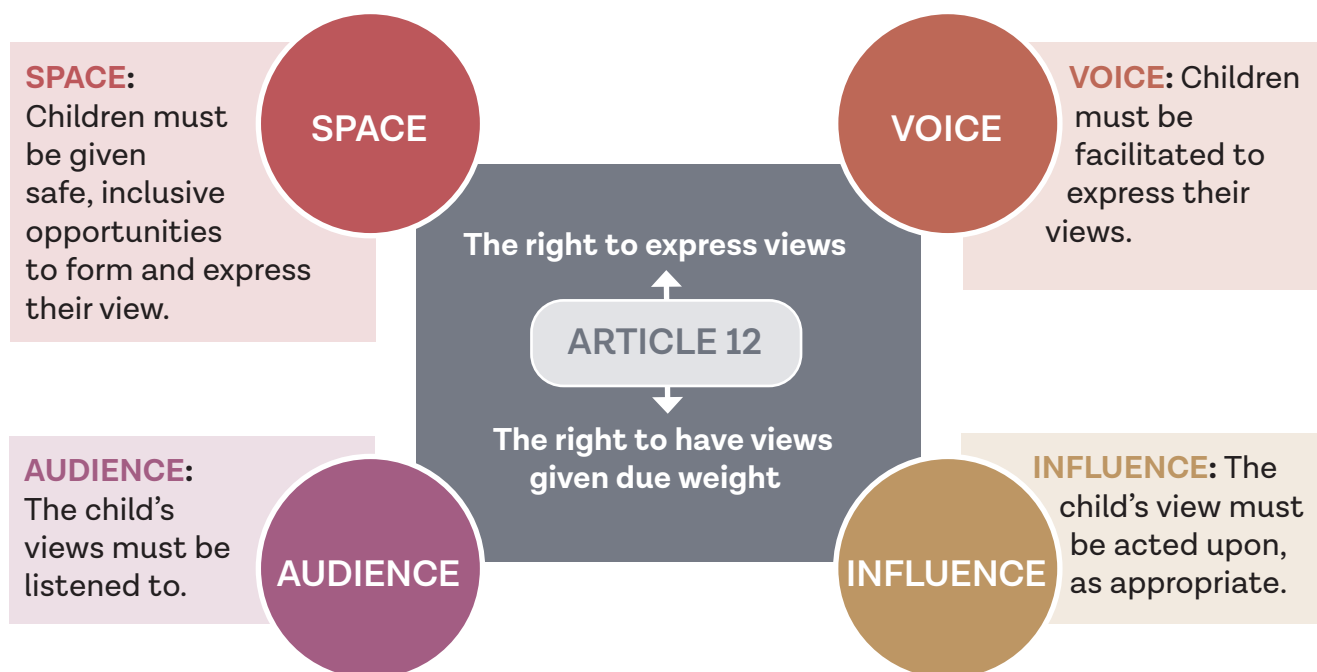
## Beyond tokenism: Lundy's model of child participation

Lundy (2007) has developed a model of participation that seeks to overcome many of these limitations by conceptualising Article 12 of the UNCRC in more practical terms. This is aimed at protecting against 'tokenistic' participation (Lundy, 2007, p. 938) and to take account of children's diverse communication preferences and needs.

Lundy's model focuses on four crucial, interrelated elements of Article 12 and sets out decision-makers' obligations, as shown in Figure 1.



Figure 1: Lundy's model of participation as included in Ireland's National Strategy on Children and Young People's Participation in Decision-making 2015-2020



Lundy's model is an important and valuable tool for practitioners because it offers practical solutions that can help them facilitate children and young people's meaningful participation in decision-making (McCafferty, 2017).

To help organisations embed a listening culture throughout their children and young people's services, Lundy, in consultation with a sub-group of key stakeholders, developed a voice model checklist for participation (Department of Children and Youth Affairs (Ireland), 2015, p. 22) as shown in Figure 2.

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Figure 2: Lundy's voice model checklist of participation as included in Ireland's National Strategy on Children and Young People's Participation in Decision-making 2015-2020



Lundy's (2007) model and checklist have been designed to apply to ALL children. Together, they provide practitioners with a framework for reflecting on which elements of an inclusive listening culture are evident within the organisations they work for. For example, under Voice, the checklist asks if children have been given 'a range of options as to how they might choose to express themselves'.

Some additional considerations are provided in the next reflective exercise to help take account of children's diverse communication preferences and needs and the additional barriers they may face to taking part in decision-making. You can use these alongside Lundy's model and checklist to evaluate how the views of children with SLCN are listened to and acted on within your organisation.



### Reflective exercise: Is there a listening culture in your service?

In completing this exercise, keep in mind Lundy's model and checklist of participation. Keep in mind also the principles for good practice highlighted earlier, in particular:

- > The need to keep the child visible and at the centre of decision-making at all times.
- > The need to keep the child's abilities and preferred communication method visible.

The questions below will help you think about how you might need to adapt Lundy's model of participation (SPACE-VOICE-AUDIENCE-INFLUENCE) to ensure that children with SLCN are listened to within your organisation.

#### SPACE

- > What information and choice are children given over who they meet, when and where to express their views? These choices are particularly crucial for easing social anxiety among children with autism.
- > What consideration do you give to the fact that they are 'stepping into the child's world' – especially when children communicate non-verbally or may have difficulty understanding your role?

#### VOICE

- > How does your service demonstrate its commitment to all forms of communication? How much emphasis is placed on what children may be communicating through their behaviour, as well as what they say?
- > Are all children's preferred methods of communication recorded on their plan or record – in particular, ways of communicating that are personal to the child?
- > How are children with SLCN supported (via accessible means) to understand who you are, why you are there and the process they are taking part in, and who their views will be shared with?

#### AUDIENCE

- > How do you ensure that every child with SLCN has access to a mechanism to express their views to those with the power to effect change?
- > Do children have access to advocacy if needed, including non-instructed advocacy?

#### INFLUENCE

- > Regardless of how they express themselves, is equal value placed on each child's views and their right to influence decision-making at some level within assessments and reviews? How is this facilitated?
- > What steps are taken to address the imbalance of power in the situation? Are children able to influence how the interaction takes place – for example, where they sit or you sit, or who else is in the room? Or if the meeting is taking place virtually, how are the child's preferred communication methods accommodated?

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