

PRIORITIES FOR A CHILD WITH CHARGE

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What is most important?

1. Oxygen and food.
2. COMMUNICATION AND BONDING.
3. Everything else.

COMMENTS

by Sandra L. H. Davenport, M.D.

While medical issues occupy the energies and thoughts of the parents (and the child, but usually to a lesser extent) during the first two years of life, communication and bonding are, in fact, the keys to helping the child become a happy and independent adult. Therefore, the "cares" (medical procedures like suctioning) need to become *routine* and incidental to the learning process. The flow of conversation and learning should be interrupted as little as possible. If nurses or personal care attendants are present during the home schooling hours or are at school with the child, they should get clear instructions from the physician about how much intervention is absolutely critical.

Too often I see sudden interruptions of the teaching process for suctioning or other procedures that happen without warning to either the child or the teaching staff. Since medical personnel are an integral part of the child's life, they need to learn not only how to communicate with the child that something is going to happen, but also to help enhance the communication process. *In effect, they should become teachers, too.*

My bias is that parents, teachers, medical staff, and others need to work on
communication, communication, communication.

When they are done with that, the next step is to work on
communication, communication, communication.

After that, they need to work on
communication, communication, communication.

Without a formal system of communication, the child will have a hard time making you understand what he or she wants and you will have a hard time getting across what you want. *For a DeafBlind person, access to communication is a lifelong issue.* The earlier good communication starts and the more people that develop good communication with the child, the happier and more successful child (and parents, etc.) will be.