

3 – 6 years. Supporting a child with a disfigurement: a teacher's guide

Guide 8. Self-expression

From a very early age, infants start to produce a range of facial expressions. The infant's capacity to engage with and respond to facial expression and voice tone and pitch precedes the development of speech and language.

Children who can recognise facial expression accurately in others will more readily learn to recognise their own and others' feelings and respond appropriately.

1 FACIAL EXPRESSION AND FACIAL DISFIGUREMENT

A child with a disfigurement may experience difficulties in developing skills of expression if any of the following apply:

- She lacked face-to-face experiences in infancy.
- She habitually avoids others' gaze – looking down or keeping her face averted.
- Her face cannot readily make the subtle movements involved in facial expression, because of unusual bone structure, paralysis, or lack of flexibility of the skin.
- She has been encouraged to 'be brave' during painful medical procedures such as changing dressings on burns – lack of expression may have been rewarded.
- Other people may simply not pay enough attention to what she is communicating non-verbally. Others may over-focus on the disfigurement and fail to see the child more fully. Or if they have been told not to stare, they may avoid looking at her.

2 OBSERVING INTERACTIONS

Your work with the child places you in a good position to make careful observations of her in different situations. Watch for facial expression, gesture, body language and use of voice. Useful situations to observe include –

- listening to stories, watching films or TV programmes designed for children
- singing, especially songs with actions
- undertaking a task that requires concentration
- joining in an activity that requires taking turns or co-operation with others
- playing, role-play,

Does the child show expressions of pleasure, enthusiasm, excitement, reluctance, frustration, impatience, irritation, anger, happiness, delight, sadness, hurt, fear, anxiety? Are her feelings conveyed to other children or to adults?

From your observations, see above, you will have a fair idea whether the child you are working with needs extra help and practice to develop her ability to communicate through facial expressions, gesture, body-language and voice tone.

3 HELPING A CHILD TO COMMUNICATE MORE EFFECTIVELY

All children benefit from

- having feelings named and acknowledged
- learning to distinguish between different feelings – upset, hungry, hurt
- seeing feelings expressed and managed appropriately.

A child with a facial disfigurement will often benefit particularly from extra work on this.

Identifying and naming feelings

Pay close attention to the child who has an unusual appearance so that you are aware of what is going on for her and how she may be feeling about it. Talk to her about this:

“Rachel, you look a bit annoyed. Is there something that has annoyed you?”

Be prepared to reflect back to the child her own expression, emphasising facial expression, gesture and voice tone, to acknowledge what she is trying to communicate.

Practising self-expression

A range of ordinary activities can be used to explore and practice all kinds of facial expressions, gestures, body language and voice tone. All young children can benefit from (and enjoy!) opportunities to notice and interpret other people’s expressive communications and to try out different expressions of their own. These activities will enable you to help a child with a disfigurement to increase their range of expression and to monitor their progress. You can also identify whether there is a need for further one-to-one work.

When planning activities for your class, it can be helpful to have identified the words and phrases you will use to describe all the variations in expression, gesture, body language and voice tone which you expect to work with in the activity.

Activity 1

Look at cartoon films with the children. Try running a short sequence of film without any sound. Pinocchio works well – there are fewer facial expressions to give clues and so concentration on gesture is easier.

Ask the children to work out what is happening by watching the actions of the characters. Be prepared to model some observations.

“He is waving his arms so they will see him.”

“Do you think that they have seen him? How do you know?”

Activity 2

Use poems and rhymes and repeat the verses in different tones of voice and with different gestures. The scarecrow song is an example.

*When all the birds were sleeping.....said softly, keeping very still
Up jumped a scarecrow.....said much more loudly, waving arms*

Activity 3

Drama, movement and games activities can all be used to enable children to experience and respond to ways of communicating through movement.

Use activities that employ different scales of expression.

- Use hands only to gesture – beckoning, directing, agreeing, warning
- Make big gestures using head/eyes and hands – beckoning, directing, agreeing, warning
- Try out different 'body language' using the whole body – wide stance with head held high, feet turned in with head drooping
- Walk slowly over a crash mat and then run over the same mat. Going slowly, you can feel your feet sink in, going fast you feel yourself bounce.

If the children take turns some will be able to watch while the others move and gesture. Invite the children to repeat the actions at different strengths so that they can feel from the inside and see from the outside how size and emphasis can change the outcome.

Activity 4

Most young children enjoy role-plays or pretend games. Give the children different costumes and props to choose from. You can then suggest all sorts of scenes and short stories which the children can create in play. Shops, family life, and hospitals are often popular scenarios, and can provide opportunities to set things in train for a wide range of social interactions and associated feelings to emerge.

Ask for comments on what the characters might be feeling and thinking.

'Here is the shopkeeper. He looks puzzled.'

'Here is the mum. She looks happy'

Through close observation and one-to-one work with a child who has a condition, injury or illness that affects the way she looks, you will be able to assess her progress in both knowing and showing what she is feeling, and in noticing and understanding how others may be feeling. If appropriate, you should discuss your observations and concerns with a specialist e.g. speech and language therapist, audiologist, child psychologist.