

FIG 4-2 Nurse assumes position at child's level.

- Speak in a quiet, unhurried, and confident voice.
- Speak clearly, be specific, and use simple words and short sentences.
- State directions and suggestions positively.
- Offer a choice only when one exists.
- Be honest with children.
- Allow children to express their concerns and fears.
- Use a variety of communication techniques.

Communication Related to Development of Thought Processes

The normal development of language and thought offers a frame of reference for communicating with children. Thought processes progress from sensorimotor to perceptual to concrete and finally to abstract, formal operations. An understanding of the typical characteristics of these stages provides the nurse with a framework to facilitate social communication.

Infancy

Because they are unable to use words, infants primarily use and understand nonverbal communication. Infants communicate their needs and feelings through nonverbal behaviors and vocalizations that can be interpreted by someone who is around them for a sufficient time. Infants smile and coo when content and cry when distressed. Crying is provoked by unpleasant stimuli from inside or outside, such as hunger, pain, body restraint, or loneliness. Adults interpret this to mean that an infant needs something and consequently try to alleviate the discomfort by meeting their physical needs, speaking softly, and communicating through touch.

Infants respond to adults' nonverbal behaviors. They become quiet when they are cuddled, rocked, or receive other forms of