

Resources

International Society for Augmentative and Alternative Communication - https://www.isaac-online.org/english/home/

QIAT - https://qiat.org/

ATAC of DRNJ (Disability Rights of New Jersey) - http://www.drnj.org/atac/

Every Move Counts - http://www.everymovecounts.net/

Aided Language Stimulation Explained - https://www.youtube.com/watch?v=flFNMky22-U&ab_channel=lcpsat

Facebook Groups: Ask me I'm an AAC User, AAC Motivate Model Move out of the Way

Parent blogs:

We Speak Podd - https://www.youtube.com/watch?v=flFNMky22-U

Uncommon Sense - http://niederfamily.blogspot.com/

Star in her Eye - https://starinhereye.wordpress.com/

AAC should be considered for all individuals whose speech does not meet communication needs across settings. Discuss obtaining a complete AAC Evaluation with your SLP, school district, support coordinator, rehab facility, or go to NJSHA.org to locate a provider.

New Jersey Speech-Language-Hearing Association 174 Nassau Street, Suite 337 Princeton, NJ 08542

888-906-5742 • fax 888-729-3489

info@njsha.org • www.njsha.org



What Is AAC And When Is It Appropriate?



AAC stands for Augmentative and Alternative Communication



It is a means of communication other than speech for someone who is unable to meet their communication needs by speech alone. We all use AAC at times, but for some this is a primary means of communication.

Communication can be Unaided or Aided

- Unaided communication modalities- do not require any tools other than the individual's own body.
 - Examples: sign language, affect, gestures, body language, vocalizations
- Aided communication modalities- require use of external tools.
 - Examples: paper communication boards, devices using recorded speech, computer software, tablet-based system

Access refers to how an individual physically operates the system

- There are many different forms of access that can be offered depending on a person's needs.
- A person can use their fingers, hands or other body parts to access a system
- Always consider all possible access methods.

00

org

AAC Evaluations:

Consider an AAC evaluation when a child, adolescent or adult has no speech, limited speech or unintelligible speech.

- Conducted by a speech-language pathologist (SLP) with experience using a variety of AAC systems.
- The evaluator may seek input from the individual's team: treating SLP, teacher, occupational therapist (OT), physical therapist (PT), family members and other caregivers.
- Most reliable access method may be determined in consultation with an OT with expertise in assistive technology/alternative access.
- Access to vocabulary should not be limited by movement or vision abilities; consider alternative access or system features which compensate for challenges.
- Determine appropriate funding source for the potential communication system (school district, medical insurance, Division of Developmental Disabilities, other).
- Use feature matching/comparison to determine elements needed for the user, frequent communication partners and what devices have those features.
- Evaluations should include consideration/trials of a variety of communication systems or applications as recommended by the evaluator.
- The user does not need to show mastery while trialing the system, just the potential to learn.

How to Achieve Success with AAC:

- Early exposure to AAC is key.
- Consistent and regular access to the AAC System across communication environments.
- Initial training and ongoing coaching for all communication partners.
 Caregiver buy-in and participation is essential.
- Systems should be robust including nouns, verbs and adjectives.
 This allows the user to communicate about a variety of topics in
 many different settings. It provides the opportunity for ongoing
 development of language. A system that includes topic specific/
 personal vocabulary and phrases will increase speech and
 effectiveness of communication.
- Communication partners provide aided language stimulation/aided language input by using the individual's system to teach how to use AAC for successful communication. A response is not required. This should be provided by all communication partners thus training/ coaching using this modeling method should be a primary goal of therapy.
- AAC systems should never be used to test the communicator on location of vocabulary (i.e., "find ____", "show me ____") they should be used to promote language use and social communication.
- Create opportunities to use the system. Ask open ended questions and provide sufficient wait time.
- Use the AAC system in different situations, environments and with different people to generalize communication skills and promote independence.

Common Myths

Myth: AAC is a last resort.

Fact: AAC is a tool that can be implemented while verbal speech is developing, improving or deteriorating. Any individual whose communication needs are not currently met by speech is a candidate for AAC.

Myth: It's too early/It's too late.

Fact: It is never too early or too late to provide access to language and improve communication. The earlier the better but age should never be a barrier to considering AAC.

Myth: AAC will inhibit development of speech.

Fact: Research has proven that AAC will not inhibit the development of verbal speech. It often increases with AAC use.

Myth: There are skills necessary before introducing AAC.

Fact: It is widely accepted that there are no prerequisite skills and that everyone should have access to an appropriate communication system. Skills can be worked on in the context of language rich activities using robust AAC.





Myth: Start with limited vocabulary.

Fact: Adults speaking with infants do not limit the vocabulary that they use. Similarly, when working with AAC, aided language input should be provided with a wide range of messages. It is unknown what the AAC user desires to communicate. Limiting vocabulary can restrict the formulation and expression of potential messages.

Myth: High tech AAC is too much screen time.

Fact: Touch screen AAC is not recreation. It is an essential communication tool.

Myth: The person will become dependent on

7 the AAC device and it will become a crutch.
Fact: AAC is a tool that improves communication interactions. AAC may be beneficial for clarifying speech, developing language and literacy skills, and rehabilitating lost language in the case of an acquired

disability.

Myth: AAC will replace verbal speech.

Fact: Research shows that people communicate in the most effective communication method. If speech is faster and easier than other communication methods, the person will use speech for communication.