

# Augmentative and Alternative Communication (AAC)

Winnebago Mental Health - May 17, 2019

Jennifer Schubring M.S., CCC-SLP  
Mike Hippie, AAC Advocate and Expert

# HELLO!

**My name is Mike Hippie.** I live in Appleton, Wisconsin. I'm on the council of special education and I am the membership director of USSAAC (United States Society for Augmentative and Alternative Communication). I have been using a communication device for eighteen years. I love the AAC community, because it is for everyone. I started learning about AAC ten years ago and I will keep learning about it because it will always be changing. When I'm not learning, teaching, or working with families, you will find me watching baseball or sports or Law and Order SVU, classic Law and Order.

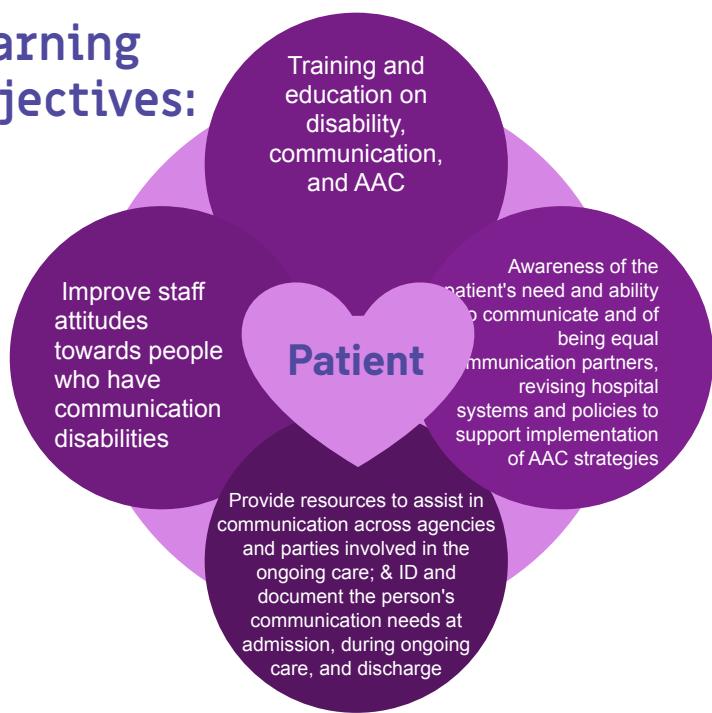


# HELLO!

**My name is Jennifer Schubring.** I am from the Green Bay Area. I am a Speech/Language Pathologist with an expertise in AAC. I began learning about AAC 18 years ago. I attended UW-Madison and Penn State. I have worked in many settings including: Birth-to-Three, Hospital, Home Health, Outpatient Clinic, and for the past 12 years I've worked in the public schools. One year ago I opened my private practice, Building AAC, to help build better communication for individuals with complex communication needs in the State of Wisconsin. I've presented at national conferences, and throughout the state of Wisconsin to help build knowledge about AAC best practices. My hobbies include baking and running.



## Learning Objectives:



## Recommendations for Patient-Provider Communication

Source: Bronwyn Hemsley & Susan Balandin (2014) A Metasynthesis of Patient-Provider Communication in Hospital for Patients with Severe Communication Disabilities: Informing New Translational Research, Augmentative and Alternative Communication, 30:4, 329-343, DOI: 10.3109/07434618.2014.955614

# Winnebago Mental Health

I need more training in:

How can I help shift colleagues beliefs about working with patients with complex communication needs?

What can I do to make sure a patient has their AAC system and how can I use it with them?

Patient

Who can I connect with to get more information about a patient's communication system? Who do I need to pass the baton to after they leave my care?

Things to remember:



## Augmentative & Alternative Communication (AAC)

- ▷ An area of clinical practice
- ▷ Addresses the needs of individuals with significant and complex communication disorders
  - Can be related to: CP, Down Syndrome, Autism, Intellectual Disability, Stroke, Genetic syndromes, Head Injury, etc.

Sources: <https://www.asha.org/NJC/AAC/>  
<https://www.asha.org/Practice-Portal/Professional-Issues/Augmentative-and-Alternative-Communication/>

# SLP Poll

What is your level of experience with AAC? Choose the description that most closely describes your experience working with individuals with complex communication needs and AAC.

186

I have a lot of knowledge and experience treating students with complex communication needs using a wide variety of AAC tools.

8 %

I have some knowledge about AAC and am comfortable treating students with complex communication needs. I have a few tools in my AAC toolbox that I am most comfortable using.

43 %

I have a little knowledge about AAC. I am unsure of myself when working with students with complex communication needs. I know of one or two AAC tools and use those extensively.

41 %

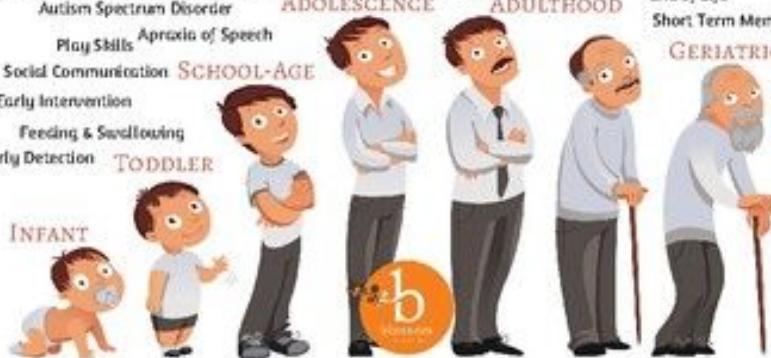
I fear getting a student with complex communication needs. I have little to no experience. I don't know where to start.

8 %

## Who needs a Speech-Language Pathologist?

by: Kasey Creek McNair, CCC-SLP

Augmentative & Alternative Communication  
Reading & Writing      Dysarthria      Traumatic Brain Injury  
Understanding Language      Dyslexia      Head & Neck Cancer  
Self Expression      Reading Comprehension      Accent Modification      Degenerative Disease  
Auditory Processing      Word Finding      Deaf/Hard of Hearing      Breath Support      Orientation  
Cleft Lip & Palate      Articulation      Voice      Transgender Voice Therapy      Feeding & Swallowing  
Language Delay      Fluency/Stuttering      Aphasia      Laryngectomy      Reasoning  
Behavior Management      Speech Delay      Executive Function      Stroke      Dementia      Dysphagia  
Autism Spectrum Disorder      ADOLESCENCE      ADULTHOOD  
Play Skills      Apraxia of Speech  
Social Communication      SCHOOL-AGE  
Early Intervention  
Feeding & Swallowing  
Early Detection      TODDLER  
INFANT

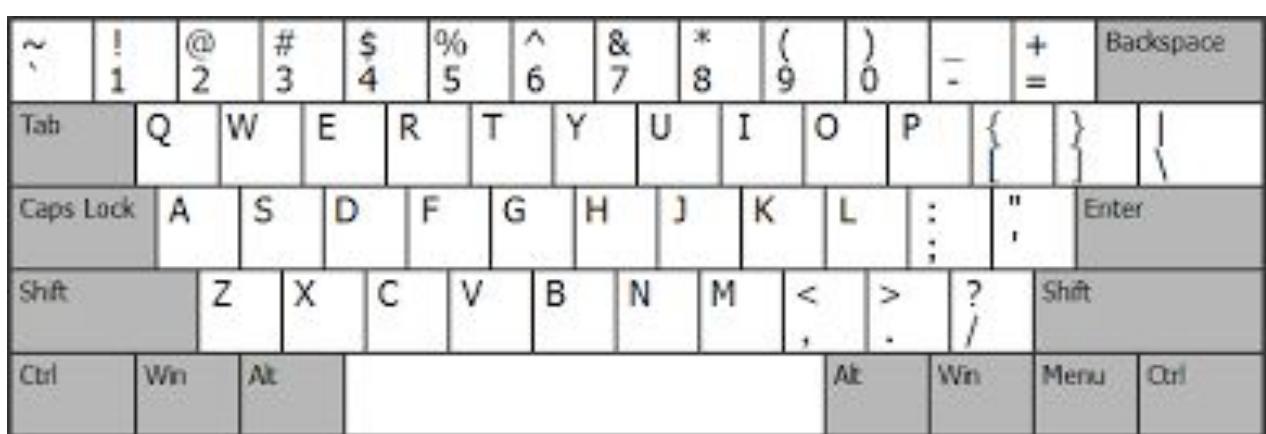


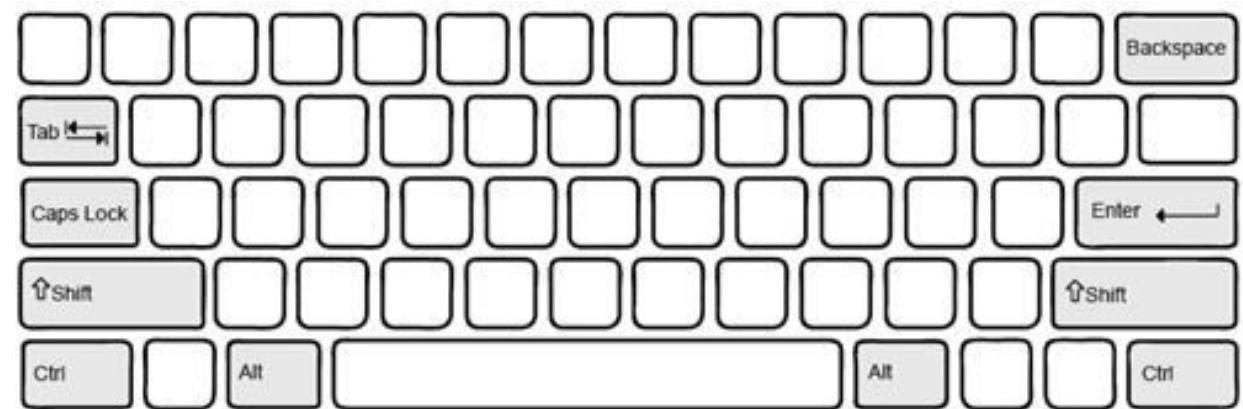
Core First™ 8x10  
tobii dynavox

核心词



©2018 Tobii Dynavox LLC. All rights reserved.





## DVORAK Keyboard Layout

!	@	#	\$	%	^	&	*	(	)	-	=	Delete
1	2	3	4	5	6	7	8	9	0	-	=	
Tab	?	<	>	P	Y	F	G	C	R	L	{	}
/	:	,	,								[	]
	A	O	E	U	I	D	H	T	N	S	"	.
												Enter
Shift	:	Q	J	K	X	B	M	W	V	Z		Shift
:												
Ctrl		Alt										Alt
												Ctrl

Vocab		Menu				
PEOPLE	QUESTIONS	PLACES	SOCIAL	TIME	GROUPS	ABC 123
I	can	to	ACTIONS	come	good	DESCRIBE
my	do	drink	eat	feel	a	more
it	have	finish	help	go	the	that
you	is	like	listen	play	stop	EXTRA Add The WORDS Up
your	don't	want	watch	work	clear	

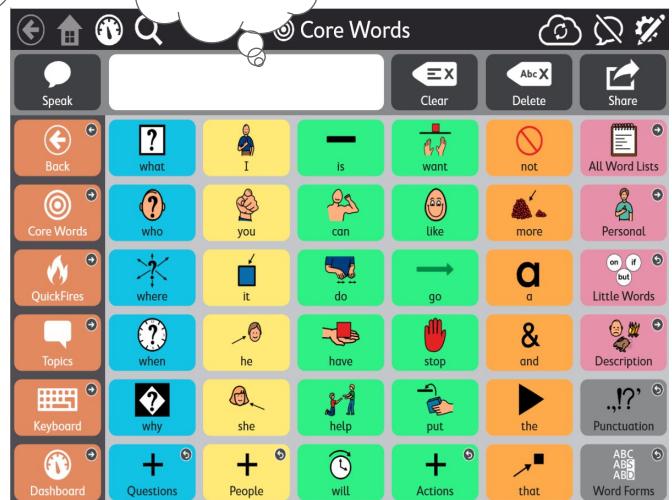
I like that.



Done

Vocab		Menu				
PEOPLE	QUESTIONS	PLACES	SOCIAL	TIME	GROUPS	ABC 123
I	can	to	ACTIONS	come	good	DESCRIBE
my	do	drink	eat	feel	a	more
it	have	finish	help	go	the	that
you	is	like	listen	play	stop	EXTRA Add The WORDS Up
your	don't	want	watch	work	clear	

Who is that?



Done

## Augmentative & Alternative Communication (AAC)

- ▷ AAC is **augmentative** when used to supplement existing speech, and **alternative** when used in place of speech that is absent or not functional.
  - We all use AAC
    - Pointing
    - Gestures
    - “The look”
    - Text messages
    - Facial Expressions

## Myth...If you can speak, there is no need for AAC!

Sources: <https://www.asha.org/NJC/AAC/>  
<https://www.asha.org/Practice-Portal/Professional-Issues/Augmentative-and-Alternative-Communication/>

*Most important thing I've learned is to have options, and to not assume I can use anything at any given time, both because of myself and my needs and because things like tech fails.*

@tuttleturtle42

(AT Twitter chat)

## AAC can be essential during a crisis

Some AAC users said that in an extreme crisis, such as on locked psych wards, AAC had prevented restraint and helped staff understand what was happening. “I was completely non verbal and so used AAC. I get very distressed in psych hospitals and end up having many meltdowns and being restrained a lot, but this time after I had calmed down I was able to explain better to staff how I felt and what had happened to cause the meltdown.

I was able to communicate with the psychiatrist and get my views across better.

I have never been able to do that in hospital before, and if I have tried then what I have said has been nothing like what I want to say at all.”

“Psychiatric crises are a really intense time that I have to deal with on a semi-regular basis, as someone with co-occurring chronic mental illness. Knowing that I now have a way to more reliably explain what's going on to the professionals at hospitals makes the situation a little less scary.”

## Augmentative & Alternative Communication (AAC)

- ▷ Unaided
  - You do not need anything but your own body to use unaided systems. These include gestures, body language, facial expressions, and sign language.
- ▷ Aided
  - An aided system uses some sort of tool or device. There are two types of aided systems—basic (low-tech) and high-tech.
    - Basic/Low-Tech: A pen and paper is a basic/low-tech aided system. Pointing to letters, words, or pictures on a board is a basic aided system.
    - High-tech: Touching letters or pictures on a computer screen that speaks for you is a high-tech aided system. Some of these speech-generating devices, or SGDs, can speak in different languages.

Sources:  
<https://www.asha.org/public/speech/disorders/aac/>

# Communication OptionsTech

## Concrete representations:

- ▷ **Real objects**
- ▷ **Tangible Symbols**
- ▷ **Miniature objects**



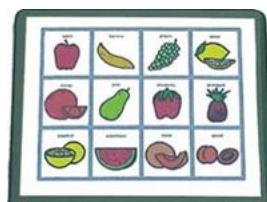
# Communication Options→ Low Tech

## Communication systems with pictures, symbols, letters and/or words

- ▷ **Boardmaker**
- SymbolStix**
- LessonPix**

Free Online picture database:

[OpenSymbols.org](http://OpenSymbols.org)



[How to use the OpenSymbols website](#)

Great resource to share with families who  
don't have access to symbol programs such  
as Boardmaker





## Communication Options Mid Tech

### Simple Voice Output Devices

- ▷ [101 ideas for using single message devices](#)

15. I have a client who is clinically depressed and she has one that she uses with her friends. When friends come by and she's not in her dorm room, they leave a message with it. She says its the best therapy she gets to have "Hi, I'm thinking about you" messages from friends when she's not expecting them.

35. One idea is to use the BIGmack for taking a break. Having it programmed to say "I need a break" could work nicely for verbal and non-verbal kids. It can help teach them to tell you when they are fatigued or getting frustrated.

90. Any time an interjection during an activity is appropriate (e.g., "Wowee!" "Cool")



## Communication Options Mid Tech

### Speech generating device with levels

- ▷ For example, a device with space for 8 symbols will have seven levels which will give you 56 possible messages. You could use each level for a different activity or a different class. These AAC systems will use recorded speech.



## Communication Options High Tech



Speech Generating  
Devices with icon  
sequencing or  
dynamic display  
devices.

## Communication Options High Tech

Text-based device with speech synthesis.

- ▷ [Proloquo4Text](#) (one example of a text-based device)
- ▷ Features:
  - Word prediction
  - Stored words/phrases/conversations/message history
  - Can speak message or have conversation partner read message
  - Multiple language available and can switch between them easily
  - Can have multiple conversations open
  - Available on the iPad, iPod, iPhone, Apple Watch



## Access

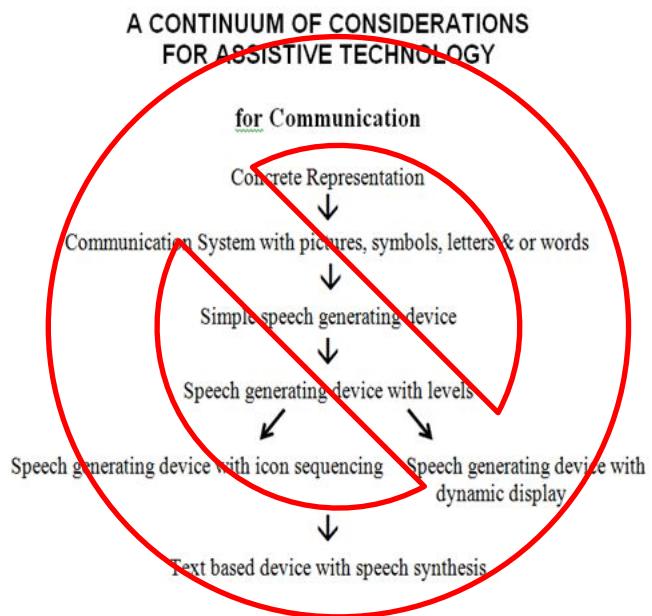
- ▷ Switches
- ▷ Keyboards
- ▷ Mice
- ▷ Touchscreens
- ▷ Eye Gaze (low tech and high tech)
- ▷ Voice recognition



## AT Continuum

A progression of low tech, through mid tech to high tech

**Research shows that there is no continuum!**



We have discovered increasingly that  
**communication has only one**  
**prerequisite;** it has nothing to do with  
mental age, chronological age,  
prerequisite skills, mathematical  
formulae, or any of the other models  
that have been developed to decide  
who is an AAC candidate and who is  
not. **Breathing** is the only prerequisite  
that is relevant to communication.  
**Breathing equals life, and life**  
**equals communication.** It is that  
simple.

--Pat Mirenda, 1993

**"Assuming an individual who struggles with communication has nothing to say, is as ridiculous as assuming an adult without a car has nowhere to go."**

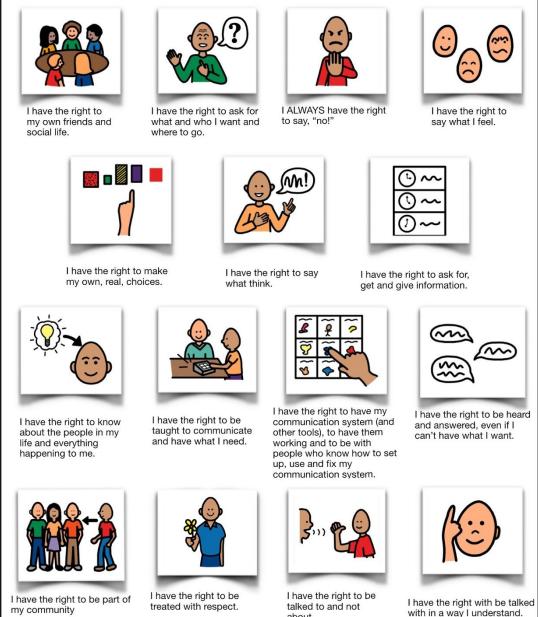


## Presuming Potential/competence

Presume competence but not knowledge. Just because you don't know how (to communicate), doesn't mean you can't know how (to communicate).

We will keep saying it until **everyone's potential is seen** and is approached with the presumption that they can communicate.

### My Communication Bill of Rights



### Communication Bill of Rights

[https://www.asha.org/uploadedFiles/  
NJC-Communication-Bill-Rights.pdf](https://www.asha.org/uploadedFiles/NJC-Communication-Bill-Rights.pdf)

Adapted from the NJC Communication Bill of Rights 2016, ASHA, by Katie Ahern, M.S.Ed. Mayer-Johnson Communication Symbols. Used with Permission.

# Why should we focus on communication and AAC skill development?

A large percentage of adults with complex communication needs do not have consistent access to appropriate AAC devices and, as a result, have limited means to participate in their daily lives within their communities.

Source: Jennifer B. Ganz (2015) AAC Interventions for Individuals with Autism Spectrum Disorders: State of the Science and Future Research Directions, *Augmentative and Alternative Communication*, 31:3, 203-214, DOI: [10.3109/07434618.2015.1047532](https://doi.org/10.3109/07434618.2015.1047532)

The number of adults with severe intellectual and developmental disabilities who do not have access to AAC and have no means to participate within activities of daily living. Stancliffe et al. (2010)

The number of individuals with multiple disabilities who do not engage in any type of community activity, largely due to communication difficulties (Wagner et al., 2005).

**Students with complex communication needs who enter adulthood without acquiring functional literacy skills (Foley & Wolter, 2010) undermining their educational achievement, their employment options, their social networks, and their access to independent living.**

**Individuals with complex communication needs who are employed even part-time due, at least in part, to a lack of effective and efficient communication and lack of functional literacy skills (e.g., McNaughton & Bryen, 2002)**



A total of 45% of adults with complex communication needs report that they have been victims of crime or abuse; 71% of these individuals have been victimized multiple times and 97% knew the perpetrators (Bryen, Carey, & Frantz, 2003). The majority had no effective way to communicate about these experiences or report the crime/abuse (Collier, McGhie-Richmond, Odette, & Pyne, 2006).





- ▷ Are you going to be able to show your language skills?
- ▷ Your desire to have meaningful communication with other people?
- ▷ Will you, with only access to these words, be able to convince the people around you that you are ready for a robust system?
- ▷ How many hours or days will you keep trying to show your skills and abilities with a system like this before giving up?
- ▷ Does the system allow you to express *anything* you really want to say?

-[David Niemeijer](#) (Assistiveware)

### **Let's give it a try!**

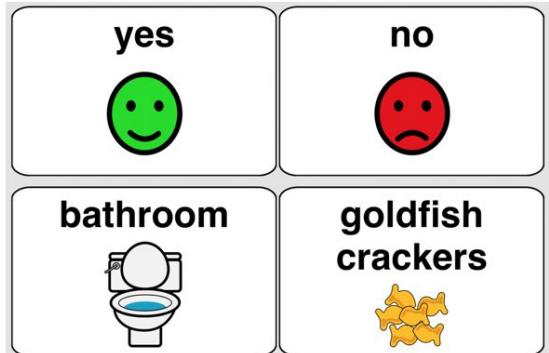
Hi! Nice to see you again.

How are you?

What are you doing this weekend?

How do you think the Buck and Brewers are going to do this year?

What did you think of the Packers draft choices?



## Augmentative & Alternative Communication (AAC)

- ▷ A synthesis of the research in ASD found that individuals with Autism do best with Aided AAC (low and/or high tech).
- ▷ Communication should be multi-modal
- ▷ Research looking at behavior and ASD found that access to a high-tech speech generating device (SGD) had a more significant impact on reducing behaviors than did a picture exchange system (low-tech).

Source: Jennifer B. Ganz (2015) AAC Interventions for Individuals with Autism Spectrum Disorders: State of the Science and Future Research Directions, Augmentative and Alternative Communication, 31:3, 203-214, DOI: [10.3109/07434618.2015.1047532](https://doi.org/10.3109/07434618.2015.1047532)

Communication is multimodal. Respect all communication.

- ▷ Pointing
- ▷ Gestures
- ▷ Sign language
- ▷ "A look"/facial expressions
- ▷ Vocalizations
- ▷ Words/word approximations
- ▷ Verbal speech
- ▷ Body language
- ▷ AAC systems

### DO's and DON'Ts of AAC

**Do respect multi-modal communication**

**Don't say  
"And now say it on your talker"**

Remember...AAC is NOT a test!

If a patient says "go" and then points to the door, do not say, "Now say it on your talker."

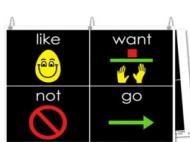
Instead, take it as an opportunity to model and expand their utterance on their AAC system. Respond by acknowledging their multimodal communication saying, "Oh, you're telling me that you WANT TO GO" or "You're telling me that you want to GO EAT."

## Core Vocabulary

What is Core Vocabulary?

A small set of words that are used frequently in communication across contexts and purposes

- ▷ 50 words account for 40-50% of what we say
- ▷ 100 words account for 60% of what we say
- ▷ 230-333 words make up 80% of what we say



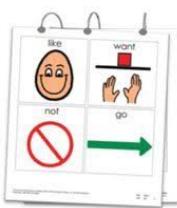
**Core Word Learning:  
I Need Access to:**

**Words You Will Be Teaching Me Soon**

**Words I Am Learning Now**



**Words I Already Know**



what	when	where	ABC 123	PEOPLE	QUESTIONS	ACTIVITIES	SOCIAL	PLACES	TIME	GODS	SEASONS
I	me	who	again	please	where	across	social	1 today	time	gods	good
you	are	will	come	thank	what	now	1 today	time	time	gods	more
it	is	want	hurt	hear	that	okay	1 today	time	time	gods	different
he	she	they	hurt	know	a	tired	bad	bad	bad	good	good
we	they	they	hurt	know	the	bad	good	good	good	good	more
your	do	go	help	get	make	need	all	at	at	some	some
here	have	like	play	read	say	see	of	for	on	in	in
yes	no	want	take	stop	tell	show	up	up	off	up	up
no	yes	not	turn	talk	walk	wish	in	down	down	out	out
not	yes	go	watch	wear	work	work	up	down	with	up	down



### Core words:

A core vocabulary is comprised of the words that are used most commonly in the expressive communication (Yorkston, et al., 1988).

Small in size

Varies little across individuals and environments

### Fringe Vocabulary:

the vocabulary we use to communicate about specific topics in specific environments (e.g. scissors, paper, and marker for art class; fork, drink, and napkin for meal time).

Purpose: adding personalization to AAC

systems

commonly these words are nouns

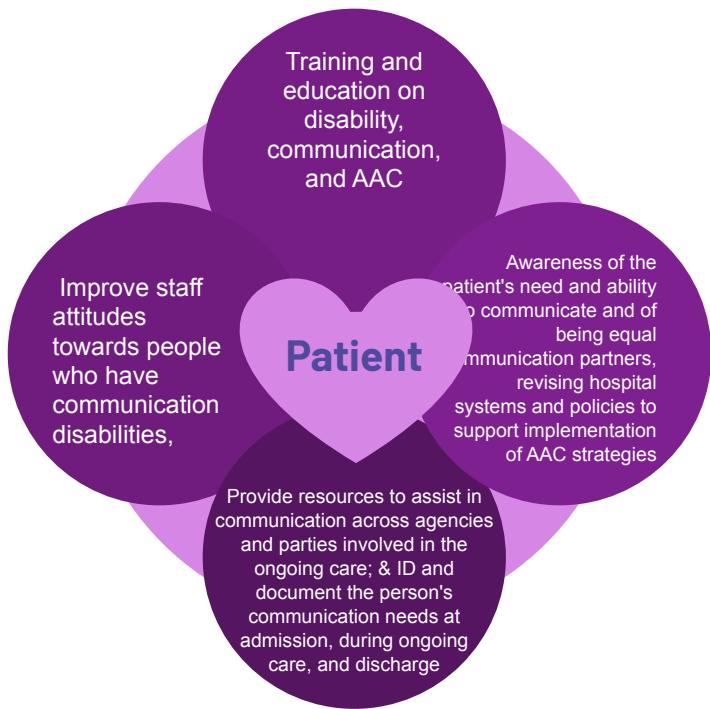


**Project Core**  
<http://www.project-core.com/>

•[Project Core:](#)

1. Professional Development Modules
  - a) Self-directed independent learning
  - b) Facilitated group learning (modules for your use when training others)
2. Universal Core Communication Systems with [selection tool](#)
  - a) 3-D symbols
  - b) 4 square universal core book
  - c) 4 square in-line partner assisted book
  - d) 4 corner eye gaze book
  - e) 9 location universal core book
  - f) 36 location universal core board & classroom poster
3. Teaching supports & Implementation Resources
  - a) Program Implementation Guide for Coaches
  - b) [School or Program Administrator Guide](#)
  - c) [Instructional planning guides and reflection tools](#)
4. Research Support and Publications

## Recommendations for Patient-Provider Communication



Source: Bronwyn Hemsley & Susan Balandin (2014) A Metasynthesis of Patient-Provider Communication in Hospital for Patients with Severe Communication Disabilities: Informing New Translational Research, Augmentative and Alternative Communication, 30:4, 329-343, DOI: [10.3109/07434618.2014.955614](https://doi.org/10.3109/07434618.2014.955614)



# THANKS!

Any questions?

## Speaker Information

Jennifer Schubring,  
M.S., CCC-SLP

Owner, Building AAC, LLC



Contact:

[jennifer@buildingaac.com](mailto:jennifer@buildingaac.com)

[www.buildingaac.com](http://www.buildingaac.com)

Facebook: @BuildingAAC

Twitter: @jjschubring

## Speaker Information

Mike Hippel

Wisconsin AAC Network



Contact:

[mike@wisconsinaacnetwork.org](mailto:mike@wisconsinaacnetwork.org)

[www.wisconsinaacnetwork.org](http://www.wisconsinaacnetwork.org)

Facebook: @WiAACnetwork