Not So Fringe After All: Supported Typing as a Part of AAC

This keynote[1] will provide participants with a framework for examining supported typing as one strategy within the field of augmentative and alternative communication (AAC). It will compare and contrast practices of supported typing with 20 years of research and accepted practices in communication for students with autism and related disabilities.

Discussion will focus on the definitions, principles, and practices from AAC summarized in this handout.

Warm up Activity:

<u>In what ways do you think AAC and Supported Typing are the same? …are different?</u>

"The silence of speechlessness is never golden. We all need to communicate and connect with each other – not just in one way, but also in as many ways as possible. It is a basic human need, a basic human right. And much more than this, it is a basic human power." Williams, 2000, p. 248 in Fried-Oken & Bersani (Eds.), *Speaking Up and Spelling It Out: Personal essays on AAC*. P.H. Brookes Publishing, Baltimore, MD.

[1] This keynote is presented as part of the 14th Annual Autism Summer Institute, Concord, NH.

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Facilitated Communication/Supported Typing within AAC by Definition

…AAC refers to an area of research, clinical and educational practice. AAC involves attempts to study and when necessary compensate for temporary or permanent impairments, activity limitations, and participation restrictions of persons with severe disorders of speech-language production and/or comprehension, including spoken and written mods of communication. (ASHA 2005, p.1)

An AAC system has four primary components: symbols, aids, strategies, and techniques (as described by Beukelman & Mirenda, 2005, and cited in ASHA 2004, pp1-2, 2005).

1. Symbols: graphic, auditory, gestural, and textured/tactile
    - FC includes selection of a symbol set best matched to the needs of the user
2. Aid: a device, either electronic or non-electronic, that is used to transmit or receive messages
    - FC includes selection of an aid best matched to the needs of the user
3. Strategies: the ways messages can be transmitted
    - FC involves "direct select" as the selection technique; a training strategy where the user moves from "dependent direct select" to "independent direct select"
    - FC involves feedback to the user that is described in AAC terms as:
        - Activation Feedback – "the information sent back to the person, upon activation of the input device" (Lee & Thomas, 1990, p. 255)
        - Message Feedback – provide the individual with information about the message that has been formulated or selected
4. Techniques: the ways in which messages can be conveyed most effectively and efficiently
    - Best practice in FC is consistent with "techniques" described as part of AAC
        - Enhance message timing
        - Assist grammatical formulation
        - Enhance communication rate

On the next page you will see emphasis of some of the key words in the definition of FC or Supported Typing that correspond with the above information on AAC.

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"Facilitated communication training is a strategy for teaching individuals with severe communication impairments to **use communication aids with their hands**. … a communication partner (facilitator) helps the communication aid user overcome physical problems and develop functional movement patterns."

[With FCT] "…it is necessary to:

- Ascertain the nature of the problem(s) which currently preclude successful communication **aid access**

- Select appropriate remedial strategies, …

- Ascertain what **representations systems are currently meaningful** for the user

- Enable the individual …to use the most empowering of the **representational systems and selection strategies** currently available to him/her by obtaining/making appropriate communication aids and teaching those in the individual's environment how the aids are used." (Crossley, 1994)

"Facilitated Communication (FC) or Supported Typing is **a form of alternative and augmentative communication (AAC)** in which people with disabilities and communication impairments express themselves by **pointing (e.g. at pictures, letters, or objects)** and, more commonly, by typing (e.g. in a **keyboard**). The method involves a communication partner who may provide emotional encouragement, communication supports (e.g., **monitoring to make sure the person looks at the keyboard and checks for typographical errors**) and a variety of physical supports, for example to **slow and stabilize the person's movement**, to **inhibit impulsive pointing**, or to **spur the person to initiate pointing**; the facilitator should never move or lead the person.

It often is referred to alternatively as Facilitated Communication Training because the goal is independent typing, nearly independent typing (e.g., a hand on the shoulder or intermittent touch) or a combination of speaking with typing - some individuals have developed the ability to read text aloud and/or to speak before and as they are typing. Typing to communicate promotes access to social interaction, academics and participation in inclusive schools and communities.

The person who provides support for communication is called a facilitator or communication support person. A facilitator can be a teacher or other professional, a family member or a friend. The person who receives the support is called the communication aid user or FC User."

(Institute on Communication and Inclusion, retrieved July, 2012)

NOTES:

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AAC PRINCIPLES & FC

The following excerpts (from Blackstone, S.W., Williams, M.B., & Wilkins, D.P. 2007. Key principles underlying research and practice in AAC. *Augmentative and Alternative Communication, 23(3),* pp.191-203) reflect standards of Rehabilitation Engineering Research Center in Communication Enhancement (AAC-RERC). Although all six principles may be relevant, four are highlighted for consideration with FC.

1. **People who rely on AAC participate actively in AAC research and practice.**
    a. Nothing about us without us (Charlton, 1998)
    b. "While there are multiple stakeholder groups in AAC, the primary stakeholders are a diverse group of individuals with complex communication needs." p.193
    c. "Key sources of evidence about effective AAC strategies and technologies (high- and low-tech) are the people who rely on them to communicate. Their characteristics, experiences, preferences, priorities, opinions, suggestions, and expertise must be sought, respected, attended to, understood, and employed in the design, development, delivery, and evaluation of AAC systems and services." p.193
2. **Widely accepted theoretical constructs are specifically addressed in the design and development of AAC technologies and instructional strategies.**
    a. "…many current researchers within and outside the area of AAC now steer away from a sender – receiver definition of Communication, toward a definition that recognizes human communication as a joint action (negotiation) between individuals for the purposes of jointly establishing meaning (von Tetzchner & Martinsen, 2000; von Tetzchner & Grove, 2003). This widely accepted view of Communication guides researchers, developers, and practitioners in formulating and interpreting information." (p.195)
3. AAC technologies and instructional strategies are designed to support and foster the abilities, preferences, and priorities of individuals with complex communication needs, taking into account motor, sensory, cognitive, psychological, linguistic, and behavioral skills, strengths, and challenges.
4. **AAC technologies and instructional strategies are designed so as to recognize the unique roles communication partners play during interactions.**
    a. Roles – AAC facilitator, communication partner: "…communication partners are often noted to be uniquely engaged during AAC interactions, in that meaning is jointly established or co-constructed, often using a variety of strategies, including the simultaneous use of multiple channels or modes (speech, gestures, manual signs, facial expressions, electronic and nonelectronic technologies, etc.)." (p.192)
    b. Communicative parity is the extent to which interactants themselves feel they are
        i. equal partners in the interaction (as befits the context),
        ii. have equal access to communication time and resources, and
        iii. are comfortable in presenting their authentic selves in context. (p.198)
5. AAC technologies and instructional strategies enable individuals with complex communication needs to maintain, expand, and strengthen existing social networks and relationships and to fulfill societal roles.
6. AAC outcomes are realized in practical forms, such as guidelines for clinical practice, design specifications, and commercial products. **The social validity of these outcomes is determined by individuals with complex communication needs, their family members,** AAC manufacturers, and the broader AAC community.

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AAC PRACTICES & FC

Quality Indications of Communication-based Services for Persons with Severe Disabilities in Schools

Adapted from Siegel, E.B., Maddox, L.L., Ogletree, B.T., & Westling, D.L. (2010). Communication-based services for persons with severe disabilities in schools: A survey of speech-language pathologists. *Journal of Communication Disorders, 43,* 148-159.

Assessment Practices:

1. Describe the individual's current communication forms and modes
2. Evaluate sensory sensitivity
3. Evaluate physical status (e.g., positioning, sensory, motor)
4. Identify social functions (e.g., comment, protest, request, etc.) of communication behavior across natural environments
5. Identify primary communication partners
6. Base assessment on multiple observations over time
7. Measure the responsiveness of partners to communication acts
8. Measure the opportunities for communication across environments
9. Identify the specific communicative forms and functions in various modes that are useful in current and future environments (e.g., oral, written, augmented)
10. Measure the spontaneity of communication
11. Use a team model that includes the person with communication needs, family, professionals, and support personnel
12. Ask families to provide information about communication needs perceived by the family
13. Explain assessment procedures and results to family members in a way that is meaningful to them
14. Ask all other team members to provide information about communication needs perceived in their activities/settings/interactions with individuals

How do AAC assessment practices include FC? Are AAC and FC assessments different?

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AAC PRACTICES & FC

Goal Setting Practices:

1. Base selection and prioritization of goals on the importance and potential impact on the individual's quality of life
2. Involve the individual, as well as family and other significant communication partners, including peers/friends, in planning and implementing communication intervention
3. Include consideration of environmental, as well as individual goals
4. Take into account an individual's existing intentional and non-intentional communication
5. Reflect a logical hierarch of skills and identify goals that seem realistically attainable
6. Promote steady and meaningful progress toward long-range plans
7. Include plans for transition to the next environment
8. Involve procedures to ensure continuity of individual's goals from the previous program/settings

How do AAC goal setting practices include FC? Are AAC and FC goal setting practices different?

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AAC PRACTICES & FC

Program Implementation:

1. Provide communication instruction, intervention, and supports primarily in the individual's natural environments in typical interaction contexts, not isolated environments
2. Use "pull-out" therapy when specifically justified to supplement contextual intervention (e.g., to provide additional practice on a particular oral-motor response or visual pointing)
3. Provide opportunities for initiation, maintenance and termination of communicative/social interaction
4. Provide opportunities to communicate across all life domains related to the individual's life experiences (including intentional, non-intentional, symbolic, non-symbolic, spoken, written, augmented techniques) as needed for the individual
5. Accommodate the current communication system while promoting new skill acquisition
6. Use communication supports and systems for instructing individuals across all program areas that are deemed appropriate to the learners
7. Use communication supports and systems that are appropriate to physical abilities
8. Use communication supports and systems that are appropriate to sensory abilities
9. Use communication supports and systems that are appropriate to individual's cognitive abilities (e.g., processing speed, auditory & visual processing, short & long-term memory, attention)
10. Use communication supports and systems that are appropriate to individual's communication needs and environments
11. Use elements of individual instructional programs that are integrated by all involved team members
12. Use communication supports and services that build upon goals and strategies developed in the previous placement
13. Use plans that are implemented to ensure continuity and transfer of information regarding communication supports and services prior to any placement change
14. Use systematic measurement in monitoring of individual's progress towards intervention goals
15. Use progress evaluation data to make decisions regarding modifications of intervention plans

How does AAC program implementation include FC? Are AAC and FC implementation different?

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