

Communicating with people who use augmentative and alternative communication (AAC)

A resource prepared by the Intermediary Pilot Program

Background and Overview

Multi-modal communication (MMC) encompasses the many diverse ways people communicate, including speech, graphic symbols, writing (texting, tweeting, emailing, handwriting), body language, facial expression, gesture, sign language, vocalisations, and behaviour. No one method or technique will fulfil every communication need in every situation.ⁱ

Recognising the diversity of communication modalities, augmentative and alternative communication (AAC) refers to a variety of tools and strategies used by people who may not communicate using speech alone.

If you rely on only one modality of communication (such as gesture or vocalisation), there is a risk that others may not understand the message as you intended it.ⁱⁱ

It is important for people to have appropriately qualified professional support in development of AAC systems for communication.ⁱⁱ

Augmentative and alternative communication (AAC)

AAC is a form of multimodal communication and includes oral (speech, vocalisations), manual (sign and gesture), all forms of aided and unaided systems and strategies, and any other assistive technologies that support communication.ⁱⁱ

A range of people may use AAC including people with developmental conditions (such as cerebral palsy, intellectual disability and autism spectrum disorder) and acquired conditions (such as motor neuron disease, traumatic brain injury, Parkinson's disease, or aphasia).

Some people may also use AAC strategies to understand another person's message, for example key word signs, symbols or pictures to accompany a spoken message.

AAC strategies recognise and reflect the continuum of communication, which ranges from informal (natural gesture, tone of voice and eye-gaze) through to symbolic, formal and representational communication (such as reading, writing and sign language). An individual may use multiple modalities or many systems of AAC in combination, allowing for adaptation based on context, audience, and communicative intent.ⁱ

Types of AAC

There are two main types of AAC strategies: unaided and aided.ⁱⁱⁱ

Unaided describes communication where no external device or aid is required. Unaided strategies include facial expression, eye-gaze, body language, vocalisation, and natural gesture. Manual sign, such as Auslan and key word sign, are also unaided strategies. Auslan is the official sign language of the Australian deaf community. Key Word Sign uses hand signs (based on Auslan) to represent the main words in a sentence to aid understanding and assist with communication development.

Aided forms of AAC may be classified as either low-tech or high-tech. Low-tech (or non-electronic) forms include photos, pictures or symbols (such as on a Talking Mat), paper-based communication boards and books, or using eye-gaze to select letters on an eye-gaze board. High-tech forms include specialist speech generating devices, or AAC software used on some form of technology hardware (such as an iPad).

People who use AAC may use a variety of aided and unaided strategies depending on where they are and who they are communicating with (for example, a person may use a speech generating device, communication book, vocalisation, sign and gesture). Communication partners play a critical role in providing a flexible communication

environment and ensuring that the person has access to the AAC strategies they require.

Common Issues

Issues commonly experienced by AAC users, particularly in new and unfamiliar communication environments, include:

- effective communication may require trained communication partners who can interpret impartially and accurately. Highly individualised communication systems may depend on a familiar communication partner
- unfamiliar communication partners may have difficulty understanding AAC
- AAC requiring partner-dependent strategies must be validated as originating from the person with complex communication needs
- stress or unfamiliar contexts may impact on physical access (for example, increased muscle tension or triggering muscle spasms)
- generating complete messages may be an unfamiliar practice if the person usually uses abbreviations and a mixture of other modalities to communicate
- the rate of speech generation may be slow. Some systems rely on speech prediction rather than typing the message in full
- fatigue is likely to be increased due to additional physical and cognitive requirements of spelling out every word and sentence
- access to vocabulary required may be limited, for example if using a picture-based communication book that does not have specific body parts or actions needed for effective communication
- technology support may be required, such as programming vocabulary needs and enabling access.

Case Example 1: Jayden

Jayden is a 39-year-old man with ataxic cerebral palsy. He can understand others well but has reduced control of his hands and the muscles used to produce speech. He can use natural gesture and vocal tone for 'yes' and 'no' however he is not easily understood by unfamiliar listeners. He uses eye gaze to spell out words on an eye-gaze board and uses an electronic speech generating device accessed by foot switch scanning.

Jayden has excellent understanding of the challenges for those he is communicating with and has a repertoire of strategies that he can implement when there is a communication breakdown.

Intermediary assessment indicated that Jayden can generate his own messages independently with his electronic device however this is slow, and he fatigues rapidly. He prefers using his eye-gaze device however he is reliant on the skills of the communication partner to accurately note what he is saying.

When he is emotional or distressed, Jayden's muscle spasms are exacerbated, and he may not be able to access his usual communication methods.

Strategies recommended for communicating with Jayden when he gives his evidence included:

- familiarisation with the process and meeting the legal teams beforehand to enable Jayden to demonstrate his communication techniques
- allowing enough additional time for responding
- structuring questions so that they are easily understood and can be responded to simply
- frequent rest breaks, as required
- allowing stress reducing aids, in particular the court assistance dog.

Case Example 2: Kelly

Kelly is a 42-year-old woman with moderate intellectual disability who presents with well-developed social skills and a reliance on visual and context cues to understand what people say. Kelly uses speech for yes, no and for everyday responses. Kelly enjoys social and community activities with the support of an NDIS worker. Kelly requires support with many activities of daily and community living. Kelly finds visual aids such as symbol-based lists, instruction charts, choice cards and reminders help her with understanding options and expectations.

Assessment identified that Kelly was not aware that she misunderstood questions. With longer, more complex or out of routine questions, Kelly responded to key words or only part of the question.

Strategies recommended for use in court included:

- providing familiarisation with the people and the procedures beforehand and providing a visual schedule of who will be asking questions and when
- using simple appropriate vocabulary, avoiding ambiguous or complex terms
- keeping tone of voice, body language and facial expressions neutral
- using short, simple questions, asked one at a time, at a slower rate and with additional time after each question
- asking questions that required a fact response not just 'yes' or 'no'
- using visual aids such as body maps, timelines and photos or pictures
- allowing additional breaks frequently and as needed due to the increased cognitive load and consider the overall length of time required.

Strategies

The information below outlines general strategies that can be adopted by representatives of the court to enhance communication with people who use AAC:

- be respectful of the different ways that a person may use to communicate
- provide enough time for the person to respond, acknowledging that some forms of AAC may require additional time. Do not rush the person or complete their responses for them
- work with the individual and their support team (such as their speech pathologist, occupational therapist, support workers, and family members) to determine the best and most effective means for communication
- determine if any additional communication supports (such as specific vocabulary) may be required and ensure the person is familiar with how to access this
- learn what additional needs the person may have. They may need specialised seating, specialised access and mounting of their speech generating device, shorter sessions, additional time for breaks, and have specific care needs. Levels of alertness at different times of the day can be affected by prescribed medications
- aim to reduce stress, which may adversely affect their ability to concentrate or use AAC strategies effectively
- provide the person with opportunities to familiarise themselves with the court process and people involved, prior to the day they are required to give evidence
- ensure that those asking questions know how the person communicates, how long it might take them to respond, and how to identify when the person is finished. Many people may choose to use their voice and body language for 'yes' and 'no' and use their speech generating device for longer messages
- offer choices especially for when breaks can occur and for how long, to reduce fatigue and anxiety.

References

- ⁱ Beukelman, D.R. & Mirenda, P. (2013). *Supporting children and adults with complex communication needs (4th Ed)*. Baltimore, MD: Paul H. Brookes.
- ⁱⁱ Speech Pathology Australia. (2020). *Augmentative and alternative communication clinical guideline*. Retrieved from: https://www.speechpathologyaustralia.org.au/SPAweb/Members/Clinical_Guidelines/spaweb/Members/Clinical_Guidelines/Clinical_Guidelines.aspx?hkey=f66634e4-825a-4f1a-910d-644553f59140
- ⁱⁱⁱ American Speech-Language-Hearing Association (ASHA). (2020). *Professional issues: Augmentative and alternative communication*. Retrieved from https://www.asha.org/PRPSpecificTopic.aspx?folderid=8589942773§ion=Key_Issues