Family Involvement in AAC Intervention – It's a Key to Success

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Introduction

Most evidence based articles focus on AAC intervention in a clinical or school setting. They often overlook providing intervention in the home-environment. In today's blog we highlight two articles supporting the importance of family involvement in the AAC.

Remember to Explore the Evidence

Granlund et al, 2008 provide evidence that helps to support the need for professionals to include parents in the AAC decision-making process. That includes not only device or App selection, but also in the development of specific intervention goals. Since the family is key to implementing intervention strategies in everyday activities, they may need support in determining how they can best adapt the targeted goals to the family routines and lifestyle.

If parents are unable to support the goals, successful use of the selected AAC tool(s) may be negatively impacted. These authors discuss how a parent's lack of support in implementing goals within the home environment often stems from a lack of understanding of the role these goals play in enabling their child gain communicative competence. Effective communication extends far beyond requesting and responding. Effective use of AAC will help a child develop language and literacy skills. It is the role of the speech-language pathologist to thoroughly explain why goals have been selected for implementation and how the child will benefit from them. If goals do not harmonize with the family lifestyle, parents may feel stressed and frustration when trying to implement them. This should not mean that the goals are abandoned, but it may require brainstorming and better collaboration to create a workable plan.

Thunberg et al, 2007, conducted a study that measured various communication activities in the home. Participants were children from ages four to eight that were diagnosed with autism spectrum disorder and unspecified pervasive development disorder (PDD). Communication of the children ranged from non-verbal and gestures to those using two word utterances. Researchers looked at mealtime, story time, and a sharing experience at preschool with and without using a speech generating device (SGD). Family members were involved in developing goals, given a training course on how to encourage AAC during activities, and were able to use the AAC device themselves to serve as a model for their child. Research measured various aspects of using a SGD during each family activities such as engagement in the specific activity, roles in turn-taking, and effectiveness in communication (ability to convey message). The outcomes are powerful and encouraging.

Comparing mealtime with to without the SGD, most children exhibited an increase in level of engagement, increase in responses, commenting and requesting, and imitating. There was a decrease in attention seeking behaviors during mealtime. This could be because the parents and children are both engaged in the SGD and working together to communicate. All children displayed an increase in communication effectiveness. One strategy that encouraged communication interaction is that parents used smaller portions to create more opportunities for the child be request more food. Siblings also became involved in mealtime, thus encouraging

socialization and imitation of messages. Children that had difficulty sitting at the table during mealtime became more focused and interacted more with their parents.

Storytime involved the parents reading a story to the child and having the child learn, comment, and answer questions. With the parents encouragement, one child used the preprogrammed phrases in the SGD and became the reader instead of the listener! Another child would communicate during story time by pointing to the pictures in the book, however when the SGD was introduced, the child was encouraged to find and point to the vocabulary pictures on the device to answer simple questions. The parent was able to help navigate through the device to locate the appropriate vocabulary. Throughout this activity, the ability to name and answer questions increased when using the SGD.

Sharing a preschool experience involved the child sharing an event that happened that day at school with their parent by using their SGD. Prior to introducing the SGD, a child would avoid interaction with their parents by playing with toys. When the SGD was used, the child was focused and was able to attend to the task successfully. Level of engagement, answering questions, naming and overall communication effectiveness increased with the use of a SGD.

Throughout all activities, physical distance between parent and child appeared to impact the child's use of the AAC device. The parent use of the AAC device positively influenced the child to also use the device to communicate.

Summary

Including the family as a part of the AAC team requires that parents be offered AAC training opportunities, feedback, and emotional support from the professionals working with them. Parents stated that the greatest challenges they face when communicating with their child is their lack of navigation skills, not knowing what to do during a breakdown in communication, selecting appropriate vocabulary, and using the vocabulary available to convey an intended message. It is the job of the SLP to help and empower them.

Parents need to support their child using an AAC device by being educated and trained in the technology, working with professionals to design the application display, and using the AAC device so they can be a model for their child. Continuous feedback and support from professionals is very important for parents to ensure desired communication outcomes for their child. Meeting with other families that are in similar situations for support and advice is also an important factor in supporting their own child using an AAC device. Families can use various sources to receive information, while keeping in mind the specific needs of their child.

Conclusively, family involvement in AAC is imperative when supporting communication use for their child with an AAC. The child's ability to generalize goals from the clinical and school setting to the home environment maximizes success for effective communication. Professionals should educate and train family members to serve as a role model and encourage AAC use. When an SGD was utilized in the home activities including mealtime, story time, and sharing an experience, children experienced an increase in communication aspects such as naming, requesting, answering questions and overall successfully convey messages.

References

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