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AAC for the Direct Support Professional: Aided Language Modeling

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May is Speech & Hearing Month. During the month of May, Speech-Language Pathologists and Audiologists strive to improve awareness of communication and hearing disorders, highlighting the importance of identifying and treating communication and hearing challenges. This article focuses on bringing awareness to communication disorders in the adult neurodevelopmental population (e.g., intellectual disability, autism spectrum disorder), the benefits of introducing Augmentative & Alternative Communication (AAC), as well as functional AAC communication strategies for DSPs with a focus on Aided Language Stimulation.

You can learn more about May is Speech & Hearing Month [here](#).

What is communication?

Communication is a complex word to define because it encompasses many factors. The American Speech-Language Hearing Association (ASHA) defines communication as:

“The active process of exchanging information and ideas. Communication involves both understanding and expression. Forms of expression may include personalized movements, gestures, objects, vocalizations, verbalizations, signs, pictures, symbols, printed words, and output from augmentative and alternative (AAC) devices.”

The basic definition of communication includes actively exchanging information and ideas using a variety of forms of expression. We communicate for a variety of reasons in our daily life. Common reasons (also known as functions) of communication include:

- Requesting
- Protesting
- Commenting
- Directing
- Asking questions
- Giving opinions
- Sharing news
- Starting a conversation

Now that we’ve discussed some of the reasons that humans communicate, think about a person that you support in your role as

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a direct support professional (DSP). Is that person able to express themselves for all the functions listed above? If the answer is no, the individual likely has communication needs that require support.

You can learn about the reasons we communicate [here](#) and [here](#).

What is AAC?

AAC stands for Augmentative and Alternative Communication. AAC includes methods that augment (or add-to) a person's communication abilities, and/or methods that provide an alternative to spoken language.

AAC can be aided or unaided. Aided AAC includes the use of any external tools or technology. Unaided AAC uses only the person's body, and can include vocalizations, gestures/sign language, body language, facial expression, and tone of voice.

You can learn more about AAC [here](#).

Why use AAC?

The ***Universal Declaration of Human Rights*** and the ***National Joint Committee for the Communication Needs of Persons with Severe Disabilities (NJC)*** considers communication to be a basic human right.

“All people with a disability of any extent or severity have a basic right to affect, through communication, the conditions of their existence. Beyond this general right, a number of specific communication rights should be ensured in all daily interactions and interventions involving persons who have severe disabilities. To participate fully in communication interactions, each person has these fundamental communication rights:

1. The right to interact socially, maintain social closeness, and build relationships
2. The right to request desired objects, actions, events, and people
3. The right to refuse or reject undesired objects, actions, events, or choices
4. The right to express personal preferences and feelings
5. The right to make choices from meaningful alternatives
6. The right to make comments and share opinions
7. The right to ask for and give information, including information about changes in routine and environment
8. The right to be informed about people and events in one's life
9. The right to access interventions and supports that improve communication
10. The right to have communication acts acknowledged and responded to even when the desired outcome cannot be realized
11. The right to have access to functioning AAC (augmentative and alternative communication), and other AT (assistive technology) services and devices at all times
12. The right to access environmental contexts, interactions, and opportunities that promote participation as full communication partners with other people, including peers
13. The right to be treated with dignity and addressed with respect and courtesy
14. The right to be addressed directly and not be spoken for or talked about in the third person while present
15. The right to have clear, meaningful, and culturally and linguistically appropriate communications”

See this link to a [poster of communication rights](#).

We know that neurodevelopmental disorders have a high correlation with communication disorders. As DSPs, it is our responsibility to ensure that the right to communicate is preserved for the people that we support.

Augmentative and Alternative Communication methods are identified as an effective support strategy for individuals with communication impairment.

“The development of augmentative and alternative communication (AAC) techniques, strategies, and interventions has offered the potential for improved communication for individuals with complex communication needs.”

“Without access to speech, individuals with complex communication needs (e.g., children and adults with autism spectrum disorder, cerebral palsy, intellectual/developmental disabilities, traumatic brain injuries, aphasia, brainstem stroke, ALS, etc.) are severely restricted from participation in all aspects of life: education, employment, healthcare, family, and community living.” – RERC, 2019

The benefits of introducing AAC strategies for individuals with communication needs may include:

- Improved functional communication
- Relationship development
- Improved literacy
- Enhanced language knowledge
- Improved educational achievement
- Supported employment/volunteering
- Decreased emotional dysregulation
- Better management of health care needs
- Decreased risk/vulnerability for abuse
- Maximized community living and inclusion

Who is a good candidate for AAC?

Historically, a variety of prerequisite skills were considered necessary for a person to benefit and be able to learn how to use AAC. Emerging evidence indicates that anyone who cannot have their daily communication needs met by verbal speech alone is a good AAC candidate. We now “presume competence,” meaning that everyone has something to say, and everyone can learn. Learn more about “presuming competence” [here](#).

AAC can be a beneficial tool to supplement verbal speech that is unclear, to support choice making and understanding options, as a back up during emotional dysregulation which impacts verbal speech, for individuals with fluctuating expressive ability, or to provide expressive communication to someone who is non-word speaking or is unable to produce speech sounds, etc.

A referral to a Speech-Language Pathologist for a comprehensive communication assessment is often the first step toward identifying appropriate AAC strategies.

Teaching AAC

When someone you support is learning a new AAC system, it's important to remember that it is like learning a new language. Whether the AAC strategy is aided (using external tools, such as picture aids, tablets/apps, written language) or unaided (using one's body – voice, sign language/gestures/pointing, facial expressions); there will be a period of learning for both the communicator and the communication partner.

Learning AAC requires commitment and support from the AAC user's communication partners (not solely the primary DSP) on a regular and consistent schedule. It is important to recognize that many AAC users are multimodal communicators, meaning they will use multiple methods of communication to express themselves. Modes of communication may include some vocalizations, use of gestures/pointing, facial expression, guiding someone to desired items, using pictures or text, etc. All forms of communication are valid and should be accepted as part of the person's communication abilities.

“A child learning spoken language typically hears about 4000-6000 words per day. By the time a child is 9-12 years old, they have been exposed to 36,500 hours of language input. A child typically hears a word 500 times before they try to say it. Developmentally, we accept that a child will take up to one year before we expect them to communicate.” - Korsten, (2011)

AAC users do not typically receive the same level of language exposure as a child who is learning spoken language, but the learning needs remain the same. For this reason, it can take an AAC user a very long time to become proficient with using their AAC strategy.

Regardless of the AAC tools and strategies being introduced, there are some general support strategies that will support the person to learn their communication method. This article will focus on “aided language stimulation.”

What is Aided Language Modeling?

Aided Language Modeling is a communication strategy where a communication partner shows the AAC user how to communicate with their AAC strategy by using the AAC strategy themselves. Aided Language Stimulation is also known as Aided Language Stimulation, Aided Language Input, Modeling, Aided Language, Augmented Language, Partner Augmented Input. The main idea with Aided Language Modeling is that we want the input (info coming in to the AAC user) to match the expected output (the AAC user using their AAC strategy). For more information about aided language modeling, click [here](#).

Imagine you are a DSP for someone named Bob. If we were supporting Bob with how to learn English, we would speak to him frequently in English. We would point and label items in English, we would ask questions and make comments in English.

Now imagine that Bob is not learning how to speak English. Bob is learning how to use an iPad with a voice output communication app (e.g., Proloquo2go or TouchChat). How would you teach Bob how to communicate? If we use just spoken English when communicating with Bob, will he learn how to use his iPad? Will he learn where the symbols he needs in various contexts are and how to use them? The answer is no. A person will best learn how to use their AAC strategy by being exposed to that AAC strategy in functional use. We would need to show Bob how to communicate using his AAC strategy as a tool together. This is what is meant by having the “input” match the “output.”

How do I provide Aided Language Modeling?

As a DSP, you are often a person's primary communication partner. You will be the person that they have the greatest opportunity to learn from in meaningful situations.

1. Identify naturally occurring communication opportunities

- Look at the person's daily routines/schedule, what are the opportunities for modeling language that relates to that event? Can you provide choices, comments, demonstration of refusal, etc.?
- For more ideas about how to identify communication opportunities, click [here](#).

2. Learn the person's AAC system/strategy

- Advocate for focused time within your shift to learn the AAC system/strategy
- New symbol systems or technology systems may take time to learn how to navigate
- If someone is using sign language, the DSP will need time to learn signs as well
- Having uninterrupted time to explore the AAC strategy will help you to feel confident when you're providing aided language modeling

3. Model key words in naturally occurring communication opportunities

- During your communication exchange with the person you support, identify the key word or concept and model that language using the AAC user's AAC system or strategy. For example, if Bob is using an iPad with a communication app that has pictures and voice output, and you were giving Bob options between "painting" or "trampoline" as a leisure activity, you would model "painting" and "trampoline." You would not need to find symbols to say "Do"+"You"+"want"+"painting"+"or"+"trampoline."
- Try to model "core words." These are the most commonly occurring words in English. You can learn more about core words [here](#).
- Find a list of common core words [here](#).

4. Infer meaning to non-verbal communication attempts

- If the person you support demonstrates intention through non-verbal communication, you can pair the person's non-verbal communication with their AAC strategy. For example, if Bob is yawning and laying down, you might choose to model "tired" or "want" + "nap."
- If you model something and the AAC user demonstrates that you were incorrect in your inferred meaning, that can be the perfect opportunity to model "no" or "I made a mistake."

5. Model one step above where the AAC user is currently communicating

- To teach a person how to expand their language skills, we want to show them how to combine concepts.
- If the person you support is not yet using AAC, or is brand new to their AAC system, you might model one word/concept at a time.
- If the person you support communicates in single words, you will model two-word phrases. You can do this by adding an action word or describing word (for example, if Bob can communicate "break," you can model "I want" + "break", or "time" + "Break").
- If the person communicates in multi-word phrases or sentences, you can model more complex sentence forms over time.

6. The only expectation on the AAC user is that the AAC user is watching

- The AAC user can't learn how to use their system if their attention is not on you.
- This does not mean that the AAC user must make eye contact with you, they do need to visually attend to your demonstration of their AAC strategy.
- We do not expect the user to spontaneously communicate.
- They do not need to copy what you modeled, and they do not need to repeat (if you are using a voice output system).
- Similar to someone learning a new language, all we expect is that they watch and listen until they are ready to try communicating themselves.

7. AAC should ALWAYS be within arm’s reach

- You can’t model in a teachable, naturally occurring communication opportunity if the AAC strategy is not readily available.
- AAC becomes part of a person’s expression and needs to be easily accessible.

The dos and don’ts of Aided Language Modeling

Learning how to provide Aided Language Modeling can take time and practice. Here are some key dos and don’ts when providing Aided Language Modeling. For more information, click [here](#).

DO	DON’T	WHY?
Provide aided language modeling everyday throughout the day	Specify a specific time of day when aided language modeling will be offered	Communication happens in a variety of contexts. Use naturally occurring communication opportunities throughout the day to model. This also ensures more frequent exposure.
Ensure the AAC User gets to practice with multiple communication partners	Have a single DSP provide all the aided language modeling opportunities	We communicate with various communication partners differently. Practicing with multiple partners also ensures that all DSPs who support the person can learn the AAC strategy.
Model key words and concepts	Try to match every word that you would say verbally to the AAC system	The AAC user needs to learn the key words to help them communicate in specific contexts. It can be hard to learn how to communicate using AAC when there are multiple targets being modeled.
Model language that is appropriate for the AAC user’s communication functions	Model language that is appropriate for your role as a DSP	Aided Language Modeling is intended to teach the user how to use their system for their <i>own</i> communication needs. They do not need to know how to find what the DSP would need to say (e.g., saying “good job” upon completion of an activity is something a DSP might say. Saying “thank you” or “all done” is a better match for the AAC user’s needs).
Model a variety of communication functions	Get stuck on making requests or choices	We communicate for multiple reasons, and the AAC user needs to learn how to communicate for a variety of needs. We want to show how to refuse, comment, ask questions, etc.
Keep providing verbal models of speech using appropriate grammar/sentence structure	Only verbally speak the key words that you are modeling	It’s ok if your spoken words and what you model don’t match. Modeling focuses on key concepts as a starting point.

Conclusion

Effective strategies for complex communication needs require dedication, understanding, patience, and perseverance for both the AAC User and the DSP. There is significant evidence to support the value of using AAC strategies for adults with neurodevelopmental disorders. Although a variety of AAC strategies exist, a common evidence-informed strategy is the use of aided language modeling which can be applied to any type of AAC system (aided or unaided). DSPs are encouraged to seek ongoing education opportunities related to AAC to best support the human right of communication with the individuals that they support.

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About the author

Kerrie Lalonde, B.A., M.A., S-LP reg CASLPO (she/her) is a registered Speech-Language Pathologist in the province of Ontario with HANDS TheFamilyHelpNetwork.ca. Kerrie has been practicing for over 13 years in a variety of service environments, including health care, palliative care, long term care, home care, and community-based practice. Working exclusively with adults with neurodevelopmental disabilities in rural communities, Kerrie has had the opportunity to partner with several developmental service agencies over the years to provide direct clinical service to clients, as well as program consultation. Kerrie was inspired at a young age to pursue a career in Speech-Language Pathology after participating in an Augmentative and Alternative Communication assessment with her brother who is Autistic. Kerrie believes that communication is a basic human right, and that communicative autonomy should be developed and preserved.

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