

InFOCUS

ARE WE ON THE SAME PAGE?

JUNE 2022

ISSUE 51



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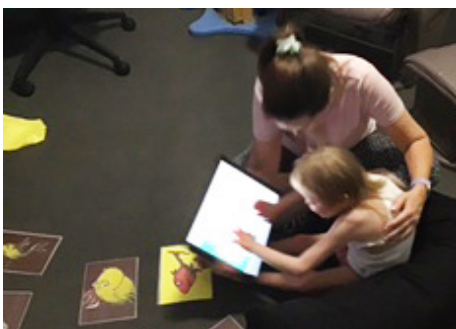
Sheridan Forster

AGOSCI In Focus is the National Magazine of the AGOSCI Inc. (formerly Australian Group on Severe Communication Impairment). AGOSCI In Focus is a bi-annual magazine and is available to members of AGOSCI. It contains information from and about national seminars, research, new communication technology, resources in the AAC field, news from overseas, and contributions from people who use AAC.

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COVER PICTURE



by Beth Foale's family, who she is supporting.

J and her mother engage together sharing favourite books. Sitting in her mum's lap shares that it is time to share a story. The story is shared using many means of communication, and J's thoughts are listened to and responded to.

DISCLAIMER

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CHAIRPERSON'S REPORT

Are We On The Same Page? Sheridan and her team are asking this question in this edition, which is important on a few different fronts. For example, it is important that clients and therapists are on the same page, as the tri-focus framework (person-partner-environment) in AAC requires this for communication support to be successful. I also think of professional associations, the NDIA, and evidence-based practice – we all need to be on the same page. Thanks Sheridan for providing another high quality magazine.



On another note we have just had our AGM, and 109 days from our first ever conference in Tassie, yay! It is going to be very exciting to see everyone face-to-face again for the first time in a few years. It is an important learning opportunity for professionals and AAC folk to come together and learn together. If you haven't yet registered, please do so ASAP.

Our Events and Education coordinator continues to be the engine room of AGOSCI, so a big thanks to Ria. She is also part of a team who are rolling out the AGOSCI AAC Mentors program, an initiative for AAC users to support AAC users. How cool! We look forward to more AAC users running the show, welcome on board. We will kick that off at our conference.

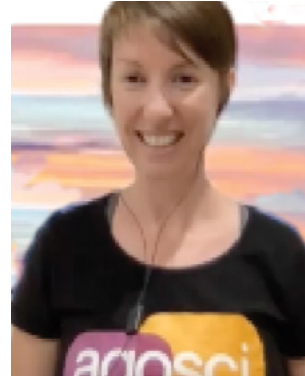
Enjoy

:: DARREN TRENTEPOHL

EDUCATION & EVENTS

Hi AGOSCI Fam!

It's been a whirlwind start to 2022. The highlight was of course our National Tour in March with the wonderful Fiona Beauchamp who presented to over 200 of our AGOSCI audience in person and online. A huge thanks to all who attended, supported, and volunteered with these events, and a special thanks to Fiona for being so flexible in a time of regular change.



As we look to the second half of the year, we're of course most excited about seeing you all at the Conference in Hobart. The events calendar continues to fill up with international speakers, in-person workshops, online courses, and of course our free member webinars. However, we'll be keeping a little 'conference-shaped' gap in the calendar to ensure you can look forward to that incredible learning opportunity without distraction!

If you have any requests, feedback, or suggestions for the education and events team, please don't hesitate to reach out to us. We're always keen to ensure we're best meeting your needs.

See you in Hobart!

Ria - Education and Events Coordinator

 education@agosci.org.au

:: RIA FERRIS



AGOSCI 2022 Awards

Is there someone that you think deserves an AGOSCI Award of recognition? Now is the time to put in your nomination. AGOSCI has three types of Awards.

- **The AGOSCI Award for Service to AGOSCI**
- **The AGOSCI Award for Service to Australian AAC**
- **The inaugural AGOSCI/Key Word Sign australia Karen Bloomberg Award**



To find our more and download the nomination form, go to www.agosci.org.au/Awards.

Fill in the form and send it to agoscichair.agosci.org.au before the 31st of July.

SECRETARY'S REPORT

Hi again to everyone,

We've had a really great year for memberships with around 546 members so far, which is 119 more than this time last year. Fantastic. This is thanks to the wonderful team we have and, in particular, Ria, for organising all our informative events. The recent National Tour was very well received with many in attendance.

I have been busy typing up minutes and attending to member enquiries. We are hoping for a great turn out to our upcoming AGM. The ACT Rep position is vacant at the moment, if you would like to think about joining the team. We are also looking for co-reps in VIC, NSW, and NT.

We are looking forward to seeing everyone face-to-face at the Hobart conference. It's been a long time coming but the wait will be worth it. See you all there.

Many thanks again to all the members who have joined this year. We value your membership and strive to provide an organisation that you wish to belong to. I look forward to seeing you in Hobart for the AGOSCI Conference.

Mel

:: MELISSA BAKES

EDITOR'S NOTE

It is with excitement that I bring you the June 2022 edition of AGOSCI In Focus.

I am pleased to be able to share with you excellent papers on the theme *Are We On the Same Page?* The theme refers to the metaphorical page and the literal page. The metaphorical page is the idea that two or more people are sharing a meaning and they understand each other. Understanding is made up of what an individual can understand plus the ways a partner expresses a message so that it can be understandable. Without this attuned expression, shared understanding is not possible. With attunement, being on the same page is limitless. Several authors share how they have been at that sweet spot for shared understanding.

We also have stories that share the literal page. A literal page may refer to literacy, where the page is the transport for information. Lizzie Lea shares the first of our 2022 book reviews on *Comprehensive Literacy For All*.

Our next edition will focus on the AGOSCI Conference to be held in Hobart. I hope to capture participant reflections, presenters deepening their papers, and lots of photos of our community.

I will also be welcoming several other 2022 book reviews and papers outside of our theme. I hope you find many papers that reflect how you can be on the same page....

:: SHERIDAN FORSTER

TREASURER'S REPORT

Hi everyone.

We have just had our AGOSCI AGM. It was great to report to our members that we posted a healthy profit this year. Thanks to everyone who supported us by attending the fabulous range of events that Ria, our Education and Events Coordinator, and our state reps organise for you. This helps ensure that AGOSCI can continue into the future. It also allows us to support many great initiatives for our members. These include assisting many of our AAC communicators to attend our long awaited conference, support our new AAC mentors program along with a generous grant from the Suzanne Ellis Charitable Trust, and run other member events such as our AAC Awareness Week activities.

If you would like more information on the financial report, or have any questions about AGOSCI's finances, please contact me at agoscitreasurer@agosci.org.au.

Not long until we can catch up again in person at the 2022 conference. Looking forward to seeing some friendly AGOSCI faces in Hobart.

:: TRACEY HANIGAN



STATE REPORTS

TASMANIA & CONFERENCE PROGRAM CHAIR



The AGOSCI Hobart Conference Committee have started meeting again to plan for September's face to face conference! Thank you to all the wonderful presenters who have been able to re-commit to the September 2022 dates. We know it is going to be worth the long wait to all be together again. We are enjoying putting the finishing touches on our Base Camp social events and hope to add a few more adventures for delegates to choose from.

Introducing
BASE CAMP

A space for family and friends to connect during the Conference. Base Camp is a place you can meet to engage in some fun activities or a space to enjoy some downtime. Below are just some of the activities we have planned:

- Accessible Yoga by "Accessible Yoga"
- The Circus Studio
- Get the most out of Hobart and make use of a Just Like Jack Running Chair
- Art Experience
- Visit to Tasmanian Museum and Art Gallery

Base Camp at the Conference

Our small Tasmanian Key Word Sign committee have welcomed some new Sign Presenters from interstate. We have recently hosted an AGOSCI sponsored Key Word Sign workshop in Ulverstone and have one planned for Hobart in May.

variety
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A camp to assist Tassie kids who have limited speech and rely on a communication system/talker (AAC) to express themselves

More info via variety.org.au/tas/programs/mmc/

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Variety Motor Mouth Camp

In other exciting news Variety Children's Charity will be piloting the first AAC Motor Mouth Camp in Hobart in October through the support of the Motors Foundation. This will be the first time an AAC Camp has been held in Tasmania and we have been fortunate to collaborate with the brains trust of Kelly Savage and her colleagues in WA, who are old hands at this now. A team of clever, committed volunteers and paid staff are busily planning the camp which will be piloted with students from Southern Support School. All going well, the camp will be extended to families from around the state in 2023.

For more information, please see the Variety website:
www.variety.org.au/tas/programs/mmc/



Rainbow room at Dark MOFO

Finally, as Winter approaches, planning is well underway for the fabulous Dark MOFO festival. This will again include a fabulous access program for people who have difficulty accessing the festival at peak times. This year it looks like participants will get an opportunity for private access to the rainbow room, amazing Winter Feast, and hopefully some performance art thrown in as well. Of course, everyone will get to purge their fears onto paper and offer them into the giant Ogah Ogah, a totem-like sculpture derived from a Balinese Hindu purification ritual and crafted by Balinese artists.

What a big few months coming up for Tasmania to highlight and celebrate our community of diverse communicators!

:: FELICITY LOVATT & TRACEY

STATE REPORTS

VICTORIA

The Victoria branch gathered together 23 keen participants for the National Tour.



Sheridan and Stephanie represented AGOSCI at the SPA conference. They were delighted to continue sharing the passion for diverse communication following Jo Watson's keynote on supported decision making and Georgia Cranko's sharing of stories and shaping her story. A highlight was the National Simultaneous Storytelling multimodal flash mob featuring many fabulous AGOSCI members and our Key Word Sign Australia family. Check out their Family Tree book reading | National Simultaneous Storytime 2022 at

<https://youtu.be/hRbV-nJKqQ>.

:: BEN BOND & STEPHANIE WEIR



Delegates admiring the Barry and the Bear towel at the AGOSCI stand



Steph and Sheri at AGOSCI stand at SPA



Kathryn and Jenna, members of the AGOSCI family



A multimodal sharing of the National Simultaneous Storytelling at the AGOSCI stand. Signing strong

STATE REPORTS

NEW SOUTH WALES

Hi Everyone,

AGOSCI NSW was delighted to host a small in person group, joined by 97 others online, on the 31st of March and 1st of April as part of the National Tour at the new Liberator office in Ashfield. It was a pleasure to learn from Fiona Beauchamp about understanding movements for accessing technology and communication.

We're working on bringing a 2-Day Introductory PODD workshop to Sydney later in 2022. Keep an eye on our website and check your emails for updates!

✉ Stephanie.wong@olivetreetherapy.com.au
or agoscnsw@agosci.org.au.

:: STEPHANIE WONG



SOUTH AUSTRALIA

AGOSCI SA was excited to finally welcome back face-to-face professional learning and our presenter, Fiona Beauchamp, for our 2022 National Tour. Around 30 delegates participated in Fiona's workshop titled *Understanding Movements for Accessing Technology and Communication*. We learnt that all communication requires movement and Fiona shared her key strategies for success. Everyone was engaged and the workshop received positive feedback. Thank you so much Fiona for sharing your in-depth knowledge with us all!

The Organising Committee warmly invites you to the 15th Biennial AGOSCI conference to be held from 3 - 6 September 2022 in Hobart, Tasmania. The theme for this Conference is *Explore, Engage, Emerge*. Participants will have the opportunity to engage and network with our AAC community and watch relationships and opportunities for authentic communication emerge. I look forward to meeting all the SA delegates at the conference, see you there!

:: JODIE WHITFORD



Photo of room of people at the National Tour SA

STATE REPORTS

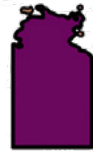
NORTHERN TERRITORY

Last month, the AGOSCI members of the NT (and non-members) got to take part in the National Tour virtually! It was great to be able to attend such a workshop and not have to worry about the large distances many of us would have to travel. Thank you to Ria for all the hard work she put in to making it happen, to Fiona Beauchamp for imparting her wisdom, and to anyone else who helped to put the event on.

On another note, I've recently been in contact with some parents in the top end looking for information about AAC in that area. I am based in Alice Springs and as I'm sure you know, it's kind of a world away from the top end. If there's anyone in that area of the NT that is interested in being involved with AGOSCI, shoot me a message as there's always an opportunity to connect.

I'm very much looking forward to the conference in Tasmania in September this year – things are looking good travel wise so hopefully we can all meet up there!

:: MEAGAN LAY



WESTERN AUSTRALIA

AGOSCI WA has had a rocky start to 2022! There was much excitement at the opening of our borders after so long, however the inevitable rise of COVID cases in WA led to the Perth leg of the National Tour having to be cancelled. However some of our members were able to join the tour virtually which was fantastic! Our WA team is back up to full strength now since Freya's return from a brief period of maternity leave in late 2021, and we look forward to being able to host some more face to face events in the second half of 2022.

:: YVETTE THEODORSEN



AUSTRALIAN CAPITAL TERRITORY

The ACT representative position is currently vacant. Email us if you are interested in becoming the ACT rep.

:: VACANT




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GET INVOLVED WITH THE COMMUNICATION HUB WEBSITE PROJECT!

by **Eliza Howard, Ria Ferris, and Amy Fitzpatrick** from **Speech Pathology Australia**

The Communication Hub website (currently under construction—due to launch in late 2022) will be a site for people with communication difficulties, their communication partners, and the wider community. It will help people understand the importance of communication in everyday life. This website will also provide resources for those with communication difficulties to empower themselves and others.

We need you to get involved in the development of the site by providing feedback on our draft version, which is currently not public. If you are interested in getting involved in the Communication Hub's development, contact us by one of these means:

- Scanning this QR code to fill out an expression of interest
- Contacting us at this link
 www.surveymonkey.com/r/SPACommHub
-  Emailing Eliza at ehoward@speechpathologyaustralia.org.au.



We will contact you shortly.

About the site:

During recent years, Speech Pathology Australia (SPA) observed a significant trend in member enquiries regarding support and resources for supporting their clients, themselves, and their broader community in the use of Alternative and Augmentative Communication (AAC). SPA partnered with AGOSCI for this project to involve a greater number of subject matter experts in this field, including people with lived experience of communication difficulty. SPA and AGOSCI successfully secured funding from the Australian Department of Social Services through the Information, Linkages, and Capacity building scheme.

The restrictions of COVID-19 since 2020 mean that freely accessible, evidence-based information and resources relating to AAC and multi-modal communication are more essential than ever.

People with complex communication needs, and their communication partners including family members, educators, and clinicians have long been impacted by the fragmented nature of information sources regarding best practices in AAC. In an open marketplace,

clinicians and family members now must also separate sales and marketing, from evidence-based information to avoid bias in assessment, decision-making, and prescription of AAC solutions for those with complex communication needs. Information overwhelm is also a factor, and information is not always presented in a way that is easy to understand. This leads to many people being excluded from accessing information online. With so many AAC-related products and services available it's hard to know where to start and how to stay across it all!

The Communication Hub will help to solve these problems by providing a centralised, curated, evidence-based hub of communication information and resources available for the broader community to access. The primary benefit being just one location for accessing all the essential information you may need if you or someone you know has diverse communication needs.

The current context is about proving the need for communication information and resources. This means having a reputable website where people can access information about their disability to show funding bodies that is easy to understand is vital, as well as educating support workers and family members without having to create resources yourself. There are videos, graphics, text, and other modes of communication because we know people learn in different ways. There will also be factsheets about different topics that can be downloaded and printed out if you want to give people information about your communication disability, or videos that you can share.

We are focused on seeking feedback from the SPA Aboriginal and Torres Straits Advisory Committee to make sure it is inclusive for First Nations peoples.

The website design is well underway. A dedicated project team, including an advisory committee and a steering committee have ensured constant revision and review as the project has unfolded. It has been fantastic to hear everyone's perspective of communication and try to integrate as many ideas as possible in authentic co-design between people with communication disabilities and support networks.

We look forward to having you assist us and to hearing your feedback!

CULTURAL AND LINGUISTIC DIVERSITY IN AAC: A GROWING FIELD IN NEED OF RESEARCH TO GUIDE IT

By Natalie Skinner

As readers of *AGOSCI In Focus*, you will know, that Augmentative and Alternative Communication (AAC) systems, are a voice for people with a communication disability. They are a means of interacting and participating socially, and help us to develop a social identity, build relationships and cultural belonging. It makes sense that these systems would include the languages we speak at home and in the community, but actually, most AAC systems are designed in English only, even though 21% of people in Australia speak a language other than English at home (Australian Bureau of Statistics, 2017). With growth of technology, there are more and more bilingual and multilingual AAC options available, but there is not much research to guide their design, or use, and so the needs of many culturally and linguistically diverse families are not being met.

AAC systems need to reflect each person's identity and be functional across different social contexts. Therefore, in Culturally and Linguistically Diverse (CALD) contexts, this voice should include home languages and the wider community language or languages. Speech Pathology Australia, in their AAC Clinical Guidelines, has recognised this issue, urging "increased recognition of the need to address the cultural communication needs of Indigenous and First Nation's peoples, people of diverse cultural and linguistic backgrounds, refugees and people in majority world countries." (Speech Pathology Australia, 2020, p. 39). To appropriately address this, we need research that helps us to understand how people use AAC in culturally and linguistically diverse contexts, so we can develop suitable resources and services.

Cultural and linguistic diversity is a fundamental aspect of development and personalisation of an AAC system, and yet it is frequently overlooked or met with barriers in terms of resources available and the way we think about multilingualism and disability. Developing effective AAC systems is a complex, long-term process, with a multitude of factors to consider. People with communication disabilities vary widely in physical and cognitive abilities, and as such AAC systems vary in how they are physically accessed and how their content is organised and presented. Existing "off the shelf" systems require personalisation which is accomplished through use over time. AAC design has historically developed in monolingual contexts (Huer, 1997), in which language of choice has not been included in

system design. Research in Australia, South Africa, and the U.S., has found that speech pathologists and AAC resources are predominantly monolingual. This creates barriers to development of appropriate CALD AAC (Dukhovny & Kelly, 2015; McLeod, 2014; Tonsing, van Niekerk, Schlunz, & Wilken, 2018).

Practical barriers

The small amount of existing research shows that there is not enough appropriate AAC in multicultural communities, and it also shows positive outcomes in cases where cultural and linguistic diversity is incorporated in AAC systems (e.g., Gona, Newton, Hartley, & Bunning, 2014; McCord & Soto, 2004). Integration of cultural and linguistic diversity can include, culturally appropriate symbols and text, and speech output in all required languages. Vocabulary selection and layout need to accommodate differences in each language (Tonsing et al, 2018), and enable switching from one language to another in conversation (King & Soto, 2022). These complex dimensions need to be considered and adapted to the person's cognitive and physical abilities (e.g., Tonsing et al., 2018). Speech pathologists often do not have knowledge of, or access to resources in the relevant languages in order to do this well.

Equally, beliefs and perspectives on disability and parent-child interaction vary across cultures. Differences in each family need to be respected and valued in collaborative development of AAC systems (e.g., Amery et al., 2020; Gona et al., 2014). Failure to consider these variables results in systems which do not meet the person's needs. For example, the system may be viewed as an educational tool, a feature of school rather than home life and therefore not the person's 'voice' (e.g., McCord & Soto, 2004). Ultimately, this can lead to exclusion from social interaction across different cultural contexts.

Development of AAC resources that incorporate the required languages is time intensive, and made more challenging by the number of languages and varieties within languages that present in a multicultural caseload (e.g., Tonsing et al., 2018). More than 300 different languages are spoken in Australian homes (Australian Bureau of Statistics, 2017). Speech pathologists who speak a language other than English, often do not speak the same language as their clients (McLeod, 2014). While progress has been made in

development of CALD resources in places such as the U.S. with larger linguistic minorities (McLeod, 2014, 2018), and several hi-tech systems now include a range of languages, the challenge persists. Adaptation on a case-by-case basis is needed, with consideration of each person and their social context. Research based evidence is needed to guide CALD AAC design. This need has been long recognised (Rossi & Balandin, 2005), yet, perhaps owing to the complexity of the area, a scarcity of research is ongoing.

Ideological barriers

For many years, there has been a misconception that people with disabilities cannot or should not learn a second language, based on fears of cognitive overload and confusion that may cause further delays in learning (e.g., Simon-Cereijido, 2018; Yu, 2013). This misconception is doubly problematic. Firstly, the primary goal of enabling communication and interaction through AAC, overrides doubt or concern over a person's capacity to communicate in more than one language (e.g., McLeod, 2018). AAC is tailored to enable communication within a person's capabilities. Linguistic diversity, being a core aspect of communication, is not a complexity to remove. Secondly, research is increasingly showing that there are no negative effects of exposure to, or learning of, a second language in people with disabilities (e.g., Iarocci, Hutchison, & O'Toole, 2017). On the contrary, depriving children of linguistic diversity by withholding their heritage language has negative effects on family interactions and socio-cultural identity (e.g., Yu, 2013, 2016a).

The widespread monolingual design of AAC systems reflects attitudes and beliefs we have about language, or the underlying language ideology that has shaped AAC development (Tonsing & Soto, 2020). Two main ways of thinking about language include, conceptualising it as a 'system,' or as a 'practice' (Tonsing & Soto, 2020). The idea of language as a system made of words, and grammatical rules, combined with political and nationalistic influences, led to AAC designed for one language, the majority language in each country (Tonsing & Soto, 2020). With increasing recognition of immigration and globalisation, the need for AAC in different languages and multiple languages, led to development of separate AAC systems for each language (e.g., McLeod, 2014; Tonsing & Soto, 2020), such as Spanish and English systems in the U.S. (McLeod, 2014; Rossi & Balandin, 2005). These separate systems make it difficult, or impossible to change between languages in conversation.

Thinking of language as a practice, something we use for communication and interaction, changes the way we design AAC. When we see AAC as a voice to enable interaction, we see that this voice needs to include the languages of the people we are talking to, enabling interaction within and across culturally and linguistically diverse contexts (e.g., Tonsing & Soto, 2020). Changing from one language to another in conversation, or 'code-switching' occurs naturally in bilingual or multilingual interactions (Auer, 1984; Wei, 1998). People can show that they belong by speaking a shared language, and code-switching can play a role in relationship development, cultural belonging, and identity (e.g., Georgalidou, Kaili, & Celtek, 2010; Yu, 2016a). In many existing AAC systems that include more than one language, code-switching is difficult to manage (King & Soto, 2022). Preventing or inhibiting code-switching has the potential to affect relationships and identity in interaction. Yu (2016a) has demonstrated this in a study involving a child with complex communication needs, however more research is needed, which includes interactions involving AAC.

There is a growing body of knowledge demonstrating the complexities of AAC interactions, and some research about AAC needs in CALD families (e.g., McCord & Soto, 2004; Tonsing, van Niekerk, Schlunz, & Wilken, 2019; Yu, 2016a), but there is very little research on how interaction occurs when linguistic diversity is integrated into an AAC system. For example, the barriers encountered in code-switching, or strategies applied to promote continuity in interaction. Evidence grounded in interaction and personal experience is essential to inform services and lead to better outcomes.

Research participation

I am currently conducting a research project exploring interaction and experiences of families who use AAC, and speak more than one language at home. This PhD project has been approved by the Human Research Ethics Committee at Macquarie University (Reference: 52022986036057).

If you are interested in participating or finding out more about this project, please contact Natalie Skinner.

 natalie.skinner@hdr.mq.edu.au

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Jess. My story



I did a course at TAFE.

It was a Certificate 3. It was about animals.



Some of it was easy. Like I worked with animals.



Some of it was hard. Like when I had to read.



I have just won an award. It was for all of Victoria.

It was for being a really great TAFE student.

My teachers said

- I did **not** give up
- I always tried my very best.

It is called the Young Achievers Award.

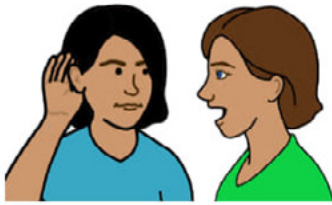
I was very excited to win.



There was a big dinner in Melbourne.

My family came too.

I bought a new dress. I had my hair done.



I do work with Cass. We read Easy English.

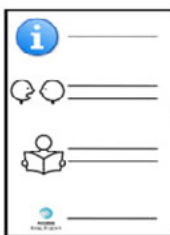
I can tell Cass when I do **not** understand.



I tell her what

- is good
- needs to change.

It helps her make Easy English better.

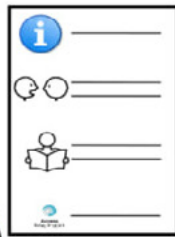


I can read all the words.

I know what the pictures mean.

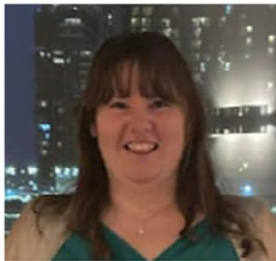
I like Easy English a lot.

I know what I am reading about.

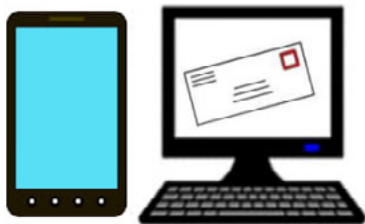


I wish my course was in Easy English.

It helps me to understand.



Jess.



You want to know more about Easy English.

Call Cathy 0466 579 855

Email

cathy@accesseasyenglish.com.au

Images from TheNounProject, Tobii-Dynavox and Picto-Selector.

Photos from Jess Stone and 7News Young Achiever Awards Facebook.

Access Easy English wrote this article. May 2022.

EASY ENGLISH: CONSUMERS TELL US WHAT WE NEED TO KNOW

By Cassandra Wright-Dole and Cathy Basterfield,
Access Easy English

Access Easy English focuses on developing written information accessible for people who have low literacy. Low literacy can be due to many reasons such as socio-economic disadvantage and poor access to education. It may also be associated with learning or intellectual disabilities. There are many other reasons why people may need Easy English, including English as a second language, mental health, deafness and acquired brain injuries such as following a stroke.

The issue of low literacy is widespread and the need for accessible written information is not limited to a single demographic. Australian Bureau of Statistics show that 44% of Australians, aged between 15 and 65 years old, do not have the literacy skills to read a range of day-to-day reading tasks. This equated to 7.3 million adult Australians at the time of the research (ABS Data 2013 #4228/ OECD PIAAC Data 2013, 2016). This does not include regional and remote Aboriginal and Torres Strait Islander people, nor people who live in institutions.

In developing Easy English, the views of the intended audience are critical. They provide insights from their lived experience on the choice of words, the sentences, the images, and the format. It is the combination of how these factors work together that appear to assist in how the reader understands the written information. The feedback we have had from people with low literacy is that Easy English is beneficial to them. They would also be more inclined to read more Easy English if it was more widely available.

One of these consumers is Jess. Jess commented after first doing a consumer review that she wished more things were in Easy English, including the TAFE course she has recently completed. Jess has welcomed other opportunities since that first experience in reviewing Easy English. We equally value her lived experience input in the projects we develop.

Some of Jess's feedback includes

- identifying words that are still too long or not known
- when information needs to be in a different order
- images that are not guessable
- images that are too complex or need more information
- steps to help her access any weblinks.

As with many readers who prefer Easy English, Jess has commented that each page does not have lots of words.

In her mid-20s, Jess is autistic with a learning disability and difficulties with her speech. Despite this, Jess completed a Certificate III in Animal Studies last year. Jess held strong when people told her she would not succeed in gaining her certificate. Jess's affinity with animals meant the practical aspect of her studies were a breeze; however, her disabilities made the written component of the course more challenging. Jess completed her course over three years instead of one.

Her experience with studying was that many people felt it was not an achievable goal for her. However, with some extra time, Jess was able to complete all requirements. In an article written by the local paper, she said, "People think I may not be able to do things which I know I can, it just takes me a little while longer to do." (Bendigo Advertiser 3/12/21)

The resilience displayed by Jess was not unseen. In 2021, Jess was nominated as a young achiever for the Kangan Institute Inspirational TAFE Student Award and announced a semi-finalist for the 7NEWS Young Achiever Awards Australia in March 2022. The 7NEWS Young Achiever Awards seeks to acknowledge, encourage, and promote the achievements of young people up to 29 years old. Winners were announced at an awards gala in April.

For Jess, participation in the gala was perhaps more significant than whether she won. The participation itself was recognition of her achievements, for herself and those around her. Like us all though, in the lead up to the gala, Jess booked in to have her hair done, booked accommodation in the city, and purchased a beautiful gown. Jess went on to win her category. A week later, she was still on Cloud 9. And like many others who get opportunities to be recognised for their achievements, she now has wonderful memories of the event, her own feelings of achievement, how proud her family are of her, the award itself, planning for and buying her new gown, and the photos for years to come.

The Access Easy English team congratulate Jess on all her achievements, both in her studies and in her award.

We encourage anyone who is interested in supporting the development of quality Easy English to make contact with us. We are always interested in meeting and working with other people who would like to provide feedback on the Easy English we develop. Your input ensures we are creating Easy English that works for you.

Cassandra Wright-Dole and Cathy Basterfield

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ARE WE ON THE SAME PAGE WHEN IT COMES TO SUPPORTING OUR CLIENTS WITH AAC?

By Clare Gregory One and Tracey Hanigan, Speech and language pathologists, Department of Education, Tasmania

As speech and language pathologists (SLPs), we belong to a profession that prides itself on excellent communication skills and the ability to work as a team. We know that we can get the best outcomes for our clients when we work collaboratively with other professionals. There is a wide body of research available that supports this inter-professional teamwork (Wilkinson & Young, 2015; Copley & Ziviani, 2007). As far as working with other SLPs (intra-professional collaboration), this happens more commonly when we work as part of a SLP team (or through mentorship) where we can provide or receive collegial support when we find ourselves managing complex cases. Times are changing though, and with the NDIS now an established part of the picture, we find ourselves working more and more with other SLPs as primary therapists for shared clients. This means that there are two therapists contributing to our shared client's augmentative and alternative communication (AAC) system prescription and therapy plan.

In March 2021, 6617 students in Department of Education schools in Tasmania were identified as

having a disability as part of the National Consistent Collection of Data (Department of Education, Tasmania 2021). Many of these students with diverse communication needs were supported through the use of an AAC system. These students who use AAC systems may have access to a NDIS funded SLP, as well as the one provided through the Education Department, to support their communication development. On paper, this looks like a great model for children and their families. Their Education Department SLP can provide consultative support in the school setting, including working with teachers to develop learning plan goals and training school staff to support their student to use AAC in the classroom setting, while their NDIS therapist offers individualised therapy sessions focusing on family specific goals. They often work more closely with the child's family on targeted vocabulary expansion and developing operational skills, specific to the home environment. This model supports generalisation of communication skills throughout the whole day – at home, in the community, and at school.

What does it look like when it's working well and we are on the same page?

When we work successfully as a collaborative team, we offer our clients a robust service of holistic communication support that moves with them across communication contexts, environments and partners. This ensures that families and schools feel supported to communicate effectively with their child/student while they, themselves, support their child's/student's communication development.

So, what are the key ingredients that bring this vision to life? From our experience as practitioners, we suspect it comes down to shared knowledge of current best practice in AAC and clear communication. As two SLPs working together with the same client, we need to have a shared understanding of the intervention plan and clearly defined roles. We must agree on the choice of AAC system for our client, the amount of vocabulary to be provided and the specific therapy strategies to be used. Good communication can happen in many ways: regular catch ups (in person, on the phone or by email), a written agreement that defines our individual roles and/or stakeholder meetings. There are many versions of what collaborative communication can look like. Ultimately, it needs to reflect whatever works best for the family.

What can happen when we're not on the same page?

There can be disagreement, parent confusion (school staff confusion too), and it can occasionally result in clients having different AAC systems for home and school. This is not in the best interests of the child, their family, and all who work with them.

One family, whose AAC journey began with their school SLP (while on a waitlist for their NDIS SLP), was recommended and prescribed a Pragmatic Organisation Dynamic Display (PODD) communication book for their child. When they later attended their first appointment with the NDIS SLP they were introduced to a different system, where the child had access to photos of preferred items they might want to request. These two communication systems were very different, and the family was confused about whose advice to follow. The school SLP found this situation confronting and felt ill equipped to talk to both the family and the NDIS SLP about their differing opinions.

What is getting in the way of SLP intra-professional collaboration?

Again, it may come down to knowledge of current best practice and communication.

Perhaps it's not surprising that there is a difference in best practice knowledge among SLPs in the AAC field. After all, we graduated at different times from different universities, we have different levels of experience, and we have had different post-university professional learning opportunities. As therapists we typically have large caseloads and time pressures. It can be hard to keep up with the many clinical areas that we must maintain our knowledge in. AAC is a dynamic and ever-growing clinical area and what is considered best practice within the field is continually changing. At the time many of us went to university, we were taught that potential AAC users had to demonstrate certain pre-requisite skills, such as showing they were an 'intentional' communicator, before they could access AAC. There was also a need to work through a hierarchy of symbols and it was thought best to start with a small vocabulary to gradually build upon.

These days, best practice is to presume that every client we work with has the potential to be a competent communicator. In fact, the only pre-requisite for providing individuals with a robust AAC system is that they are breathing (Mirenda, 1993). Their AAC system must provide the vocabulary to allow them to 'communicate what they want to say, when they want to say it, to whoever they want to say it, wherever they want to say it, however they want to say it' (Porter, 2007). Zangari (2014) stated that a linguistically robust AAC system must include no fewer than 300 core words, a wide range of word classes, and the ability to make morphological changes; it must also support motor automaticity and allow for planned growth.

We are all very busy, and making time for collaboration can be difficult. NDIS SLPs have to factor in billing for the time spent contacting the other SLP, and of course there are other practical issues like scheduling a time to communicate face to face (or by phone or email). With shortages of SLPs nationwide and the increasing provision of telehealth as a service delivery model, we often find that we are not even in the same state. These factors can make it difficult to build strong and respectful working relationships. This can be further exacerbated when we have different ideas about the best intervention plan for our client. Many of us lack experience and skills in negotiating conflict within a professional relationship.

What opportunities do we have, right now, to be on the same page?

Being on the same page starts with being up to date with current best practice knowledge in AAC. As a group, and as individuals, we can stay up to date by:

- using AGOSCI and Speech Pathology Australia (SPA) resources/guides, including member webinars and other professional learning opportunities
- keeping our knowledge in the field of AAC current by attending the AGOSCI 2022 Conference in Hobart – there will be a pre-conference workshop that includes information about supporting individuals who use AAC
- using online resources (including websites and social media accounts) such as the Informed SLP, AAC Coach and SpeechBite for information about best practice and current research
- joining special interest groups – locally or through social media platforms

Once we are all on the same page with current best practice, the next step is to have clear and open conversation/collaboration with our SLP colleagues, and the clients and families we work with. With that open communication, we provide perspectives of the client/family at home (and in their community) and in their learning environment. Some ways we can work together include:

- written agreements about the roles of each SLP working with the client. In some schools this is written into the NDIS service agreement for therapists visiting schools
- phone calls or emails (although may incur an additional cost to families with NDIS funding)
- team meetings with all stakeholders
- a quick chat if the opportunity presents, such as when the NDIS therapists visits the school to see a client

Are there some new opportunities we can create, moving forward, so we can all be on the same page?

Some questions we might ask include:

- As a profession, how can we build our collegial relationships to ensure that all SLPs who work in the AAC space are up to date with best practice?
- Could there be a place for more mentoring opportunities in the AAC field at the local and/or

national level?

- How can we provide opportunities for SLPs (at university or in our workplaces) to improve our interpersonal skills so we can learn how to negotiate disagreement? There are not many other areas of practice where we share clients with another SLP, and so negotiating these tensions in shared practice is something that we must be given guidance to navigate.
- Are there gaps in our knowledge that ongoing research into this area can address? Some ideas include:
 - minimum standards for AAC education within our university courses
 - AAC best practice knowledge and experience in different SLP groups (for example: new graduates, older graduates, public service, NDIS)
 - strategies to address the issue of any knowledge gaps identified
 - SLP intra-professional collaboration – what works well and what doesn't
 - parent experiences of working with more than one SLP
 - different models of SLP intra-collaboration, depending on the location or services involved

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LET'S SHARE A STORY: HOW BOOKS AND STORIES CAN ENCOURAGE INTERACTION, SHARED MEANING AND DEVELOP CONCEPTS/UNDERSTANDING WITH CHILDREN AND ADULTS WHO HAVE MULTIPLE DISABILITIES

By Beth Foale, Speech Pathologist

Introduction

J is a 13-year-old girl who enjoys close one-on-one interactions with familiar people, musical instruments and songs, and movement-based activities. She has multiple disabilities including an intellectual impairment, physical disability, cortical visual impairment (CVI), and a hearing impairment. J communicates using natural communication modes including facial expression, eye gaze, some individualised gestures, body movement, and vocalisations. J's understanding of messages is best supported by touch cues, key signs/gestures, and real objects within familiar contexts and routines.

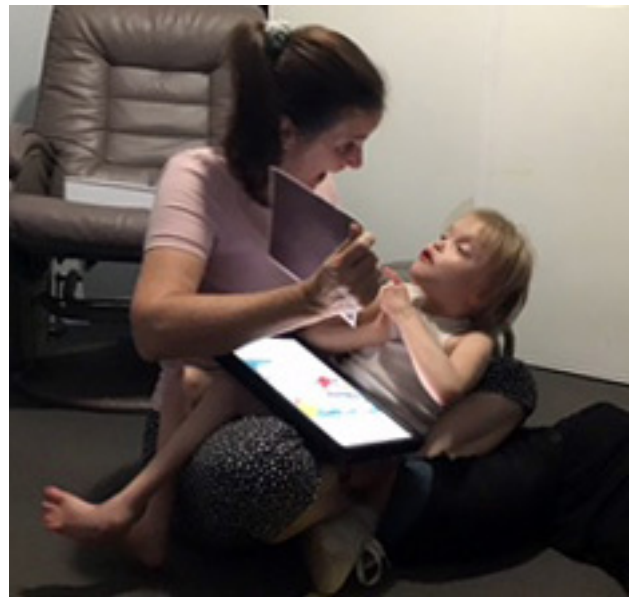
J has always shown an interest in books. However, those shared with her previously, took into consideration her low vision and contained mostly single images per page with a limited text (usually only a single word). J's mum has a deep love of books and is a published author herself. She wanted to explore the possibility of sharing some of her favourite childhood stories with her daughter in a way that was both accessible and meaningful to her.

This paper explores the ways in which books can be modified and adapted in their physical presentation as well as how stories can be shared to maximise an individual's engagement, participation, and understanding. It also discusses ways in which sharing stories can promote social interaction and communication skill development in children and adults with multiple disabilities.

Book selection and modifications

Our knowledge of J's vision, hearing, cognitive, and physical abilities, and her individual interests and preferences all contributed to the way in which books and stories were presented and shared with her.

The books selected were about familiar and motivating topics. J has previously shown an interest in fish, so books such as *One Fish, Two Fish, Red Fish, Blue Fish* by Dr Seuss were in keeping with her specific interests and existing knowledge.



J gazing towards book page

Books with repetition of language and features such as rhyme, alliteration, and onomatopoeia helped to capture J's interest and auditory attention and to add meaning to the story. Examples of books that were selected for J included *Mr Brown Can Moo! Can You?* by Dr Seuss.

As J has cortical visual impairment (CVI) that impacts her ability to process visual information, some illustrations in the books were considered too visually complex for her to gain meaning from them. J's mum enlarged the single pictures: each fish in the book, *One Fish, Two Fish, Red Fish, Blue Fish*, cropped out the background information, and drew a black outline around the picture. These were then presented to J as either a laminated picture card or as a single image on J's iPad Pro using the Pictello app. The backlighting provided by the iPad meant that these pictures were potentially easier for J to see.

J will often reach out and grab objects as a way of interacting with or exploring them and, as a result, can unintentionally rip the pages of a book. By providing the laminated pictures or the images on the iPad, this preserved the books which J's mum had owned since she was a child.

Sharing the story

J's mum would say and sign or gesture the story simultaneously. She would then show J the illustration either using the hard copy laminated photos or on the iPad, depending on J's preference at the time. Real objects were also used on occasions, such as a toy car when talking about the car fish.

The story was acted out by J's mum using gesture, animated facial expression, body language, and key signs, as these helped J to visually attend to her communication partner's actions and to provide further meaning about the story.

When reading the story aloud, J's mum used exaggerated intonation, and at times singing rather than speaking the story, as J is particularly attentive to singing. She did not simplify or modify the text so as to not lose the overall intonation pattern, rhythm, and rhyme. It is unsure how much J can hear, however observations of her previous responses showed awareness of intonation and some vowel sounds as she will vocalise "ar" in star" at the appropriate time when listening to the song, *Twinkle, Twinkle Little Star*.

Additional sound effects were provided, such as when reading about the sound, "knock, knock" in *Mr Brown Can Moo! Can You?*, knocking on a hard surface close by (e.g., door, wall).

J's mum was responsive to her level of interest in the book. If J was engaged, she would extend the time on a given page or part of the book; if not, she would move onto the next page.

J is highly motivated by people, especially her mum and often engages for longer during interactions with her. Sharing a book, or in this case the pictures or iPad, was often challenging as J frequently wanted to sit in her mum's lap, which meant that she could see the book but not her mum's face. Alternatively, sitting face-to-face with her mum enabled J to observe her mum's gestures, facial expressions, and body movement, but it was more difficult for her to access the book. J's mum problem solved and provided her with a supportive cushion that fit snugly around J so she could sit beside her mum with good visual access to both her mum and to the book.

Discussion

J anticipates reading books with her mum as the cushion and iPad and laminated pictures provided

her with meaningful object cues about this upcoming experience. When these items are presented, J moves over to the cushion, then looks at her mum and smiles to show she was ready for an interaction and activity that she knew would be enjoyable.

While J mostly observes her mum's actions, she looks at the iPad or pictures and reaches out to them on occasions when they are presented to her. In the past it has been difficult for J to shift her gaze from a person to an object. However, recently she has started looking at an object she is engaging with, then looking to her mum (a short distance away) as a way of sharing this experience with her. Reading books has provided her with the opportunity to move her visual attention between a person; that is, her mum gesturing or signing the story and then to look at the visual (laminated picture or iPad) to gain further information about the story.

J usually spends around 2-3 minutes engaging in a highly motivating activity. She will move away from activities or place her hand over her eyes when she wants to finish or have a break from the activity or interaction. Overall, J is able to stay engaged with her mum for longer periods of time during book reading activities. J's sensory regulation needs and pain levels can significantly impact her ability to interact with others and to engage in activities at any given time.

J demonstrates her interest in the story by maintaining her visual attention to her mum's actions. She smiles and sometimes laughs to show her enjoyment. J's vocalisations can be loud and continuous, and at these times it is difficult for her to listen and engage with others. J's stilling of her body, orientation towards her communication partner, and decrease in the intensity, volume and frequency of her vocalisations, are her engagement cues. These are evident at times during familiar activities including book reading.

J's increased attention and interest in specific books provides her with opportunities to further explore language concepts within a motivating and meaningful context. The book, *One Fish, Two Fish, Red Fish, Blue Fish* is rich in concepts including colour, number, size, actions, and body parts. When reading about the blue fish, J's mum presents another object that is blue. She uses gestures and body language when presenting concepts such as "run" by doing a running action. When reading about the fish with the yellow hat, J's mum signs hat and then touches her on the head.

While reading books, J's mum also observes, interprets, and responds to her communication attempts.. When J covers her eyes to request a break, her mum waits until she is ready to read some more. J uses an individualised gesture, tapping on her forehead with a fisted hand to indicate she likes something. J's mum will acknowledge this by smiling and commenting, "you like this J" as well as doing the same individualised gesture as J.

J's mum also provides her with opportunities to use vocalisations in context, such as singing *Twinkle, Twinkle Little Star* when reading about the star fish in *One Fish, Two Fish, Red Fish, Blue Fish*. J is highly familiar with this song and will sometimes vocalise "ar" for "star." J's mum also pauses after certain sounds in books to provide her with the opportunity to say these: "moo" in the book, *Mr Brown Can Moo! Can You?*

Summary

- Consider the positioning of both the individual and their communication partner to ensure optimal access to the story and each other, as well as being well supported and physically comfortable for the activity
- Select books on topics of interest and/or based on experiences, but also consider introducing different/new stories to expand topics if appropriate
- The types of books to source and provide may include published books to purchase or borrow, personalised books written for or with the individual, free books written by others, (e.g., Tar Heel reader)
- Develop a book reading routine; consider having a specific object cue, location and/or time for book reading
- Determine the book format that best suits the individual, (e.g., a hard copy book, story on a computer or iPad with direct or switch access, audio book, modified book with tactile symbols or real objects)
- Determine how the book will be "read" to the individual, (e.g., read aloud, signed, mimed, hand under hand tactile exploration, or a combination of these)
- Provide the individual with opportunities to be actively involved in the story reading process, (e.g., turning the page in the book, accessing a switch or touching the screen to turn to the next page if reading books in apps such as Pictello or websites such as Tar Heel reader)



- Consider how stories can be made more meaningful to an individual by providing additional cues such as real objects, sound effects, and intonation
- Consider how illustrations in stories can be more visually accessible to an individual (if relevant) by simplifying pictures and/or providing optimal viewing conditions, (i.e., reducing glare, maximising contrast, or utilising back lighting on an iPad)
- Consider the communication and social interaction skills that can be focused on during book reading activities, (e.g., expressing preferences, joint attention, anticipating events or actions, vocabulary/concept knowledge, requesting more, maintaining interactions, expressing feelings, commenting)

The next chapter....

Nicola Grove, the developer of Storysharing®, focuses on how to identify, create, and share the personal stories of individuals who have complex disabilities. So far, J has experienced the joy of observing and listening to other people's stories. In the future, we are hoping to help J develop her own stories which she can share with others. It is important that everyone can share their stories with others and to do this in a way that is meaningful for them. This could be a story about a personal experience, a person, place or object of interest, or an enjoyable activity they participate in frequently or routinely.

Story topics that could possibly be explored for J include her new wheelchair, which she likes to

manoeuvre herself in (especially going around in circles) or her interest in certain fabrics which J likes to feel/hold on to. Our careful observations of J and the knowledge we have about her sensory abilities, interests, and preferences will guide us in developing and telling her stories.

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COMMUNICATION INTERVENTIONS TO SUPPORT YOUTH WITH COMMUNICATION DISABILITY TO LEARN TO USE SOCIAL MEDIA

Emma Grace, Flinders University, College of Nursing and Health Sciences, Caring Futures Institute

A young person used Key Word Sign to comment on learning to participate in online conversations, “LIKE, GOOD”....”TALKING”....”HAPPY”. For her parent the highlight of supporting her daughter to learn to use social media has been the increased motivation for, and enjoyment of communication.

It’s that response back [from others] that’s the most meaningful for her, so they’ve actually commented on something she’s really said, that’s what’s the most powerful for her. (Parent of participant)

I recently completed my PhD investigating an intervention to support youth with communication disability to learn to participate in online conversation via social media. I hope that from the knowledge gained in this project I can encourage clinicians and parents of youth with communication disability to include online conversation and social media as part of their communication interventions. The larger PhD study involved a mixed-methods study to investigate a 4-month cross-age peer e-mentoring intervention to enhance participation in online conversation by youth who use AAC ($n = 4$, 13-18 years). This article provides an informal reflection on the research, more details are available in the thesis or other publications (Grace, 2019; Grace & Raghavendra, 2019; Grace et al., 2019). Further work is currently underway. I am thankful for the mentors, young people, and their families who gave their commitment and time to participate in this study.

Social media is used all over the world for communication, providing countless opportunities for interaction and is used disproportionately more by youth than any other age group. In 2018 80% of Australians reported using social media (Australian Bureau of Statistics, 2018). My PhD research investigated and established that online conversation can be a valuable context for communication interventions.

Social media accessibility cannot be assumed

Although it is often assumed that youth can easily connect on social media and do it all the time, we know

that some individuals with communication disability want more support to get online. Despite widespread use of social media, under 38% of respondents with a sensory or speech disability used social media to connect with others outside of their home (Australian Bureau of Statistics, 2020). In my PhD research, participants and their parents experienced challenges in accessing social media including needing support to get online, set up the technology, being unable to physically access some platforms, unable to access funding for equipment to use the computer at home, and needing support when complexity of the online interaction or technology increased (e.g., talking to more than one person at the same time, typing into the chat directly from their device). Similar findings have been reported in previous research (Caron & Light, 2017; Raghavendra et al., 2018).

There’s a lot happening when he’s on his computer... his [Bluetooth] link, if that’s working, if it’s not working... if the video’s working, if it’s not working, if the internet’s working. (Parent of participant)

Broken.... for people [who use AAC] you need to have it reliable. (Participant)

Concerns regarding online predators and cyber-bullying further highlight the need for a proactive approach to support and provide education in this important space for interaction. Participants found the intervention gave them more confidence in accessing social media, “I am not worried as much”. (Participant.) Parents also appreciated this aspect of the support,

We went through all those [safety] procedures, but she had that -- she’s not getting it unless this happens and that was at the time ‘this is all the [safety] rules’ ‘okay’. (Parent of participant)

Social media reduces communication barriers

Online conversations have different rules and contexts than face-to-face conversations. For example, the transcript of a social media conversation is often persistent and visible which may be experienced as an advantage by youth with communication disability. The persistent transcript enables conversations to take

place over a longer time, supports comprehension, and normalises use of a range of modes (i.e., sticker, photo, emoticon) and technology to communicate. There is no expectation for formal language and syntax online, allowing individuals with communication disability increased economy and flexibility of language use. In my PhD research participants reported how online conversation created increased opportunities for conversation saying the changes meant they can: “talk more.....I love it.” (Participant), “more people can speak to me”. (Participant), “T-A-L-K” (Participant).

Social media enhances communication skills

Individuals who use AAC are known to experience difficulties in face-to-face conversations such as taking less and unequal turns, using a restricted range of pragmatic functions (e.g., predominately responsive) (Clarke & Wilkinson, 2009). It is likely that these conversational participation patterns impact on a young person's opportunities to develop communication skills. Linguistic analysis of participant online conversations in my PhD research indicated that youth who use AAC initiated conversation, topics, took optional turns and used a wide range of pragmatic functions. Participants comments confirmed these observations “I talk more” (Participant). Another participant pointed to her AAC app and to clarify confirmed that using the app has got easier, she used Key Word Sign to explain that this is because she has been “CONCENTRATING” to create, copy, and paste messages for social media. Participants' parents reflected that online conversation supported youth to develop communication skills. For example, improving pragmatic skills, improved use of their AAC system, increased confidence communicating.

In speech therapy we're talking about the rules of communication and how to communicate and going backwards and forwards, by doing it ...[online] it was those same kinds of rules applying, but she was able to do it at her own pace so that was just so fantastic. (Parent of participant)

Parents of participants also reflected on how some communication partners improved their attitude about the young person's abilities after having online conversations with them.

Well there was the comment the other day when [extended family member] was talking to him ... [online] and he was having a conversation with her and somebody else, like two, and she emailed me on my email and said ‘oh *Jake’s fun to talk to. I didn’t realise he knew so much about a lot of things’. (Parent of participant)

This article encourages you to consider how online

conversation and social media can be a greater part of our communication intervention tool kit. When looking for ideas about how to use social media or for information about different platforms there was a great story in the December 2021 edition of In Focus.

**Pseudonym used to maintain anonymity*

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PLANNING RESEARCH WITH PEOPLE WHO USE AAC: ARE WE ON THE SAME PAGE?

By Jacinta Pennacchia

Jacinta Pennacchia is a speech pathologist and PhD student. Her research is focused on assessment of mental wellbeing and mental health problems for young people with complex communication needs (CCN). The aim is to ensure that services to address poor mental wellbeing and mental health problems are accessible to people with CCN.

Her research is situated within two larger bodies of work: the Centre of Research Excellence: CP-Achieve at MCRI which focuses on improving the physical and mental health and participation of young people with cerebral palsy, and the CHILD-PMH group at Jonkoping University in Sweden which focuses on mental health and participation (re)habilitation for children and adolescents with disabilities.

Patient and public involvement is a major component of Jacinta's work. Throughout her PhD, consumers may be involved in any aspect, including identifying research priorities, influencing study design, planning recruitment and other implementation strategies, interpreting the findings and integrated knowledge translation whereby consumers support the dissemination of findings to research end-users. Jacinta has been generously supported by AGOSCI to fund consumer involvement in her PhD research.

What is consumer involvement?

Consumer involvement, patient and public engagement, co-design – however you may label it – is about involving people with lived experience in research and is becoming best and standard practice so that research is done *with* people, not just *on* them or *for* them. I acknowledge that the words used to talk about young AAC-users and their families is important and that discussions around terminology are robust and ongoing. In this article, I will be using the term 'consumer' as it aligns with terminology considered and then chosen by CP-Achieve and their young adult advisors.

Why is consumer involvement important?

Considering why consumer involvement is important as it brings to light a range of values. Reflecting on my own attitudes towards consumer involvement, I considered values described by Gradinger and colleagues (2013). Values such as *rights* and *empowerment* highlight the importance of AAC-users

having a say in what matters to them and influencing research that impacts them. These values align with my role as a speech pathologist, and professional ethos to support people with CCN to have skills for self-advocacy.

Values such as *quality/relevance* and *representativeness/generalisability* highlight the importance of generating knowledge that is useful and relevant to AAC-users and the AAC community. These values resonate with my role as a researcher and goal for my research to lead to outcomes that are meaningful and practical to research end-users. I believe that consumer involvement is important both for the consumer and for the research.

What does consumer involvement in research actually look like?

To plan what consumer involvement in research looks like, many researchers and consumers will use a framework. One example is the Involvement Matrix (Smits et al., 2020) which describes research as comprising three phases: preparation, execution, and implementation, and five roles: listener, co-thinker, advisor, partner, and decision-maker. The framework can be used as a visual tool to facilitate a dialogue between researchers and consumers and to scaffold generation of ideas about how and when consumers may be involved in research.

The Involvement Matrix was developed through co-design, during which adaptations to existing frameworks of stakeholder participation were made. For instance, Arnstein (1969) described a ladder of "citizen participation". The vertical ladder has been critiqued for its suggestion that there are *levels* of consumer participation and control. In reality, consumer involvement is nuanced, and somewhat fluid, and may depend on consumers' characteristics (e.g., their abilities and interests) as well as the nature and stage of research. Consumer-led/equal-partner positions are not always possible nor desired, and therefore should not be considered the ultimate goal. Co-design of the Involvement Matrix highlighted the need for a horizontal structure that does not depict a hierarchy, but instead shows that people may have different *roles* within the research and that roles may vary over time.

INVOLVEMENT MATRIX		ROLE IN PROJECT/RESEARCH					
		Listener <i>Is given information</i>	Co-thinker <i>Is asked to give opinion</i>	Advisor <i>Gives (un)solicited advice</i>	Partner <i>Works as an equal partner</i>	Decision-Maker <i>Takes initiative, (final) decision</i>	
STAGE OF PROJECT/RESEARCH	Preparation	Facebook page to increase project visibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Consumer sets up and monitors page
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Execution	Data collection and analysis	Consumer sent a newsletter with updates	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Implementation	Infographic showing study results	<input type="checkbox"/>	Consumer reads draft and gives feedback	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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www.participatiematrix.nl

Involvement Matrix - examples of how it may be used to generate ideas for involvement. Use with permission of the Center of excellence for Rehabilitation Medicine Utrecht, the Netherlands; UMC Utrecht and De Hoogstraat

Using the Matrix, researchers and consumers may generate ideas for involvement. Examples can be seen in the diagram above.

The Involvement Matrix highlights that consumer involvement in research will look different for each project, and that involvement should be planned and discussed so that it is acceptable to both the researcher and consumer.

PLANNING RESEARCH CONTINUED

What are challenges to effective, authentic consumer involvement? How can these issues be addressed?

Consumer involvement is not without challenges; however, this should not deter researchers or consumers. Researchers may remind themselves of the reasons for consumer involvement and the values that they hold, and then identify potential barriers so that a plan can be created to address them.

For instance, below are some issues that I may face within my research and some ways that these issues can be addressed:

ISSUE	EFFECT ON CONSUMER INVOLVEMENT	PLAN TO ADDRESS THE ISSUE
Physical accessibility	People with disability may require environmental adaptations, such as wheelchair accessible meeting rooms, hearing loops, and high contrast documents. The individual requirements of consumers need to be accommodated to achieve full participation.	Find out the accessibility needs of consumers ahead of time to book appropriate spaces/equipment.
Communication	People with disabilities, and specifically those with CCN, require accessible communication methods to effectively share opinions and contribute as research partners. Some people with CCN also have co-occurring intellectual or cognitive impairments, meaning tasks may require further adaptations to be accessible.	Use of communication support strategies (Rooijen et al., 2021) such as shorter sentences, one message per sentence, frequently used words, and images to support comprehension of concepts. Supply consumers with materials ahead of time so that they can read them and prepare with mentors. Plan and budget for additional time for meetings as communicating with AAC-users usually takes more time.
Power imbalance	Power imbalances typically exist between researchers and the people who are involved as consumer partners. This imbalance may be exacerbated when the consumer is young and/or has a disability.	Frequent and ongoing contact to build trust between the researcher and consumer and so that the consumer is listened to and valued, and they know how their contribution has influenced the work (Bailey et al., 2015; Rooijen et al., 2021). I
Gatekeepers	Gatekeepers (may be family members, paid support workers, and hospital or school staff) may discourage young people with disabilities from being involved in research, or they may give their own views rather than allowing the young person to communicate freely (Bailey et al., 2015). I	Include and inform potential gatekeepers as to the importance of consumer involvement and the process by which it occurs. Give these groups an opportunity to express their views in addition to supporting the young person's self-expression.
Vulnerability	The perception of young people with disabilities as being a vulnerable group, and qualities associated with vulnerability (e.g., passivity, helplessness) may influence researchers to exclude them from being research partners (Snipstad, 2022). I	Challenge own attitudes and beliefs about the capabilities of "vulnerable" groups and their need for "protection." In addition, create open dialogue with consumers about their needs and risk of harm so as not to assume that they are invulnerable.
Funding	Consumers should be paid for their time. In addition, payment for support worker time should be accounted for.	Seek sources of funding through grants, scholarships, and stipends.

So, are we on the same page?

Researchers and the AAC community may not always be on the same page, and maybe that is inevitable and fine. Researchers often don't have lived experience of CCN, and people with CCN may not be researchers. Exploring differences in perspectives may be an avenue for further reflection. However, authentic efforts are needed to bridge the gap and find a shared page.

Consumer involvement can help the researcher get onto the same page as the AAC-user in terms of research priorities. Similarly, consumer involvement can help the AAC community get onto the same page as the researcher in terms of integrated knowledge translation.

My research aims to involve consumers authentically to find a shared page to generate meaningful and valuable knowledge that can be applied by the AAC community.

Please feel free to reach out if you would like to chat further or request the reference list.



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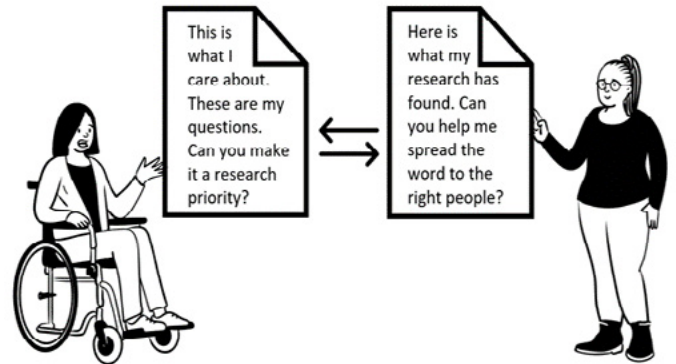


Image of woman in wheelchair and woman standing talking



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THOUGHTS ABOUT FRIENDSHIP

By Jenna O'Brien, Nicole, Ruby, Penny, Brodie, and Abby, from Kids Plus Foundation

We meet together. We are a speech pathologist and five women with disabilities. We use lots of different ways to communicate.

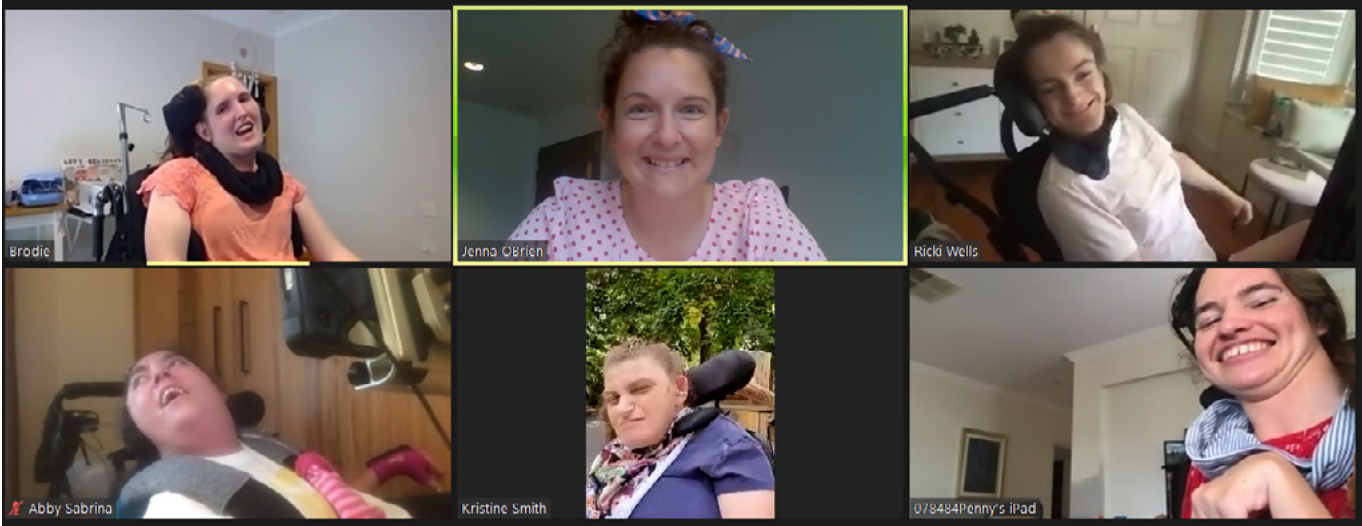
The theme of friendship was chosen by the group, it is topical for them. We had a chat about maintaining friendships and connection through COVID-19. We made a word speech bubble/word cloud of all the things we thought about friendships. We wondered, "are we on the same page with friendships?"

Some of our questions included:

- What we need and like in our friendships
- How we can feel about our friendships
- What we like to do with our friends.
- What do you think about friendship?



Speech bubble of words about friends



Zoom photo of 6 group participants

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AAC AND ME: GETTING SPEECH PATHOLOGY STUDENTS ON THE SAME PAGE AS THEIR CLIENTS



I've got a fear of heights but I absolutely loved it, hands down one of the best experiences of my life so far ...

Fun. Image from e-booklet, exploring the 6-Fs (with an adult) (Rosenbaum & Gorter, 2012)

By Karen Wylie (speech pathologist / lecturer, Curtin University), Matthew Hesketh (consumer advisor, lived-experience educator and AAC user, Curtin University), Deanna Holmes (parent of an AAC user, and project collaborator), Elena P. (AAC user and project collaborator), Kate Carmellotti (speech pathologist, Physio Inq), Charlotte Huynh (speech pathology student, Curtin University), Keegan Ross (project officer and speech pathology student, Curtin University), and Joey Harrall (AAC user, AAC mentor and lived-experience educator, Liberator)

Communication is an essential part of who we all are. What we want to communicate about and how we express ourselves are unique and personal to us. No two people communicate in the same way.

Speech pathologists support people to communicate in the best way possible. To do this, speech pathologists need to take time to understand a range of things about their clients, including:

- what people are (and are not) interested in
- how they spend their time (or would like to spend their time)
- who the people in their lives are (and the communication skills of those people)
- how the person may communicate differently with different people and in different situations.

Person-centred practice

Therapy services should always be person-centred. Understanding people's everyday lives, what they like to do, how they spend their time, and what they need to be able to participate meaningfully is important to person-centred practice. The individual is at the heart of all decision-making about any process that concerns them (McNaughton et al., 2019). Person-centredness is consistent with the aims of the NDIS (NDIA, 2021). Three ideas are important in creating person-centred services:

- i. the attitude/skills of the service provider
- ii. creating collaboration between people and their service providers
- iii. considering the unique characteristics and lives of each person

(Forsgren, Åke & Saldart, 2022).

Speech pathologists need to understand the things that are important to the people they work with, know how to develop a relationship that fosters trust, and how to work together with people to decide on what to do, and how best to do it (Australian Commission on Quality and Safety in Healthcare, 2022).

University training of speech pathologists

At university, we train speech pathologists to be ready to enter the world of clinical practice. For students

to become practice-ready and equipped to work with people who use AAC, they need much more than an understanding of theory and technical knowledge about AAC and its implementation. Our graduates also need to know how to build an understanding of each person's unique characteristics and situations.

As part of their university training, speech pathology students undertake clinical education in a range of services, under the supervision of a practising speech pathologist. In addition, within units taught at university, speech pathology programs often use 'case examples' to help students understand key concepts or points (McCabe et al., 2008). However, information about 'cases' is often brief – presented in a single teaching session or a within a single task. Students do not have the opportunity to continuously engage with information about the person, to build a deeper understanding of their communication and their everyday lives. Without this it is hard to see how AAC systems and interventions are tailored to the specific needs of people. Case examples may be real or hypothetical and information is usually told from the perspective of the speech pathologist.

Building the voice of people who use AAC into the curriculum

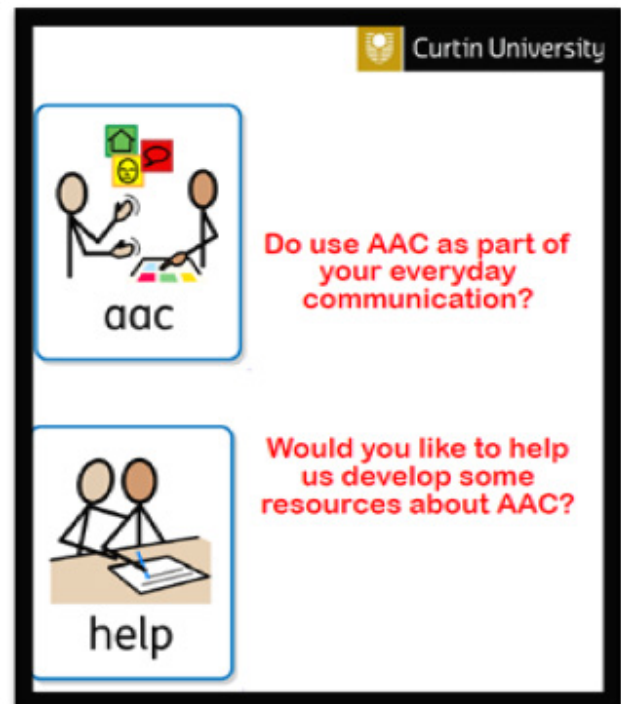
At Curtin University, we see value in our graduates understanding that their work can become so much more meaningful (and useful) if they have a deeper understanding of the person they are working with. They need to be *on the same page* as their clients: understanding their everyday lives, experiences, aspirations, and relationships they have (and desire to have) with others. For us, getting graduate speech pathologists to be on the *same page* as the people they support means:

Empowering students to see and to understand what makes up the whole person; to hear, and to know, those important deeper details in the life of the person and in the person's support network.

Making sure that stories are authentically represented to ensure the *voice* in the telling belongs to the people in the situation, rather than a message mediated by the academic speech pathologist teaching the unit.

What are we doing to achieve this?

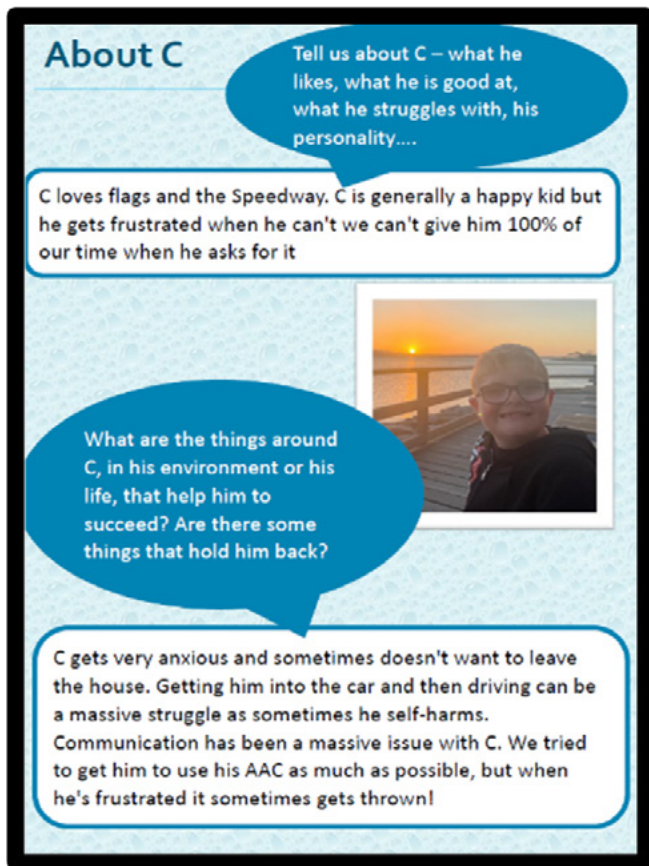
In the multimodal communication units within our speech pathology courses, we are building authentic *lived experience education* that encourages students to



Easy English recruitment for collaborators. Example of 1-page understand the experiences of people who use AAC on a deeper level. We do this in two ways:

We work with AAC users to create indepth, authentic multimedia case studies and embed this content gradually throughout semester, allowing students to deepen their understanding of the individuals as their thinking matures.

We ensure that people who use AAC teach some essential components of course content, as well as sharing their own lived experiences.



An example page from C's e-booklet

Multimedia case-based learning

To help our students to *know* people who use AAC and apply what they understand about a topic to each person's situation, we decided to develop a small number of 'cases/people' and have students learn about these same people across the semester [case based learning, (McCabe et al., 2009)]. This approach enables students to reflect on their newly acquired knowledge and apply it to the 'case' as the semester progresses. The aim is for students to feel they know and understand the person more as the semester progresses, just as you would in a clinical relationship.

We also felt that it was imperative for students to hear the voices of people who use AAC in telling their own stories. We aimed to produce information shared by people involved in the situation rather than mediated by an academic. We wanted students to hear directly from people who use AAC, their families, supporters, and therapists.

In 2021, we successfully applied for a small amount of funding from the university to develop two multimedia

case studies. We hoped that people who used AAC would be willing to work with us to show and/or tell us about their communication journey. We aimed to show how they use multimodal communication, understand the therapy and support processes they are part of, and understand what is important to them. These resources could then be used in teaching the students. It was important that collaborators were paid for their contributions to teaching and so were put on staff during resource development. We were lucky to be joined in this project by Elena and Deanna and her son, who shared their AAC stories.

Our collaborators reflected on why they wanted to join the project:

We were very excited to be part of the team at Curtin to help the students learn what happens from a family's point of view. It has taken us a long time to find a speech pathologist who really works well with our school and with us at home to help our child. She really knows our child and our situation and knows just how to support us with the next steps. We have worked closely with our speech pathologist to help our child communicate on numerous levels (AAC, speech & Key Word Sign). We have seen great gains over the years and look forward to what the future holds.

In all honesty, my interest in the project was mostly out of curiosity at first... plus I had so much free time on my hands. When I finally understood the idea behind this project, I thought why not involve myself in something that would probably change my feelings about my communication device and my perception of allied health. Being involved has made me very interested to learn more about AAC and speech pathology.

Our advisory group guiding decisions around the project consisted of an academic (Karen), an AAC user (Matthew), two former students who understood the content taught (Kate and Charlotte), and a project officer (Keegan). We developed videos and e-booklets to use with students. Deanna and Elena shared copies of device page-sets, reports, and NDIS plans with us. We interviewed a range of people and feel very grateful for the generosity of our collaborators, their therapists, aides, and family in sharing their time and experiences.

We began piloting the resources in the first part of 2022, integrating them into the modules within the unit. This roll-out will continue in the second half of 2022 and we aim to evaluate the impact of these



Joey Harrall teaching speech pathology students at Curtin University

resources. We hope to be able to build more, funding dependent...

AAC users teaching essential course content

People who use AAC routinely share their life experiences with speech pathology students at university. However, it is important to recognise that AAC users are ‘experts by experience,’ and many have much more to give than their life stories. Matthew and Joey have worked with Karen for a few years, teaching speech pathology students as sessional academics. Matthew and Joey do share their AAC journey stories with students. In addition, Matthew and Joey are also teaching *core course content*. For example, within seminars, Joey teaches students about aspects of alternative access, while Matthew teaches about the NDIS and advocacy. We hope to be able to build out some of this content over time – as always – funding dependent. *Note: We use the phrase ‘funding dependent’ deliberately here, as we feel strongly that people who use AAC should be appropriately remunerated for their time and contributions to teaching students.*

Summary

Our journey getting student speech pathologists on the same page as people who use AAC is a work in progress. Ours has been a collaborative effort to date, involving AAC users, academics, and speech pathology students. We are aiming to put the voices of AAC users into the heart of teaching, so students can really

consider how to know each client and practice in person-centred ways. Let’s see how we do!

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LET'S KEEP A SOUVENIR. LET'S TALK ABOUT IT. LET'S WRITE ABOUT IT – REMNANT BOOKS AND PREDICTABLE CHART WRITING

By Samuel Boey, Sam the Speechie

"This is me at Camp Have a Chat 2017. I was performing magic. That was my magic wand in its red cover. I was modelling "silly" on a core board. I had fun with everyone. Let's do it again sometime."



Photo of Sam at Camp Have a Chat

When I was younger, way before there was the internet and smart phones (yes, I'm not that young), we used to have photo albums. When a friend visited, my parents would bring out these photo albums, look at the photos together and have a chat about them. This helped us share what had happened with our friends and allowed them to comment and share their experience.

Some of my more creative friends had also started creating beautiful scrapbooks to store their precious memories. These photo albums were crucial in helping us "be on the same page."

Let's keep a souvenir

What is a remnant book? Other names include chat book, scrapbook, diary, or brag book

Remnant books are visual/tactual way of helping students record important events in their lives (Hanser, 2004). Students can pick a familiar remnant or souvenir of an event to set a topic for face-to-face communication (Beukelman & Mirenda, 2005). Remnant books can also help students select a topic for writing (Musselwhite & Hanser, 2003).

How do I create a remnant book? And what do I add in it?

Each time the student participates in any activity get an object, symbol, or picture from that event. The student



Photo of a remnant book page

must be the main person to decide what goes in or gets left out of the book.

Some examples of remnants: movie ticket stubs, a special leaf/stick from the park, pamphlets or leaflets, business cards from a doctor's visit, photos, any advertising material, paper straw/straw holder, receipts, visual schedules.

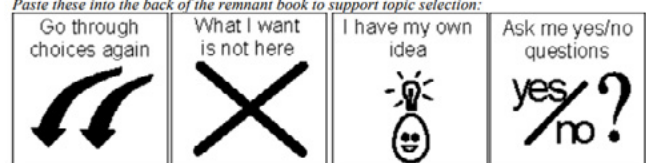
Place the remnant in the book. You can glue it in or staple a Ziplock bag to place it in. To help remember what the remnant is, write on a post-it-note or something temporary the key details of the event:

- Who was there? What were they doing?
- Where were we?
- When was this?

Selecting topics for talking about or writing

The student can then choose a topic using their preferred access method. The following operational commands can also be included at the back of the remnant book in case we miss what was chosen.

Paste these into the back of the remnant book to support topic selection:




Topic selections icons for remnant book

Let's talk about it

Previously, I've written about co-planned sequence social scripts and have a list of questions as a format for the social script. Let's reuse it:

- Let me tell you about this.
- Describe object or photo. Consider the use of Descriptive Teaching (Van Tatenhove, 2009).
 - For more information on Descriptive Teaching in action, you can watch the following recorded webinars on www.aacconference.com (past session -2018)
 - Nicole Wingate & Angie Sheets: Tell me more: Descriptive teaching methods for instructors of AAC users
 - Erin Sheldon: Descriptive Teaching at home: Modeling for interaction
 - The Expanding Expression Tool is also a useful prompt for Descriptive Teaching:
- Categories (It is a type of ____),
 - Use (What do you use it for?),
 - Look (What does it look like?),
 - Made of (What is it made of?),
 - Parts (what are its parts?),
 - Where (Where do you find it?),
 - What else do I know?
 - Who was with me?
 - What did we do?
- Where and when was this?
- How did I feel?
- What do you think?

For other suggestions on scripting,

 <https://praacticalaac.org/strategy/beyond-requesting-using-scripts-to-teach-conversation/>

Let's write about it

How do we practice writing in a fun and motivational way? Predictable Chart Writing!

Planning your chart

1. Think about the chart topic and give it an interesting title, for example "The most fun I've had in years; The silly things we do; Crazy Animals."
2. Create a "sentence stem" with 2 to 5 high frequency words (core vocabulary). For example,
 - a. _____ is big and fast.

- b. It feels _____.
- c. I like _____.
- d. Put it on the _____.

Writing your Chart

1. Discuss the topic. Use the remnant in the remnant book to support discussion.
2. Write the title and discuss it.
3. Write the "sentence stem" and as you write, talk about the letters and the writing conventions you are following (capital letters, space, punctuation).
4. Model with AAC and talk aloud.
5. Write an example and write your name in brackets after.
 - a. It feels fun. (Samuel)
2. Encourage your students to contribute and write them name in brackets.
 - a. It feels hot. (Adam)
 - b. It feels silly. (Bryan)
 - c. It feels crazy. (Charlie)
 - d. It feels tired. (Dean)

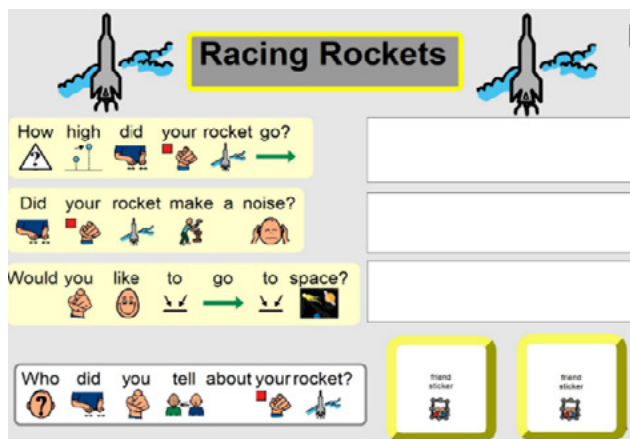
Rereading your Chart

1. Reread the title and remind your students of the topic. You can use the remnant in the remnant book.
2. Reread the chart while pointing to each word. Make sure your students can follow that each word is separate (you can tap to a rhythm).
3. Show how you cut up your own sentence into individual words
 - a. Encourage your students to cut up their own sentence.
4. Encourage your students to build sentences with the pieces of words
5. Glue the correctly ordered sentence onto the remnant book.



Reading chart

LET'S KEEP A SOUVENIR CONTINUED



Racing rockets chat page by Julie Crawford

An example of a well designed Remnant Book/Chat Book

At Camp Have a Chat, each camper was provided with a lovely chat book. During the few times I attended, they were designed by Julie Crawford.

The first few pages were for campers to fill in personal information and likes and dislikes. There were additional pages for campers to share and collect this information with each other.

The next few pages were dedicated to each activity. Campers could collect remnants (and stickers) at each activity station. There were also questions about the

camper's experience and opinion at each activity.

This provided campers with not just a fun experience but also a good scaffold to "have a chat" with other campers after the activity.

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AGOSCI has been awarded the Communication Access Symbol. This means we have met the standards that make our business or service communication accessible. We are committed to communicating effectively and respectfully with customers who have communication difficulties, and we use strategies and resources to support successful communication.

CLICK TIPS FROM... HELEN TAINSH

This edition Click Tips are bought to you by Helen Tainsh.

I am a speech pathologist and I have been working with individuals with Complex Communication Needs for just over 30 years. I am passionate about providing every individual with CCN access to a robust communication system. I work part time at CPEC in Melbourne and have a private practice.

Please note :: AGOSCI is not paid or affiliated with any companies mentioned below.



Cerebral Palsy Education Centre (CPEC) Learning Place

CPEC is a centre in Glen Waverley that provides direct services to people (0-65 years) living with Cerebral Palsy and similar conditions that result in movement challenges. The new website has some information about PODD. This information is being built upon to educate families and professionals about PODD.

CPEC - Learning for Life - Therapy Services - <https://www.cpec.org.au/>

PODD at CPEC - <https://www.cpec.org.au/podd>

 <https://cpeclearningplace.org.au/moodle/login/index.php>



Jane Farral Consulting

An extremely comprehensive source of information that is constantly updated. It is invaluable for any of us supporting individuals with literacy skills.


This website has detail about comprehensive Literacy Instruction and differentiating instruction for students who may be emergent, transitional, or conventional in their literacy development.

 <https://www.janefarrall.com>

Pragmatic Profile of Everyday Communication Skills.

This profile collects invaluable information about how the individual communicates in everyday life. It uses an interview format that SP completes with parent or caregiver or teacher.

Revised Edition (complexneeds.org.uk)

 www.complexneeds.org.uk/modules/Module-2.4-Assessment-monitoring-and-evaluation/All/downloads/m08p080c/the_pragmatics_profile.pdf



ROCC Assessment Tool

The Roadmap of Communication Competence is a tool designed and produced in Australia, by Janelle Sampson, Speech Pathologist. It is a rubric tool to assess, plan and evaluate communication outcomes. It has been superbly designed and is very user friendly.

 <https://www.roccassessment.com.au/>



Linda Burkhart

Linda Burkhart is an incredibly skilled teacher in the US. She is a leader in the field of assistive technology, adaptive play and augmentative communication for children who face significant challenges.

She has a comprehensive website with many invaluable links including functional activities, information re switching skills and development skills for switching as well as many handouts and papers.

 <https://lindaburkhart.com>

BOOK REVIEW : COMPREHENSIVE LITERACY FOR ALL

Book review of: Erickson, K. A., & Koppenhaver, D. (2020). *Comprehensive literacy for all: Teaching students with significant disabilities to read and write*. Paul H. Brookes.

By Elizabeth Lea

Comprehensive Literacy for All is one of those books that leaders in the field reference and elevate. I have seen some of the literacy strategies mentioned in the book used with success, so I was keen for the opportunity to delve in. I read this book like a novel rather than a textbook. It was absorbing, life-changing and has provided a 'before and after' experience whereby my clinical practise will be forever shaped by what I have learned. My copy of the book is heavily punctuated with yellow highlighter, since there are so many sections that are too important to not retain.

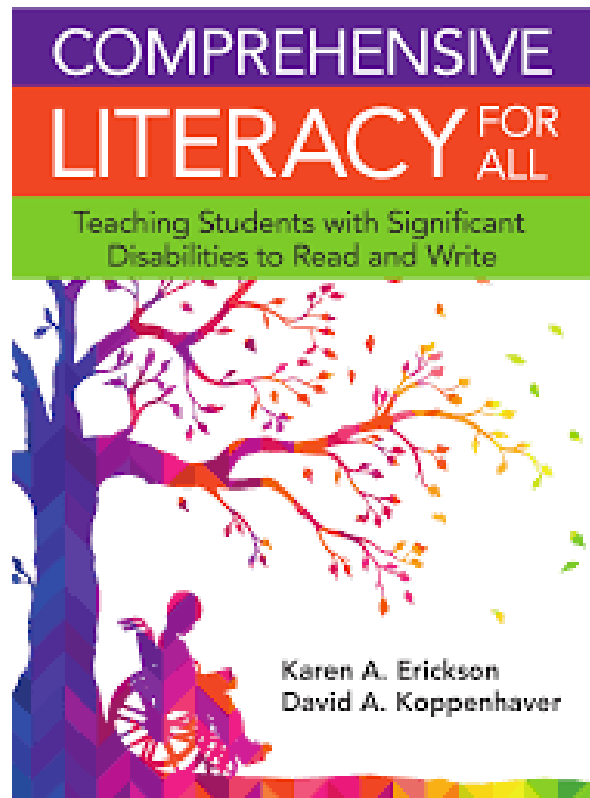
Comprehensive Literacy for All is written by Karen Erickson and David Koppenhaver, both professors, teachers and researchers in areas relating to literacy, communication, and disability. The book's premise is that all students, regardless of the level of disability they experience, are capable of learning to read and write and that failures of learning should be interpreted as failures in teaching. The authors state that, "students learn what they are taught, and we often have not taught them in ways that effectively result in successful reading and writing because of the complexities of their disabilities or our lack of understanding" (p. xvii).

The authors explain:

Disabilities affect learning because they impair abilities to see text, hear instruction, process language, hold pencils, understand experience, and otherwise gain access to the world. These difficulties have been resolved again and again by talented and committed educators, families, related services personnel, librarians, administrators, and others who believe in the abilities of all students to learn (p. 30).

In reframing our perceptions regarding how students' disabilities may affect their ability to access literacy instruction, we are confronted by the realisation that the responsibility for learning outcomes is squarely on educators. This is heavy stuff - it is challenging to know what needs to be done yet feel overwhelmed in trying to make it happen with limited time, resources, and knowledge.

The book seeks to address this issue by providing practical and explicit instruction in identifying the kind of



Cover Comprehensive Literacy For All

literacy instruction to implement, what to teach, how to teach it and how to address common challenges that educators experience in classrooms.

Consideration is firstly given to the learning environment in which students are expected to learn. The authors outline 10 elements that occur when students with significant disabilities learn to read and write, and they explore how to create these conditions for students. These elements are:

1. Knowledgeable others
2. Means of communication and interaction
3. Repetition with variety
4. Cognitive engagement
5. Cognitive clarity (an understanding of why a learning task is necessary and important)
6. Personal connection to the curriculum
7. Encouragement of risk taking
8. Comprehensive instruction
9. Significant time allocation
10. High expectations

Each element is explained in detail so that educators

can attempt to create these elements in their own learning environments. The text is referenced with articles as well as anecdotes from the authors' teaching experiences, which provide the reader with practical ideas and examples, as well as sources for further reading.

Next, readers are guided through the process for determining whether to implement comprehensive emergent or conventional literacy instruction. Comprehensive emergent literacy "is focused on developing students' abilities to engage with text, communicate effectively during reading and writing activities, and recognize and use letters and words so that, ultimately, they can benefit from conventional literacy instruction" (p. 25). Comprehensive emergent literacy is a precursor to print knowledge and includes:

- Shared reading
- Shared writing (predictable chart writing)
- Alphabet knowledge and phonological awareness
- Independent reading
- Independent writing

Comprehensive conventional literacy instructions aims "to teach students to read texts silently with comprehension, compose meaningful texts that can be read and understood by others, and learn to decode and spell words in order to support comprehension and composition, as well as face-to-face communication by students with complex communication needs" (p. 25). It includes:

- Reading comprehension
- Self-directed reading
- Word study
- Writing

Integral to the authors' approach is respect for the beginning writer as they develop their confidence to write and their identity as a writer. Teachers are instructed to value all writing attempts, attribute meaning to what students write, refrain from correcting and shaping it and encourage the writer to write more. The educator can then plan future mini-lessons to address the kinds of errors being noted. The authors explain that:

The heart of writing instruction is daily experience in writing to communicate thoughts, rather than writing to compose grammatically and syntactically correct sentences...Audiences – including the students' families-are educated to respond to content and ideas,

rather than perceived shortcomings because they have been taught by their child's teacher that whatever they view as shortfalls ultimately becomes the next mini-lesson, without ever diminishing their child's self-confidence or interest in writing (p. 97).

Comprehensive Literacy for All is a practical manual that brings together the knowledge to support educators to effectively teach their students with disabilities to learn to read and write. Importantly, it provides guidance regarding best practice as well as a contingency plan for when the optimal is not possible:

If you are just one teacher, therapist, or caregiver without access to a supportive, interprofessional team, do not be afraid to just get started. What we have learned through the years is that students with significant disabilities benefit when the adults in their lives are willing to jump in (p. 199).

This book effectively conveys that comprehensive literacy is achievable for everyone and serves as a powerful call to action.

Elizabeth Lea is a speech pathologist and owner of an AAC private practice, The Communication Toolbox, in Sandhurst, Vic. She can be contacted at enquiries@thecomunicationtoolbox.com.au

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The AGOSCI webinar series is designed to promote skills and knowledge about AAC across all sectors of the Australian community. All webinars are free to attend for AGOSCI members only.

 www.agosci.org.au

To view past webinars, please log-in to your AGOSCI account and proceed to the members only section to view recordings. Past webinars are online within 48 hours of the view date. Our past webinars include:

- What is AAC, and what does it look like?** *By Janelle Sampson*
- Towards cohesive language development in AAC** *By Cathy Binger*
- Being part of the AAction** *By Fiona Given*
- How I became an AAC communicator** *By Nick Bradbury*
- Championing communication access for all** *By Barbara Solarsh and Georgia Burn (from Scope)*
- AAC and the NDIS - Surfing the waves of change** *By Gail Bennell*
- Achieving functional communication through Minspeak** *By Siobhan Daley*
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- Communication assistants: What strategies do they use in conversation with people who have Down syndrome, Rett syndrome or Cerebral Palsy?** *By Dr Jane Remington-Gurney*
- What's in a voice? An overview of message banking and voice banking** *By Peta Booth, Speech Pathologist from LifeTec Australia*
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- "How do I need to be in order to be with you?": Supporting adults with profound intellectual and multiple disabilities** *By Sheridan Forster*
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- I have a dream for communication - AGOSCI Conference Keynote Presentation 2019** *By Joey Harrall*
- SPA x AGOSCI: Considerations for AAC assessment in the world of NDIS** *By Cathy Olsson and Jessica Moll*
- Moving beyond object requesting for AAC users with ASD: What does the research say?** *By Kristy Logan*
- SPA x AGOSCI: Considerations for AAC assessment in the world of NDIS (Webinar #3)** *By Cathy Olsson and Jessica Moll*
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- Inclusive education for people with complex communication needs** *By Phoebe Lehmann and Dr Abi Thirumanickam*



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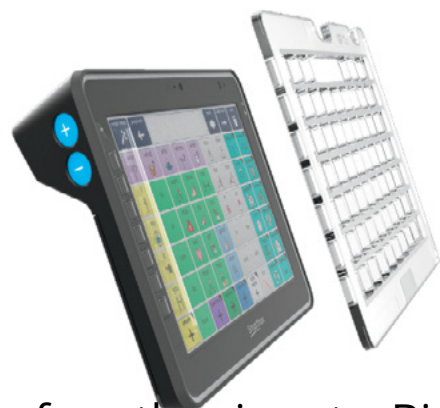
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