

# Common Barriers to AAC Use

Lingraphica®

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#### Lack of Motivation

#### "My client just doesn't seem to want to use it"

- Device content is it salient, meaningful, and FUN to communicate about?
- Average verbal speaker uses 16,000 words per day, 60% of which is talking about ourselves – stories, opinions, relationships, hobbies, etc.
- Talking about ourselves activates pleasure centers in the brain (Ward, 2013)
- But most AAC is set up to focus on requesting wants and needs
- Use real photos of user's family, environment, and hobbies
- Create readily accessible folders that are motivating; topics adults with aphasia most often chose to communicate about include Family, Hobbies, Travel, Work, Religion, among others (Fried-Oken et al., 2015)

# Common Barriers to AAC Use

"My client is a good candidate for AAC, but it just 'isn't working'"

#### Setting Salient and Realistic Goals for AAC Use

#### The best goal is the one your client wants to work on

- Set tiered goals with patient input "Right Now I want to..."; "A bigger goal for the future is..."; "I hope to someday..."
- Set goals around connection "I'd like to communicate with \_\_\_\_\_ again"
- Set specific goals in four areas of AAC use:
- Linguistic skills meaning of icons
- Operational skills how to use device
- Social skills Pragmatic and interpersonal skills with a device
- Strategic skills for discourse turn taking, initiation, topic changes (Kleim & Jones, 2008; Light 1989)

#### Avoid Device Abandonment

# My client was engaged at first, but now the device sits in a drawer

- Keeping vocabulary current and making frequent changes
  - Current and seasonal events
  - Life/family changes
- Factors associated with decreased device abandonment:
- Trial period prior to device selection
- Device that is portable and resembles other modern technology
- Plan for support when issues arise how will the SLP, family members, and device manufacturers each be involved? (Johnson, Inglebret, Jones & Ray, 2006)
- Some expect "quick fix" and quit when it does not immediately solve the communication impairment – it will only help you if you put in the time and effort to make it work.

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#### Familiarity with Technology

# Clients may believe it's too complicated to learn a device

- Select a device that is as simple as possible while still meeting client's needs
- Train the basics charging a device, powering on, etc.
- Set your client up for success ask them to start by just touching one icon to build positive outcomes

#### Fear of "Giving Up" on Speech

# "I would rather talk"... "I don't want my mom to be dependent on a computer"

- Studies show use of an AAC device can actually improve language comprehension and aphasia severity (Steele, 2004)
- AAC is one "tool in your toolbox," not a replacement for speech
- Use AAC device to cue verbal speech through repetition
- Encourage total communication; continue practicing verbalization, gestures, drawing

#### Family/Communication Partner Support

#### Communication is not a solo activity – training must extend to the communication partner

COMMON Patterns in Conversational Partners...

- Take the majority of conversational turns
- Interrupt the AAC user/Guess at message
- Focus on learning technology rather than user's needs
- Believe AAC is unnecessary because they already know the user's needs
- Ask mostly yes/no and closed-ended questions

"GOOD" Communication Partners...

- Focus on collaborative communication
- Allow time for user to generate message
- Use clarifying questions and ask permission to guess; confirm understanding
- Create best environment minimize background noise and glare; face each other
- Persistent when breakdowns occur "I really want to know what you're trying to tell me" (Simmons-Mackie et al., 2010)

#### How the SLP Can Help:

- Presume positive intentions of the communication partner
- Allow them their own grieving process
- Teach a least-to-most cuing hierarchy the partner can use
- Model a cues for alternative communication methods when a breakdown occurs
- Sit back and watch provide opportunities for patient and partner to interact during therapy without SLP guiding the conversation. Provide praise and constructive criticism on the interaction.

#### Psychological Factors

### Is the patient psychologically ready to embrace an AAC device?

- The cycle of grief applies

   Denial, Anger,

   Bargaining, Depression, Acceptance

   (Kubler-Ross, 1969)
- Many patients will not be ready for an AAC device until they reach acceptance
- Counseling regarding communication impairment is within the scope for practice for SLPs and often where we must start (ASHA, 2016; Scherer, 2002)
- Focus on Positive Psychology and Resilience Training appears to increase motivation and engagement with therapy (Holland, 2007)

