Upfront

In many places, augmentative and alternative communication (AAC) is the "road less traveled." While we have made enormous progress over the last quarter century, we have a long way to go before most roads to AAC are constructed, paved and sign posted.

This issue of Augmentative Communication News (ACN) is about the role of the AAC community in spreading information and resources to parts of the world where AAC techniques, strategies and devices are just beginning to be recognized (and used) in medical, educational and community service delivery systems. The sad fact is that, from impoverished areas in the "third world" to the many pockets of AAC ignorance that still exist in the cities and rural areas of our wealthiest and most "developed" nations, many people with severe communication problems are without access to AAC services and devices.

In areas where people with disabilities are still hidden away, it will probably take decades to change attitudes and establish an infrastructure that can begin to address the rights and needs of people with communication impairments. Even in areas where disability rights are in place and people with disabilities play an active role in society, most people have never heard of AAC, and many do not even understand that individuals who are

unable to speak have the potential to communicate.

Do we in the AAC community have a responsibility to share what we know and support the growth of AAC in areas where people with severe communication disorders are being marginalized? Is there something we can do as individuals to help people in our own communities? In lands far away? I believe the answer to these questions is a resounding "Yes."

This issue begins with tales of some ordinary people who are doing some extraordinary things around the world. **Case Examples** describes

Case Examples

Getting there from here

AAC is spreading worldwide, often in a haphazard way. Some would guess (and rightly so) that the emergence of AAC in a community will reflect the economy and public policies of the country or region. However, some areas with very few resources have exemplary AAC services; other areas with favorable economies and strong disability rights laws offer minimal AAC services. Go figure.

This section highlights efforts to spread information about AAC beyond national, linguistic, racial, socio-economic and ethnic borders. It is a compilation of stories about

AAC service providers who have traveled (for various reasons) to Asia, Africa and the Pacific Rim to work with people who have very different backgrounds and experiences. All report they personally have gained more than they have given:

When my family and I decided to tour Ethiopia, I found the name of an ISAAC member in the Directory, contacted him, started to correspond, and we arranged the first workshop. As a result, I have made friends in a country very different from mine. *Illana Gorfil from Israel (1998), about Addis Ababa.*

I can honestly say that I have learned far more about AAC and communication than I have ever offered in my workshops. I am not claiming to

understand the needs of any culture because I have only had the opportunity to meet and share information with people for two to three weeks at a time. Rather, I try to continually evaluate whether specific information is useful and meaningful. I have become more humble about the presumption that what I practice in Calgary, Alberta, Canada is applicable or even appropriate elsewhere. Ultimately, I enjoy working with the "local team" as they work with their clients. In a short period of time, we are able to experience the joy of "teaming," *i.e.,* sharing information in a respectful and productive way. *Jillian Swaine from Canada (1999) about her travels to Poland, Saudi Arabia, Thailand and the eastern Canadian Arctic (Baffin Island).*

I was stunned by what the staff had accomplished. They cope each day with old equipment, little in the way of materials/tools for adaptations, classrooms with very few materials, *etc*., but the teachers' attitudes towards people with disabilities, philosophy of treatment and their general knowledge base is state-of-the-art. The cultural differences are tough to prepare for though. Anne Warrick sent me information that was extremely helpful, but I didn't begin to 'get it' on a gut level until I was there. *Ellen Kravitz from U.S.A. (1999), about the SSEI program in Calcutta, India.*

A gradually expanding network is bringing AAC to people with communication difficulties in some unlikely places. Each story, although quite different, unfolds with some familiar themes:

1. When people express a desire for information and assistance, the international AAC community often responds—even when resources are limited.
2. People working together across cultural, economic and racial borders can do so productively and respectfully. Where there's a will, there is often a way.
3. Many people in the AAC community care enough to take action when they are aware of people who need AAC but don't have access to it.
4. No effort is too small. AAC activities in areas with limited resources can create a ripple effect that has a significant impact.

Every step taken to overcome prejudice and ignorance, and to tear down barriers that deny people access to AAC devices and services, is a step forward for people with severe communication impairments and for the field of AAC. Although these case examples highlight activities in geographically less familiar places, similar stories could be told about AAC practitioners who reach across less obvious borders closer to home.

Example #1: Calcutta, India

Sudha Kaul and her colleagues at the Spastics Society of Eastern India (SSEI) in Calcutta have worked tirelessly to provide AAC to children in India. "Try everything! Ask everyone! Our children deserve nothing less," she says. True to her word over the past twenty years, Sudha has sought financial support from many sources. "Not an easy task," she says.

Calcutta, where the SSEI is located, is a city on the East Coast of India that radiates intense energy and vitality. Calcutta prides itself on being an artistic center with many national heroes in literature, poetry, art and film. It is also widely known for its dense population and poverty, which is exacerbated each year when thousands of people from Bangladesh flock as refugees into the city during the monsoon season.

The SSEI AAC journey began in 1979 when Anne Warrick, a speech-language pathologist from Canada, went to Calcutta to present a Blissymbolics workshop and help the staff assess and set up AAC programs for children with severe speech disorders.[1] Over the years, other exchange opportunities have contributed to "training the trainers" at SSEI:

AAC practitioners at work in areas where resources are very limited. These stories are valuable not just as examples of what one or two individuals can do to make a difference, but also for their clues and insights into how all of us might get the most out of our available resources when these resources are at their scarcest. **Clinical News** *and* **Equipment** *highlight strategies that address giving a workshop and doing assessment in unfamiliar places.* **Equipment** *gives a list of items in an AAC travel kit.* **Governmental** *reports on ISAAC's Emerging Countries Committee. Finally, the new section,* **AAC-RERC,** *highlights three research projects underway at this multi-site Center.*

The adventuresome spirit and commitment of scores of dedicated practitioners, the successes of an increasing number of augmented communicators, and an expanding AAC industry bode well for the future of the AAC "superhighway." Many thanks to those listed as **Resources** *on page 8, especially to Anne Warrick who inspired this issue, and to Jillian Swaine whose ideas, together with Anne's, are woven throughout.*

Sarah W. Blackstone, Ph.D.
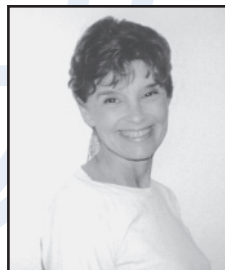
• A Rotary International scholarship grant enabled a SSEI Center teacher to attend Purdue University's special education program.

• Funds from ISAAC's Emerging AAC Committee have provided partial support to attend ISAAC Biennial Conferences.

• Among those the Department of International Development in the United Kingdom, administered by the British Council in Calcutta, has funded are: Prue Fuller, Carolyn Gray, and Juliet Golbart from the UK, Ellen Kravitz from the USA, and Anne Warrick from Canada. As a result, clinical workshops, research and a wide variety of training materials are available. [See the **Resources** section.]

Example #2. Papua New Guinea (PNG)

Emma Duke-Williams from the United Kingdom worked in Papua New Guinea (PNG) from August 1995 to December 1997 as the Coordinator of a Special Education Resource Centre. She participated as a VSO (Voluntary Service Overseas) volunteer, which is the UK equivalent of the Peace Corps (USA) and AVA (Australian Volunteers Abroad). PNG is an island located north of Australia. For centuries, people on the island have lived in isolation from each other because of the country's rugged terrain. This may account for much of the diversity within PNG.

While the countryside is rich in natural resources, many people depend on subsistence farming. Only a small percentage earn a regular wage. People speak a variety of indigenous languages in their homes. Linguists have catalogued more than 800 distinct languages.

Melanesian Pidgin (Tok Pisin), developed by early colonists and their indigenous laborers, is increasingly spoken among members of different ethnic groups. English is the official language and is taught in public schools.

The PNG national health-care system usually requires only a small fee for services and medicine. Hospitals, however, are often not well equipped, and people sometimes walk for hours to get treatment. The national education system is not compulsory, and a special education program began only three years ago. Government policy mandates the integration of children with special needs in their local schools wherever possible. Special Education Resource Centres (SERCs) are set up to (1) support children with special needs in mainstream classrooms, (2) provide alternative services for children who are either too young or too disabled to attend the local school and (3) offer support for mainstream teachers. Emma Duke-Williams worked at the Creative Self Help Education Resource Centre (CSHERC), a community-based rehabilitation center and a SERC. Many of the children had learning difficulties and hearing impairments. She notes:

> These children were disadvantaged beyond their primary disabilities because the predominant language of education is English, a second language for them. We believed that using symbol-assisted materials might help the children comprehend and express themselves.[2]

Initially, Centre staff drew symbols. However, they now use a computer program, *Writing with Symbols,* to generate symbols for use on light-tech displays.[3] As a result, young deaf children at the Centre now communicate using a combination of sign language, gesture and symbol cards with an English gloss. A few can type single words on the computer—"The look of amazement as they produce a picture is quite something!"[2] Also, a profoundly deaf woman in her twenties, who never attended school, is using symbol-supported text and starting to read.

Because some PCS/Rebus symbols are culturally inappropriate, the staff designs alternative symbols. In addition, staff has built up a resource of symbol materials for Grades 1 and 2, which they share with other SERCs.

> Chimneys are not features of most houses in PNG. So, the symbol for "house" is on stilts like the prefabricated "Australian" houses and locally made bush material houses.[2]

Other ways symbols are being used include: (a) to assist hearing children in Tok Pisin schools to develop language skills and (b) to help the general public understand health and other information sheets. There is a very high rate of illiteracy in PNG.

Example #3: Aboriginal and Island Communities

Keila Waksvik, an occupational therapist, and Michelle Picchetti, a speech-language pathologist from Cairns, Australia, travel several hundred miles by air to visit Aboriginal and Torres Strait Island communities to deliver AAC services through Education Queensland. Although the educational system is based on the mainstream culture, an effort is being made to accommodate linguistically and culturally diverse populations. For example, Aboriginal English and Torres Strait Creole are now recognized as valid dialects and as useful stepping stones to full competence in Australian English.

The Torres Strait Islanders are a Melanesian people, distinct from the indigenous Australian Aborigines by culture and language. Both groups come from an oral rather than a print-oriented or literate tradition. AAC is a new service area for these communities. Keila says:

> We are really doing AAC exactly as we would in a Cairns school, except that we have the resources of an industrialized country and are applying them in island or remote aboriginal communities which differ widely from the dominant 'Anglo-European' Australian culture. We tend to favor low-tech approaches for their ease of implementation and use. However, there is a growing interest by school staff and parents in high-tech aids. [Note: Communication aids are available for trial and long-term loan through the Cairns-based Assistive Technology Resource Centre.][4]

Implementing and integrating AAC instruction into the educational program is difficult due to the same realities others face using AAC in inclusive settings, *i.e.* teachers are unfamiliar with AAC, a child has a new teacher and aide every year, teachers and/or parents lack "ownership," teachers are unable to view AAC working in practice in other classrooms, and no one has time for preparation and planning. Michelle says:

> The itinerant and consultative nature of our roles makes it difficult to build rapport with on-site staff and demonstrate/model AAC use over a concentrated period of time. In addition, people with disabilities, particularly those with severe physical disabilities, have not routinely been included in schools or in community life. Finally, community members and families may have vastly different expectations for a child's future than predominantly white and middle class professionals.[5]

Two children currently using AAC are:

(1) A young boy in Grade 3 with athetoid cerebral palsy who recently got his power wheelchair license. He attends a full day school program in the Torres Strait and uses a combination of high-tech (Word Strategy on the TouchTalker) and light-tech (PCS communication book and a SpeakEasy).

(2) A high-school girl with cerebral palsy and a moderate intellectual impairment who uses a low-tech PCS communication book with Torres Strait Creole as the accompanying gloss. Because the high school is on a different island, accessibility is a problem. A local woman acts as a teacher's aide and implements a distance learning program with itinerant supports provided 8-10 visits per year.

Example #4. Addis Ababa

Illana Gorfil from Israel, with partial funding from an ISAAC-Prentke Romich Scholarship, went to Ethiopia during the summer of 1998. She writes:

> I had a most interesting experience in Addis Ababa where I worked with 25 teachers from the School for Mentally Retarded Children. The German Church sponsors this school. There is no speech therapist in Ethiopia and much is needed in the field. My challenge was what to give in only a week, which seemed so short and yet so long at the same time.[6]

Illana also found the classrooms very different from those in Israel:

> The classrooms are silent; it is not only the children who don't talk. I found the best approach was a very practical hands-on one, with lots of demonstration, modeling and opportunities for participants to plan, problem solve, and prepare communication activities to carry out in the classroom. It was through these daily activities that I could gauge each teacher's grasp of so many new AAC ideas and concepts.[6]

She also found herself "continually challenged" by cultural differences:

> You just do not know what is acceptable. I found it disturbing at first that no one would ask questions or say something was unclear. Gradually, I learned to accept this as the norm.[6]

Illana also accompanied the field workers on home visits to a refugee camp in Addis Ababa. She described this as both "very interesting and quite heartbreaking . . . a humbling experience."

> In a shelter made of cardboard, corrugated iron and plastic sheeting lived a young mother and two children, one of whom was blind, CP, and non-verbal. The poor woman was very depressed and begged on the streets. How do you talk to her about communication when the next meal is most important? Sadly, of course, there is no schooling available for this child.[6]

Summary

These stories offer a glimpse of how a few caring and courageous women are helping to spread the benefits of AAC to some of the most remote corners of the world. Similar stories could be told about AAC practitioners from the Iberian Peninsula reaching out across the Atlantic to support incipient AAC activities in Latin America, of Israelis traveling to Eastern Europe to help train new professionals in the field, or of individuals helping to spread AAC in South Africa and some underserved neighborhoods in Los Angeles. It is still the resourcefulness of a small but growing cadre of caring individuals that fuels the spread of AAC practices to underserved areas.

These are the individuals who help build the roads that others will pave and later follow. As Paolo Friere, an innovator who spent his life bringing educational opportunities to underserved peoples, once said, "We make the road by walking."

Clinical News

Working in unfamiliar places

What kinds of practical problems confront people who choose to work in areas where resources are limited and cultural contexts unfamiliar? Jillian Swaine, Anne Warrick and others who have faced similar circumstances over the years have shared a few key strategies that address common issues that arise.

Facilitating the use of AAC

First on the agenda after you arrive in the area is to go window-shopping. AAC materials must be easily accessible and affordable to people in the area. Go out in the community to get a sense of where the supplies are located, their availability and cost.

> They will not necessarily be what you are used to, but you'll find things that work.[7]

Jillian recommends purchasing preschool story books (if available) and ABC type flash cards in the native language. These items will have culturally appropriate pictures and may be useful when creating displays:

> I found Inuktitut preschool books that are specific to the culture: Hunting, return of the sun, living on the land and animals such as walrus and whales.[7]

Conducting a workshop

No matter where a workshop takes place, the key to its success often lies in the preparation. In planning workshops for emerging AAC areas, Swaine and Warrick suggest a step-by-step "S-T-E-P" approach:[8]

> **S for socia**l. Be aware of and follow

social/cultural protocols.

> **T for technological.** Use technology to help people understand. *Show me, don't just tell me.*

Videotapes, photos, demonstrations, 'hands on' opportunities can be very effective.

> **E for economical and efficient**. Focus on strategies, techniques and technologies participants can use after you leave.

> **P for political**. Be aware of the politics. Issues that relate to the people involved, government policies and the current realities of the area and program are important. Make sure you have a translator to help with language problems. Prepare in advance to address participants' questions and agendas.

Table I summarizes areas to consider when providing an AAC workshop. Jillian recommends using Microsoft PowerPoint® when giving workshops.

> I have written self-contained 'units' so I can quickly change the order and meet the needs of the group. With Power-Point, I can cut and paste short video clips of clients, photos, sound clips, *etc*.

> I purchased a laptop with international adapters. It runs on both 110 and 220 current Also, I don't have to rely on having the correct video format. I have key PowerPoint units as traditional slides so I take a hardcopy of the handouts for photocopying or creating overheads. Then I can be flexible, depending upon the audio-visual equipment available.[7][Note: hiring a projector can be expensive, so check in advance.]

Assessment

Over the past 20 years staff from the Spastic Society of Eastern India (SSEI) have instituted a community approach to AAC assessment, focusing on the family and community. According to Anne Warrick:

> People living and working in village communities (parents, siblings, grandparents, educational, community and health workers) are the most effective communication intervention-ists. The role of AAC consultants is to raise awareness, share knowledge and transfer skills to community members.[9]

Anne believes an assessment should seek to determine at least some

Table I. Suggestions for conducting workshops in unfamiliar places. Jillian Swaine (1999)			
Handouts:	Bring handouts, catalogs, cheat-sheets/instructions in the native language. Many countries do not have access to materials and vendor support.	**AAC philosophy:**	Emphasize that each person is different. Symbol displays, signs, gestures, vocalizations, devices and communication strategies will also be different. Sress the importance of a multi-modality approach, training in natural environments and the need to train partners.
Samples:	Bring communication displays, schedule boards, conversation books, computer programs,simple digitized voice output devices and catalogs.	**Symbols:**	Make line drawings culturally applicable. Arrange so individual can see and understand them . Use simple lines (black 3 pt thick), maximum of 2 bold colors, appropriate size. Make symbols easily accessible for communication.
Videos:	Show videos of individuals using AAC techniques in real-world settings. Pause to explain important points through a translator.	**Technology:**	Where technology is of interest and accessible, demonstrate its use and give case examples of how it can assist people to communicate in real environments. Don't overemphasize because, in many areas, no infrastructure will support its use.
Photos:	Take photos with a digitized camera or scan them into PowerPoint. Use while you are talking or demonstrating equipment/strategies.	**Training contexts:**	Use play, work and recreation as wonderful learning, language and interactive contexts. Play themes are different in different countries, e.*g.,* in Thailand children make bowls out of banana leaves and play "market" - buying/selling items.
Demos:	Demonstrate use of symbols, interaction strategies, multi-modal approaches. Type English instructions on one side and get the other side translated.	**Seating:**	Address seating and mobility for individuals with physical disabilities. Issues vary. In Saudi Arabia, Thailand and the eastern Canadian Arctic (Baffin Island), families spend much of their time on the floor with cushions and floor coverings, so seating and mobility close to the floor is important.

information about:

1. **Family structure**: Family profile, economic and education levels, knowledge of and attitude toward disability, available time, employment status, child rearing patterns of family/community members.

2. **Community structure**: Attitudes toward and knowledge about disability, local beliefs and practices, community's economic level and available resources, social, political and cultural milieu of potential AAC users and families.

3. **Available Resources**. Medical, therapeutic and education services for people with special needs. Government and non-government organizations, transportation, accessibility, networking capabilities and voluntary sector.

The assessment team asks family members to (a) identify primary communication needs of the person who has difficulty speaking; (b) identify what immediate and extended family members and/or caregivers want the person to communicate about; (c) list daily routines, activities, and schedules of primary partners and (d) determine where to start.

The team observes the individual interacting with others to identify:

1. Key caregivers, *i.e.,* those who show concern for communication needs, have free time, a willingness to learn about the application of AAC, a positive attitude and a faith in the child/adult's abilities.

2. The individual's abilities and challenges in general and in everyday communicative interaction.

3. Possible AAC strategies that the individual can use to increase access to language, interaction and participation.

Following the assessment and before initial goals are prioritized, staff and family discuss the information gained in relation to the family's needs. Finally, the team reaches a consensus about where to begin.

Summary

Careful planning can go a long way towards influencing a successful AAC intervention in an unfamiliar culture. But a willingness to adapt flexibly within the context of the new setting is of at least equal importance. Each new setting will offer its own unique set of challenges.

Equipment

AAC Travel Kit

Suppose you were on your way to visit an area where AAC is relatively unknown. What would you bring? Although the answer will obviously vary depending on who you are, what you know, and where you're going, there are some things you can do that will help you decide what to take, and some things that you almost invariably will need.

If it is at all possible, check with someone who lives in the area well in advance of your visit. And, don't forget to check out the Internet.

An Internet search can help you learn more about the culture, economy, language and available local resources. You might also get lucky and establish communication beforehand with someone in the region who could provide helpful information. Swaine provides an example:

The Internet has been an invaluable communication and information tool. For example, I searched the Internet for Inuktitut (language in the eastern Canadian Arctic) and found it is only available in a true type font and keycaps. Before leaving on my trip, I confirmed this with the Inuktitut Research Institute.[7]

Table II lists supplies and materials you can consider bringing along. Jillian also suggests contacting AAC vendors well in advance of the trip.

They have been very responsive and supplied catalogs, demonstration equipment, donated equipment, and in some cases, given financial support.[7]

An expanded version of Table II is available. It includes examples and a rationale for each item listed.

For a copy, contact Jillian Swain, c/o ISAAC Emerging Countries Committee, 49 The Donway West, Suite 308, Toronto, ON M3C 3M9 Canada. 416-385-0351 (phone); 416-385-0352 (fax). www.isaac-online.org

Table II. Suggested equipment for workshops and consultations Jillian Swaine (1999)	
SUPPLIES: Stick back Velcro™, Vel lock, 2-sided tape, Duct tape, Glue stick, Scissors, Ruler, Paper/pencil, Colored markers, Blank paper, Blank white labels, Post-IT™ notes, Photo album, Menu album, Batteries (9V, AA, AAA, C), 3 1/2" discs, Adapters for computer (serial to PS2, AT to PS2), Mac Tac, Radio Shack parts for making switches.	**TEACHING MATERIALS:** *What is communication*? *Team assessment*? *How to make a switch*? *How to choose vocabulary*? *Clarification techniques*? *Visual considerations*? *Seating to support communication*? AAC textbooks, newsletters, journals and proceedings.
GRAPHIC DISPLAY MATERIALS: Blank grids of various sizes and layouts, Mayer-Johnson's *PCS Wordless Editio*n, *PCS Guide*, *PCS Stamps*, Samples of a variety of displays, Materials for low vision, Symbol assessment.	**LIGHT TECHNOLOGY DEVICES:** Small digitized VOCAs, Tape recorder with remote, Switch Latch and Timer, Switch Tester, Call bell with switch access, Battery interrupter, Batterey operated toy.
MARKETING MATERIALS: Vendor catalogs, Marketing videos, Selected textbooks, List of websites, "Old" equipment from vendor.	**HIGH TECHNOLOGY DEVICES:** Laptop loaded with access software (scanning, morse code), Expanded keyboard with guard, Large digitized VOCA, Mouse alternative (head controlled), On-screen keyboard, Trackball, joystick.
SWITCHES: Examples of homemade switches, Examples of commercial switches [small, large, plate, pillow, leaf, pneumatic , *etc.*].	**OTHER**: Small tool case (screwdrivers, hex keys), Mounting equipment.

The AAC-RERC

Three new projects

ACN's continuing coverage of the new Rehabilitation Engineering Research Center in AAC highlights three projects. These projects have the potential to change how we think about (1) providing language on displays and devices, (2) strategies for promoting the successful employment of AAC users and (3) measuring communication rate during interactive exchanges in ways that give us better comparative data about the effectiveness of different device and display features.

1. Improving assistive technology strategies for young children. Janice Light and Kathryn Drager from Penn State and their collaborators[10] are seeking to better understand how young children organize language and represent it.

> Today we are representing language and organizing displays based on adult models of language. Essentially, we put symbols (that make sense to adults) in boxes. Does this facilitate language learning for young children? Are we organizing language in ways that support development? How do children learn to select language symbols in space (on displays, devices, and the environment?)[10]

Phase I of the project seeks information about how children learn to use language concepts organized in communication systems in different ways (*e.g.*, using environmental pages on a dynamic display). Researchers will teach typically developing children (ages 2-5) to use different organizational approaches to see how quickly they learn, how they retrieve language, and what errors they make. They will also ask groups of seven year olds to build communication

systems to see what new insights they might contribute to the design of AAC technologies for young children.

> Imagine your little sister/brother couldn't talk and couldn't use his/her hands. What would you make to help her/him answer questions at school, talk and play with you, read books with your mommy and daddy.[10]

In Phase II, researchers will develop guidelines for AAC systems that represent and organize language in developmentally appropriate ways and evaluate these approaches with children who require AAC. They will consider how state-of-the-art computer software and Internet Website designs can benefit AAC device (display) design, by making systems more engaging, interesting, and developmentally appropriate.

2. Improving employment outcomes. In another Penn State project David McNaughton and Janice Light are working with successfully employed augmented communicators, as well as their family members, employers, and employment counselors, to identify strategies that lead to obtaining and maintaining employment.[11] Six focus groups will be conducted over the World Wide Web to gather information on the experiences of individuals with: (1) cerebral palsy, (2) amyotrophic lateral sclerosis, (3) mental retardation, (4) autism, (5) traumatic brain injury, and (6) aphasia.

After the results from these data are collected, researchers will work prospectively with (1) adolescents just entering the job market and (2) individuals reentering the job market after acquiring a disability. Efforts will be made to link people with similar employment interests and experiences with members of the focus groups.

3. Communication rate, efficiency and effectiveness. Jeff Higginbotham and colleagues at the University of Buffalo are studying the role of "rate" on communication.

> The field is now informed about the efficiency of AAC devices and communication products mostly by manufacturers and developers. That is because we do not have objective ways to measure and compare the rate, efficiency and effectiveness of the communicative use of AAC products. Also, heretofore, we have measured rate using a "words per minute" (wpm) approach. While this captures the linguistic elements of messages, it leaves out critical characteristics of the communicative process in AAC.[12]

The message transmission rate of augmented communicators compares poorly to typical speaking (and typing). This is due to constraints of high-tech and low-tech devices, as well as user limitations. This project will develop new tools for measuring communication rate during interactive exchanges. The goal is to devel-op a way to determine which device and display features enhance effec-tive and efficient communication.

Summary

The results of these projects may further inform the field about the validity of how we currently think about designing language displays for young children and individuals with limited language skills, how we might consider delivering certain types of AAC services (*i.e.*, employment support over the Internet) and how to measure communication efficiency. In each case, the findings could be relevant to people who use AAC, practitioners and developers. Stay tuned.

Governmental

Emerging Countries Committee

The International Society for Augmentative and Alternative Communication's (ISAAC's) Emerging Countries Committee undertakes projects that support the advancement of AAC particularly where AAC is emerging as a strategy for communication. Activities include workshops, sponsored memberships, providing expertise and consultation. The committee actively 'markets' AAC where there is little activity and serves as a conduit for collecting and disseminating information.

Presently, the committee is exploring the concept of "twinning" countries and has developed an information package describing AAC and its benefits. It includes a videotape, overheads, and a brochure and membership forms. Jillian Swaine, co-chair says, "New committee members are welcome!"[7]

Things you can do

1. Consider sponsoring a new ISAAC member from an economically developing country. This costs only $20US/member per year.

2. Offer to talk to a group of therapists or parents regarding AAC in an emerging AAC area. Contact ISAAC for an information package. [See also Resources.]

3. Offer to meet with ISAAC members in a country you are visiting.

Please contact ISAAC, 49 The Donway West, Suite 308,Toronto, ON M3C 3M9 Canada. 416 385-0351 (phone); 416-385-0352 (fax). www.isaac-online.org

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[12] Jeff Higginbotham (April 1999). Personal communication.

Resources

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