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Research on the competence, attitudes, and use of augmentative and alternative communication by specialists in RCSPiE

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SUMMARY

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The survey was carried out by the ASSIST – Assistive Technologies Foundation within the Promotion and Acceleration of the Introduction of Augmentative and Alternative Communication for the Inclusion of Children with Disabilities Project financed by UNICEF Bulgaria. This survey was carried out in April 2023. Two hundred fifty-two specialists from 23 Regional Support Centres for the Process of Inclusive Education (RSCPIEs) in Bulgaria participated in it.

The survey was carried out for the second time with the same questionnaire; the results from the first survey (carried out in 2020 in partnership with UNICEF Bulgaria) were published in Hristova & Grinberg (2021). The first survey was carried out online with 224 specialists from 18 RSCPIEs.

Augmentative and Alternative Communication (AAC) gives children and young people who have impaired expressive language and cannot write an opportunity to communicate. AAC aids can be low- and high-tech and can include printed boards with symbols and pictures, as well as modern tablets and laptops with specialised software and built-in access technologies, such as eye gaze control. The development of language competence and communication skills, along with training, is one of the most important work objectives in modern approaches in this field, and in the case of complex communication disorders this objective can be achieved only through AAC aids. However, the successful and timely introduction of AAC requires that the specialists working with children with complex communication needs should know the functionalities of modern AAC aids and should use them actively in their practice, which unfortunately doesn't correspond to the current situation in Bulgaria.

The question of how many people need AAC is often raised, because, as of the present moment, there is no survey aimed to answer this question specifically. A preliminary answer to this question can be derived on the basis of data on other countries and estimates used in reputable sources in the AAC field (e.g. Beukelman & Light, 2020). Estimates of the prevalence of the people in need of AAC among the population vary depending on the methodology used, ranging from 0.5% to 2% in total for all conditions and diseases resulting in speech disorders. For example, frequently cited values in the AAC field are 0.5% (Creer, 2016) and 1.2% (Beukelman & Light, 2020). If a conservative estimate of 0.5% is assumed, this means there are around 5,500 children needing AAC in Bulgaria, using data of the National Statistical Institute (NSI) on the number of children as of the end of 2022 – 1,099,696 (NSI, 2022; for data-based estimates, see State Agency for Child Protection (SACP), 2023). A small number of these children receive an adequate needs assessment, access to AAC system and systematic work on its adaptation, development and sustainable use. Overcoming this requires that the barriers to the introduction of AAC in inclusive education should be analysed. It shouldn't be forgotten that a large number of children with communication disorders will continue to have these disorders as adults, too. Data shows that the majority of people in need of AAC, respectively in need of help from specialists, who can use AAC, are adults. For example, 82,000 Bulgarians have a stroke annually and 30% of them are affected by aphasia and need AAC. Globally, one of the main barriers is related to the lack of qualifications of the specialists working with children with communication disorders (Hristova & Grinberg, 2018).

On the proposal of ASSIST – Assistive Technologies Foundation, texts regulating AAC use in the individual needs assessment, technical assistance and provision of access to information and communication were included in the Ordinance on Inclusive Education, as supplemented on 1.08.2024 (Council of Ministers, 2024) (respectively Art. 76(10)(2) , Art. 104(4)(4) and Art. 106(6).

The main objective of the new survey was to assess the familiarity level and the frequency of use of Augmentative and Alternative Communication (AAC) aids among RSCPIE specialists as of the time of its conduct (April 2023) and to provide information on the training needs of specialists working with children with communication disorders. Another objective was to observe how these indicators had changed compared to a similar survey carried out in 2020 (Hristova & Grinberg, 2021) after more than 2 years, during which a series of AAC-related initiatives, trainings and conferences had been carried out, with substantial participation by RSCPIE specialists.

The questionnaire used in both surveys included self-assessment questions on the familiarity with and practical use of different AAC aids, as well as questions pertaining to the choice of strategies or actions in a few case studies. The participants also shared information on the main barriers to using AAC in RSCPIEs, as well as on the number of AAC-related courses that had been offered during the course of their higher education in the respective specialty or during upskilling.

The results from the first part of the questionnaire showed that the main part of specialists rated their familiarity with – and respectively the frequency of use of – AAC aids as very low. This indicated the presence of serious gaps in their competencies in this key area of working with children with complex communication needs in the inclusive education system. This was evident from the results obtained from the first part of the questionnaire:

- The percentage of RSCPIE specialists who were well or fully familiar with low-tech AAC aids was 56%. These aids were used sometimes, often or all the time by 43% of specialists. In many cases, specialists were familiar with low-tech AAC aids, but used them primarily for training, not for communication.
- 28% of specialists were familiar with mid-tech AAC aids; they were used sometimes, often or all the time by 11% of specialists.
- The situation was even more serious in the case of high-tech AAC aids, which provide children with complex communication needs with the best opportunities. 24% of specialists were well or fully familiar with them; these aids were used sometimes, often or all the time by 9% of specialists.
- Regarding computer access aids that enable children with fine motor skills impairments to use high-tech AAC aids, 13% of specialists were well or fully familiar with them, while only 2% used them sometimes, often or all the time.
- The average percentage of specialists who had never used the abovementioned AAC aids were respectively: low-tech – 29%, mid-tech – 78%, high-tech – 80%, and access devices – 97%.

The above results showed that, on a practical level, RSCPIE specialists were not familiar with AAC devices and didn't use them to a sufficiently high extent. However, in comparison to the results from the previous survey, there was an overall rise in the familiarity with and use of AAC and computer access aids.

What was examined in the second part of the questionnaire, through case studies and questions to the specialists, were the strategy choices related to the practical use of AAC aids, as well as the extent to which specialists shared common misconceptions (the so-called myths) regarding AAC aids' usefulness and the cases in which they should be used. The results showed that the majority of specialists had a correct understanding of the concept of using AAC in real-life situations. At the same time, however, a significant part of the respondents answered incorrectly and shared misconceptions about AAC strategies and applicability, especially in the case of early intervention, that had already been disproven by modern studies. This can affect negatively their work with children with communication needs, their families and teachers in the inclusive education system. In spite of this, the overall trends are positive and if support is provided in terms of the needed training and access to AAC systems, this will result in the wider and better use of AAC in RSCPIE activities.

The results from the third part showed that communication skills and AAC aids were not included frequently enough in the assessment and individual support plans. The barriers identified by the participants in the survey fully align with the results of a similar survey in Europe (Hristova & Grinberg, 2018) – insufficient funding and low qualifications are perceived as the main barriers to the successful introduction and use of AAC when working with children with communication needs.

The fourth part of the survey collected data on the self-assessment of specialists regarding the number of AAC-related courses they had taken, as well as their desire for upskilling in this field. Regarding their qualifications in the AAC field, specialists shared that during their higher education there were no or almost no courses in this field (77% had none, while 15% – only a single course during their higher education). This can, in part, explain the unsatisfactory results in terms of familiarity with and use of AAC aids. Generally, the respondents showed great interest in upskilling in the AAC field, which is a good prerequisite for compensating for the large gap in this field.

The survey carried out provided various information on AAC use in the inclusive education system in which RSCPIEs should play a major methodological and organizational role. The results obtained from the survey showed an increase in the familiarity with and use of AAC but in spite of this, the overall degree is unsatisfactory.

Based on the analysis and conclusions made, the following guidelines were proposed for accelerating AAC use in the inclusive education field:

- Establishing programmes at higher education institutions for qualification of specialists in the inclusive education system in the AAC field. Part of the activities in this direction may include state requirements for offering practically oriented courses related to the introduction and use of AAC in university programmes for training specialists – resource teachers, speech therapists, occupational therapists, psychologists, etc. Also, introducing accreditation criteria for programmes related to the quality of AAC training.

- Ensuring funding and inclusion of AAC systems and alternative means for access to them in the equipment standards for RSCPIEs, Special Education Support Centres (SESCs), kindergartens and schools, as well as training the specialists who will use them.
- Establishing an “AAC expert” specialisation for training specialists, who can make AAC needs assessments, to consult families of people with disabilities and to support the utilisation and development of AAC aids according to the needs of children and young people with complex communication needs. Establishing a national register of AAC experts.
- Establishing an upskilling programme for specialists in the inclusive education and social services systems in the AAC field, which will provide opportunities for consulting by AAC experts, testing new AAC aids, forums for sharing experiences, etc.
- Granting official status at national level (e.g. in the Ministry of Education, the Ministry of Labour and Social Policy, the Ministry of Health and the justice system) of AAC experts and the National AAC Team, which will require their involvement in needs assessment activities, AAC aids choice, adaptation and ensuring sustainable lifelong use.
- Amending the inclusive education legislation and explicitly including texts similar to those in the United Nations Convention on the Rights of Persons with Disabilities (Art. 24(3c) and (4) – and Comment 4 of the United Nations Committee on [the Rights of] Persons with Disabilities thereto), related to the provision of AAC aids to students in need and upskilling the respective specialists for working with them. Establishing an accountability system regarding the use of the provided AAC systems and reporting the results of their use. Good example in this direction is the Ordinance on Inclusive Education, as supplemented on 1.08.2024 (Council of Ministers, 2017, 2024).
- Adding AAC aids to the list of free aids and adopting a regulation concerning the needs assessment and choice of appropriate AAC aids, adaptation and support regarding their sustainable use.