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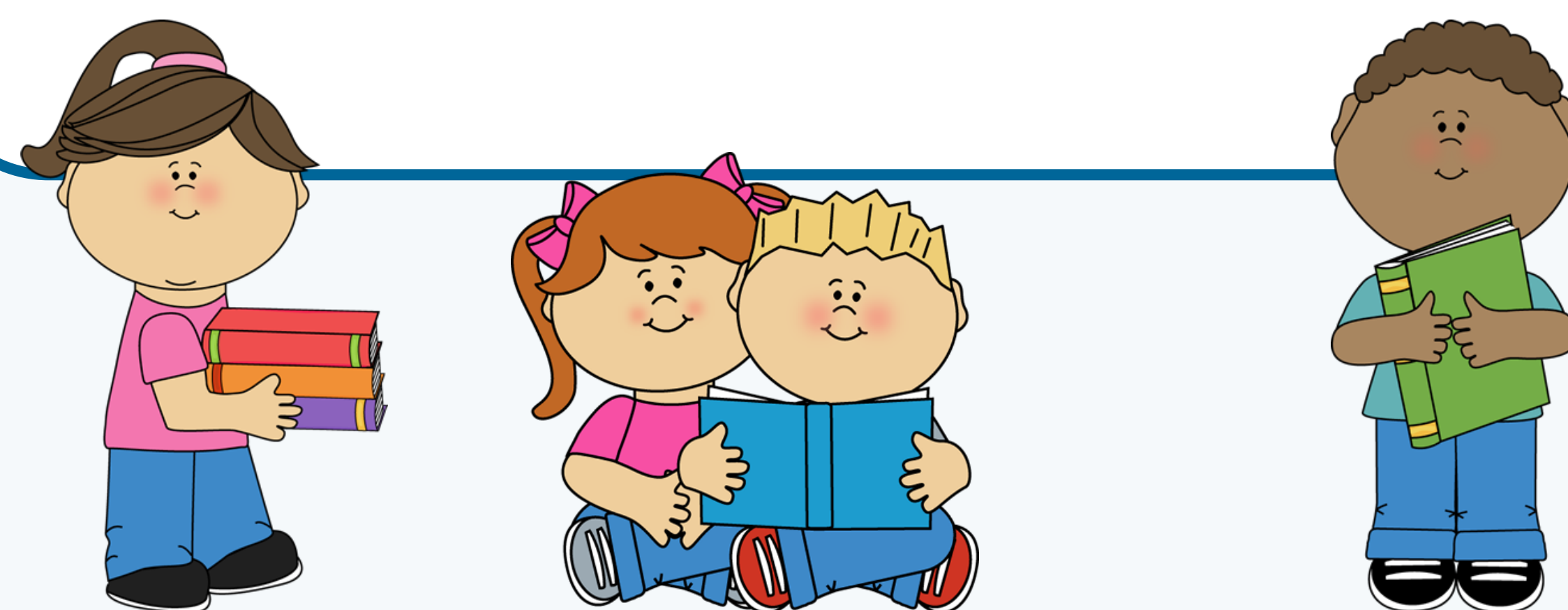
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## Rationale

- Augmentative and alternative communication (AAC) gives people with complex communication needs a way to communicate effectively.
- Research suggests that teaching an individual to use low-tech AAC can support later high-tech AAC use<sup>1</sup>, and that parent education and training about these intervention strategies supports positive communicative outcomes<sup>3</sup>.
- Through online modules developed by Berthelsen, Lyle, and Smith (2018), “AAC and Read with Me 1.0” teaches parents to use a low-tech AAC board with their child and to implement simple strategies to facilitate communication development.

## Purpose

- Review and revise “AAC and Read With Me 1.0”
- Develop a pilot project to determine the effectiveness of “AAC and Read With Me 2.0” as a resource for parents of children with complex communication needs who do not have an AAC system.



## Pilot Project Research Questions

1. To what extent is parent and child behaviour in joint literacy activities modified following the completion of the online modules?
2. Is parent report on the surveys a reliable and accurate measure of parental communication strategy use?
3. Do the parents use the discussion forum, and for what purpose? What themes, if any, emerge from content posted to the forum?

## AAC and Read With Me 2.0: Changes Made

Components of Interest	AAC and Read With Me 1.0	AAC and Read With Me 2.0
<b>Modules</b>	<ol style="list-style-type: none"> <li>1. Reading and Waiting</li> <li>2. Modeling</li> <li>3. Responding</li> <li>4. Asking “Wh” Questions</li> <li>5. Answering “Wh” Questions</li> <li>6. Prompting</li> </ol>	Original module content maintained, but revised through: <ul style="list-style-type: none"> <li>• Simplified language</li> <li>• Parent-friendly instructions</li> <li>• Accessible content</li> <li>• Emphasis on practicing skills until parent feels comfortable using them</li> </ul>
<b>Module Format</b>	Pre-recorded, voice-over PowerPoint videos uploaded to e-Class external <ul style="list-style-type: none"> <li>• Videos <b>cannot be paused</b></li> <li>• Videos <b>must be played from the beginning</b></li> <li>• Written script available once <b>all modules are completed</b></li> </ul>	Pre-recorded, voice-over slideshows, re-recorded using iSpring Presenter 9 <sup>5</sup> ; uploaded to e-Class external <ul style="list-style-type: none"> <li>• Videos can be <b>paused</b></li> <li>• Videos can be <b>started at any slide</b></li> <li>• Written script available for <b>each module individually</b></li> </ul>
<b>Assistive Materials</b>	<ul style="list-style-type: none"> <li>• How to create a low-tech AAC board</li> <li>• How to choose appropriate books</li> </ul>	<ul style="list-style-type: none"> <li>• How to create a low-tech AAC board</li> <li>• How to choose appropriate books</li> <li>• <b>Discussion forum for parents</b></li> </ul>
<b>Evaluating the Program</b>	<b>Pre-program survey:</b> <ul style="list-style-type: none"> <li>• 3 open-ended questions</li> </ul> <b>Post-program survey:</b> <ul style="list-style-type: none"> <li>• 6 open-ended questions</li> <li>• 5 rating scales (strongly disagree to strongly agree)</li> </ul>	<b>Pre-program survey:</b> <ul style="list-style-type: none"> <li>• 3 open-ended questions</li> <li>• <b>4 demographic questions</b></li> <li>• <b>7 rating scales (strongly disagree to strongly agree)</b></li> </ul> <b>Post-program survey:</b> <ul style="list-style-type: none"> <li>• <b>7 open-ended questions</b></li> <li>• <b>14 rating scales (strongly disagree to strongly agree)</b></li> </ul> <b>Parent Video Analysis</b>
<b>Instruction Documents</b>	None provided	<ul style="list-style-type: none"> <li>• <b>How to access E-Class</b></li> <li>• <b>How to upload videos</b></li> <li>• <b>How to make discussion forum posts</b></li> </ul>

## Proposed Analyses

- **Pre- and post-program video recordings of a shared reading activity** analyzed for parent use of module skills and number of child’s communicative attempts.
- **Pre- and post-program surveys** comparing parent self-report of ability to use module skills as compared to video recordings of parent-child interactions.
- **Categorize information posted to the discussion forum** using inductive conventional content analysis<sup>2</sup> with NVivo software.<sup>4</sup>

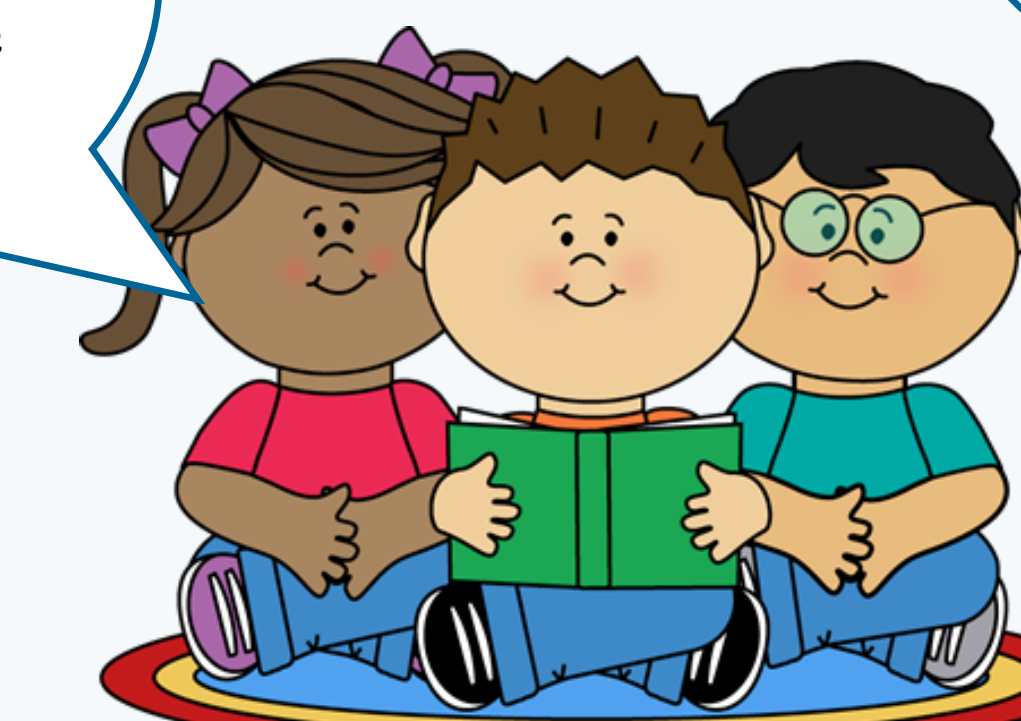


## Preliminary Data and Feedback

### Participants

Offered Access	Registered	Submitted Survey #1	Viewed Module 6
19	8	7	2

“I think it would be extremely valuable to be able to continue to review the videos again...also I would ideally like to have them to review and train with new support staff.”



“The hardest part was getting started, getting the board made.”

“Overall, I feel I learned a great deal in a short amount of time relevant to expanding our language and giving [my child] a tool to communicate. I have high hopes for our future interactions with specialists like SLPs to guide our next steps. I would gladly participate in future work you do. or even the iteration of the study, should there be one... I always value to resources [for] parents, especially for free.”

## Challenges

- Technical support issues during development.
- Making presentations accessible and user friendly.
- Deciding on an eClass format (internal vs. external).
- Establishing how to maintain participant anonymity while promoting participation in the forums and tracking participant responses.
- Slow start to recruitment via traditional methods (posters, clinician promotion, etc.).
- Parent Facebook groups seemed to be the best platform for recruitment.

## Future Directions

- Parent and clinician responses to recruitment were enthusiastic, even though only a smaller number of individuals started and finished the modules.
- Parent responses to the resource were overwhelmingly positive, despite challenges in creating AAC boards.
  - Future research could establish how to make this process more parent-friendly, as this section was not modified during the current project.
- A free, online, parent-friendly and easily accessible resource for parents of children with complex communication needs on treatment waitlists is much needed in Canada, and this project should be developed further in the future.