Critical Review:

adjustment) OR (social facilitation) OR (social identification))

The search was not limited by date in attempts to find as much relevant literature as possible. As well, The University of Western Ontario Library catalogue was searched for other relevant resources. Finally, other applicable studies were obtained from the reference lists of previously searched articles.

Selection Criteria

Studies included in this literature review were required to have examined the quality of social interaction of AAC users and/or the factors that impact it. There were no limitations in terms of research participants, research designs, type of AAC system or outcome measures.

Data Collection

Results from the literature search produced qualitative and quantitative studies fitting the selection criteria.

Results

Single Group Pre-Posttest:

Johnston et al. (2003) observed three preschool children with disabilities that were being taught functional communication using an AAC system. Each child had his/her/their own Individualized Education Plan (IEP). The children were 3:3, 3;10, and 4:6. Intervention was provided during daily activities within the preschool classroom. The intervention included 4-steps: 1. establishment of communicative opportunities, 2. model of the desired behaviour by a teacher or peer, 3. guidance to engage the child in the desired behaviour, and 4. consequences and comments

ability to produce the desired behaviour. When the

Book/Expert:

Within the text <u>Augmentative and Alternative Communication: New Directions in Research and Practice</u> (1999), it was noted that family members consistently report that they felt it was easier to communicate on behalf of their family member that uses AAC rather than waiting for the AAC user to use their system to speak for themselves. It is suggested that this is a result of the busy family schedule. It is often found that the oldest sibling or the sibling closest in age to the child that uses AAC acts as a mentor and interpreter.

The authors put forth the factor of acceptance as a barrier to social interaction for AAC users. The example used was grandparents. If the

there is greater chance that social interaction will be increased. This may be generalized to all individuals. Conversational partners that accept the AAC user increase the amount and quality of social interaction.

Sweeney (as cited in Loncke et al., 1999) conducted a study of children 8 to 12 years of age who use AAC or had severely dysarthric speech. The study revealed that none of the children interviewed indicated that all of their family members understood them and few of them indicated that there was more than one neighbour or peer that interacted with them regularly or successfully. The study also revealed that children who use AAC have significantly fewer communication partners compared to their peers, who typically had 40 or more partners and no difficulty developing new ones. In the majority of cases, less than seven people could be identified that could understand the AAC user.

Conclusions

The current data provides speech language pathologists with a foundation to understand the

that influence it but is limited to a minimal amount of studies. Okolo and Bouck (2007) reviewed research and found that only 10% of the 122 studies they reviewed investigated attitudes and social interactions of AAC users.

Solid conclusions are difficult to develop

which is confounded by the limited amount of research specifically investigating social interactions of AAC users. The research designs used in the studies reviewed, range in design strength. The

randomized clinical trials provide strong evidence but may be less naturalistic.   Although the number of studies reviewed was limited, similar findings can be seen across multiple studies, which increase the overall reliability of the findings.

Many of the studies used a design format where participants observed a videotape of an AAC user. This format is primarily used because it provides consistency in exposure as well as it is less time consuming. The ideal situation would be to naturally observe a real social interaction between an AAC user and peer.

Research in this area is extremely important, as improper support during social interaction could foster the AAC user to be unnecessarily dependent and/or cause the AAC user to avoid social interactions. Duchan (1997) concluded her argument

AAC user to participate naturally with peers in daily events; interaction and participation in daily events are the only ends. She emphasized that the AAC user needs to feel they are participating because their participation is meaningful and motivating to them and valued by those with whom they interact.

Lilienfeld and Alant (2002) suggest that low rates of social interaction between AAC users and their peers can have a negative effect on the development of attitudes. Research suggests that AAC device features may have a significant effect on the attitude of conversational partners and their willingness to interact with the AAC user.

Multiple studies suggest the importance of being a multi-modal communicator. This allows the AAC user to be a more effective communicator in different environments by changing communication strategies.

Throughout the reviewed research, there is a trend dealing with the age and gender of the

believed that gender impacts the attitude of the partner but further research should be conducted to solidify reliable conclusions.

Recommendations

Further research is needed to evaluate the quality of social interaction of AAC users. This research should specifically look at identifying factors that can enhance the quality of interaction and therefore possibly resulting in increasing the quantity

of interactions and number of conversation partners. There is evidence that if researchers can identify factors that improve the perception of the AAC user it could transfer to improved attitudes of the conversational partner.

Speech Language Pathologists (SLP) should adapt their approaches to allow evaluation of the success of an AAC device to include its functional use in interactive situations. There is a need to change the way that we evaluate the success of an AAC system. Shane (as cited in Felson Duchan, 1997) proposed that success must be measured as a function of its use in interactive situations such as conversational interactions, classroom interactions and social interaction within the community (p. 5). This means SLPs need to teach the AAC user how to utilize their AAC system functionally.

Using peer modeling should be another aspect that SLPs try to incorporate into their therapy approach. There is evidence that proves peer modeling rather than clinician/interventionist modeling can improve the AAC users ability to imitate and increase the amount of peer interactions.

SLPs should teach the AAC user and to encourage him/her to explain their situation and their device to the conversational partner. This may positively impact the quality of the social interaction. Research shows that this is beneficial so SLPs need to emphasize the importance of self