



2019 ATiA Survey

Training Needs in Augmentative and Alternative Communication



2019 ATIA Survey:

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The Assistive Technology Industry Association fielded an online survey to learn about the training needs of those who assist users of augmentative and alternative communication (AAC). With over 1,000 respondents, the findings are clear: there remains a pressing need for training to increase the capacity of professionals and support providers to provide effective AAC and Assistive Technology.

In 2011, the Assistive Technology Industry Association (ATIA) surveyed more than 500 Speech Language Pathologists to assess knowledge of and training needs related to Augmentative and Alternative Communication (AAC) and Assistive Technology (AT) supports.

In October 2019, with the help of the Human Services Research Institute, ATIA repeated the survey—this time with an expanded scope and reaching out to a broader range of professionals and non-professionals.

A total of 1,057 AT and AAC practitioners responded to the 2019 survey. Respondents reported being engaged in a variety of responsibilities related to AAC supports—including assessing and

selecting AAC devices and supporting AAC users.

According to the 2019 survey, and consistent with the 2011 survey, practitioners see a need to improve their knowledge and skill in AAC. While they are confident in their own abilities, they:

- ❖ Do not view their educational experience as adequate preparation for their work
- ❖ Do not have strong confidence in the other practitioners in their work setting
- ❖ Rely on and are highly interested in pursuing a wide-range of continuing education activities, with a preference for online modes of training delivery



46% say they did not have adequate preparation in AT in their professional training



49% say the adults/children they work with don't have access to needed AAC supports

Suggested Citation: Assistive Technology Industry Association and Human Services Research Institute. (2020). 2019 ATIA Survey: Training Needs in Augmentative and Alternative Communication. <https://www.atia.org/>

The 2019 Survey

Respondents

Speech Language Pathologists (SLPs) made up the majority of respondents (60.1%); Occupational Therapists represented the next highest total (9.5%); others included educators, administrators, clinicians, and parents. The respondents serve people in all age groups, but 809 of them (83%) work with children in grades K-12.

The majority of respondents (65%) work primarily in school settings (preschool through grade 12), while

nearly one-quarter (24%) work in community-based or home settings. A much smaller percentage work in outpatient (14%), early intervention (10%) or other settings.

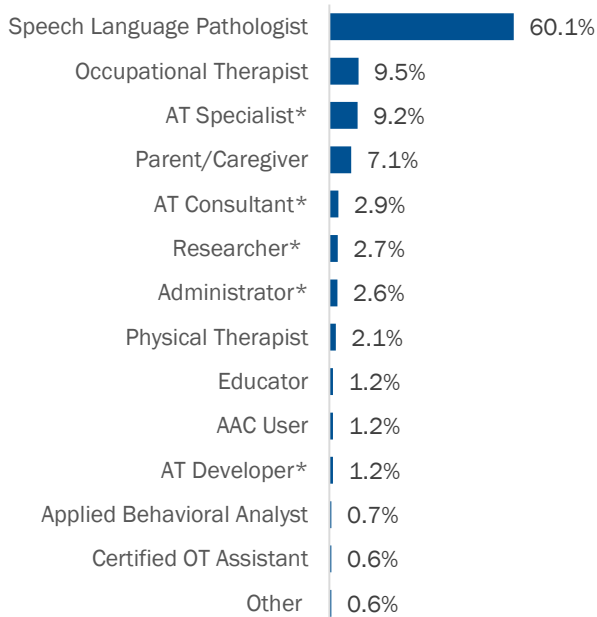
As a whole, respondents are experienced professionals: their median years of practice was 16. And many reported working on a multidisciplinary team to support individuals' AAC use.

The survey also had international reach: 82% of respondents were from the US and 5% were from Canada, but the remainder were spread across Australia, New Zealand, the UK, India, and Israel.

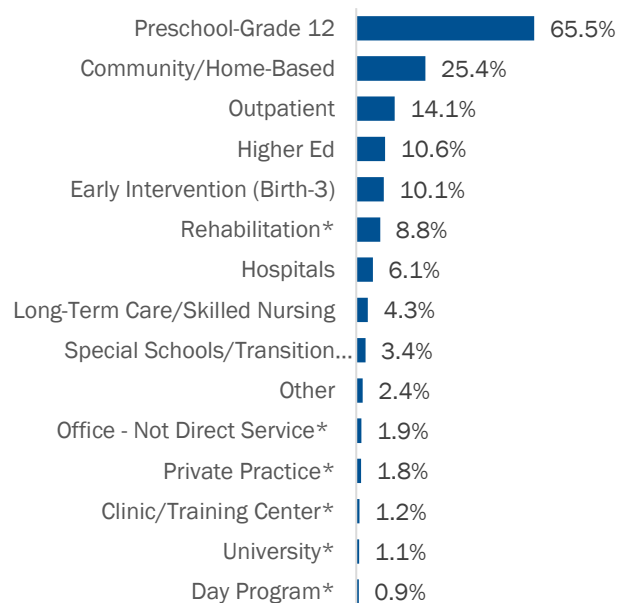


65% of respondents work primarily in school settings (preK-grade 12)

Respondent's Role



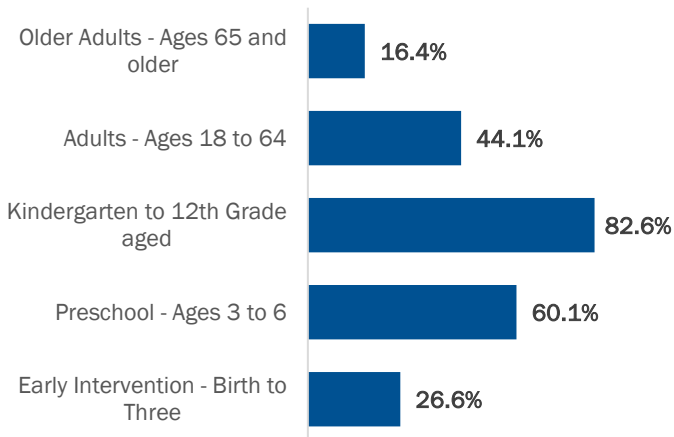
Respondent's Practice Setting



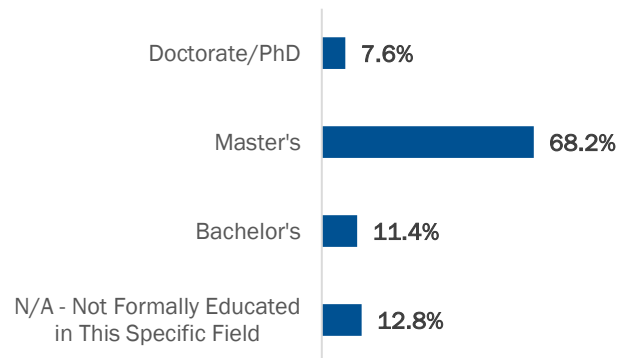
*Response was written in rather than selected from available options.



Respondent's Primary Age Group Served



Respondent's Formal Education (Highest Degree Attained)



2019 Survey Results

Many of the needs identified by the 2019 survey are the same as in 2011, indicating that things have not fundamentally changed in 8 years. (See page 8 for a comparison of results.)

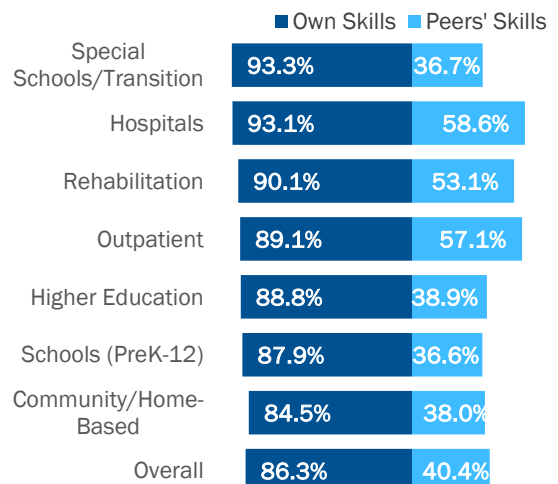
Confidence in Skills and Knowledge

Overall, 86% of respondents report confidence in their AAC knowledge and skills, and their ability to meet the needs of the people in their practice setting (agreeing “somewhat” or “strongly” with that sentiment). But confidence varied by role and by setting, as shown in the graph to the right. When compared to their confidence in their own skills, practitioners were less confident that their peers have the needed skills, suggesting perceived gaps in the needed AAC skills across settings.

Practitioners in school settings (preschool through high school) were among the least confident in the AAC knowledge and skills, while those in outpatient settings had the most confidence in their peers’ AAC knowledge and skills. One possible explanation is that AAC practitioners in school

settings have limited opportunity for interdisciplinary work that would allow for cross-discipline transfer of knowledge and skills in AAC that may occur un multidisciplinary team of professionals. Another possible explanation could be that school-based providers are largely required to be generalists and that AAC is only one part of they and their peers’ responsibilities.

Confidence in Skills by Setting Type



As may be expected, higher levels of education were correlated with a more favorable self-assessment of ability. Among SLPs with doctoral-level training (n=34), 82% strongly agree they have the necessary skills to meet the needs of the people they serve; among SLPs with master's-level training (n=497), 58% strongly agree, and among those with only a bachelor's degree only 48.8% strongly agreed. (Recall that this survey included practitioners from outside the United States, including practice settings

where a bachelor's degree can be a sufficient qualification to practice as a Speech and Language therapist.)

SLP's who strongly agree they have the needed skills*



Preparation & Training

Training in AAC and AT is needed both at preservice and on an ongoing basis as technology and best practices change.

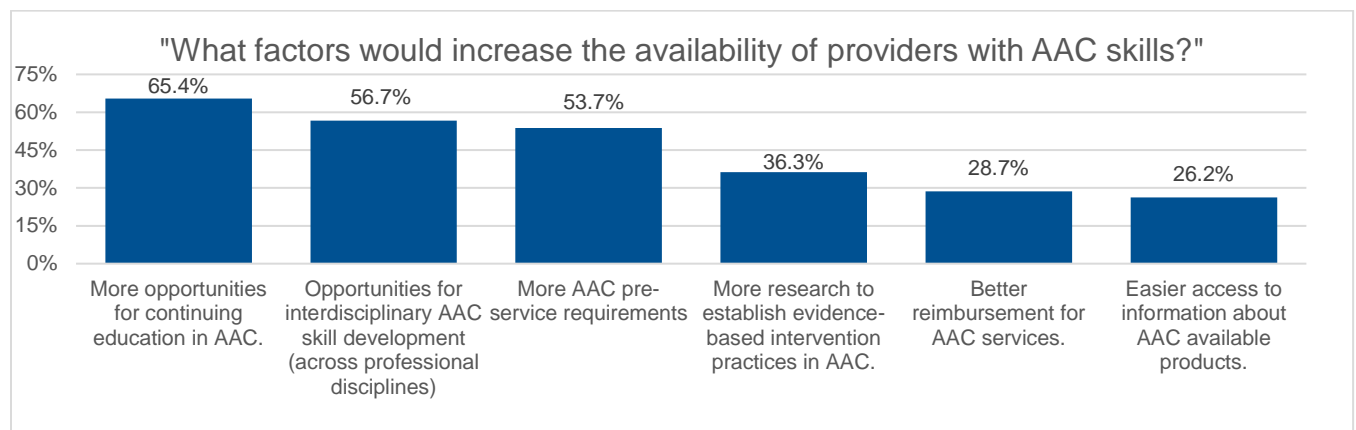
With regard to preservice training, there does not seem to be a strong relationship between a respondent's function and their views of their AAC preparation. The one exception was among Occupational Therapists: 68% of OTs "strongly" or "somewhat" **disagreed** that they were well prepared in AAC, compared to 60.8% across all respondent groups.

Percent who felt adequately prepared in AAC from their undergrad or grad program:

Function	Strongly or somewhat agreed
AT Specialist	34.1%
Speech Language Pathologist	31.9%
AT Consultant	28.6%
Parent Caregiver	21.6%
Occupational Therapist	19.5%
Average	28.5%

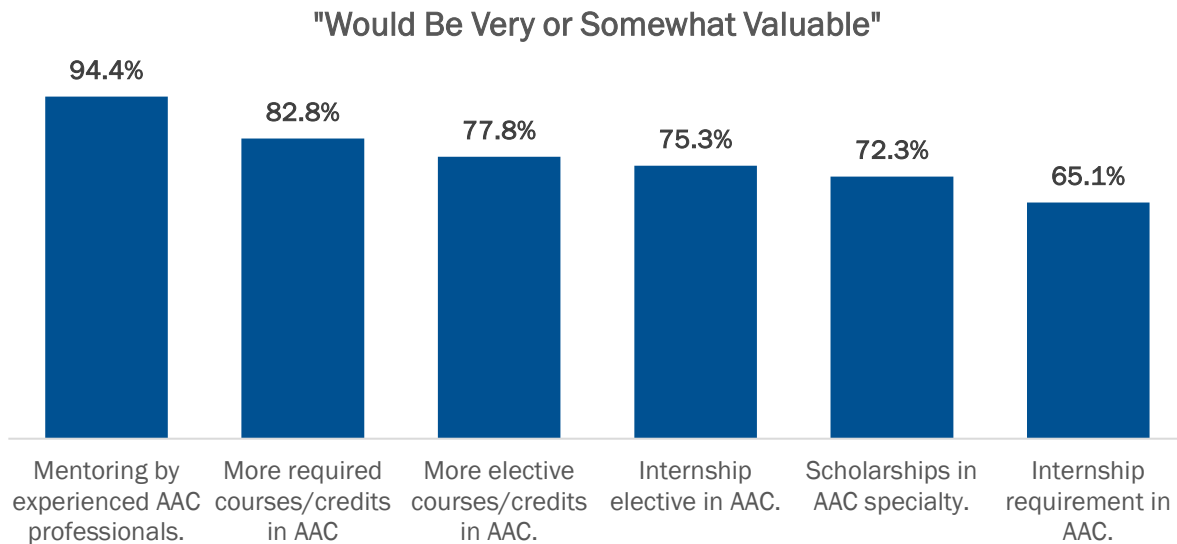
HOW DO WE INCREASE PROVIDER'S SKILLS?

Respondents numerically ranked a variety of different strategies for ensuring that there were an adequate number of skilled practitioners. Three strategies stood out from the others: Continuing Education, Interdisciplinary Skills, and Pre-Service Requirements.



PRESERVICE

Rather than placing a lot of confidence in one or two approaches, respondents had very favorable opinions of a variety of different strategies for improving preservice training for AAC. This “all-of-the above” approach to improving preservice training is headlined by a markedly pronounced desire for mentoring by experienced AAC professionals.



**Respondents noted
‘trained and experienced
faculty’ as the greatest
priority for improving
preservice training**

Barriers to Training



- Lack of AAC content in other courses
- Lack of faculty who are well-versed in AAC
- Lack of AAC clinical/practicum opportunities



Cost of training



Lack of interest in the topic



No time in program for required/dedicated AAC course



Service population isn't large enough to merit the training

Percentages listed correspond to the number of respondents who identified a given barrier as "somewhat significant" or "very significant"

For rehabilitation and education professionals, training in skills and content knowledge required for effective AAC and AT delivery should begin as part of preservice training. There were multiple barriers identified which limit preservice opportunities to gain AAC skills.

Continuing Education

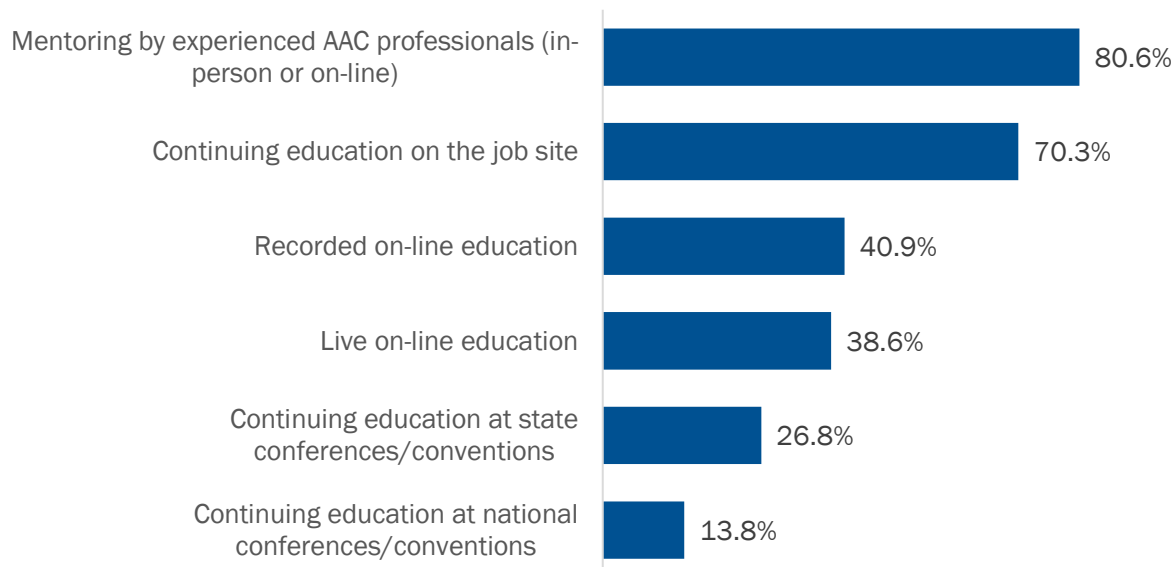
Continuing education was the most highly ranked suggested remedy for the perceived gaps in knowledge and expertise. webinars (live or recorded) ranked more favorably than state or national conference educational opportunities. These findings were fairly consistent across subgroups such as setting, function, and years of experience.

Respondents look favorably on a wide variety of solutions to the problems with AAC training, and they may be generally described as favoring an “all of the above” approach. The most highly desired solution is more mentoring opportunities (consistent with the 2011 survey results).

Additional priorities include multidisciplinary team training opportunities (“so everyone is on the same page”), opportunities for training in languages other than English, online groups on social media, and providing opportunities to have people who use AAC well to serve as paid mentor-trainers.

- ❖ **69%** have a strong interest in pursuing AAC-specific continuing education.
- ❖ **87%** say they would likely use a current list of AT website and online education offerings.
- ❖ **83%** indicated a desire to find AT that can meet the needs of individuals with motor impairments who require alternative access methods for AAC and other environmental controls.
- ❖ **81%** have an interest in AT to meet the needs of students with specific diagnoses including autism, mobility issues.

Continuing Ed opportunities ranking in the top 3



Continuing Ed Topics

Survey respondents were given opportunities to reflect on a range of Continuing Education topics. They ranked each topic relatively highly, reflecting a need for a broad range of training content to meet the demand. Below are the percentages who report being somewhat or strongly interested in:

- ❖ Strategies for keeping up with new technology - **92.9%**
- ❖ Alternative access strategies including eye-gaze, switch scanning - **92.4%**
- ❖ Comparison of AAC technologies (apps, dedicated devices, etc.) - **91.8%**
- ❖ Advances in AT relevant to learning - **90.0%**
- ❖ Best practices in person-centered AT needs-assessment, in order to select the right tools for each client – **89.9%**
- ❖ AT in the school setting – **88.8%**
- ❖ Resources and strategies for public and private (including philanthropic/grant) funding – **88.1%**
- ❖ Interdisciplinary, collaborative AT practices in schools – **87.6%**
- ❖ AT for people with Autism, neurodevelopmental disability – **73.1%**
- ❖ Effective documentation of AT needs for insurance/other third-party payer requirements – **67.3%**

Continuing Ed Sources

Clinicians and the public have access to information and education about AT and AAC from an increasingly broad range of sources.

When asked to choose from a list of 8 sources for ongoing continuing education, 57% of respondents (n=424) indicated that ATIA is their most trusted source for quality continuing education in AT/AAC.

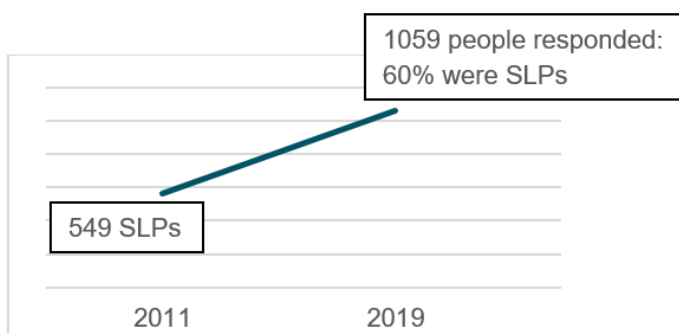
There is a need for clear, updated, and unbiased information. Rankings of trusted sources for continued education were:

- ATIA-sponsored conferences or webinars
- Learning from a supervisor or other clinicians “on-the-job”
- ASHA-sponsored conferences
- RESNA-sponsored conferences or webinars
- AT users/families
- Colleges and universities
- AOTA-sponsored conferences
- AT or AAC vendors or manufacturers webinars/website resource

“[We need] more contact with people who are proficient users of AAC. They are often our best teachers.”

Looking back to look forward: The 2011 and 2019 ATIA surveys

The ATIA survey in 2011 highlighted pressing issues among practicing SLPs and served as a foundation for efforts to expand training and capacity building to expand access to quality AAC.¹



With an expanded group of respondents, we see:

- Strong demand for education and resources about advances, new AAC and AT (2011: 86%; 2019: 93%)
- Concerns about the adequacy of preservice training in AAC. For comparison: in each the majority of SLP respondents reported they did not receive adequate education in AAC (2011: 74%; 2019: 68%)
- 78% of respondents report they had inadequate preparation in AT, excluding AAC, in their undergraduate and/or graduate programs.

The demand for mentorship and training remains strong across survey years, with 2019 marking a slight shift in favor of direct mentorship opportunities as the greatest need expressed by respondents.

What's new in the 2019 ATIA Survey?

The expanded 2019 ATIA survey reached out to and included participants beyond the 2011 survey population of only Speech Language Pathologists. Respondents in the 2019 survey included the voices of other rehab practitioners, educators, family members, and users of AAC.

Questions in the 2019 survey allowed for greater understanding of the **respondent's role** in the delivery and support of AAC, and the **settings** in which respondents practice, in addition to their experience and education, preservice and post professional training.

In addition to questions about the respondent's knowledge and ability to provide AAC, the 2019 survey included specific questions about the broader category of Assistive Technologies to address a broad range of functional support needs for people with disabilities across the lifespan, not just communication as in AAC.

¹ Full results of the 2011 survey are available at: <https://www.atia.org/wp-content/uploads/2018/12/ATIA-SLP-Survey-2011.pdf>

Summary and Recommendations

Provide targeted training opportunities for practitioners in different settings.

When viewed across service settings, respondents had varying levels of confidence in their ability and the ability of their peers to meet AAC and AT needs. The ongoing demand for mentoring (both preservice and post-service) suggests that there are setting-specific—or even site-specific—training needs that practitioners. Continuing education opportunities that present content that is setting-specific (or population-specific) can help meet this demand.

Pre-service training in AAC and AT with faculty that have updated skills is a priority across a wide range of topic areas. This calls for educators of AAC and AT practitioners to build pre-service training programs to meet the needs of learners and the field across the continuum of educational experiences including didactic training and practicums.

Mentors usually can provide important skills-based education based on experience however the demand for information-based education about new and emerging technologies is an ongoing demand. This presents an additional focused area of opportunity for ATIA.

Continue to expand flexible training opportunities to support emerging needs.

Continued advances in technologies fuel the demand for ongoing training. Online and on-demand training can meet this continued need—and can meet practitioners where they are.

Short and video-based training modules that feature people who are adept users of AAC provide focused content, allowing learners to gain practical insights into the user experience.

The overwhelming support for continuing education and the general interest in all types of this professional development points to gaps in training offerings. Availability of content was the most significant gap. This survey leaves us with an impression of pressing need for more quality training options that will support new practitioners as they begin their careers and to facilitate ongoing skills and knowledge development.

Implement a survey targeting users of AAC and AT.

This survey reached a broad audience through online distribution. However the distribution through ATIA Networks resulted in a respondent group that was primarily SLPs and other professionals. While the survey was designed to capture opinions from a range of people knowledgeable about AAC, including AAC users and their supporters or caregivers, it reached only a limited number of non-professionally trained respondents.

Future efforts to target input from AAC and AT users and from their support providers would provide important insight into the experience and needs of those who are most directly impacted by gaps in AAC and AT knowledge.