

### A discussion club



for adult users of augmentative and alternative communication



A discussion club is a space (offline or online) created for a group of individuals using augmentative and alternative communication (AAC) where they can meet to talk to one another. The club is a place gathering participants with similar communication problems, allowing them to talk and discuss freely, establish relationships, but also bring up essential topics related to the life of people with disabilities, their interests, passions, and everyday reality. This is also a way to practise conversational skills and consolidate capabilities acquired by AAC users over years of their communicational interactions and during their AAC therapy.

The formula of the club for adult AAC users assumes that adult individuals with disabilities participating in meetings can share their experience, plans, fulfilled and unfulfilled dreams, talk about their path to self-sufficiency, achievements and failures. It is assumed that participants of the club for adults are prepared in the educational and therapeutic process to hold a free dialogue, with respect for every attendee.

#### Who is the innovation is targeted at?

The innovation is targeted at adults using augmentative and alternative communication. Such individuals often find it difficult to initiate and hold a conversation, which is often related to their coexisting motor disability or to the fact that their environment is not familiar with their communication method. Hence, AAC users feel misunderstood, shy or anxious, and they need assistance in establishing new relationships.

### Who can implement the innovation?

The club can be organised by facilities, institutions and organisations supporting individuals with motor disabilities and people with complex communicational needs, as well as universities educating students in the following areas: pedagogy, rehabilitation, psychology or other fields related to people with disabilities.



## What problems does the innovation address?

For most of us communication goes beyond close relations within the family circle. We talk to many different people because of many different reasons. We often communicate with our neighbours or acquaintances, as well as people providing us with various types of services, e.g., a bus driver, a salesperson, a clerk, a physician, a waitress, a teacher.

Individuals utilising augmented and alternative communication also have such needs but satisfying them is considerably hindered due to difficulties with initiating and holding a conversation, which is often related to a coexisting motor disability.



Consequently, AAC users often feel misunderstood, shy or anxious, and they need help in establishing new relationships.

#### How was the innovation created?

The innovation was originated by Karolina Kamińska who – based on her own personal and professional experience – activated it together with Hubert Żelazko and Gabriela Lorens. All three of them are clinical speech therapists, specialists working on a daily basis with patients experiencing difficulties with communication, using AAC. When testing the method, to optimise the form of the discussion club format, innovators were supported by Agnieszka Pilch, an AAC specialist and supervisor.

# How to implement the innovation at your end, step by step?

Adult AAC users have complex communicational needs. These are most often individuals who rarely leave home and are deprived of occasions to actively participate in social life. Many of them are not professionally active. They often spend all their time at home, having no access to high-tech equipment and the Internet. This does not create favourable conditions for keeping regular contacts with other people than their immediate relatives. An attempt can be made to reach them via Facebook (by organising events and publishing informational posts on various groups), online instant messengers (by sending messages to specific individuals, specialists, and friends) as well as e-mail invitations or requests for contact to institutions supporting people with disabilities. But the recruited group is likely to be small, which is by no means an obstacle to starting a club – a group established within the pilot was made of 10 individuals and met once a month. The club can be organised in either offline or online format, depending on the preferences and capabilities of its organisers and participants. To establish an online club, it is obviously necessary to ensure the Internet access and a videoconferencing platform with an option of separate sessions (breakout rooms), such as Zoom. Hence, the organisation of a discussion club in such a form might require a training on the videoconferencing platform usage. To organise offline meetings, it is necessary to arrange a venue adapted to the needs of individuals with motor disabilities. Additionally, it is necessary to ensure transport, refreshments and – in the case of the hybrid form – a computer, microphone, PA, and an overhead projector.

Regardless of the selected format, it is necessary to ensure the presence of facilitators and communication partners, and optionally also a supervisor observing club meetings, sharing their knowledge, experience and insights with facilitators, consequently helping to optimise the form of such meetings.

During the pilot phase, club meetings were held once a month, on average (partially online, partially offline), and lasted ca. 2 hours online and ca. 3 hours offline. It seems that such sessions should not exceed that timeframe. Club meetings were regularly attended by 8 to 12 AAC users, ca. 10–15 speech therapy students, 3 facilitators and 1 supervisor. Due to organisational concerns, the group should not exceed that number.

Each meeting should be held according to a plan and principles accepted by everyone, such as not interrupting others, not criticising one another's opinions, the right to have one's own viewpoint, to refuse to speak or answer questions, the necessity to keep other users' comments confidential, and to speak on one's behalf only. The formula of such meetings should be open to guests and current events, and to the change of the topic upon attendees' request. Each participant should also have the right to present their personal problem or share reflections from their own life, if they feel such a need.

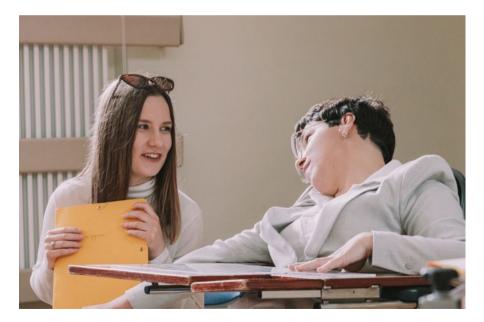
It is a good idea to follow the sessions with short conversations with communicational partners, aiming at sharing feelings, thoughts and opinions.



## Does it work? How does the innovation help its beneficiaries?

Social activity that communication is the key component of is essential to ensure development and quality of life. It increases the sense of affiliation and purpose in life. It has beneficial impact on health and reduces the risk of depression. It is needed to establish contacts, friendships and longterm relationships. Participation in the life of a wider community, social interactions, shared learning, play or leisure stimulate and support bonds. This is why the participation in the discussion club is highly beneficial for AAC users, enabling them to:

- speak in public,
- reduce tension related to speaking on their own,



- interact with other individuals experiencing similar difficulties,
- see how their own utterances are perceived by others,
- draw inspiration from other people's utterances,
- share experiences and interests,
- have enough time to prepare and present their own utterance,
- respect rules of communication, show mutual respect,
- communicate with various communicational partners,
- have a sense of acceptance in a group of speakers,
- establish new relationships, develop socially.

#### How much does it cost?

Starting and running a discussion club is obviously related to certain costs which are determined by the formula of the club.

For a one-day **live meeting** the following elements are necessary:

- hiring a venue (ca. PLN 500),
- ensuring refreshments (depending on the number of participants, assistants and caregivers – PLN 40 per person),
- if applicable: covering the cost of transport for attendees coming from other locations (two-way transport from another location may cost PLN 2,000, and within one city by car – PLN 300).

For a meeting held online, it is necessary to buy a communicational platform subscription, e.g., Zoom (ca. PLN 900 for annual subscription).

#### Who are the authors of the innovation?



Karolina Kamińska – clinical speech therapist, special pedagogue, early child development support specialist, AAC communication therapist. Graduate of the Maria Grzegorzewska Special Pedagogy Academy in Warsaw, majoring in special pedagogy, and of the Łazarski University, majoring in clinical speech therapy and early development support. She gained professional experience working as a speech therapist at counselling centres, kindergartens, and special schools. She specialises in implementing augmentative and alternative communication.



**Agnieszka Pilch** – innovation supervisor, AAC communication specialist, oligophenopedagogue, early development support specialist, IT specialist. Head of the Augmentative and Alternative Communication and Easy to Read and Understand Text Council, the President of the Mówić bez Słów Council – ISAAC POLSKA, and the Vice-President of the AAC-owi Przyjaciele Council. She also runs a discussion club for AAC users in Zamość, opened thanks to the pilot of the innovation.

#### **More information**

For more information, including a guide on how to organise a discussion club, visit: <u>https://inkubatorpomyslow.org.pl/innowacja/klub-dyskusyjny-dla-doroslych-uzytkownikow-aac</u>.

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### Uncommon solutions to common problems

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