EVIDENCE-BASED PRACTICE

It is the position of the American Speech-Language-Hearing Association that audiologists and speech-language pathologists incorporate the principles of evidence-based practice in clinical decision making to provide high quality clinical care. The term evidence-based practice refers to an approach in which current, high-quality research evidence is integrated with practitioner expertise and client preferences and values into the process of making clinical decisions.
INTRODUCTION

In these articles, the authors explore augmentative and alternative communication (AAC) that are bilingual and use English as a second language. Authors also reflect on the cultural and diverse children that use AAC. McNamara considers the established research in bilingualism in the typically developing population and those with speech language disorders to propose guidelines for best practice in bilingual AAC. Yu reviews topics that include studies comparing the developmental outcomes between monolingual and bilingual children on the autism spectrum and studies on the role of home language development in English acquisition. The purpose of Mindel and John’s article is to increase the competency of school-based speech language pathologists who are increasingly working with culturally and linguistically diverse student populations using AAC. Johnston, O’Neill, and Schumann’s article provides interventionists with a strategy for comparing the efficiency of initial graphic symbol acquisition in an individual’s first and second language for English language learners who use AAC during functional communication training. McNamara considers the established research in bilingualism in the typically developing population and those with speech language disorders to propose guidelines for best practice in bilingual AAC. Wagner outlines some commonly heard questions and concerns professional and families share with regards to bilingual AAC intervention and shares some resources for selecting, customizing, and designing robust bilingual AAC system, strategies for teaching core words each month and ways to incorporate both paper-based and electronic-based AAC tools. Solomon-Rice, Soto, and Robinson discuss project scholars who receive evidence-based training in AAC assessment, AAC intervention, collaborative teaming, AAC applications supporting the language and literacy of culturally and linguistically diverse children, and professional development in collaborate AAC settings.

LEARNING OUTCOMES
You will be able to:

- summarize the barriers to bilingual communicative competency for people with complex communication needs from culturally and linguistically diverse backgrounds
- identify culturally and linguistically appropriate vocabulary and symbols to better facilitate broader generalization of the use of the AAC system
- explain why home language development facilitates English acquisition in children on the autism spectrum
- describe the steps for conducting functional communication training (FCT) with beginning AAC users who are English Language Learners
- describe at least three personal experiences that have shaped their perspectives with regards to language development
- identify the five broad areas of competency needed to provide effective AAC services

Participants are encouraged to actively seek and critically evaluate the evidence basis for clinical procedures presented in this and other educational programs.

Adopted by the Scientific and Professional Education Board, April 2006
PROGRAM HISTORY

Start date: November 18, 2018
Available through: November 16, 2021

IMPORTANT INFORMATION

To earn continuing education credit, you must complete the test with a passing score on or before November 16, 2021.

To see if this program has been renewed after this date, please search by title in ASHA’s online store at www.asha.org/shop.

This course is offered for 0.30 ASHA CEUs (Intermediate level, Professional area).