- [Blair] And now I will hand
it over to our speaker, Tanna.

- Thanks so much, Blair.

Hi everyone, and thank you for joining.

Give us a shout in the
chat if, for any reason,

my audio doesn't sound
good as we proceed today.

And also, I just wanna
give everybody a heads up

that you may hear some background noise.

I am in a pretty active
therapy space right now,

so there'll be some authentic
noises that are very in line

with the topic that we are
going to explore together.

So, hopefully, that doesn't
distract you too much,

and we can get through
our exciting topics today.

This is part two of a two-part course.

I'm hopeful that some of
you were able to join me

for part one, and if not,
you definitely can go back

and watch that recording
on the AbleNet website.

We will be picking up with
the more of the support end

of things today, whereas before,
it was a lot of observation

and kind of assessment around
these connection concepts

that are at the center of our topic.

Just a reminder of who I am

and how you can get in touch with me.

Some of you also have
already reached out via email

to ask me some questions

about some of the content from part one.

I'd love that.

If I didn't get back to you yet,

it's just because it's
been a hectic season.

But I do get back to
everybody who reaches out

with any questions or comments
or points of discussion,

so please don't hesitate
to reach out to me.

I am speaking to you today as an SLP

with some areas of interest
and specialty in autism

and, of course, AAC, which
is why you're all here today.

When I'm not an SLP,

I am a consultant, a coach, and a trainer

and the founding director of AACcessible,

so you'll see some of the resources

from AACcessible speckled
into the talk today.

AACcessible is a nonprofit,
so if you do see a resource

that is not financially accessible to you

and you would like to reach out to me

for some support in acquiring
that, please let me know,

but most of the resources
that I will share today

will be entirely free.

And if there's any low-cost ones

and I can support you,
I am happy to do that.

You have these in your webinar outline,

but I just wanna remind us

of some of the goals I'm
hoping we can tackle today.

First and foremost, I really
wanna help you narrow in

on some of the intervention elements

that you will be focusing on

when working with children
on the autism spectrum

who are learning to
use AAC to communicate.

We also wanna give you some
prompts and cue guidance.

Of course, there's no hard
and fast, right or wrong.

I can't give you a
prescription necessarily

on prompts and cues that
you should or could use,

but I definitely wanna add to your toolbox

and also talk about some
of the prompts and cues

that you might already be using

and some of the pros and cons

of some of those choices
that you're making.

And then I have a lot of
resources to share with you

as we go throughout the talk today.

Some are AAC-specific, some

are more autism-specific,

or maybe very transdisciplinary concepts

that are not directly
autism and AAC-focused,

but that I have found
helpful through my career

as I've tried to become a better clinician

for these types of learners.

Wow, we just had our brief intro

and the way we're gonna
flow is really to spend most

of our time today
talking about a framework

that I co-created with my
colleague Heidi Hosick,

who works at Team Autism in Tennessee.

Her and I are very enthusiastic
followers of the DIR model

and did a masterclass for them last year

where we really tried to put
a framework around this idea

of how does AAC instruction
look a little different

for some of our children on the spectrum

who are in those emerging
stages of communication,

but also in emerging stages
of learning to regulate,

to share attention

and develop relationships with
the people in their lives.

So, we're calling this the
Mindful AAC Modeling framework.

It is a work in progress,

but I think it'll be a helpful tool

to bring into this conversation,
along with some guidance,

then learning support strategies

around those connection concepts

that we tackled in part one.

We're also gonna do that
resource exploration

with time permitting.

Otherwise, you do have a
link in your PowerPoint

to help you move through those
resources at your own pace,

but I'll mention them as they're relevant

throughout the talk as well.

And then, hopefully,

we'll end with some
question-and-answer time today.

So then, getting started,

this is a reminder slide from part one.

We talked about these
three connection concepts,

the very first of which is regulation.

And we defined regulation
in the terms of AAC,

really, as the learner's
readiness to engage, to relate,

and to learn in our interactions
with them around AAC

or just around other developmental skills

that we're working on.

And in part one, we
discussed a lot of ways

that we can collaborate with the learner

and observation and interaction,

but also with familiar
partners to that child

and also team members

to help identify some
of the regulation needs

that could potentially be causing barriers

to our attempts to engage and
embed AAC into our sessions.

So we're gonna pick up with then,

we've got these identified perhaps needs,

and that's always a
dynamic process, right?

Because the needs are going to change,

but also, our understanding of those needs

is going to change as we
get to know these learners

and as we see them in different contexts.

But here are a few support strategies

that I think are helpful
general strategies

to bring to this idea of
supporting self-regulation.

We talk a lot when working with children

on the autism spectrum about
helping them to regulate,

needing to regulate

and self-regulation is
something we all strive for.

Last time, we talked about
what dysregulates us as adults,

perhaps neurotypical adults
or neurodiverse adults,

wherever you fall on the continuum,

but really knowing that all
of us become dysregulated

and that our goal is to self-regulate.

However, young children

with and without neurological
differences really

are not self-regulating
so much as co-regulating

in these early stages of life.

And so strategies like
encouraging the child

to self-advocate for a beanbag

or squeezes or tickles, those are great.

Those are very left-brain
logic strategies.

They rely on language and logic

and they're probably not gonna
be the frontline strategy

for co-regulating with your
children in the autism spectrum

who are at this very young age

and also this very young
stage of their communication.

So, the very first thing that I always try

in my clinical sessions

is to make sure that
I myself am regulated.

In order to provide, you
know, these learners,

the co-regulation support that they need,

we really do have to ensure that we are,

ourselves, regulated.

And we talked a little bit last time

about what does it feel like

for you to be dysregulated.

That answer may be different
depending on where you are

in your workday, where you
are in your work setting,

where you are in your personal life,

the level of stress, fatigue,
you know, physiological pain

or discomfort or distraction
that you're experiencing.

But it really is an
important part of our work

with these communicators

that we do a lot of
introspection/reflection

on what types of regulatory
capacities we're bringing

into every single session.

I had a mentor early on
in my career in Florida,

wonderful, talented clinician

and one of the biggest takeaways

that I got in my early
years working with her

is she had these little
kind of dream catchers

on the outside of the doors

in her clinic rooms all
throughout the clinic.

And it was really kind of
this idea of whatever baggage

that we felt we were
bringing into that moment,

it was a good visual
reminder to be aware of it.

You can't pack it away all the time,

but to be aware of it,
tuck it away if you can,

but also navigate through
it in a reflective manner

as you're working with
children and families.

So that's purely part of the
first steps of being regulated

is really to be aware that you are human

in addition to being a clinician

and that you may be bringing
some additional pieces

of dysregulation to a session

that are really not in your control,

but can be in your awareness

and you can figure out how
they may be contributing

in a positive or a hindering
way to the interactions

with the children that you're serving.

Sometimes in addition to awareness,

we do have to realize even
in a session where we went in

with regulated state of mind,
but perhaps interactions

with a particular child
are dysregulating for you.

Maybe you feel that you're not
being productive in a session

or you're doing a lot of
managing of challenges

and you're feeling a
little confused or chaotic

and it can be quite dysregulating.

So I always try myself when I'm

in situations with students,

especially that I'm just getting to know,

to try to do some co-treatment if I can.

Do some co-treatment with families,

but also with other
clinicians and educators,

so that if I get into a space
where I am dysregulated,

I can remove myself from that
interaction as I need to.

Maybe that's just removing myself

from interacting directly with the child

so that I can collect and
reflect on the situation

and come back in with more
awareness and knowledge

or I may actually need
to leave the session.

And that's not always possible.

And of course, we have to ensure

that children are always
safe and with adults

and with skilled providers,
but I just wanna make sure

that you're all thinking about the fact

that this is an important element

where collaboration and teaming
could really come in handy,

whether that be with
parents or team members

that are on your clinical team.

All right, so in addition to
being regulated ourselves,

there are some ways that we can try

to help our learners co-regulate.

Co-regulating really
means that through the use

of our right brain, through
the use of our affect

and our biophysiological movements

and the intensity of our
movements and our voice

and all of these elements of emotion

that we bring it to life,
through using those,

we can actually help our
learners to tune in with us

or we can tune in with them

when they need us to attune to their needs

and to help them regulate their
emotions, either up or down.

So, some of the ways I like
to use this co-regulatory idea

is by thinking about some basic ways

that I can change either
myself, my presence,

or elements of the environment

in a way that serves to
help regulate that learner.

So, for example, my presence.

If I am too close to someone

who needs a little bit more space,

a learner that gets anxious
when I'm in close proximity

for whatever reason, then maybe
I need to move further away.

Or if I've got a downregulated learner

who's a little under-responsive

and may have a little bit of a hard time

understanding what the
expectations of an activity are,

if I'm too far away,

do I need to move in a little bit closer?

So sometimes, the proximity
of my body in the space

can be a service of co-regulation.

This is also true of
the presence of others.

Some of our young children
are particularly activated

by the presence of certain
people in the environment.

Those may be peers or
members of the clinical team,

and we don't know why.

Perhaps this is inactivating relationship,

but for whatever reason,
there may be certain people

that are dysregulating to children.

And so do we need to remove
ourselves as, you know,

the clinician and child from
a particular environment

because there's a person,

maybe another peer at a
daycare center, for example,

that dysregulates our
child because they're noisy

or they move too quickly

or they try to take their toys, right?

So the presence of yourself
and the presence of others

is definitely a first element to consider.

In addition to proximity,

I also wanna make sure that
I am operating in a space

that really helps my learner
stay regulated and engaged.

I'm always thinking of
engagement beyond regulation

and so sometimes,

I find that getting below
my learner's eye level,

at their eye level or
below their eye level,

that does not mean that they need

to make eye contact with me.

That's not the point.

But it means that I am
getting into a space

that really reduces complexity, right?

Because as I'll demonstrate here

as I get close to you, right?

The background is disappearing from me.

And so some of our
learners on the spectrum

have some visual processing differences

where the learning space
can be quite complex

even if they don't have vision issues.

And so sometimes getting
close and getting down

or below that child's eye
level can be a regulating

and engaging posture.

The second piece I like to
think about in modifying myself

is how can I use my non-linguistic
ways of communicating

and ways of being with children

to add to regulation for this child?

So I don't know if this
has ever happened to you,

but I have had children
who are really sensitive

to the way I use my voice.

I'm gonna pop over to the chat
just to give us a brain break

and an active learning moment here,

but has anybody experienced
a moment with their learner

where their voice, the tone
of their voice, the volume,

prosody, the rhythm,

has resulted in
dysregulation or regulation?

Maybe you could pop a
couple lines in the chat

and share your experience.

Lots of singing, and
they'll cover their ears.

I've been hit in the
face for singing before.

You too?

Yeah, yeah.

So, lots of ideas, guys, in the chat.

Scoop those up

because my guess is they're
all very intuitive ways

that you, either as a
clinician or as a human,

have discovered,

hey, I can use this amazing
emotional tool, right?

Of the emotion and meaning of
what we say is really tied in

to the way that we say it

and the way we use our voice,
the rhythm of our speech,

the pace of our speech,
all of that matters,

but here, we're talking
specifically about the voice.

So this may not be with any words.

This is really just the tone, the rhythm,

the melody of our voice.

I'm sure that you all have noticed

that when you use a high
prosody, a high melodic tone,

it tends to be quite engaging
and upregulating, right?

So if I'm singing

â♪ª Five little monkeys jumping on the bed â♪ª

You can hear that my vocal intonation

is going up pretty much at
every stanza of that song.

However, if I use lower tones,

not just lower volume but lower tones,

we know that those are quite
downregulating for children.

So, if you think about the way

that a parent might soothe a young baby,

these are similar concepts, right?

Where we're using the
properties of our voice

to upregulate or downregulate,

and then we're always
stepping back and observing,

how did my change in vocal tone,

vocal rhythm, prosody, vitality,

all of those intensities
that go along with voice,

how did that serve to
change the regulation status

of this child, right?

So we're not gonna use it just because,

you know, I said that down-tone

is gonna help the child downregulate.

You're gonna use the
trial-and-error method

and see how it's working.

There's also other ways that
we use affect or emotion

to help kids co-regulate that
are not related to our voice.

So, for example, how
might you use your body

to engage a child who is under-responsive,

someone who has dysregulated,

but in a way where
they're under-responsive?

Pop some ideas in the chat.

Yeah, we've got some
interesting ideas here.

So I'm thinking here you guys

are using your body absolutely,

and you're using it with the child,

so we're thinking here sensory input,

but I was thinking more

about how would you move your body, right?

So, if you wanted to upregulate a child

who may be a little bit low energy,

you might use higher
vitality movements, right?

This is where you might jump

that dinosaur really,
really, really, really fast

and maybe you make sound, or
maybe you don't make sound.

You're exploring with kind
of, do I use multiple senses

or just do I use one here?

But modulating the rhythm

and the speed of movement in our play

or our gross motor
activities with these kids

can also be a way of
exploring co-regulation.

In contrast, you know, if
the child is overexcited,

maybe even in a positive way,

you can see they're getting
a little overstimulated,

I might shift my gears down, right?

We're thinking of it just
like a gear of a car.

I don't drive,

but I hear it in the car
when I'm in it, right?

As that car is reaching a hill

and having to, you know,
go up a steep incline,

the different gears are gonna downshift

and upshift accordingly, right?

And so we're kind of looking
at that regulation meter

and trying our best to understand

do we need a little upregulation here

or did we get a little too excited

and was I a contributing factor to that?

How can I use that tone and that movement

in order to bring that
regulation level down?

There's also some other ways, of course,

to use facial expressions and gesture.

There's a lot of evidence in the research

that shows that when we
use high affect in our,

it was taught to me early on in my career

as therapeutic use of self, right?

So, if I wanna become animated

in order to get a child
engaged and upregulated,

I'm going to use a lot
of big facial expressions

and hand movements.

I'm gonna emphasize and
stretch out my speech, right?

But if I wanna downregulate,

I'm liking that I have a flatter affect,

I may mirror that child's
affect if they're upset.

And so I'm trying to kind
of match their regulation

and if they need a little support

to bring them back to green,
if we're thinking of green

as that just right regulatory level

for what we're doing together.

Doesn't always mean they need to be calm.

And we talked a little
bit about that last week

and I mentioned that the
Autism Level UP! group

just released a book that
I'm super excited to get

and read talks a lot about this idea

of regulation is not always calm.

It is the right energy.

The right energy. Right is not
even the right word, right?

It's the most effective energy and state

to bring to a particular
task or interaction.

All right.

So lastly, we can talk about
environmental changes as well.

Some of our kids get dysregulated
when they have spaces

that are challenging
to their senses, right?

So we've already talked about
how spaces can be noisy.

I've also had kids who,

I don't know if you guys
have ever experienced this,

they walk into a room with no toys,

and it's very dysregulating for them.

I have other kids who walk
into a room with a lot of toys,

and that is very dysregulating to them.

So, as you think about the way

that you observe children
interacting with the spaces

that you're in, to some reasonable degree,

think about how that
space might be adjusted

in order to help that child regulate,

of course, knowing we
can't control all spaces,

especially if we're working in the home

or in early childcare settings.

The name of the book is
"Energy", by the way, Amy.

It's called "Energy",

and it's by the Autism Level UP! folks.

And I actually linked it in your resources

for today as well.

All right, I've been
on this slide too long,

so I'm gonna move on.

I think you guys are
getting the hang of it

and also just putting some wonderful ideas

in the chat already.

One last piece before we move on

from this slide, though,
is I really wanna,

because we're a speech
and language therapist,

most of us in this room,

or at least focused on building language

in this webinar together, as
the title gives us clues to,

I talk too much, as you can tell.

I don't know how many of you talk a lot.

We wanna talk to our kids

because we know that we want
to teach them a language,

but language can also be quite
dysregulating to children.

And so one of the elements

that I like to manipulate in that meter

as I'm co-regulating is also
the amount of talking I do.

How frequent I'm talking
before I leave a quiet space

or a quiet pause.

I also wanna choose the words that I use

to match what is going on

in that learner's emotional experience.

So, I don't tell children how
to feel or how they do feel.

I don't usually tell them that,

but I do wanna use language
and tone when it's appropriate

that match that learner's
emotional experience

as much as possible.

And so I may use a lot
of wondering language

instead of saying, "You feel mad," right?

I might say, "Oh, it
looks like you're upset.

I see. That was hard," right?

So I'm using a tone of
voice, and I'm using language

that kind of narrates that experience,

doing as best as I can
not to label that emotion

for that learner in a way

that makes me seem like a
better mind reader than I am.

All right, let's move on then.

So, what does AAC look like here

if we've got a child who is
working on regulating themselves

in the moment or as a stage, right?

Learning to regulate can be a place

where some children spend a lot of time

if they're in that earlier

social-emotional developmental stage.

Other learners may be quite able

to start showing some self-regulation,

but in certain situations,

they do need more of this
earlier level support.

So, what does AAC look like here

for a learner who is dysregulated?

The very first thing we
wanna think about, of course,

what we just discussed
in that support slide,

is our connection focus.

And really, that is

to help that learner
regulate their body and mind.

And through that regulation,

what we hope will come from that

is to establish some
shared attention together,

some shared engagement together.

So, learners at this stage,
once they become regulated,

may benefit in a session

from using a lot more of those
sensory and social routines

rather than object-based play.

And the sensory and social routines

can also be a wonderful
tool to re-regulate

if we become dysregulated.

So then, within some of those
sensory and social routines

that you might create as a
learning context for AAC,

our communication focus
may not actually be

on modeling AAC when we
are dysregulated, right?

If the child is in a dysregulated moment,

whether they are
dysregulated in an up fashion

or a down fashion,
modeling on my AAC device

is likely not going to
be happening very often.

Perhaps not even at all.

But that doesn't mean
I can't model anything.

And so these learners, I really find,

benefit a lot from me

modeling some signals

during these moments of co-regulation.

And I like to think about signals

as anything that communicates
that's not a symbol.

So, any behavior, any gesture, movement,

use of gaze, use of voice, I
consider all of those signals.

And likely, they are the dominant way

that a learner at this stage

may be communicating on their own.

So, I can model some
signals that are related

to this co-regulation.

For example, I have several
kids who really love

to sit with me and rock back and forth

in a firm hug on my lap when
they're feeling dysregulated.

So this movement that I'm doing,
actually, becomes a signal

for that to happen with them.

And so the other day,
actually, I had a little guy

who's been having a hard
time transitioning out

of the session and after enough
times of us sitting together

and regulating, he actually
came and sat on my lap

and started moving himself like this.

And I saw that as, you know,

a way for him to start
that self-advocacy process

of this is how I can tell you
what I want you to do with me

to help me regulate, right?

I can come and sit in your lap

and I can move my body
to show you what I need

in order to help me calm down.

In this case, it was calming down

was what he wanted or needed to do.

He was quite upset.

So modeling signals is
definitely at the top of my list

in terms of a communication focus.

And these can be any
signals that are safe,

but they don't necessarily
need to be signals

that fit into a box.

This is not where we need to say,

"Well, this is where I'm gonna
help you learn how to point

or learn how to use a sign,"
which is actually not a signal,

it's a symbol, but it can
serve kind of more of a means

and purpose for learners
at this early stage.

Any questions or comments about this idea

of when a learner is dysregulated,

we see devices and tools
are probably not being used

to model in those moments?

That doesn't mean that
they're not available

for that regulated moment that's
coming next, though, right?

So, this is not a readiness concept.

This is not no one who's ever dysregulated

should ever have an AAC device.

That's not the conversation we're having.

But it's thinking about
that mindful modeling.

Is this a good for me to
pull out the AAC models

or is my connection-focused
my priority for this moment?

And our sessions can change
from moment to moment

or we can have entire sessions
that we stay in this space

and it's really a rhythm and a synchrony

that we're trying to
achieve with that child

in order to make those decisions together.

Okay, so then, let's just
catch up on my slides here.

Let me make sure I hit everything.

Great. Okay.

So then moving on then, we've
talked a lot about regulation.

Let's move to engagement now
and reminder from last class,

we talked about engagement
really being, you know,

whoops, I lost my notes.

Hold on one second.

Here we go.

Getting back in there.

Okay.

So when a learner's engaged,

we know that that's really
where they are interested

to interact with people
and activities, right?

So, this learner is regulated.

They're not having to
manage their readiness

and energy that they're
bringing to learning experience

and also, they're engaged.

But what happens if they're not engaged?

And I'm tempted just as a reminder

to come back to all you
in the chat and ask,

what are some of the ways

that your learners are showing you

that they are not engaged?

And I'm gonna catch this
question if you think about it.

"Helping to get regulated
for AAC cues and then..."

Yes, so somebody asked a question,

"Are you saying that we should focus

on helping a child get regulated?"

Yes, I am saying that.

So, even children who have AAC devices,

and I believe that many

if not most of our children at this level

should have some tools available to them.

But if I'm dysregulated,

I am not using the
language side of my brain.

I am using the right hemisphere mostly.

I'm using the affect side of my brain

and I really need to connect

with bottom-up strategies for regulation.

So, if anybody's ever
read "Beyond Behaviors"

or any of the work of Dr. Mona Delahooke,

she's also a book that I
included in your resources.

He's a huge advocate of
really looking at behavior

and regulation in this manner

and there are many that follow her

in this line of thought as well.

Oftentimes, when children are dysregulated

or even neurotypical children
are upset emotionally,

we tend to go in a little too prematurely

with language, right?

We wanna talk to them
about their feelings.

We wanna help them label their feelings.

But really, what they
need developmentally,

what neuroscience and early
childhood research tells us

is they need us to connect with them

with our right brains first.

Right brain to right brain.

They really need those bottom-up

or body-up ways of regulating

before they can even receive language.

And so if I have children

who have a little bit more
of those splinter skills

where they're using their AAC quite a bit

when they're regulated, but of
course, not engaging as much

when they're dysregulated,

I may make a decision as an
example to your question,

where we regulate together

without the AAC being
a part of that process,

but then we may come back

and we may talk about
the experience, right?

It looks like you feel better, you know,

maybe I'm modeling as I'm touching here.

We went and got squeezes and
so I may use that before,

during, and after AAC modeling idea

where I maybe can't model in the moment

while we're co-regulating,

but that learner is using a
lot more language to coordinate

and integrate their life
experience at their stage.

And so I don't wanna miss an opportunity

to name and narrate some of the experience

that we just had together,

whether it was positive
or it was challenging.

Running around the room

is a disengagement signal
that we've got here.

Two people are fearing
running around the room.

Task avoidance, not looking
toward, pushing away toys.

Yeah, so it sounds like
you all have clear signals

that you're getting from your learners

as far as disengagement

and that was part of what we talked about

in our part one of the series.

So what can we do in order
to support engagement

is kind of where we wanna go next.

So I wanna slide over there.

So you can see here,

there's a lot of the same strategies here

that we use when we're
thinking about regulation,

but the purpose of these
strategies are very different

when we're thinking about engagement.

The very first purpose here at the top,

or the very first strategy here at the top

of course, is we need to be engaging.

And I'm sure all of you are
rock stars at this based

on the way that you responded

to my question about using tone,

but children need us to be engaging,

especially if they are a little

on the under-responsive side, right?

So, kids who really need
big bells and whistles

in order to pull out the salient
features of an interaction

and in order to find them
joyful and motivating, right?

So a big piece of engagement
is really adapting ourselves

as clinicians and as partners

to become the most engaging
or at least be engaging,

we're upping the ante
of joy and motivation

for the child based on what they're doing.

And so some of our engagement strategies

as far as using affect is, of
course, to be playful, silly,

and really engaging with the
way that we use our bodies,

use our facial expressions
and use our materials.

I don't know if anybody in the room

has used any Hanen trainings

or Hanen materials in their career,

but Hanen has some wonderful,
really low-cost resources

and free things on their website

that talk about this idea of people play.

And people play really
is just that extension

of the concept I mentioned before

of those social and sensory routines.

This is where we may have a
child who has a difficult time

at this current stage really managing

an activity and a person, right?

So that triadic gaze,

that becomes kind of a quadratic
gaze if you think about it

because we've got this
AAC device going on now

can really be something
that they're working on

but isn't quite as solid.

And so really eliminating the toys

or reducing toys and objects

and focusing on some
sensory social routines

that involve movement and
sensory experiences and music,

maybe with a few objects
can be a great way

to engage a child who may
be disengaging from you

by walking away, pushing away,

or doing some of the things
that you're talking about.

I also think here, being
flexible during these moments

is really important for you
and also for the child, right?

So, backing down, of
course, on directions,

rules or conventions
around a particular toy

or an activity can be very helpful.

And I don't know how many
of you need this reminder,

but I know I work a lot with

families, and every parent

or caregiver brings a
different play experience

to the table.

And usually, it's the way
that they were played with

or not played with that
they're kind of pulling on

as background, right?

And so these can be helpful
reminders to families

who get a little stuck

with the way that a toy
should be used, right?

So if we've got a kitchen toy,

we've gotta use it to cook and to feed

and that's how we use that toy.

That can be great for
moving play skills forward

when those skills are the next best level,

but it isn't usually very engaging

for a child who's at a lower play level

and some families can feel quite stuck

on what to do with materials

or even how to insert themselves
in that back-and-forth

with an object or without an object

because perhaps they
haven't had play examples

that have been quite as
flexible and quite as centered

on the relationship and the interaction.

I see some questions
popping up about regulation,

I'll make sure we leave some
time to talk more about that.

All right, we also wanna be a partner

with our kids who are engaging with us.

And that means sharing control.

It means sharing creativity, right?

It might mean that the
next session you have,

instead of putting everything
in a locked cabinet

and requiring the child to
request, as an extreme example,

you've got a couple things
laid out in particular areas

of your clinic room. or
you encourage the family

to set up the living room
prior to your home visit

where you've got maybe
three or four activities out

in the carpet.

And those activities then
can serve as an inspiration,

but also a way for that
child to have agency

and to guide you to what
they're finding interesting

for that moment.

This also means this partnership that

instead of redirecting
our activity in play

in a way that fulfills our
communication agenda, right?

Going in as a speech
therapist with an agenda

on working on a particular
core word, for example,

that we wanna partner with that child

in really helping them
achieve their intentions

and their goals, right?

So it's really this difference
of going in with AAC in mind

versus going in with connection in mind.

I can embed my AAC in pretty much anything

once I get a good hook going, right?

But I really need that child
to show me through partnership

where they wanna achieve.

How do they wanna play with this toy?

How do they wanna experience
the sensory properties

of this toy?

And then, through that
co-creation of the activity,

I'm gonna know where to take my language.

Today, this morning,

I had a session that was a
really good example of this.

I had a little one, I
think, he's about three,

and his partner was asking
me how to engage him

in more functional play.

And this little guy is really
a lot more anchored right now

in those sensory social routines,

those people play routines.

Those are really the best way

to get more interaction
and connection going.

But the first thing that we wanted to do

is we wanted to just kind
of take a look at, well,

how does he like to play
with those toys right now?

What are the things in
the sensory properties

about those toys that
he finds most engaging?

And through observing that,

we were able to come up with some ways

to make those a little bit

and a lot more interactive
really without changing his goal.

His goal was to experience
that sensory property.

We just wanted to make that
an interactive experience

that we could do together

without taking away from
the joyful elements of it.

Lastly, we can definitely use
temptation to engage kids,

but we wanna use temptation
in socially honest ways

and also pretty carefully.

When we create a lot of barriers in play,

locking things away in containers,

what have you guys noticed?

What usually happens when
there's a lot of obstruction

in our use of communication temptations?

Loving some of the comments in here.

Follow a child's lead, they shut down,

they get frustrated, they have tantrums.

Absolutely. Absolutely.

Now, does this mean we have

to have everything be a free-for-all

and we can never create obstructions

or barriers or temptations?

Absolutely not.

But if your child is not engaged,

the very last thing that's
going to get them engaged

is for you to put a bunch
of barriers and blockers up,

so you do need to be mindful

of where to put such temptations.

So, I think one of the
best examples that I have

in using some of these sensory
social or people routines,

I must say I'm swinging a child

and we're creating a nice rhythm,

a nice ritual, as Hanen would say,

that has a beginning,
a middle, and an end,

then I might actually pause that child

at the top of the swing, right?

And pause for maybe two seconds

and wait and see what happens, right?

That's a little bit of a
communication temptation

to get that child engaged with

me to keep the swing going.

But it doesn't mean that
they have to say anything

at this stage.

What I really wanna just see

is do they show some anticipation signals

and can I capture some moments
where I can rope them in

and woo them into an interaction

by creating a couple
temptations here and there

in our routine together?

Lots of frustration, self-absorption.

Someone's called it here self-stim mode,

but I really think of that as a child

who's kind of gone within
and is self-absorbed

and really has shut down
because of the barrier

that was placed being too much for them.

And not because you intended it to be,

but just because that was
where it landed for them.

We can also use our
language, right? To tempt.

I think that one of the
biggest aha moments I've had

at this stage where I'm really
working to engage my kids

is that when I use the right words,

the words that seem to
match their signals,

what they may be thinking or feeling

as far as I can best guess

with my very minimal
mind-reading abilities,

they actually engage
with me more frequently.

I don't know if any of
you have noticed this.

There's a lot of research
on this idea, too.

This concept of follow-in comments

is very powerful in the literature

for children using all types
of modalities of language,

including AAC.

But when we can contingently
model what that child seems

to be focused on and what
they seem to be communicating,

what we end up seeing is
a lot more engagement.

Now you guys have a lot
of great ideas popping up

in the chat here

on how to create some of these
gentle temptations as well.

All right, and then lastly,

sometimes, engagement
is hindered by the fact

that the environment is not
accessible for the child,

so don't forget to think about
universal design principles.

Use your team members

that have areas of
expertise and motor, vision,

and so forth that can really
help you paint a full picture.

Another good example from
my session this morning,

this little guy has significant
motor planning differences

and I think that that
is largely contributing

to his repetitive play.

He finds something he can
do, he finds joy in that,

and then he wants to do
it over and over again.

And who wouldn't, right?
I wanna do that, too.

And so being able to provide something

as simple as a smaller ball
he could hold onto better

in this little activity
we were doing actually led

to differences in his play
that I hadn't seen before

because when he was trying
to manage those larger balls,

they weren't able to really do anything

that he wanted them to do.

And I think that that was
probably mostly related

to his fine motor differences.

So coordinate with your team

and see how can universal
design and adapting the play

and the learning environment really help

to fulfill some of those engagement goals

that you have for your student.

So what then does AAC look like here?

AAC is really gonna look
like connecting first,

first and foremost,

we always wanna keep our connection going.

And so our connection focus
is going to be continuing

to keep that child engaged,
but also re-engaging that child

when they become disengaged, right?

When I establish engagement,

I wanna look for signs of engagement.

And I feel like our last slide,
our last part in part one,

had a lot of ideas on how to look

for some of the signs of engagement.

I also included a checklist, I believe,

around regulation that
might be helpful here.

We know that our idea here in connection

is if I can help this child stay regulated

and engaged more and
more and more with me,

that I'm building a
relationship with them.

They're seeing me as a trusted partner

that's going to help them achieve a state

where they feel safe and they
feel ready to participate.

And I'm gonna do that enough

that they know they
can rely on me for that

and expect that from me.

And so then that engagement's
gonna hopefully continue,

that relationship's gonna
hopefully strengthen

and that regulation may be
a little bit less over time

or dysregulation, rather.

But at this stage, really,

when a child is regulated and engaged,

I wanna continue to use
some of those signals

that we talked about, right?

I wanna model non-linguistic ways

of communicating all of the time,

but I may actually do a lot

of contingent modeling here, too.

And that's what I described earlier

where I'm looking in
those follow-in directions

where I can see what
is this learner doing,

what are they focused on, what
do they seem to be thinking

and feeling about what they're doing

and how can I match models to that.

And then, if they're communicating

with me using their
signals or their words,

I wanna match models to that as well.

And so that's really what
contingent models are,

they're models on the AAC system

that match what that learner
is communicating to you.

They can also be models

that match what that
learner is focused on,

so some of those follow in
comments that we talked about.

All right, and then
relatedness, we talked before

and I just talked now
about how that formula

for relatedness comes from
that consistent support

in co-regulation and engagement.

And this is really the sweet
spot that we're looking for.

We're hoping that we can
get our AAC learners engaged

and regulated and communicating
with us in their way

so that we have a solid platform

upon which to build language.

And this is really what
development tells us, too.

Most children in early
developmental stages

where they're learning
to regulate and engage,

even children who are neurotypical,

are not using language at that time.

And there's a good reason for that.

So we're looking for the sweet spot

and really, this is where our AAC snapshot

is gonna take a big shift

because we're continuing
to focus on connection.

We know that we can move
in and out of regulation

and in and out of engagement

because that is often the nature

of how children on the spectrum

are navigating their
individual differences, right?

So, we wanna continue to monitor

and support any of those needs.

We're gonna continue to
strengthen our relationship

by doing that, but
we're also gonna move up

with a lot more modeling.

And so, in that mindful
modeling continuum,

like I'm gonna show you here in a moment,

we might not only do
some contingent modeling,

but we might start doing

a lot more focus stimulation here, too,

which is using our AAC
system to model more often

in that parallel talk or self-talk format,

again, trying to match it
to the child's interest

because we know that follow-in
comments are a lot stickier

in terms of their long-term
learning impact than directives,

questions, and other
forms of adult language

that we might be able
to provide that child.

This is also where we're
probably gonna start using

more prompts and cues

because we're gonna start finding

that as a child stays
engaged and regulated

and we're able to provide more modeling,

we want to have some
opportunities for that child

to also use the new words
that they're learning.

So, I provided two slides
here for prompts and cues,

very similar to what we use
in the traditional speech

and language space with a
couple differences, of course.

This is the resource from Kate Ahern

that's recently been updated
that's got a really nice way

of thinking about a
least-to-most hierarchy

when using AAC with children.

But I wanna jump a little bit

because we're running low on time

as I usually do for this talk

and just kind of get a sense from you,

what do you think the benefits are

of a least to most prompting hierarchy

when you're thinking about
working with these learners

and teaching them how to use AAC.

And it's follow-in comments.

That's follow-in.

And if you search that in Google Scholar,

you should probably get
some results that pop up.

If you don't get any results,

I would suggest searching
parental verbal responsiveness

or PVR, parental verbal responsiveness.

And that is often the research studies

that will talk a lot about
those follow-in comments.

Yeah.

So, what are you thinking the benefits

of the least to most hierarchy are?

Because often, when we teach a new skill,

we think about a most to least hierarchy,

meaning then where they are,

avoiding their (crackling
drowns out speaker).

You guys got it.

I don't need to beat this into the ground.

So yeah, and I think it
becomes a little tricky

because when we're working with AAC,

we're always providing modeling

just like when we're playing with a child

who's not working with AAC,

we're always talking to them, right?

So, our AAC modeling,

although considered kind
of a most supportive cue

if we're using it as a queue,
was actually both queue

and also just part of
the interaction, right?

So, I like to think

about my modeling being me taking my turn

and interacting naturally with the child,

but also, I use direct models

in my prompting queue hierarchy.

Most of the evidence
in the field right now

will tell us that a
least-to-most hierarchy

is what we should be using when
it comes to AAC instruction

and so I provided two examples of that

for you in the slides.

The first one from Kate
Ahern on the prior slide

and this one is a little
bit more descriptive

about what some of these
may look like in use.

I didn't have a lot of time today

to talk as much about prompts
and cues as I wanted to,

so if you have questions,
please reach out to me.

I do have some ideas on how to add

to this prompt and cue hierarchy

for kids who are specifically
working a little bit harder

on joint attention to models.

For example, using things like penlights

and laser pointers, modifying
the way that I model,

even using physical

emphasizing elements, which you
might see a lot on Instagram

to draw attention to words.

But before we part ways today,

I just wanted to get a sense
of where we stand in the room

on hand over hand.

If you're using it, why? If
you're not using it, why not?

And what's the consensus?

We talked a little bit
about this last time.

No hand over hand.

We've got some hand under, ick.

No, no, no. Lots of no, lots of no.

So, it looks like the
consensus is no or never.

And I would agree.

That is really where the
research and clinical practice

and neuro-affirming activism
is telling us we need to go.

So, if you can remove
this from your repertoire,

I think you'd be moving
in the right direction.

There's obviously positives

to helping students with physical support.

We know that physical prompting

can be a big part of lots
of different teaching

and therapeutic goals that we have.

However, there's actually
been really strong clinical

and research evidence

that shows that hand over hand
actually is not as supportive

as other strategies, and it can
lead to many of the problems

that you talked about
in the chat just now,

mainly prompt dependency
and learned helplessness.

So we're all gonna
hopefully be on a consensus

that hand over hand is not
a thing we're gonna do,

but if you want to challenge
me on that and talk about it,

I'd love to because I
learned so much about that,

about things from those conversations,

so reach out to me and email me

and we can talk a little bit
more about your hesitations.

I did see some of you
mention hand under hand.

There are some people who
actually hate this, too.

There's some very vocal
activism in the AAC world

that hand under hand is never,
never, never, never okay.

And I'm just gonna put
my personal opinion,

I don't agree with that.

And I think that it definitely
depends on the student

and the purpose behind
the physical direction.

For example, I only use hand under hand

when I know that I have a
student who has motor sequencing

and motor planning challenges,

who has some fine motor instability.

And I only use hand under
hand after that student

has initiated reaching for their AAC tool.

I will never take a student's hand

and reach toward their AAC tool.

Part of the reason I don't do that,

other than I think it's intrusive probably

and not welcomed by some children,

is that I can't really control

whether or not what I'm matching
and teaching that learner

is actually mapping their mind
in the way that I hope it is

because they didn't actually
initiate anything, right?

So I'm really banking on the fact

that when I said, "We're gonna go,"

and then I took their hand,
that they're actually modeling

or mapping rather the
concept of go with me,

giving them that hand or hand support.

So, some of that mapping
is not gonna stick

when we don't allow the
student to initiate.

Also, communication
starts with the student.

The circle of communication
is initiated by the child

no matter what type of
modeling we're doing.

So I'm not gonna change that

just because I'm using
hand under hand support.

I also wanna make sure that
I'm giving support in a way

that's not guiding the student
but just supporting them

and reaching for what
they wanna say, right?

So I'm always gonna wait
for them to initiate.

Can you bring research
citations on hand over hand?

Yes, absolutely.

So, in your resources, I provided a,

I wanna say I provided both.

I provided you a link to a
blog post on PrAACtical AAC

that talks about hand over
hand versus hand under hand.

The really wonderful thing that
you'll get on that blog post

is the argument that
happens in the comments,

which is also so informative, right?

And the pros and the cons and
the people who are hating it

and the people who are loving it.

And then in there,

Dr. Zangari also cites
a really great article

by Jane Fairhall that I think
I put separately as well,

was a good starting point.

It's definitely not a body of
research, that one article,

but it should give you some initial ideas

and also then hopefully can
open you up to some terms

that you can look for
as you research more.

So with that, I didn't
leave us as much time

for resource exploration as I wanted to,

but I just wanna pop over there quickly

and make sure that you all
know where the resources are,

what they look like,

and I add new ones to
this curated collection

as I find them.

So, if you come back to
this link in a couple weeks,

it wouldn't be uncommon for
you to see new things there.

I also encourage you

to share with me anything I'm missing,

any resources that you've
encountered that you're like,

"You should really have this on there

because this was really helpful to me."

I definitely would love for
you to share that with me.

So, in your PowerPoint,
you'll have a link to this

on the resource exploration section.

And each one of these is just a resource

that I have found super helpful

as I've tried to wrap my mind
around regulation, engagement

and really finding activities

that I can use as a scaffolding

for building AAC into my
work with these children.

So, the one I was talking about just now

with the prompting is in here.

This is Autism Level UP!

That's the folks I was talking
about that have the new book

and also tons of other resources.

There's a link here to
Mona Delahooke's website

where she's got a book,

intensive trainings
and resources she does.

This is the hand under
hand, hand over hand post,

and also some Hanen link
here for the people play

and other sorts of activities.

I think one of the
things I've noticed most

in working with these
very young children early

in their journey with autism

is that I really need to find more ways

to have fun with them.

And so I put a lot of resources in there

that hopefully will just inspire you

to think about engaging these
children in different ways,

perhaps building on some of the things

that you already do together.

So, with that, I'm going to
turn it over to questions.

Blair, I'm also happy to stay
on a couple minutes extra

for questions if the
group would like that.

Did go a little over what I had promised.

- [Blair] That sounds great.

We've had one question
put in the Q&A about,

it says, "Recommendations
for a single-mother household

who is unavailable
physically or emotionally

to help the learner co-regulate

due to their own dysregulation.

How do you move the
learner to self-regulate

or co-regulate in a different way?"

- Absolutely.

So, this is beyond my, if
I'm pretending to be you,

this is a situation that's
beyond my scope of competence

because I'm not a mental health counselor.

So, I put on my resource
coordination hat at this moment.

I offer myself as a reflective, active,

compassionate listener to that mom

if she has a relationship with me

and feels that she can
share some of her experience

in our sessions,

but really, it sounds like
before this woman can be

an asset to her child in this way,

she needs somebody to help her regulate.

And that means she may need
sources beyond your ability.

If anybody else has ideas

on how they've navigated
this situation, please share,

but I think that the family unit

is your client at the moment

and I think you need other
resources and people on your team

to help that family unit move forward.

Any other questions?

- [Blair] Looks like we
had another one asking

if you have any experience working

with deaf students with autism.

- Very minimal, actually.

We did, however, have a wonderful speaker

who joined us in our early
intervention conference.

We do one every year at
AACcessible in February.

Her name was Susie DiPillo, I wanna say.

And she is an AAC enthusiastic
SLP who works with deaf

and hard-of-hearing students.

If you would like, I
can connect you perhaps

if you've got questions.

She might be a great resource

or she may know somebody who is.

- [Blair] Perfect.

We have another one who asked,

"So I have a child who's very
proficient at his AAC device,

but he often stims on particular buttons

and it can be very distracting."

She said, "How do we disrupt this?"

- Mm-hmm.

So stim is an interesting thing

because it is very difficult
to know the purpose behind

that child pushing that button.

And I'll give you one thing to chew on

that might help your thought exercise

as you try to problem-solve this.

There's some research coming out.

Lots of it actually recently coming out

that's really showing us the
functions of Gestalt processing

for our learners.

And I have noticed that this
concept of Gestalt language

are not only for learners
who are using spoken words,

I'm seeing this in learners

who are using aided words as well.

I'm even seeing this in learners

who are using media to communicate,

so communicate it through

YouTube videos and songs.

And so before I jump to stim,

not discounting that it's
probably very distracting

to somebody, it's probably
not distracting to the child,

but it's probably distracting to somebody,

I think you may start best

with reflecting on some
of the other functions

of that behavior that may not only,

or even at all be stim in nature.

So I think that one of the ways to do that

is to get some history on
when that particular button

or word or phrase is being
used in other contexts.

And I wonder if you put
some pieces together

that would help you respond in a way

that would help that learner
take the conversation

in the direction that they wanna go,

whether it's to request
or to share something

or to indicate they
need regulatory support.

So, you need to get to
the underlying purpose

and I don't know that it's
only, or even at all, stim,

before you can start to reduce
or eliminate that behavior.

- [Blair] Great.

I think we could take

maybe one or two more.

Someone asked, "What are
your thoughts about our role

in providing information/recommendations

for parents to explore medications?

I have many, many middle
schoolers on my caseload

who have moderate to severe behaviors

or an inability to focus
and are unmedicated."

- Mm-hmm.

Yeah, I don't take it on myself

to provide medication recommendations

because it's just not in my
scope of competence or practice.

I've also heard from many of my psychiatry

and psychology colleagues

that medications are often not the only,

or even the best strategy
for many of the behavior

and attentional challenges
that you're talking about.

So I think the very first
thing that I might wanna do

is if the family agrees,
you might wanna connect

to whatever behavior and
psychology or psychiatry

or medical team member is
managing that child's care,

have some conversations
and dialogues with them.

I think that to suggest medication
would be too prescriptive

without having all of the information.

And so, if I have concerns

that this child could be doing better

with other types of biological support,

I wanna go to somebody on the team

who's had a little bit
more of that lens on

and start a dialogue with them

before approaching the family.

- [Blair] Okay. Let's see.

We've got one more that says,

"Do you have any recommendations

for how to help a group
of children transition out

of a group session when
they are overstimulated,

similar to how you rock with
your one child?" (laughs)

- That's a tough situation.

Yeah. Interesting.

Well, I have learned some
really brilliant strategies

as an observer in this situation.

So, just letting you know,

I have not run a full group session

with young children on
the autism spectrum.

Most of my sessions are
dyads or individual sessions,

but I have worked with daycare providers

that are kind of rock stars in doing this.

And I think one of the
biggest takeaways I've had

is this bookending idea of making sure

that all of our group activities

have a sandwich style, right?

So, a predictable start
and a predictable end.

And that means that part
of that transition piece

has to be part of the end, right?

So maybe that's a song,
maybe it's a movement,

maybe it's one of those long strings

with the cute little flags
that everybody holds onto.

Maybe somebody has a buddy,

and everybody sticks with their buddy,

and they're in two by twos
as they march down the hall.

So that would be my recommendation.

My second one is

when I was a preschool teacher
way, way back in the day

and I had a lot of mixed
neurological profiles in my room,

I realized that what I was doing

as a teacher really upregulated

or downregulated my students.

And so I would build my routines

so that if we did a really exciting thing

where everybody got silly and goofy,

we would automatically
downregulate together

for a couple minutes before
we would move on to something

that required more
structure and more control.

And so this may be we dim the lights,

we get into a soft movement and song

and everybody takes that as a cue

that the neurology is
gonna kind of come down

before we have to
transition out of the room.

- [Blair] Great.

Okay, we'll make this
one our last question.

It says, "Any magic words for
helping to change the mindset

of school teams, teachers,
and paraprofessionals

that are very compliance-based

and have a hard time wrapping their minds

around co-regulation and
engagement before communication?"

- Yes. I wish I had magic words.

This is actually something
I struggled a lot with

at a recent consultation I
did with the school district.

And I think that the first
thing, as with anything,

it always comes down to the
relationship in my experience.

And it may take a long
time for you as a provider

to build relationships with people

in these positions on your team,

but it's where I would focus my energy.

Emily Rubin, who is one of the creators

of the SEE-KS method,

the SEE-KS model, which
I put in your resources,

has a really beautiful way

of talking about appreciative inquiry

is a method that she encourages
school districts to use

as they're taking on new ways

of thinking about learners on the spectrum

and how to engage
learners on the spectrum.

The SEE-KS model, by the way, is free.

All of their resources are
free on the website I provided,

and she may have some more tips

on how to have this conversation,

but I think the first piece

is really developing relationships

by not only offering
advice, offering listening.

And from that listening
with that appreciation,

inquiring about why these
positions and mindsets are present

and how they seem to fulfill
or motivate the goals

that this well-intentioned educator likely

is feeling pressured by.

So I'd love to talk a
little bit more about it

if we have more time in an email,

but check out the SEE-KS framework

and see if you can find any

of those resources helpful

for chipping away at that.

- [Blair] Great. And how
is SEE-KS spelled, Tanna?

Is that-
- It's S-E-E-dash-K-S.

- Okay, perfect.
- It stands

for some long acronym of words,

but it's a model of organizational
change, if you will,

that is intended for school districts

and other organizations serving
large groups of children

on the spectrum, really
using universal design

and all of the wisdom of the SCERTS Model,

which was developed by
Emily, Amy, and Dr. Prizant

and kind of integrating
them into this really usable

and practical framework.

- [Blair] Perfect. Awesome.

Well, I think we got through
most of those questions.

So, thank you, Tanna,

for sharing your knowledge with us today.

If you would like to earn
ASHA's CEUs for today's session,

please remember to
complete the assessment.

You can find the link to
the assessment in the chat,

or you'll be redirected
to the post-session page

once this webinar ends.

The link to the assessment
will also be included

in the follow-up email that
will go out tomorrow at 1:00 PM.

The assessment must be
completed at 80% or better,

and it will remain open for one week.

So thank you all for attending,
and we hope you will join us

for another ableU session very soon.

So, thank you again, Tanna.

- Thanks so much, Blair. Thanks, everyone.

I hope you have a great week.