

Editor's Corner

As a partner in the Rehabilitation Engineering Research Center for Communication Enhancement for more than a decade and a founding Editorial Board Member of the *Journal of Pediatric Rehabilitation Medicine*, I am delighted with this special issue on Augmentative and Alternative Communication (AAC). Without access to AAC, children and young adults with complex communication needs are at great risk of unnecessary social isolation, low expectations, illiteracy, and poor post school outcomes. Much of this can be avoided through access to AAC technologies and services during the pre-school and school years.

Sadly, for many children and youth with complex communication needs, access to AAC devices and services is still viewed as a luxury rather than a necessity.

“Without a means of communication the teachers will have no idea of what the person is or isn't learning. It is the school's responsibility to make sure the children are receiving FAPE [Free Appropriate Public Education] and without good communication both receptive and expressive the child may not be receiving FAPE. . . If the schools are not supporting or using the communication devices then they are not providing FAPE and that is against Federal regs. Schools teach typical students how to speak properly and how to use grammar etc. so why would they not be responsible for teaching our children who uses AAC to communicate? [posted by mom of T, ACOLUG, Oct. 17, 2010].”

“Our school would have NEVER bought any type of device for our child. . . heck I had to fight them to make them “allow” J to bring the one she had into the school. . . and after almost 6 years the school still refuses to support her in its use, we have had to get help outside of the school system [posted by mom of J, ACOLUG, Oct. 9, 2010].”

“Over the years K has used several devices. The

school has never sent home a device of any kind for us to use. They promised several times to send home a device for us to use over the summer, but never did [posted by mom of K, ACOLUG, Oct. 11, 2010].”

Denial of needed AAC devices and services for their children posted by these 3 mothers echoes that of many others. This denial of needed AAC devices and services continues despite the federal Individuals with Disabilities Education Improvement Act (IDEIA).

The related articles by the 6 authors of this special issue have provided you with state of the art information about the scope and benefits of AAC technologies and effective clinical approaches. As Dr. Blackstone stated in her Guest Editorial, you as “Pediatricians and other medical and rehabilitation professionals are often the first professionals with an opportunity to identify and refer children with CCN to programs that can support access to AAC and functional communication.” In your role as gatekeepers, you can help change the view that access to AAC devices and services is simply a luxury. For many children and youth with complex communication needs, communication access is a necessity for living healthy and productive lives at home, in school, and in the community.

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