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To cite this article: Lyle Lloyd & Kathleen Kangas (1988) AAC terminology policy and issues, *Augmentative and Alternative Communication*, 4:1, 54-57, DOI: [10.1080/07434618812331274627](https://doi.org/10.1080/07434618812331274627)

To link to this article: <https://doi.org/10.1080/07434618812331274627>



Published online: 12 Jul 2009.



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ISAAC GOVERNANCE AND COMMITTEE ACTIVITIES

AAC Terminology Policy and Issues

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The first three volumes of *Augmentative and Alternative Communication* (AAC) include three articles (Lloyd, 1985; Lloyd & Fuller, 1986; Waksvik, 1985) and two letters to the editor (Blau, 1987; Musselwhite, 1987) on terminology and related taxonomic issues. This interest reflects the need for an emerging field like augmentative and alternative communication (AAC) to develop an internally consistent and logical terminology which will facilitate the international and transdisciplinary development of the field. Because of this need, the International Society for Augmentative and Alternative Communication (ISAAC) has established an ad hoc terminology committee which will examine the issue over the next several years. At some future point, the ISAAC terminology committee will be in a position to ask the board of directors to consider the possibility of an official terminology for ISAAC. Prior to asking the board of directors to consider such a possibility, however, the committee will need to take several steps which may include the following: establishing a glossary of the terms which may need to be considered in such official action, soliciting input from the membership, modifying the list of terms, developing a draft set of definitions for the glossary, providing the opportunity for input by all ISAAC members, revising the glossary of terms and definitions based upon committee consensus, publishing the draft glossary in *The ISAAC Bulletin* for membership discussion, and then presenting such a glossary to the board of directors for discussion at one of its biennial meetings. We are optimistic that the ISAAC committee will develop a proposal for consideration by the board of directors at either its 1990 or 1992 biennial conference. Therefore, in the editorial office we have taken several interim steps in order to improve the continuity of style used in AAC and to facilitate the work of the ISAAC ad hoc committee.

The purpose of this report is to provide information on the steps which we have taken to develop an internally consistent and logical terminology in AAC. The specific steps initiated during the past year include the use of key words and establishing a journal policy for the use of some specific terms. In addition, we are considering the adoption of journal policy for other terms and the development of a glossary of terms either as journal policy or as suggestions for use.

Key Words

In the March 1987 issue, we initiated a policy of providing key words for all refereed articles published with the exception of letters to the editor. In addition to facilitating terminology development, we hope to use the key words for indexing purposes starting with the 1988 volume. The "Information for Authors" asks for five-to-ten key words to be provided when a manuscript is submitted. Initially, the key words were provided by the authors with few additions or modifications suggested by the editorial office. This year we plan to improve the consistency of the selected key words by using a checklist to assist authors in choosing the appropriate terms. This will greatly facilitate indexing. The list of key words we are currently providing to authors is provided in Table 1. This list is a combination of the terms generated in 1986 to profile areas of expertise of our consulting editors and ad hoc reviewers, and the key words generated by authors of papers published in 1987. Prospective authors are encouraged to consult this list when selecting their key words. **These key words are in the process of development; and we would appreciate input from AAC readers to add terms or to otherwise modify the word listing.** Individuals who have developed key words or indexing terms for AAC are encouraged to share them with the AAC editorial office and the ISAAC terminology committee.

Terminology Policy Initiated

Until ISAAC adopts an official terminology, we have found it necessary to establish policy for the use of certain critical terms for the AAC journal. Some consistency of usage is necessary in order to facilitate the transdisciplinary and international communication which has been one of the central goals of AAC since its beginning. Furthermore, as AAC develops a reputation as the primary source of professional literature in our field, it may be expected that professionals who are less involved in the development of the field of AAC will look to the journal for models of appropriate means to discuss issues of interest to AAC. The list below reflects the current status of journal policy related to the terms listed. In general, we have requested that

TABLE 1: Key Words: Working Draft for Suggested Key Words*

Abbreviation expansion	Encoding	Policy
Acceleration	Errorless learning	Pragmatic intervention
Adolescents	Eye-gaze	Prediction
Adults	Facilitators	Presymbolic communication
Aided	Funding	Professional preparation
approaches	Gestural systems:	Qualitative research
communication	Amer-Ind	Reading
symbols	other, Specify _____	Reduced keyboard size
* American Sign Language (ASL)	Graphic	Scanning
Anticipation	complexity	Semantic elements
Aphasia	representation of manual signs	Service delivery
Apraxia	symbols	*Sign languages other than ASL & BSL,
Assessment	Group experimental designs	specify _____
cognitive	*Handicap	Signing key words
interaction	Head injury	Single subject designs
language	Hearing impairment	Sigsymbols
physical ability	Iconicity	Social validation
other, Specify _____	Illustrative case	Software
Assistive devices	*Impairment	Specific learning disabilities
light-tech, e.g., communication boards	Inservice training	Speech impairment
high-tech, e.g., computers	Instructional design	Speech synthesis
speech output	Instructional techniques	Spelling
text composition	Intelligibility	Statistics
Attitudes	Interdisciplinary approach	nonparametric
Augmentative and alternative communica- tion (AAC)	Interaction, communicative	parametric
Autism	Intervention	Strokes
Blissymbolics/Blissymbols	Language acquisition & development	*Symbol
Brain injury	Learning theory	sets
*British Sign Language (BSL)	Legal issues	systems
Case study	Letter arrays	Taxonomy
Cerebral palsy	Lexicon	Technology
Children	Linguistic prediction	Terminology
Cognitive processes	Manual signing	Time delay
Color encoding	*Manual signs	Traditional orthography (TO)
Communication	Manually Coded English (MCE)	Transdisciplinary approach
aid	Manually coded spoken languages other	Transition
board	than English, specify	Translucency
device	Match-to-sample	Transparency
efficacy	Mental retardation	Unaided
Complexity	Model	approaches
Computer	Motor development	communication
Concreteness	Multidisciplinary approach	symbols
Counseling	Multimodal approach	User perspective
Database	Multiple correspondence	Visual impairment
Demographic	Multiple disabilities	Visual perception
Design strategy	Nonelectronic	Vocabulary
Developmental delay	*Nonverbal communication	manipulation
Direct selection	Nonvocal communication	selection
Disability	Numerical linguistics	Voice synthesis
Disambiguation	Parents and significant others	Word
Discourse analysis	Pedagogical sign systems	frequency
Dynamic displays	Perceived complexity	lists
Dysarthria	Physical impairment	sets
Ecological	Picsyms	Writing aid
Efficiency	Pictographs	Writing skills
	Picture Communication Symbols (PCS)	Other, Specify _____

*ACC has an established policy on the use of the terms marked with an asterisk

authors revise their papers to conform to these policies unless they can provide a specific justification for some variation.

Alternative Communication: This is used only in special cases. See: Augmentative and alternative communication.

American Sign Language (ASL): This should be used only when referring to the natural sign language used by the deaf community in the United States. See: Manual signs; Sign language.

Augmentative Communication: This is used only in special cases. See: Augmentative and alternative communication.

Augmentative and Alternative Communication: As a general practice use, the term “augmentative and alternative communication” should be used (or “AAC” after it is spelled out the first time) rather than using individual preferences of “alternative communication” or “augmentative communication” (which would both be abbreviated “AC”). There may be some cases in which the

author is specifically talking about only one aspect of AAC, either alternative communication alone or augmentative communication alone. In these instances the more specific term would be appropriate. If the phrase "alternative communication" or "augmentative communication" is used for a specific reason, a justification for that specialized use should be included in the cover letter to the manuscript. We have adopted the policy of using "AAC" when one of the other two forms is not justified for several reasons. One of the most obvious is the consistency with the journal's title *Augmentative and Alternative Communication*, and the sponsoring organization, International Society for Augmentative and Alternative Communication. As an international journal, there is another very important reason relative to translation into different languages. Individuals in many non-English speaking countries can translate "alternative communication" relatively easily and have essentially the same meaning as we would have in North America. However, in some of the countries there is a difficulty translating augmentative communication and conveying the same meaning as many people intend when they use it in North America. There is a problem of definition and logic with the translation of augmentative communication.

British Sign Language (BSL): This should be used only when referring to the natural sign language used by the deaf community in the United Kingdom.

Disability: This should be used to refer to the activities which are affected by an impairment. For example, a motor impairment might cause a disability of mobility or a communication disability. See: Handicap; Impairment.

Handicap: This should be used when referring to the role of the individual in society and the impact of a disability or impairment on the individual's roles. Thus an individual with a severe physical impairment might experience a handicap of occupation or of social integration. However, it is important to distinguish impairment from handicap, as a handicap may be the result of an impairment, but it is not an inevitable result. See: Disability; Impairment.

Impairment: This should be used to refer to a specific structure or function that is absent or deficient. In most usages, the specific nature of the impairment should be identified. For example, rather than report that an individual is "severely impaired," one should state that the individual "has a severe motor impairment." See: Disability; Handicap.

Manual signs: Manual signs is a general term that may be applied to either a natural sign language (e.g., ASL, BSL) or to the use of signs as a code for a spoken language. This would include the simultaneous use of signs and speech, either when each word is signed or when only key words are signed. See: Sign language.

Nonverbal: The use of the words "nonverbal" and "verbal" should be limited in order to avoid ambiguity. For example, a statement such as, "The child was nonverbal," may be interpreted as "The child has no use of any linguistic symbols," or alternatively as "The child has no speech but has some linguistic skills such

as comprehension of speech or use of graphic or manual symbols." Although the term "nonverbal communication" may be used when referring to nonlinguistic communication or communication which does not involve the use of words in either the acoustic or visual form, in most cases "without speech" will be less ambiguous than "nonverbal." See: Verbal.

Sign Language: This should only be used when referring to a natural language (e.g., ASL, BSL) and not when referring to the use of manual signs as a code for a spoken language. Signing Exact English and Signed English are examples of manual signs used to code spoken English. It is not accurate to use the term sign language if one is referring to selecting a vocabulary of signs from a sign language, but using the signs as a code for a spoken language. See: Manual signs.

Symbol: Symbol refers to a representation of a referent. The type of symbol should always be specified to avoid confusion, for example, spoken symbols, graphic symbols or manual symbols.

Verbal: The use of the words "verbal" and "nonverbal" should be limited in order to avoid ambiguity. While verbal frequently means speech, it can also refer to a broader meaning of the use of language symbols. For example, it is more clear to say "The test was administered with spoken instruction," rather than to say "The test was administered verbally." In most cases "spoken" will be less ambiguous than "verbal." See: Nonverbal.

General Considerations

Although AAC is adopting the World Health Organization usage of the terms "disability," "handicap," and "impairment" (see Waksvik, 1985), there is still some variation in the more specific terminology one may use when referring to specific physical and cognitive impairments, and the related disabilities. In keeping with the transdisciplinary role of AAC and ISAAC we will use the terminology advocated by the major professional journals related to the respective disabilities and impairments for guidance. For example, the "information for authors" for the *American Journal on Mental Retardation* or *AJMR* (previously the *American Journal on Mental Deficiency* or *AJMD*) provides a balanced discussion on such usage. Therefore, the *AJMR* terminology statement is quoted to provide interim guidance.

Conventions about terminology for referring to people with mental retardation have changed many times over the years. Authorities now agree that the word *retarded* should not be used as a noun, as in "the mentally retarded." Many authorities believe that *retarded* may be used as an adjective, as in "mentally retarded adults," but others reject this practice in favor of prepositional constructions, such as "people with mental retardation." Both the adjectival and prepositional constructions are acceptable in *AJMR*; however, when the context makes it clear whether one is referring to mentally retarded persons or when it is otherwise unnecessary to refer to intellectual level or diagnostic classification, authors should use the most descriptive generic term, such as "students," "children," or "residents," without either adjectival or prepositional use of *retarded*. Whenever an author needs to describe level of intellectual functioning or diagnostic classification, terms should be drawn from the latest edition of AAMR's *Classification in Mental Retardation*. Because normal

has multiple meanings and implies abnormal where it is not applied, it should not be used. Instead, use more operationally descriptive terms, such as "intellectually average pupils" or "non-retarded employees."

Terminology Policy under Discussion

There are several concepts for which we do not have adequate terminology and believe there is a need to select appropriate terms and establish a policy relative to their use. **We would especially appreciate reader input about terms for the following concepts, as well as others which may warrant discussion.**

There has been some variability in the way in which we speak about the persons who are of interest to us in the development of AAC. These individuals have variously been called "nonspeakers," "nonspeaking individuals," "augmentative communicators," "augmented communicators," "AAC users," etc. Nonspeaker seems to be becoming a less popular term as there is a growing appreciation of the notion that we are frequently augmenting some degree of speech skills, even for individuals who have very limited use of speech. AAC users seems to be adequate when discussing individuals who are already practiced in the use of some AAC approach, but this term becomes awkward when attempting to discuss individuals who may benefit from AAC approaches, but who have not had the opportunity to use them. Many times it is appropriate to use the phrase "individual with little or no functional speech." This phrase is descriptive, but it is long and seems awkward when used frequently in a single manuscript.

We also have difficulty describing the professionals who are engaged in selecting, developing and training AAC techniques. For example, we have attempted to avoid implications that any specific profession is responsible for any particular aspect of AAC, but this sometimes leads to long and awkward phrases such as "AAC interventionist," "clinicians/educators," "facilitators," "trainers," and "specialists in AAC." Likewise, we have seen variable usage of terms such as "communication partners," "natural speakers," and "speaking partners."

There is a need to establish a consistent means of classifying and describing the variety of AAC tech-

niques. When referring to symbols it seems appropriate to use "aided" or "unaided" in referring to the superordinate level of classification. All the responses and comments received to date relative to the Lloyd and Fuller (1986) taxonomy paper have supported this classification over others such as static/dynamic, gestural/symbolic, sign/symbolic, etc. (Blau, 1987; Musselwhite, 1987). It would seem that "aided" and "unaided" would also be appropriate for the superordinate level of a transmission taxonomy.

We hope this report on the current status of journal policies regarding terminology will assist the development of our field in several ways: (1) by providing guidance to authors in preparing manuscripts for publication; (2) by facilitating the work of the ISAAC Terminology Committee; and (3) by stimulating the transdisciplinary and international communication which has been one of the most important strengths of ISAAC and of AAC. **To that end, we look forward to reader responses and I hope to be able to publish several letters to the editor regarding these terminology issues. We welcome responses which will support, expand, or challenge the policies we have presented here.**

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REFERENCES

- Blau, A. F. (1987). A response to Fuller and Lloyd: Toward an augmentative and alternative communication symbol taxonomy: A proposed superordinate classification. *Augmentative and Alternative Communication*, 3, 97-99.
- Lloyd, L. L. (1985). Comments on terminology. *Augmentative and Alternative Communication* 1985, 1, 95-97. Reprinted from *Communicating Together*, February 2, 1984, 19-21.
- Lloyd, L. L., & Fuller, D. R. (1986). Toward an augmentative and alternative communication symbol taxonomy: A proposed superordinate classification. *Augmentative and Alternative Communication*, 2, 165-171.
- Musselwhite, C. R. (1987). Further comments on terminology. *Augmentative and Alternative Communication*, 3, 164-165.
- Waksvik, K. (1985). Readers Forum. *Augmentative and Alternative Communication*, 1, 52-54.

ISAAC Publishes Information on AAC Courses

To assist members in identifying augmentative and alternative communication (AAC) courses, ISAAC has published information on such courses and seminars in the February 1988 issue of *The ISAAC Bulletin*. An updated list will be published periodically. Therefore the editor is requesting that individuals teaching courses send basic information including: (1) title of course, (2) credit (semester, quarter, or term units), (3) instructor, (4) university or college and mailing address for additional information, (5) when the course is offered, and (6) a course description of up to 150 words. This information should be sent in duplicate typed doubled-spaced copy to **Barbara J. Nail, Editor, The ISAAC Bulletin, Special Education, SCC-E, Purdue University, West Lafayette, Indiana 47907, U.S.A**