

This month's tip comes from Caroline Musselwhite [www.aacintervention.com](http://www.aacintervention.com)

“Lennie is a seven year old boy in an inclusive second grade. He has severe developmental apraxia, but lots to say — he lives with frustration. His teacher points out to the therapist that she and the other students can often understand him if they know what he’s talking about. The therapist decides to give Initial Letter Cueing a try - with this approach, Lennie will point to the first letter of each word that he says, and the partner will confirm it before he goes on. Lennie is also struggling with reading, including letter recognition. By the end of the year, his initial letter cueing abilities have mushroomed, making his speech more intelligible, and he can now predict the first letter of words accurately!”

### **What Is Initial Letter Cueing?**

This is an alphabet supplementation approach intended for people whose speech is currently difficult to understand, but who would be more intelligible if the speaker indicates (e.g., by pointing) the first letter of each word s/he says. The strategy was first described and explored by Beukelman and Yorkston (1977). This is a truly augmentative system, as the user must speak to supplement the initial letter cues. In addition, the act of indicating one letter per word serves as a self-pacing mechanism, which may enhance intelligibility for some speakers.

### **Sample Uses**

Initial letter cueing can be used to various extents and for various purposes, such as:

- used in all communication attempts, for people with speech that is unintelligible to all listeners;
- used in selected situations (e.g., noisy meetings) or with selected listeners who find the speaker difficult to understand;
- used only to repair communication breakdowns.

### **Who are Candidates for Initial Letter Cueing?**

The following information, derived from Beukelman, Yorkston, & Dowden, (1985, p. 121) helps sort out the characteristics of two groups who could benefit from initial letter cueing, types of populations that might show those characteristics, and why the letter cueing might help in each situation.

Individuals whose speaking rate is more rapid than their level of motor control and coordination will support many persons with Parkinson’s disease individuals with an ataxic speech pattern characterized by poor coordination of the complex series of movements required for speech

Pacing System: speaking rate is slowed as the speaker finds and points to the target letter Individuals with such imprecise articulatory movements that they are not understood by their partners persons with severe flaccid or spastic dysarthria

Alphabet Supplementation System: the listener is provided with extra information, necessary to enhance intelligibility

## Specific Criteria for Initial Letter Cueing

- 1) High motivation to communicate
- 2) Speech that is unintelligible, at least to some listeners, but does have these characteristics:

- a) Near-accurate vowel production
- b) Approximation of normal intonational patterns
- c) Syllabic integrity (i.e., student produces three syllables for the word "computer" and four syllables for the word "alligator")
- d) Omission, distortion, or substitution of many initial consonants (or system will not be helpful).

- 3) Ability to recognize and indicate letters of target words (Note: this can often be taught)

### Setup of Letter Cueing Board

The size, spacing, and range of the board should be determined by asking the user to point to letters on boards varying in overall size, letter size, and letter spacing. If the person does not currently recognize letters, shapes or small pictures can be substituted. Physical adaptations may assist in promoting accurate, rapid pointing.

#### Considerations include:

- 1) Keyguard: a keyguard may be fabricated and affixed to the board
- 2) Securing display: board may be attached securely to the display surface
- 3) Angle of Display: consider mounting the board on an easel (see Musselwhite & Hanser, 1999a, b).
- 4) Accessing cells: a pointer might be helpful with suggestions provided by the occupational therapist. Examples are:
  - T-stick (purchased, created from a 2" and a 4" length of gluestick, hot glued together)
  - dowel attached to wrist cuff, etc.
- 5) Protective Covering: paper displays can be laminated (consider glare factors!) or a Plexiglas cover can be affixed to a more solid display
- 6) Multiple Displays: these may be exact duplicates used in home /school / work settings, or modifications used for various purposes (e.g., a user with good fine motor skills might carry a handkerchief with letters written in indelible ink - this can be used only to help repair communication breakdowns.
- 7) Portability: if the display must be carried, provision should be made, such as a shoulder bag or a hip pack.

### Assessment for Initial Letter Cueing Potential

Goossens' & Crain (1985) have developed an Initial Letter Cueing test that may help to determine if the strategy will be helpful. Their assessment is especially useful for individuals who will have to be taught to point to first letters.

#### References:

- Beukelman, D. & Yorkston, K. (1977). A communication system for severely dysarthric individuals with an intact language system. *Journal of Speech and Hearing Disorders*, 1977, 42, 265-70.
- Beukelman, D., Yorkston, K., & Dowden, P. (1985). *Communication Augmentation: A casebook of clinical management*. San Diego: College-Hill Press.
- Goossens', C. & Crain, S. (1985). *Augmentative Communication: Assessment Resource*. Volo, IL: Don Johnston: www.donjohnston.com.
- Musselwhite, C. & Hanser, G. (1999a). *R.E.A.D.! Really Easy Activities for Do It Yourselfers!* Special Communications, 916 West, Castillo Drive, Litchfield Park, AZ 85340. See [Products](#) Section for Ordering Info
- Musselwhite, C. & Hanser, G. (1999b). *W.R.I.T.E.! Writing with Really Innovative Tools for Everyone*. Special Communications, 916 West Castillo Drive, Litchfield Park, AZ 85340. See [Products](#) Section for Ordering Info