SCOPE:

County Mental Health/Mental Retardation Administrators
Community Home Directors
Family Living Home Directors
Adult Training Facility Directors
Vocational Facility Directors
Early Intervention Program Directors
Non-State Operated Intermediate Care Facilities
for the Mentally Retarded
State Operated Intermediate Care Facilities
for the Mentally Retarded

PURPOSE:

The purpose of this bulletin is to provide a description of facilitated communication, a history of its development, a statement of rights, and a list of resources.

BACKGROUND:

What is Facilitated Communication?

Facilitated communication is described by Douglas Biklen, Syracuse University, (1991) as "a means of facilitating expression by people who either do not talk or do not talk clearly". Facilitation consists initially of (1) some level of physical support to the individual that enables them to point to letters, symbols, or pictures on a communication device; (2) verbal reassurance; and (3) encouragement. The degree of facilitation needed varies from person to person, ranging from an encouraging hand on the shoulder to boost confidence, to full support and shaping of a student's hand to enable him or her to isolate and extend an index finger for pointing (Crossley, 1990).

Rosemary Crossley, DEAL Centre, Australia, distinguishes facilitation from other forms of physical assistance that serve the function of a response prompt for students with disabilities as follows:

REFER COMMENTS AND QUESTIONS TO:

Ms. Carol Albert, Office of Mental Retardation, P.O. Box 2675,
Harrisburg, PA 17105-2675; Phone 717-783-5760 (Network: 8-443-5760)
Facilitation differs from other hands-on training methods such as graduated guidance and co-active movement in which the movements are performed by both student and teacher together and it does not matter if the teacher's movement is stronger than that of the student (at least not at the start of training). In facilitated communication, it is vital that the choices made be those of the aid user. The aid user's movements should be stronger than that of the facilitator who gives the minimum assistance necessary (1990).

Origins of Facilitated Communication

The term facilitated communication was first introduced by Rosemary Crossley in 1980. Nevertheless, other accounts of the type of phenomenon documented by Crossley can be traced to the 1960's (Goodwin & Goodwin, 1969) and 1970's (Oppenheim, R., 1974), (Dyer, 1981), and this literature is receiving new scrutiny in light of the growing interest in facilitated communication.

Crossley began exploring the technique in the 1970's at St. Nicholas Institution in Melbourne, Australia, for persons with severe multiple disabilities who were regarded as profoundly intellectually impaired (Bettison, 1991). Working as an aide, Crossley began using a method which combined providing individuals with both emotional and physical support to help persons with cerebral palsy gain access to letter and language boards (Biklen & Schubert, 1991).

In 1985, Crossley began using the same method with children with autism, and found that the individuals revealed unexpected literacy skills (Biklen & Schubert, 1991). The method was controversial. Skeptics argued that the possibility existed that the communication produced reflected the facilitator's movements and thoughts rather than those of the person being facilitated. The controversy was lessened, but not eradicated, when the method was validated in the Supreme Court of Victoria using message-passing tests. The tests were implemented by having Crossley leave the room and return to facilitate communication about something that had transpired in her absence (Biklen, 1990).

In 1986, Crossley established the Dignity, Education, and Language (DEAL) Centre in Melbourne, Australia, to provide people with no speech or dysfunctional speech with alternative means of communication (Crossley, 1988). She extended an invitation to Dr. Douglas Biklen, of Syracuse University, to visit her in Australia to witness what she had "discovered". In her letter, Crossley stated that she was eliciting "high-level" communication from students who had been previously categorized as "low functioning" (Biklen, 1990). In 1989, Biklen visited Crossley and was astonished at what he witnessed. He returned seven months later to study Crossley's work in greater detail. In 1990, Biklen began training teachers and speech therapists in the Syracuse, New York area in the methodology of facilitated communication. Accounts of the success of these procedures have appeared in a variety of publications since that time.
Why is Physical Support Necessary?

Many people with severe communication disabilities can learn to communicate independently without ever needing physical support. However, there are many people who cannot speak or whose speech is highly limited and who cannot point reliably. Many of these people, including most individuals with autism and some people with other developmental disorders, experience what is known as "developmental dyspraxia".

The term apraxia means "without action". It refers to absence of, or difficulty with achieving voluntary action. People who have developmental disabilities, such as autism and other related conditions, experience developmental dyspraxia (Kelso & Tuller, 1981; Miller, 1985; and Maurer, 1992). That is, they can act, but voluntary actions are often disordered in some way. Specifically, developmental dyspraxia may include problems of initiating action (getting started); problems of stopping action (perseveration); impulsiveness; problems of modulating pace of action; inability to speak or speaking that is repetitive, automatic, or poorly articulated and of unusual pitch, rhythm, and tone and so forth. Dyspraxia can be confusing, since a person may have good ability to carry out routine activities and have difficulty only with new ones. Typically, any activity requiring multiple steps is more difficult than one- or two-step actions (Miller, 1985).

Physical support in facilitation should be designed to specifically address the dyspraxia, for example to slow down pointing so the person can overcome impulsiveness and problems of pacing action. Similarly, a hand on the forearm, elbow, or shoulder, or merely sitting next to a person typing can give a person confidence and help the person to focus on the task at hand, helping the person to initiate action and to relax enough to get sequencing correct. The goal of facilitation is to aid the person to overcome physical difficulties and then to work toward achieving more independent typing (Biklen, 1993).

Are There Studies to Support the Validity of Facilitated Communication?

Facilitated communication has been validated in two research studies in Australia, the latest in 1993 (Steering Committee, 1993; Intellectual Disabilities Review Panel, 1989), and in two recent studies in the United States (Bergen and Ramsden, in press; Vazquez, in press; and Cardinal, 1993).

Professor Carol Vazquez reports from her controlled study that while both of her subjects had varying performance on different tasks, both demonstrated the ability to communicate information requested (which was unknown to the facilitators) under experimentally blind conditions (p. 21 Vazquez in press) (Biklen, 1993).

Does Facilitated Communication Work Equally Well With Everyone?

No. As with any method, it may not be effective with some persons and will predictably have varying success with others. Success may be related to neurological factors (e.g. tremor, low and high muscle tone, lack
of proprioceptive awareness), educational experience and opportunities to practice, and the implementation of effective facilitative practices.

Is Facilitated Communication a Cure for Autism or Other Developmental Disabilities?

No. It is simply a support to enable people to communicate. Facilitated communication is based upon a belief in the competence of the individual regardless of his or her label.

What Are The Benefits of Facilitated Communication?

Improvements in communication can lessen the frustration and anger that often result from the inability to communicate.

Any improvement in a person's ability to communicate can reduce the social isolation that accompanies the inability to communicate by enabling the development of relationships.

Communication enables individuals to make known their needs and to communicate their decisions, thus allowing people to have control over their own lives.

Communication is essential for learning about the world and critical to making a contribution to the community.

RESOURCES:

Facilitated Communication Institute
Syracuse University
370 Huntington Hall
Syracuse, New York 13244-2340

The Facilitated Communication Institute provides publications, training videos, training workshops, conducts research, and publishes The Facilitated Communication Digest, a quarterly newsletter.

Pennsylvania Facilitated Communication Network
c/o Mary Lapos
Central Susquehanna Intermediate Unit
P.O. Box 213
Lewisburg, Pennsylvania 17837
Phone: 717-523-1155

The Facilitated Communication Network publishes a quarterly newsletter, sponsors quarterly meetings for speakers and facilitators, and provides information and guidance to practitioners.

The Central Susquehanna Intermediate Unit provides training to facilitators under a project sponsored by the Pennsylvania Department of Public Welfare, Office of Mental Retardation.
A STATEMENT OF RIGHTS:

The Right to Communicate

The right to communicate is both a basic human right and the means by which all other rights are realized. All people communicate. In the name of fully realizing the guarantee of individual rights, we must ensure

- that all people have a means of communication which allows their fullest participation in the wider world;
- that people can communicate using their chosen method; and
- that their communication is heeded by others.

Where people lack an adequate communication system, they deserve to have others try with them to discover and secure an appropriate system. No person should have this right denied because they have been diagnosed as having a disability. Access to effective means of communication is necessary to exercise the constitutional right of free speech.

(Excerpted from Biklen, Borthwick, Shevin, 1992)

BIBLIOGRAPHY:


