Project Abstract

Title: Social Validity of Technology Assisted Language Intervention for Children who are Deaf or Hard-of-Hearing
Bethany Wysocki, Rajvi Desai, Robert Gibler, Sandra Grether PhD, Lisa Hunter PhD, Jareen Meinzen-Derr PhD

Background:
Children who are Deaf or Hard-of-Hearing (DHH) are at-risk for language delays and possible language impairments which can impact social and communication functioning. Technology Assisted Language Intervention (TALI) is a novel approach that focuses on the feasibility of using augmentative and alternative communication (AAC) as an intervention for children who are DHH. Results from a recent pilot study of TALI suggest that TALI may be a viable intervention approach for enhancing language development.

Objective/Problem Statement:
We are studying the accessibility and feasibility of this novel approach to supplement current interventions for children who are DHH. To investigate the feasibility of TALI across settings, we studied the social validity of the TALI intervention. Social validity broadly refers to the concordance between the measurable outcomes of an intervention and the goals, needs, and preferences of the recipients and interventionists who deliver it.

Methods:
Interviews and focus groups were used to collect qualitative data from parents (n = 9) and professionals (n = 19) to gain their perspective on the feasibility of TALI outside of therapy (e.g., school, home, community) and as a supplement to existing language interventions. Predetermined small and large group questions were discussed during two separate parent and professional focus groups through telephone or email. Responses were documented through written means and recorded audio. Qualitative analysis of the focus groups was conducted by graduate students (n = 6) and researchers (n = 2) in a consensus approach. We also completed a literature search of social validity in relation to the use of AAC devices to support communication with children who are DHH.

Results:
Parents reported that TALI was feasible to implement in home and therapy settings. Professionals reported that TALI may be difficult to integrate within schools, particularly with students in a manual or total communication academic setting. However, professional partners also indicated that TALI may be beneficial for supplementing reading and writing curricula.

Discussion:
Successful use of TALI devices can be encouraged by providing additional supports for parents and providers. Overall, results suggest that TALI is a socially valid intervention that shows promise as a supplement to existing interventions for children who are DHH.

Conclusions:
A manuscript will be completed describing the social validity of the TALI intervention. Information gleaned from this manuscript will inform the development of supports to assist parents and providers with implementation of the TALI device across settings.