



ASHA
American
Speech-Language-Hearing
Association

GUIDANCE FOR EDUCATIONAL AUDILOGISTS AND SCHOOL-BASED SLPS: ASSISTIVE TECHNOLOGY FOR STUDENTS

In the school setting, **assistive technology (AT)** consists of any tool or device that provides accommodations/modifications to students within the educational setting. Students use AT to access the curriculum; AT assists with daily living skills, supports learning, and enhances daily tasks for students with disabilities.

AT in Schools

During every individualized education program (IEP) meeting, teams must determine whether a student requires AT to access their educational curriculum. This resource is intended to support educational audiologists and speech-language pathologists (SLPs) working with school teams and students when determining how AT may be appropriate to support identified communication needs.

The website of the National Institute on Deafness and Other Communication Disorders (NIDCD) includes a webpage, [Assistive Devices for People With Hearing or Speech Disorders](#), that covers the following topics:

- augmentative and alternative communication (AAC)
- accessibility features such as text-to-speech, speech-to-text, and captions
- hearing assistive technology (HAT)—including remote microphone hearing assistive technology (RM-HAT), sound-field amplification systems, and classroom audio distribution systems

For some students, one AT option that can help support their communication is an **augmentative and alternative communication (AAC) device**. AAC devices either supplement a person’s speech and language skills (“augmentative”) or replace a person’s speech (“alternative”).

For more information, visit ASHA’s [webpage on AAC devices](#).

U.S. Department of Education’s Guidance Regarding AT

In January 2024, the U.S. Department of Education (ED) issued a “Dear Colleague” letter titled [Guidance on Myths and Facts Surrounding Assistive Technology](#). Information in this resource directly impacts decision making and considerations used by educational audiologists and SLPs working in early intervention and schools.

Below are **some of** the myths that the ED guidance debunks and some of the facts that the ED guidance clarifies—with specific considerations for educational audiologists and SLPs working in the school setting. Note: The ED guidance uses the term “child” or “children” in each myth and in each fact statement. ASHA, however, uses the term “students” when discussing each topic to include all individuals requiring service in the schools—from age 3 to age 21. The “myth numbers” seen in the list below are those numbers already assigned by the ED in the existing guidance document.

MYTH 1: Assistive technology (AT) should be considered only at some (not all) individualized education program (IEP) team meetings.

FACT: Each time an IEP team develops, reviews, or revises a child’s IEP, the IEP team must consider whether the child requires AT devices and services.

- Consider tools that support communication strengths.
- Consider every environment.
- Consider tools that can provide equitable access to language and curriculum.
- Consider whether the student can complete the task independently using accessible tools.

MYTH 2: Providing AT devices and services is optional under the Individuals With Disabilities Education Act (IDEA), and a local education association (LEA) does not have to provide AT devices and services if no funds are available for that AT device and service.

FACT: IEP teams must consider AT devices and services for all children with IEPs and must provide—and fully fund the AT devices and services—if the IEP team determines that they are necessary to provide a free appropriate public education (FAPE) for the child.

- Consider who on the team has the appropriate training or qualifications to provide AT services.
- Consider funding options and payer requirements—while keeping in mind that the tool must be individualized.

MYTH 3: Providing an AT device to a child with a disability satisfies the IDEA’s AT requirements.

FACT: IDEA requires IEP teams to consider whether a child with a disability needs AT devices and services.

- SLPs can learn more about accessibility that supports communication by learning about **the SETT Framework**. This framework requires that the IEP team consider the following characteristics and needs: Student, Environment, Tasks, and Tools. [This ASHA Leader article](#) provides additional information related to the SETT Framework.
- Educational audiologists are uniquely qualified to offer essential services related to hearing assistive technology (HAT). They assist with ensuring that students, families, teachers, and related service providers are well-versed in the proper use of this equipment. See the Educational Audiology Association’s position statement, [The Role of Educational Audiologists in IDEA’s Special Factors](#) [PDF].
- The student’s daily access to the device(s) must be documented in the IEP. See [this local court ruling](#) that speaks to the importance of adequate recordkeeping—doing so demonstrates compliance with program rules, including IEP implementation.

MYTH 4: An AT evaluation must be conducted prior to providing an AT device and service to a child with a disability.

FACT: An AT evaluation can be included as an AT service for a child but is not required under the IDEA.

- Certain ATs may be used that are already embedded in a student’s educational environment. For example, visual schedules can be helpful for all students but might need to be adapted for a student with visual impairments. Specific educational technology software may be available at the district level to all students. An AT evaluation is not necessary to provide accessible options for this student.
- If there are consistent places or tasks that need adaptation, an evaluation may be more effective in identifying AT to support the student in class.
- **Augmentative and alternative communication (AAC)** is a type of AT that assists with communication. More in-depth assessment may be required for trialing the most appropriate types of low-tech and high-tech AAC devices. Assessment timelines and local processes should not be barriers to accessing AT.
- Functional assessment of a student’s auditory access across all of the student’s school environments is an important part of the selection process for hearing assistive technology (HAT). You may need to trial more than one type of HAT to maximize auditory access.

MYTH 5: Children can learn to use an AT device on their own; educators have no obligation to provide training to a child or to their family.

FACT: The LEA is responsible for ensuring that the child with a disability, their parents, and their educators know how the AT device works through the provision of AT services.

- Educational audiologists and SLPs can provide direct instruction on how to use these tools.
- SLPs provide support to improve communication, understanding, or expression using AT.
- If a student needs AT, educational audiologists and SLPs can demonstrate proper use of the technology to the student, parents/caregivers, and educators.
- IEP Goals can include AT services and instruction.
- Use of AT is explicitly taught in interventions using AAC or AT tools that support written language. SLPs who are working with a student toward communicative competence explicitly teach operational, social, linguistic, strategic, and psychosocial skills *using* technology.
- AT may include technology that is considered “light-tech” or “no-tech” AAC.
- Educational audiologists and SLPs need to provide training and ongoing support to the educational team to ensure effective AT adoption across all school environments.

MYTH 6: Specific AT decisions do not need to be included in the written IEP document.

FACT: IDEA requires the school and school district to include in the IEP a statement about a child’s special education, related services, and supplementary aids and services.

- The statement can be descriptive of the features needed. For example:
 - “The student requires text-to-speech features when presenting information to other students or to the class. At this time, the student uses *(insert description of the feature or description of the device or software)* and has demonstrated proficiency using this tool when provided verbal instructions or reminders. This student will benefit from direct instruction to learn the features of this software more independently.”
 - “The student requires a communication application to support expressive communication when oral speech is unreliable. The student uses this communication app *(insert communication application name)* on a personal device to *(insert function and purpose of the application)* and independently types their communication message without additional support.”
 - “The student requires remote microphone technology to enhance auditory access in the classroom and other school environments where background noise, reverberation, or distance from the speaker may be acting as barriers to communication and curricula access. At this time, the student uses *(insert name of brand and model of remote microphone technology)* and has shown comfort with its use. Continued support from the educational audiologist is essential to ensure the technology’s functionality and to provide training for new teachers or staff on its proper use.
- Supplementary aids and services do not need to be tied to an IEP goal and may include AT.
- Indirect AT and AAC services listed on an IEP must be tied to a specific goal.

MYTH 7: AT does not need to be considered as part of the secondary transition process (i.e., transitioning out of high school to postsecondary education, employment opportunities, or adult services).

FACT: AT should be considered for inclusion in a child’s transition plan because AT devices and services create more opportunities for that child to be successful in their postsecondary plans.

- Students may benefit from technologies to support independent living and employment such as digital schedules, email, and other digital products required for postsecondary success.
- Educational audiologists and SLPs can provide critical observations and recommendations during transition meetings that may support decision making about digital communication instruction—including text messages, emails, social media communication skills, and strategies that may impact postsecondary success.
- Educational audiologists and SLPs support families in understanding the accommodations that individuals with disabilities may continue to need in higher education. They also help connect students with disability support services if they plan to pursue postsecondary education at a college or a university.
- Educational audiologists and SLPs may assist families finding resources, grants, and other funding options for AT and AAC needs at the postsecondary transition planning meeting if the school provides current strategies.
- For more information and resources related to transition planning, see the ASHA Practice Portal page on [Postsecondary Transition Planning](#).

MYTH 8: AT cannot be used for participation in state academic assessments.

FACT: The Elementary and Secondary Education Act (ESEA) requires states to provide the appropriate accommodations, which includes the use of AT devices for students with disabilities as part of their state assessments.

- Any AT used in assessments of communication should be documented. If norm-referenced assessments are used to determine initial or continued services, educational audiologists and SLPs must document the conditions of the assessment and whether they fall outside the normative data. Below are some informal/qualitative assessment measures that you can use to assess appropriateness for AT and AAC:
 - [The WATI Assessment Package](#) [PDF]
 - [Quality Indicators for Assistive Technology Services \(QIAT\)](#)
- If a student is not proficient using the AT to demonstrate their understanding of concepts or materials, then the team should consider additional instruction to ensure that the student can demonstrate proficiency.

MYTH 14: AT, universal design, universal design for learning (UDL), and accessible educational materials (AEM) are all the same thing.

FACT: AT, universal design, UDL, and AEM each have their own unique purpose and definitions under federal law. Educational audiologists and SLPs should be familiar with each of these terms and how their services might support a student with a communication disability.

- AT: *Discussed at length above.*
- Universal Design: Designing and choosing materials that are accessible to all students. Consider the design concepts of your activities. Can the students all participate meaningfully in the activity without major environmental adaptations or changes?
- Universal Design for Learning (UDL): A framework developed by CAST¹ helps educators design accessible learning environments. Are you considering the framework you will use to create your sessions—sessions that are adaptive and accessible for every group member?
 - [Universal Design for Learning](#)
 - [UDL: The UDL Guidelines](#)
- Accessible Educational Materials (AEM): When making determinations regarding AEM, here are several questions to consider:
 - Are the materials you are using made to support the learner’s unique needs?
 - Do you need to see if certain AEMs can be purchased for your activities?
- Examples include audiobooks, print text, and adaptive writing tools or technologies to support non-oral responses.

MYTH 15: Using AT devices and services will not improve child outcomes.

FACT: Research demonstrates that using AT devices and services actually improves child outcomes across all settings.

- AAC services include direct instruction in operational competency and strategic competency. Developing AAC competencies reduces device abandonment, as evidenced by the following research:
 - [An Evidence-Based Approach to Augmentative and Alternative Communication Design for Individuals With Cortical Visual Impairment](#)
 - [A Scoping Review of Communication Outcomes Measures in Augmentative and Alternative Communication](#)
- The benefits of hearing assistive technology for children with auditory issues are well-documented in the literature.
 - [Frequency Modulation System and Speech Perception in the Classroom: A Systematic Literature Review \[PDF\]](#)
 - [Remote Microphone Technology for Children With Hearing Loss or Auditory Processing Issues](#)

¹ CAST is a nonprofit education research and development organization formerly known as the Center for Applied Special Technology.

MYTH 16: The use of AT devices lowers a child’s motivation because it does the work for them.

FACT: Research shows that AT actually increases a child’s motivation to complete their assignments.

- For more information, see page 14 of [Myths and Facts Surrounding Assistive Technology Devices and Services](#) [PDF].

MYTH 17: If a child does not want to use AT, a teacher does not need to follow up to model and encourage the child to use the AT.

FACT: If a child does not want to use an AT device, then it is critical that the IEP team work with the child to understand and address the root cause of their refusal.

- Educational audiologists and SLPs work with students to increase communication independence. AT is an evidenced-based tool that—when provided to the student with explicit instruction and when implemented with fidelity—can improve independence.
- Data collection is crucial to determine the reasons for refusal behaviors and to document opportunities for success.
- Providing multiple examples of AT and backup communication tools using consistent models enables practice of and acceptance of accessible tools.
- If a student is reluctant to use their HAT, then it is crucial that the educational audiologist identify the underlying issues and collaborate with the student to foster self-acceptance. See the webpage titled [FM Systems](#) (on the Supporting Success for Children With Hearing Loss website).

MYTH 18: When children are using their own devices for AT, less responsibility falls on the school or the educator.

FACT: AT devices and services that are written into the IEP are the responsibility of the LEA. There may be flexibility if the parent and the LEA agree on using a child’s device instead of using an LEA’s AT device.

- If the student has an existing AAC system that meets their needs at home, then the LEA and IEP team may agree to allow the child to use that device in school if it is the best fit for the student’s educational needs. If the student plans to use a personal device at school, then the parent may need to complete paperwork and processes identified and required by the school district.
- A student of any age may use multiple forms of AAC throughout the school day to communicate and access their instruction. The LEA is responsible for identifying supports that improve access to instruction.
- The National Joint Committee for the Communication Needs of Persons With Severe Disabilities (NJC) discusses this on the ASHA webpage titled [Funding for Communication Services and Supports](#):

“But even when there are alternative or complementary funding sources, the school’s obligation is to see that the student receives what is specified in the IEP in a timely manner. It is not permissible to delay access to needed technology pending approval from other funding sources. In such cases, schools may need to explore temporary access solutions (such as a district’s equipment inventory, an equipment loan program, or short-term rental) while waiting for more permanent funding solutions.” (para 5)

MYTH 19: Buying AT devices takes a long time and will not give timely services to the child as required.

FACT: IDEA requires that, as soon as possible following the development of the IEP, special education and related services are made available to the child in accordance with the child’s IEP. This includes AT devices if they are required as part of the child’s special education or related services.

- Best practices in determining the tools that a student needs to complete tasks in a school setting are well-established in the SETT Framework. LEAs may have their own procedures for determining the tools that a student may need.
- A comprehensive AAC evaluation may be recommended when identifying the tools that a student may need.
- ATs could include “light-tech” or borrowed devices to implement while awaiting delivery of recommended, dedicated equipment.

MYTH 20: All AT devices must be approved by an LEA’s information technology (IT) department.

FACT: The IEP team determines which AT device(s) and service(s) are necessary to meet the child’s needs.

- Not all AT is digital. The IT representative may be a critical member of the team if the AT requires their support.
 - Some technology that is digital might not require IT support.
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MYTH 21: Only staff who specialize in AT can deploy AT devices or provide AT services.

FACT: IDEA requires the IEP team to have representatives of the LEA who are qualified to provide—or supervise the provision of—specially designed instruction to meet the unique needs of children with disabilities.

- Educational audiologists and SLPs are members of the IEP team and may participate in decisions and implementation of AT with adequate training.
 - *Note:* “Qualified” means that the representative has training and experience with the tools that are available and appropriate to meet the student’s academic and social needs.
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MYTH 22: There are no resources available to LEAs who can provide technical assistance on AT devices (e.g., loaning and testing of AT devices).

FACT: Every state has a state or territory AT program that can provide device demonstrations and device loans to LEAs so that they may evaluate an AT device’s effectiveness prior to purchasing.

- Find your state’s [local AT program](#).