

THE VIRGINIA AND HARVEY KIMMEL FAMILY FUND PRESENTS

THE 2022 STUDENT MATINEE PROGRAM

STUDY GUIDE

FOR

All of Me

BY LAURA WINTERS

||| DIRECTED BY |||
ASHLEY BROOKE MONROE

BARRINGTON STAGE
COMPANY

All of Me

**BARRINGTON STAGE COMPANY
SEPTEMBER 21-OCTOBER 9**

BY: LAURA WINTERS

DIRECTED BY: ASHLEY BROOKE MONROE



BOY MEETS GIRL. BOY USES WHEELCHAIR, GIRL USES SCOOTER. BOY AND GIRL USE TEXT-TO-SPEECH TECHNOLOGY TO CONNECT TO EACH OTHER AND THE WORLD AROUND THEM. LOVE IS HOLDING THEM TOGETHER EVEN WHEN THE PEOPLE IN THEIR LIVES WANT TO PULL THEM APART. IT'S A ROMANTIC COMING-OF-AGE STORY THAT HASN'T BEEN SEEN BEFORE. ALL OF ME IS A HILARIOUS AND CANDID PORTRAYAL OF DISABILITY AND CLASS IN PRESENT-DAY AMERICA.



STUDY GUIDE



This guide is meant to be a practical education resource for teachers to draw connections between the play and core curricular subjects being studied in the classroom. The guide contains background information on the play, as well as suggested activities that can be used to explore the play's key themes either before or after viewing the performance. The activities and topics are organized in modules that can be used independently or interdependently according to class level and time availability.

TEACHERS CAN USE THIS GUIDE TO:

- Enhance student appreciation of the experience of live theatre.
- Introduce students to relevant cultural & historical topics that support classroom learning.
- Creatively draw connections to topics addressed in the play as they relate to core curriculum.
- Gather instructional tools, which can be used to plan lessons in alignment with national learning standards.

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**SPECIAL THANKS
TO THE
VIRGINIA AND HARRY KIMMEL FAMILY FUND**

PREPARING FOR THE PERFORMANCE

BEFORE THE PLAY



Read articles from this guide with your class. If possible, have students read the play and use the guide to provide context for their reading. Go over the tips for Theatre Etiquette with your class.



DURING THE PLAY

Please arrive 10-15 minutes before the performance to allow time before the show for students to use the restrooms, which are located in the theatre lobby. Barrington Stage Company's policy is that all audience members remain masked while inside the theatre. Make sure to have masks for your students.



AFTER THE PLAY

We will host talkbacks after the show. Please remain seated and prepare your questions for the cast. Teachers may choose to lead one of the post-show lessons found in this guide in order to help your students draw connections to the curriculum.

THEATRE ETIQUETTE

We are so glad you are joining us for this important play. This play is meant for an adult audience and has several comedic moments. We ask that you discuss what being a respectful audience means with your students. Playwright Dominique Morisseau wrote the following rules of engagement that may be used as a guide for your discussion about theatre etiquette.

DOMINIQUE MORISSEAU'S PLAYWRIGHT'S RULES OF ENGAGEMENT

- You are allowed to laugh audibly.
- You are allowed to have audible moments of reaction and response.
- My work requires a few “um hmms” and “uhn uhns” should you need to use them. Just maybe in moderation. Only when you really need to vocalize.
- This can be church for some of us, and testifying is allowed.
- This is also live theatre and the actors need you to engage with them, not distract them or thwart their performance.
- Please be an audience member that joins with others and allows a bit of breathing room. Exhale together. Laugh together. Say “amen” should you need to.
- This is community. Let's go.

A FEW MORE REQUESTS FROM BSC:

- Silence or turn off all electronic devices, including cell phones, as the glow from your device is distracting.
- There is no photography allowed during the show.
- Please be seated promptly in your assigned seat.
- Remain in your seat for the entire performance. There is an intermission where you will be able to use the restroom or stretch your legs.
- Pay attention to announcements that are made prior to the show about the rules of the theatre you are attending and the location of the fire exits.

CONTENT ADVISORY

Brief mention- drugs (selling, using; opiates and cocaine)
Reference to- suggestive sexual language
Depictions of - ableism, classism, neglect (physical, emotional, medical)

AN INTERVIEW WITH THE PLAYWRIGHT & DIRECTOR



**LAURA
WINTERS**



**ASHLEY BROOKE
MONROE**

LAURA WINTERS, WHAT INSPIRED YOU TO WRITE ALL OF ME?

It came from a couple of things. One of which is that when I was in high school, I was watching my paternal side of my family really struggle to address my grandma's changing access needs. She was in her late 80s and had a lot of health issues, and there was a lot of language around hoping that she would walk again. People were just really struggling to accept that she needed other care, and that she needed new accommodations.

One day, she sadly fell. She had to have the lower half of one of her legs amputated, below her knee. All that was like a very scary incident and it became this weird double-sided coin. On the one hand, all of her access needs were met because we were no longer pretending that she might one day walk. It was like, "Here's the wheelchair. Here's the wheelchair-accessible van. Here's the exact right height of the bed that they had recommended for a long time that just kind of went ignored." So that was one thing that I was witnessing in high school and just was, like, always in the back of my mind.

And then one day, I was on a plane. And I just happened to read an in-flight magazine that had a woman who worked with a lot of AAC users who founded a company to make custom voices for people. And because she said she would often hang out with AAC users and how strange it was that everyone, despite their background, would have the same two voices. So she made a company to make people bespoke voices that they could program and use as their AAC voices. So that image of two people talking [in AAC voices] really struck me. And then those ideas just sort of started like weaving together.

ASHLEY, HOW DID YOU GET INVOLVED WITH THIS PLAY?

It was just some really good luck. Laura went to college with the choreographer of a musical that I directed. And we met for coffee and Laura was working on a few different projects and what would become *All of Me*. I had just been working on a production of *The Glass Menagerie* on Broadway that starred Madison Ferris, who is now the lead in *All of Me*. And so through that project, I had become really interested in disability studies and the intersection of disability and theatre. And I knew the perfect actress to play Lucy. So I was like, let's see if we can collaborate on this brilliant play of course with Madison.

AN INTERVIEW WITH THE PLAYWRIGHT & DIRECTOR



(CONTINUED)

LAURA WHAT WAS YOUR PROCESS LIKE WRITING THE PLAY KNOWING THAT AAC WAS GOING TO BE USED?

It was very interesting because it took a really long time into the development of it, where we actually got to hear it in any kind of way, with the voices. So for a couple of years of just me hearing it, imagining it in my head. And I rewrite a lot. So when we actually did get the voices, I changed, like, probably most of the lines. But yeah, just trying to imagine what it would be like if you couldn't just emphasize and exclaim the same way that we're used to. There's definitely some trial and error.

ASHLEY WHAT WAS IT LIKE TO DIRECT THE PLAY WITH TWO OF THE LEAD ACTORS USING AAC DEVICES?



Yeah, Madison and Danny are not AAC users. They communicate vocally in their day-to-day lives. So this process for them has also involved learning how to use these devices. It becomes kind of technical at some points. They're running QLab (you know what a sound technician would be running during a show), and they're juggling that while acting. But they make it look effortless. It was really important to me that the actors got to cue their own lines, because the timing has to be in their control. So running QLab and having speakers and everything be part of their scooter and their power chair gives them the power.

LAURA, WHAT HAS IT BEEN LIKE COLLABORATING WITH DANNY AND MADISON?

Danny and Madison had both been a part of this play and its journey for quite a long time. So in the beginning, where I didn't have any particular people in mind, the disabilities were sort of a bit more vague and amorphous and now they've actually become much closer to the actor's actual lived experiences with disability. So Alfonso is paralyzed, just like Danny is. Lucy and Madison both have muscular dystrophy. That's just been very helpful obviously. They're both (Danny and Madison) so open and collaborative and to shape the script. It's made the story a lot better, for sure, having them with us.



AN INTERVIEW WITH THE PLAYWRIGHT & DIRECTOR

(CONTINUED)



IN ALL OF ME, THERE IS A STRONG THEME ABOUT CLASS, AND HOW THAT INTERSECTS WITH ISSUES OF ACCESS. WHAT WERE YOUR HOPES IN TERMS OF CONVEYING A MESSAGE ABOUT THAT? AND WHAT WOULD YOU HOPE THE AUDIENCE LEARNS OR TAKES AWAY FROM THAT? THIS QUESTION IS FOR BOTH LAURA AND ASHLEY.

LAURA:

The more I researched about disability, and the more I learned about class, in general, to just learning how your life can just be completely different [based on your class]. The more you learn about disability and how it functions in the U.S., like the logistical, bureaucratic barriers that are just constantly in place for you to get whatever you need, literally, any single thing you could possibly need. Getting it is incredibly difficult. At any given time [if you are disabled], all of your money has to be less than \$2,000 to retain your benefits. So then you're just incentivized to not [make money]. So the U.S. has people caught in a very sticky web. But hopefully [All of Me] communicates that through some humor, and just kind of a lighter touch.

ASHLEY:

One of my favorite things about going to the theater as an audience member is gaining insight into people whose lives are very different than my own and gaining empathy through that. And I think there's a lot of that happening in All of Me, but it also happens across characters. So I think we've been talking about how the two moms in the play don't ever get to spend time with people of a very different class than them. And both of them gain empathy and understanding about what it is like to be in the other class over the course of our journey in the story.

I'D LIKE TO ASK YOU HOW IT WAS TO WRITE A ROMANTIC SCENE BETWEEN DISABLED CHARACTERS? HOW DOES REPRESENTATION PLAY INTO THAT CHOICE?

LAURA:

From the beginning, I was like, this scene needs to be in this play. Yeah, and I think that that's because again, once scratching the surface of, disability and representation, if you spent even 10 minutes on it, you'd find people [with disabilities] being like, "People with disabilities never get to be in in romantic plots or sexual plots. People think we don't have sex. People think we're not sexual. They think we don't want to get married; they think we don't want to fall in love."

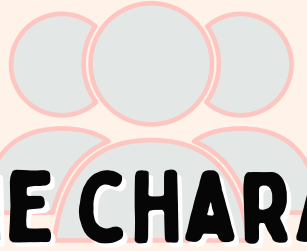
So it just became very clear, from the start, that I want to see these people have this [romantic] scene. And I think it's pretty hot, and fun to watch.



All of Me

SETTING:

LATE SPRING/EARLY SUMMER 2019,
SCHENECTADY, NEW YORK.



MEET THE CHARACTERS

LUCY: 22, white, female, a retired jazz singer, disabled. A dry and incisive sense of humor: the ideal person to watch *Real Housewives* with. She has a degenerative neurological disease that surfaced after high school that is atrophying her muscles. Although she can still produce sounds with her voice, she primarily uses a text-to-speech Augmentative and Alternative Communication device to speak. She uses a motorized scooter.

ALFONSO: 26, Latino or AfroLatino, male, an infectious disease researcher, disabled. A level-headed charmer with flashes of insecurity. The friend who is game to accompany you to your cousin's clarinet recital. He was paralyzed as a baby, and has limited motor abilities and no speech capability. He uses a text-to-speech Augmentative and Alternative Communication (AAC) Device to speak. He uses a motorized wheelchair.

JACKIE: late 20s, white, female, always in Lucy's shadow despite being the older sister. Her extreme helpfulness stems more from recognizing that someone's gotta make dinner than from having a heart of gold. A manicurist always on the hunt for singing gigs, she spends her days at the salon earmarking the magazines for new trends. She spends her nights Pinning DIY ways to make said trends on her nonexistent budget. Nondisabled.

CONNIE: late 40s/early 50s, white, female, mother of Lucy and Jackie. A manicurist at a nail salon who is too proud to use the cane she should be using. A pull-yourself-up-by-your-bootstraps woman with a nearly unshakeable faith. Would do anything for her daughters or for a massage. Considers herself nondisabled.

MOOSE: early to mid 30s, white, male, Jackie's live-in fiancé. A capricious libertarian who will defend his decision to make playing online poker his "full-time job" to the death. An oddball. Nondisabled. Moose also doubles as THE RUNNER.

ELENA: mid 50s, Latina or AfroLatina, female, mother of Alfonso. A poised, multi-lingual yoga devotee with two blank pages left in her passport. She's a self-made lawyer who knows how to relax as hard as she works. (A valium, anyone?) Nondisabled.

WHAT IS DISABILITY?

Disability is highly contextual- the same person may or may not be disabled in different circumstances and at different points in their lives. Generally speaking, disability is something inherent to an individual that impacts how they interact with certain systems of society and culture. It may be physical, mental, behavioral, cognitive, emotional, or a combination of all of these. You cannot determine if a person is disabled by looking at them. Trust a person's word. For various reasons, including but not limited to the state of healthcare systems, the financial burden of a formal diagnosis, and the lack of institutional awareness of different conditions, people may not have official documentation of their disabilities. Different people have different preferred language and terms; always default to an individual's preferred language when discussing their identity.

**DISABILITY CAN BE A TEMPORARY THING,
AND IT CAN BE ACQUIRED OVER TIME.**

- **Disability can be temporary or permanent**
- **It can be congenital or acquired**

DISABILITIES CAN BE EITHER VISIBLE OR HIDDEN

- **Many disabilities may be hidden such as chronic illness, learning disabilities and mental health conditions.**

DISABILITY LANGUAGE DOS & DON'TS.

DO

- ✓ Follow the lead of the person in question
- ✓ Say “disabled person” or “person with a disability”
- ✓ Use clear and precise language- disabled is not a dirty word
- ✓ The opposite of disabled is non-disabled
- ✓ People who use wheelchairs are not wheelchair-bound; they are wheelchair users





DON'T

- ✓ Use the following words (although some may use to self-identify): cripple, cripp, insane, spastic, handicapped, retard, differently abled, handicapable, midget, vertically challenged, high/low functioning, invalid, lame, dumb, slow, special needs (unless referring to an organization that uses the term), wheelchair-bound.
- ✓ Say a person “suffers from” or is “afflicted with” a condition
- ✓ Add “the” to a group- disabled people, not “the disabled”
- ✓ Assume disabled people are meant to inspire you



STATISTICS ABOUT DISABILITY



- 
- 
- 1 in 4 adults in the US are living with some sort of disability
 - 61 million adults in the United States live with a disability
 - 2 in 5 adults age 65 years and older have a disability
 - 1 in 4 women have a disability.
 - 2 in 5 non-Hispanic American Indians/Alaska Natives have a disability.
 - 1 in 3 adults with disabilities 18 to 44 years do not have a usual health care provider
 - 1 in 3 adults with disabilities 18 to 44 years have an unmet health care need because of cost in the past year
 - 1 in 4 adults with disabilities 45 to 64 years did not have a routine check-up in the past year

SOURCE:

https://www.cdc.gov/ncbddd/disabilityandhealth/documents/disabilities_impacts_all_of_us.pdf

THE MEDICAL MODEL OF DISABILITY

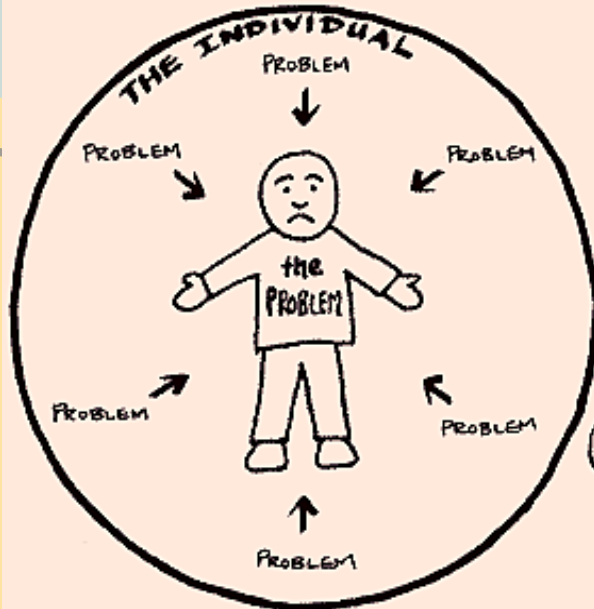
The medical model views disability as resulting from an individual person's physical or mental limitations, and is not connected to the social or geographical environments. The Medical Model focuses on finding a "cure" or making a person more "normal." Being disabled connotes that one is "less abled". This view is increasingly outdated.

THE SOCIAL MODEL OF DISABILITY

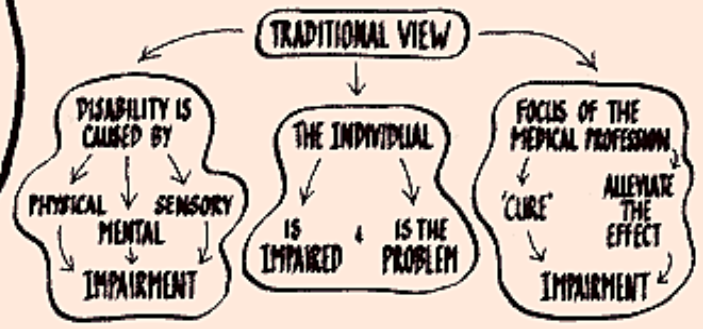
The social model does not pathologize the challenges of disability, and instead give equal attention to what the person is capable of doing and accomplishing. Unlike the medical model, any genetic or biological variations are attributed to the heterogeneity of human life. Further, the attitudes and physical barriers that are imposed by society are blamed for disabling a person from achieving their potential.

THE MEDICAL VS. SOCIAL MODEL OF DISABILITY

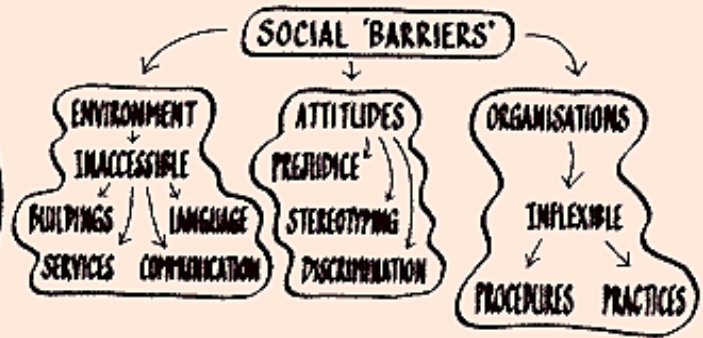
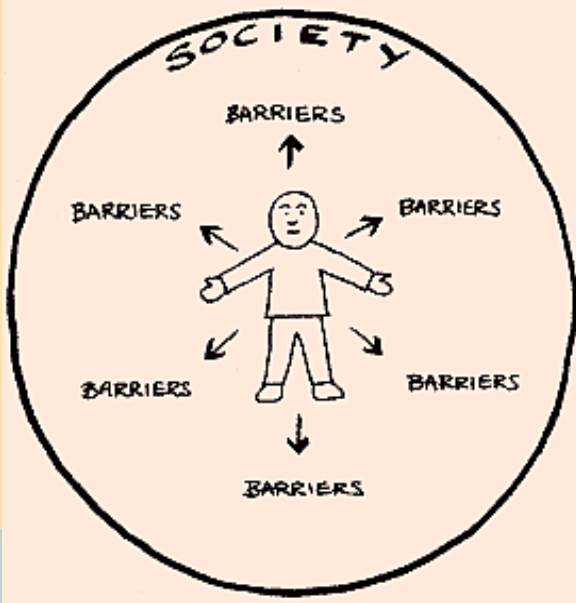
THE MEDICAL MODEL OF DISABILITY



IMPAIRMENTS AND CHRONIC ILLNESS
OFTEN POSE REAL DIFFICULTIES BUT
- THEY ARE NOT THE MAIN PROBLEMS



THE SOCIAL MODEL OF DISABILITY



Source:
<https://www.neurodivercitysg.com/medical-model-vs-social-model.html>



THE HISTORY OF DISABILITY RIGHTS

Historically people with disabilities have struggled for civil rights. During pre-industrialization, people with disabilities were either cared for by their families or abandoned at birth. During the late 1800's there was a push to institutionalize people with disabilities. This is also known as the asylum era where people with disabilities were often abandoned and neglected. During the early and mid 20th century, institutions began to close and disabled people were once again in the care of their families.

THE FOLLOWING ARE IMPORTANT HIGHLIGHTS OF THE DISABILITY RIGHTS MOVEMENT:

Ed Roberts

(born January 23, 1939,—died March 14, 1995) American born disability rights advocate who is highly regarded as the father of the independent-living movement. Having contracted polio at the age of 14, Roberts was paralyzed from the neck down.

PARC v Pennsylvania

In 1972, the United States District Court for the Eastern District of Pennsylvania decided the case of Pennsylvania Association for Retarded Citizens (PARC) v. Commonwealth of Pennsylvania. The court ruled that the state could not deny an individual's right to equal access to education based on an intellectual or developmental disability status.

Mills v. Board of Education (1972) was similar to, and supported and expanded the Pennsylvania case. Mills held that no child could be denied a public education because of "mental, behavioral, physical, or emotional handicaps or deficiencies."

THE HISTORY OF DISABILITY RIGHTS

(CONTINUED)

The 1973 Rehabilitation Act & the 504 Sit-In

The 1973 Rehabilitation Act was written to do two main things: 1) to provide vocational rehabilitation training and support to people with disabilities, to help them better find and retain employment, and crucially 2) to protect people with disabilities from discrimination based on their disability (covered under “Section 504” of the Act). The Rehabilitation Act only protected people with disabilities from discrimination at places that received federal funding. If an organization or company did not receive federal funding, they were still under no legal obligation to not discriminate against people with disabilities. Faced with weakening support of the Rehabilitation Act, disabled advocates staged one of the largest, most impactful protests by disabled people in U.S. history: the 504 Sit-Ins. On April 4, 1977, disabled advocates across the country swarmed into regional HHS offices and refused to leave. The San Francisco protest was led by advocate Judith Heumann, and thanks to pressure from the sit-in and protests in D.C., Secretary Califano signed the Section 504 regulations into law on April 28th, 1977.

WANT TO LEARN MORE ABOUT THE 504 SIT-INS? WATCH THE NETFLIX DOCUMENTARY CRIP CAMP!

Capitol Crawl (March 12, 1990)

The “Capitol Crawl” protest for disability rights on March 12, 1990, was a critical event leading to the passage of the ADA. After months of inaction by Congress; “More than 1,000 protesters came to Washington on that day to urge Congress to approve the law. Calling for immediate action. Then, to symbolize the barriers confronting disabled people, more than 60 activists abandoned their crutches, wheelchairs, powerchairs, and other mobility-assistance devices and began crawling up the 83 stone steps that lead to the Capitol.” (Source: [ShareAmerica](#))



THE HISTORY OF DISABILITY RIGHTS

(CONTINUED)

The Americans with Disabilities Act (ADA) was passed into law July 26, 1990 and protects people with disabilities from discrimination. Disability rights are civil rights. The ADA was modeled after the Civil Rights Act of 1964, which prohibits discrimination on the basis of race, color, religion, sex, or national origin. The ADA is an equal opportunity law for people with disabilities.

Individuals with Disabilities Education Act (IDEA) is a piece of American legislation that ensures students with a disability are provided with a Free Appropriate Public Education (FAPE) that is tailored to their individual needs. IDEA was previously known as the Education for All Handicapped Children Act (EHA) from 1975 to 1990. In 1990, the United States Congress reauthorized EHA and changed the title to IDEA. Overall, the goal of IDEA is to provide children with disabilities the same opportunity for education as those students who do not have a disability. Under the law, students with disabilities have the following rights:

- The right to receive free public education.
- The right to receive an appropriate evaluation in order to determine what supports and services they need.
- The right to be placed in the “least restrictive environment” that will promote their learning.
- The right to have an Individual Education Plan (IEP) which specifies the services and accommodations the student should receive.
- The right for parents to be involved in the process, and for parents to challenge decisions they do not feel meets their child’s needs.

The Olmstead ruling

In 1999, the Supreme Court ruled in the court case *Olmstead v. LC* that under the ADA, disabled people have a right to receive government-funded services in the community rather than in institutions. This was a huge victory for the disability community, as it meant that people with disabilities didn’t have to be contained in institutional settings to receive any state-funded services they needed; they could live their own independent lives in the community instead.

You’ll hear this ruling also referred to as “Money follows the person” (meaning, the government-funding a disabled person receives follows them regardless of where they receive services) and it was a huge boon to the independent living movement.

The ADA Amendment Act

In 2008, Congress passed the ADA Amendments Act of 2008 (ADAAA), which amended the ADA slightly. In the years since the ADA had been passed, court cases had narrowed and restricted the definition of disability under the law, and had made it very difficult for disabled people to win ADA court cases. The intent behind the ADAAA was to reverse these rulings by expanding the definition of what is considered a disability under the ADA, and make it easier to bring lawsuits under the ADA.

WHAT DOES ACCESSIBILITY ACTUALLY MEAN?

- FLEXIBILITY AND CHOICE! NOT EVERY PERSON NEEDS THE SAME TYPE OF ACCOMMODATION AND WHAT WORKS FOR ONE PERSON MAY BE A BARRIER TO ANOTHER.
- CREATING A CULTURE OF INCLUSIVITY SO THAT PEOPLE ARE COMFORTABLE ASKING FOR ACCOMMODATIONS.
- WORKING TO EDUCATE YOURSELF ON DIFFERENT TYPES OF ACCOMMODATIONS
- BEING WILLING TO IMPLEMENT CHANGES FROM THE MICRO TO THE MACRO
- MAKING SPACE FOR ANYONE OF ANY ABILITY TO BE ABLE TO PARTICIPATE IN ANY PART OF YOUR SCHOOL, ORGANIZATION OR FACILITY

UNIVERSAL DESIGN

“Universal Design is the design and composition of an environment so that it can be accessed, understood and used to the greatest extent possible by all people regardless of their age, size, ability, or disability. An environment (or any building, product, or service in that environment) should be designed to meet the needs of all people who wish to use it.

Simply put, universal design is good design.” ~National Disability Authority

CURB CUT EFFECT

“If you build it, they will come.”

Curb cuts are ubiquitous in areas with sidewalk systems. The cut in the curb that allows for wheelchair access, have come to benefit all. Those with strollers, luggage, walkers, skateboards, shopping carts and more access curb cuts making our lives easier. “Access for those denied it is the goal. Access for everyone is the result.” -Learning for Justice

SPOON THEORY

Was created by Christine Miserandino to explain that “the difference between being sick and being healthy is having to make choices or to consciously think about things when the rest of the world doesn’t have to.” In Spoon Theory, Energy is represented by spoons. Normal daily tasks cost spoons- however “Get ready for work” isn’t the task, it’s broken down to each detail. So you lose a spoon for each of the following: “open eyes, get out of bed, pick outfit, put outfit on” etc. Once you’re out, you’re out. Spoon Theory has been adopted by chronic illness/disability communities (“Spoonies”) to provide insight into their daily lives.

WHAT IS ABLEISM?

- ABLEISM IS ANY KIND OF DISCRIMINATION AGAINST THOSE WHO ARE DISABLED PHYSICALLY, MENTALLY, EMOTIONALLY, OR OTHERWISE.

COMMON ABLEIST TROPES

- Disability is not shorthand for evil or villain (Richard III, Tyrion Lannister, Captain Hook)
- Disabled person as inspiration for abled hero (Tiny Tim, almost any human interest story featuring disability).
 - This is often called inspiration porn
 - “Willpower is a cure” (Forrest Gump, Dr. Strangelove, Joe Bucket)
- Fictional disabilities (Kryptonite! Werewolves!)
- Erasing disabilities!
- The erasure of disabled romance, dating and sexuality

COMMUNICATION BILL OF RIGHTS

The graphic consists of a central white box with a red border. At the top, it says "It's my right to ..." followed by a large dashed speech bubble. Surrounding this central box are ten smaller boxes, each with an illustration and a text label. The labels are: "make a choice", "say no", "say what I want", "say what I need", "share my feelings", "to ask for attention", "be heard and responded to", "know what's happening", "have my communication system at all times", "be treated with respect", "be spoken with and not about", and "be a full and equal member of my community".

make a choice

say no

say what I want

say what I need

share my feelings

It's my right to ...

to ask for attention

be heard and responded to

know what's happening

have my communication system at all times

be treated with respect

be spoken with and not about

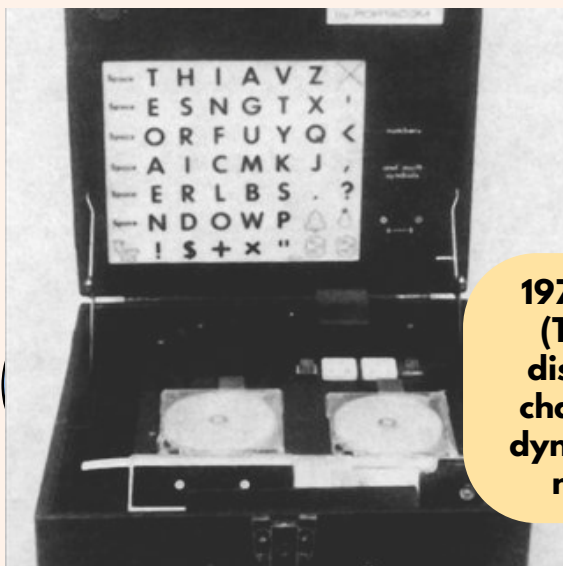
be a full and equal member of my community

AUGMENTATIVE AND ALTERNATIVE COMMUNICATION (AAC) HISTORY

Lucy and Alfonso both rely on AAC devices to communicate. The history of AAC dates back to as early as the 1920's. Now most AAC's are apps that can be used on a tablet, phone or laptop device. AAC's can also be customized using an individual's recorded voice. One can choose a recorded voice to customize their AAC, with companies like Vocal ID. Before technology was so advanced other tools were used to help people communicate.

1920s- The F. Hall Roe's communication board consisted of letters and words printed on Masonite, and it was the first widely available communication aid.

I CAN HEAR PERFECTLY	PLEASE REPEAT AS I TALK (THIS IS HOW I TALK BY SPELLING OUT THE WORDS)	WOULD YOU PLEASE CALL
A AN HE	AM ARE ASK BE BEEN BRING CAN	ABOUT ALL
HER I IT ME	COME COULD DID DO DOES DON'T	AND ALWAYS
MY HIM SHE	DRINK GET GIVE GO HAD HAS HAVE	ALMOST AS
THAT THE THEM	IS KEEP KNOW LET LIKE MAKE MAY	AT BECAUSE
THEY THIS WHOSE	PUT SAY SAID SEE SEEN SEND SHOULD	BUT FOR FROM
WHAT WHEN WHERE	TAKE TELL THINK THOUGHT WANT	HOW IF IN
WHICH WHO WHY	WAS WERE WILL WISH WON'T WOULD -ED	OF ON OR
YOU WE YOUR	-ER -EST -ING -LY -NT -S -TION	TO UP WITH
A B C D E F G		AFTER AGAIN
H I J K L M		ANY EVEN
N O P Q R S T		EVERY HERE
U V W X Y Z		JUST MORE
1 2 3 4 5 6 7		ONLY SO
8 9 10 11 12 30		SOME SOON
		THERE VERY
SUN. MON. TUES.	PLEASE THANK YOU GOING OUT	\$%&*(SHHHH)?
WED. THUR.	MR. MRS. MISS	START OVER
FRI. SAT. BATHROOM	MOTHER DAD DOCTOR	END OF WORD



1970s - The Tufts Interactor Communicator (TIC) used scanning to provide access to display and printers and later introduced changing the scanning letter arrangement dynamically based on the probability of the next letter to be selected while typing.

AUGMENTATIVE AND ALTERNATIVE COMMUNICATION (AAC) HISTORY (CONTINUED)



1973 - "The Talking Brooch," a wearable communication aid, was designed for individuals who could not talk but could type on a keyboard held in the hand.

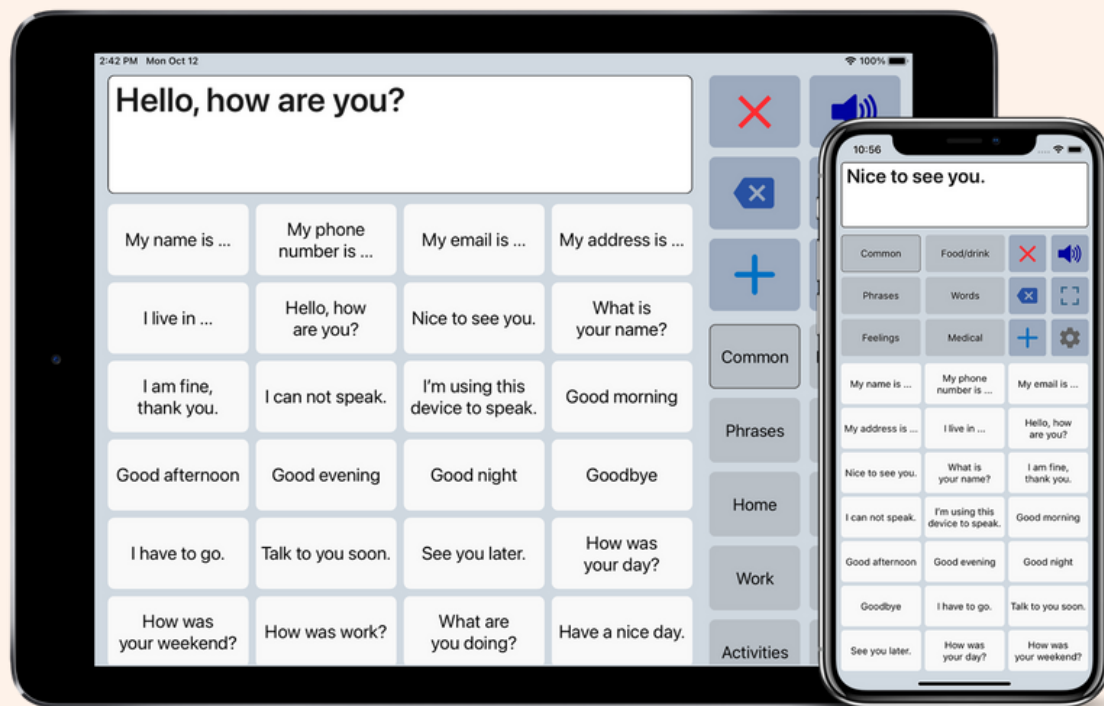
I	me	how?	who?	why?	again	please	thank you	problem	now	bad	good
my/mine	am	to	be	feel	give	listen	happy	sad	tired	okay	cool
it	is are	will	come	hurt	hear	know	that	a	the	and	more
you	can	eat	drink	finish	get	love	make	need	all	at	some
your	do	go	help	open	put	say/talk	see/look	first	then	for of	on
here	have	like	play	read	stop	walk	show	wait min	in	up	off
yes	no/don't	want	take	tell	turn	watch	wear	work	out	down	with

Today- Essentially, a core board is a colorful board with symbols that are fixed in place. This is known as the 'core vocabulary'. In addition, there are several strips attached at the top, containing specific vocabulary, usually organized into categories such as food, toys, places, and people.

AUGMENTATIVE AND ALTERNATIVE COMMUNICATION (AAC) HISTORY (CONTINUED)



Today - Text to speech apps. We now have various apps that help people with aphasia, nonverbal autism, and other speech and language support needs. These provide augmentative and alternative communication that can predict the words you want next.



A HISTORY OF AAC METHODS

BY CAITLIN CAFIERO

Broadly, AAC methods have existed forever. Sign language and gesture are AAC; so are drawing and writing. But usually, when someone says AAC, they're talking about a method that uses a tool or device. The first communication board is usually cited as the F. Hall Roe board (named for its first user), which began to be reproduced and distributed in Minneapolis in the 1920s. However, it's probably more accurate to say that the Roe board was the first to be reproduced. Loved ones and caregivers almost definitely created their own individual versions of boards to communicate with non-speaking people, but on an as-needed basis.

The F. Hall Roe communication board had sentences the user was likely to need ("I can hear perfectly" and the stem "Would you please call") as well as instructions on how to converse with the board user ("Please repeat as I talk- this is how I talk by spelling out the words"). In separate sections, there are common words and word endings as well as the alphabet and numbers, days of the week, etiquette phrases and honorifics, and punctuation in white block letters on a black board. The user could use their finger or a pointer tool to indicate what they wanted their conversational partner to speak aloud, forming words letter-by-letter and sentences word-by-word. Variations on this board that relied on symbols or pictures followed- one, created by Charles Bliss, used a symbol language called Blissymbolics, in which symbols representing basic concepts like feeling, person, and room could be combined to create phrases and sentences. The idea was to create a faster way of communicating by using the symbols as shorthand for concepts rather than spelling out words precisely.

Today, there are several types of communication boards that AAC users might use. Some people use the same pointer or finger to indicate words, as the original Roe users did. On the show *Speechless*, the character JJ Dimeo uses a laser pointer on his glasses to point to words and letters on his communication board. Another system uses a core-fringe vocabulary model- words that a user is likely to use a lot are represented on their main board with a word and picture combination, with icons grouped and color-coded by type. Then more specific vocabulary, such as words relating to transportation or to hygiene, are on strips that a user can flip between. The number of low-tech AAC systems is almost infinite because each system is designed to be highly flexible and tailored to the individual. No two people have identical spoken vocabularies, so why would two AAC users have identical vocabulary access?

A HISTORY OF AAC METHODS

BY CAITLIN CAFIERO (CONTINUED)

Moving away from low-tech interventions towards electronic and digital AAC, the first system is generally considered to be the Patient Operated Selector Mechanism, developed in 1960. The technology boom of the 1960s meant that there were electronic aids being invented all over the world at about the same time. Inventors were pretty quick to create typewriters with display systems, then to create portable systems like the Talking Brooch. These early systems still relied on conversational partners reading what the AAC user was saying, which meant that group conversations or conversations with people who couldn't read were complicated or impossible. In the 1970s, engineers and accessibility advocates began developing AAC devices that would synthesize a voice, which allowed the user to “speak” without the aid of a conversational partner. The early devices were often bulky, heavy, and required a lot of power to run. The challenge became developing systems that could go wherever the user did. At this point, computer development and AAC development became intertwined. Some of the same people who were creating PCs and Macs for home use were also creating software that let AAC users get the same devices as the average consumer and install their own accessibility features. Instead of having to buy slightly updated versions of hardware over and over again, which was prohibitively expensive for most users, they could tweak the code of a software program to create a more flexible and responsive AAC program.

Although there are AAC users today who use devices that are only for their AAC, it's much more common for someone to have an app or a plug-in tool for an off-the-shelves tablet as their voice. In our play, Lucy and Alfonso have iPads that connect to a more powerful speaker. Lucy uses a very basic AAC voice that comes default with her app; Alfonso has a more customized one that sounds less robotic as well as a voice that speaks Spanish. The apps they each use have a keyboard mode that uses predictive text and a button mode with pre-programmed sentences or phrases. They can arrange these modes however they like so that both are displayed at the same time or so that one is accessible by a keyboard shortcut. The predictive text means that words or phrases that they use a lot might be suggested quickly: if Lucy types “S-c-h” her app will be faster to suggest “Schenectady” than “Schubert” because it's a word she uses a lot.

A HISTORY OF AAC METHODS BY CAITLIN CAFIERO (CONTINUED)

One thing that's exciting about AAC apps is just how flexible they are- in addition to being able to program phrases and sentences, you can change the sizes of buttons and the contrast between them, you have the app keep whatever you've typed until you delete it so you can say the same thing over and over for emphasis without retyping, you can even add features that let you play sound effects or songs in your music library from the app. Using AAC does not mean that someone is at a disadvantage when they're communicating. When AAC users have access to the tools they need and have conversational partners who respect their methods of communicating, they have the same capabilities as someone who speaks verbally.

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DISCUSSION QUESTIONS AND ACTIVITIES TO EXPLORE AFTER THE PLAY

1. What is the role of music in the play? Does one need a human voice in order to sing?

ACTIVITY #1- MUSICAL PROJECT USING ASSISTIVE TECHNOLOGY

- How would you cover a song using digitized voices and assistive technology?
 - Be creative and present your song to your classmates. How can you best use the free technology available to create music and cover a popular song that you enjoy?
 - <https://murf.ai/studio> Allows you to create text to speech and add a backing track. Or you can use other apps and get creative!!
 - Some other apps that you can use for free

2. Compare and contrast the ways in which Lucy and Alfonso are able to navigate their disability. What role does income and class play in this ability to access accommodations? How do these differences influence the characters' lifestyles? What aspects of the set design help to clarify these differences?

3. Lucy learns to create boundaries with her mother Connie by observing Alfonso's mother asking for consent before touching him. How important are boundaries and consent between a parent and child? What are some examples of other boundaries that the parents in the play cross that feel inappropriate? Imagine you are close friends with Lucy. How would you advocate for Lucy to her mother?

DISCUSSION QUESTIONS AND ACTIVITIES TO EXPLORE AFTER THE PLAY

4. In what ways does Connie treat Lucy differently than Jackie? What role does Lucy's disability play in this difference? What other differences are there between the sister's lives and the expectations placed on them?


5. The character of the runner in the play offers both Lucy and Alfonso help. What do you think the intentions of the runner were when he asks if they need help? What do you think the impact of his offer had on both Lucy and Alfonso? Why do Lucy and Alfonso respond differently to his offer of help?

ACTIVITY #2 - WRITE A MONOLOGUE

Alfonso, Lucy and Connie all have disabilities that require accommodations. Pick one of the above characters and write a monologue from their perspective about their relationship to their disability. How do they view their disability? Are they accepting of it? Are they able to navigate it? How does the character justify the choices that they make in the play?



GLOSSARY

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- a. Assistive technology (AT)- products, equipment, and systems that enhance learning, working, and daily living for persons with disabilities.**
 - b. Augmentative and Alternative Communication (AAC)- describes alternate methods of communication for those who require support, with systems that rely on body language such as gestures, eye contact, sign language, and more.**
 - c. Ableism- Discrimination against those who are disabled physically, mentally, emotionally, or otherwise**
 - d. Accommodations- Adjustments which can be made to support those who may have alternate needs with regard to living spaces, communication, and other regular functions and activities**
 - e. Accessibility- Measures that support the quality of being easy to approach, reach, enter, speak with, use, or understand**
 - f. Congenital- having a particular trait, disease or disability from birth**
 - g. Degenerative muscular dystrophy- a group of over 30 genetic diseases causing progressive weakness and loss of muscle mass throughout the body. It currently is without a cure but there are ways to interact with the symptoms via therapy and medications.**
 - h. Heterogeneity- the quality or state of being diverse in character or content.**



GLOSSARY

(CONTINUED)

i. Inclusion- the act or practice of including and accommodating people who have historically been excluded (because of their race, gender, sexuality, or ability)

j. Medicaid- Medicaid provides health coverage to millions of Americans, including eligible low-income adults, children, people who are pregnant, elderly adults and people with disabilities.

k. Paraplegia- refers to complete or partial paralysis in both legs and, in some people, parts of the lower abdomen.

l. Quadriplegia- paralysis of all four limbs

m. QLab- powerful macOS software for designing and playing back sound, video, light, and show control cues. It's a flexible, reliable, and user-friendly tool

n. SSI- Supplemental Security Income is a Federal income supplement program which is designed to help aged, blind, and disabled people, who have little or no income

o. SSDI- Social Security Disability Benefits are federally funded and administered by the U.S. Social Security Administration (SSA). Social Security pays disability benefits to you and certain members of your family if you have worked long enough and have a medical condition that prevents you from working for at least 12 months or is expected to end in death.

p. Trope- a common or overused theme or device, cliché

q. Text to speech (TTS) technology- a type of assistive technology that reads digital text aloud. It's sometimes called "read aloud" technology. TTS can take words on a computer or other digital device and convert them into audio.



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12. <https://www.olmsteadrights.org/about-olmstead/> Olmstead Rights: “OLMSTEAD V. LC: HISTORY AND CURRENT STATUS”

13. <http://universaldesign.ie/> National Disability Authority: 2022, “The Centre for Excellence in Universal Design”

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YOUTUBE VIDEOS

TO SHARE WITH YOUR CLASS

- a. <https://youtu.be/kmAfpmGO7DU> The Social Model of Disability | NDACA
Jul 11, 2019 NDACA is the National Disability Arts Collection and Archive; a one-of-a-kind archive preserving the unique story of the Disability Arts Movement.
These four animations were produced in collaboration with Disability History Month.
- b. https://youtu.be/_loi7COpA7A Deaf History Month: Martha's Vineyard
Watch this "Journeys on the Deaf Path" video to learn about the history of deafness on Martha's Vineyard.
- c. <https://youtu.be/akGYugciSVw> Sexuality and Disability: Forging Identity in a World that Leaves You Out | Gaelynn Lea | TedX Yale
Jan 18, 2017 Gaelynn Lea felt left out of mainstream dating and beauty culture due to her physical disability. In her talk, she recounts the epiphany that empowered her to pursue life, love, and a musical career on her own terms.
- d. <https://youtu.be/qThC79iYs1U> Jennifer Keelan Video, Capitol Crawl
Apr 23, 2017 Part of school presentations for Arlene On the Scene and Arlene the Rebel Queen. ArleneOnTheScene.com
- e. <https://youtu.be/uJr4wGcLNsA> TED.com: Our fight for disability rights -- and why we're not done yet | Judith Heumann
Apr 24, 2018 Four decades ago, Judith Heumann helped to lead a groundbreaking protest called the Section 504 sit-in -- in which disabled-rights activists occupied a federal building for almost a month, demanding greater accessibility for all. In this personal, inspiring talk, Heumann tells the stories behind the protest -- and reminds us that, 40 years on, there's still work left to do.