



ABIOS

Acquired Brain Injury Outreach Service

FACTSHEET: Communication

Audience: Person with an ABI

For further information contact the
Acquired Brain Injury Outreach Service (ABIOS)

Ph: (07) 3176 9506

Email: abios@health.qld.gov.au

Augmentative and Alternative Communication (AAC)

“Augmentative and Alternative Communication (AAC) is any type of **communication strategy** for people with a range of conditions who have significant difficulties speaking”.

(Speech Pathology Australia)

AAC involves **assisting or replacing** speech to maximise effective communication (expression and understanding). It may be used **temporarily or permanently**.

There are two main types of AAC:

1. Unaided AAC:

Communication techniques that do not require an additional item or aid. The person uses their own body to express themselves.

Examples of unaided AAC include:

- eye contact
- facial expression
- gestures
- manual signing

2. Aided AAC:

Communication techniques that use an additional item or aid to assist communication.

Examples of aided AAC include:

- high technology systems (iPad, tablet, speech generating device)
- low technology systems (real objects, communication books, pen & paper, pictures, and photos)



Why might someone need to use AAC?

- If someone is not able speak or express their needs or opinions adequately, they may be able to use a variety of AAC systems to get their message across (E.g. unaided and aided)
- If someone finds it difficult to understand what is being said, AAC can add more visual information to aid understanding.

How is an AAC system developed?

Working out the best AAC systems is a detailed process, so health professionals often work together:

1. The Speech Pathologist is the key health professional and will help work out the best communication approach (understanding & expressing language)
2. An Occupational Therapist will focus on how you can access (use) a system
3. A Physiotherapist may provide information regarding seating and positioning.



Following an assessment, there is often a trial period of the AAC options. This may take place across different settings E.g. at home, in the workplace, or in the community. A combination of AAC approaches may be used according to the communication environment and the communication partner(s) required.

Main points to consider with AAC:

- Developing an AAC system is a comprehensive process that often involves a number of specialist health professionals
- It is a client-centred process - The person with the ABI plays a key role in the AAC selection
- AAC does not replace speech or language - it is an approach that supports spoken language.
- AAC systems and strategies can help a person to understand what others are saying
- A person may need a combination of AAC systems to communicate
- AAC systems grow with the person. They should be updated regularly and contain current information
- The success of AAC relies on the support of a person's communication partners (family, support workers) and their training