



AAC provision for children and young people in England

- 40 - 60% of people with learning disabilities also have communication difficulties. This means they are likely users of low tech AAC such as signs and symbols (*Mencap*).
- Landmark international research in 1999 indicated that 0.4 -0.6% of the population need AAC (*Augmentative Communication News*)
- 0.05% of children and young people in the UK need high technology AAC. This means aids that enable people to make choices and create messages using pictures, symbols, words or letters that can be linked to an electronic voice. That's an estimated 6,200 children and young people in England.
- The annual cost of providing communication aids to every child or young person in England who needs one is in the order of £6.5 million. The benefits can be huge and result in an increase in the numbers of economically productive adults.
- If even one in ten children provided with aids and associated services were as a result able to enter permanent employment, this would realise estimated benefits of £310m to the economy over those individuals' working lives.
- International research has indicated that nearly one third of all AAC equipment is abandoned if there is inadequate expertise to assess and identify the right equipment, or insufficient support available in its use¹.
- Recent research in one local area, shows that numbers of young people aged 15-19 with severe or complex needs increased by 70% over the decade 1998-2008.²
- The 2008 Bercow Report highlighted that 'children and young people who require augmentative and alternative communication aids (AAC) face a particular struggle to have their needs met under the current commissioning arrangements'. The review found no consistent system (locally, regionally or nationally) for ensuring that those who need communication aids receive them.

Key findings from Jean Gross, Communication Champion

- One in five (22%) of the areas visited did not have in their area a speech and language therapist with specialist expertise in AAC, or had a specialist but without sufficient time allocated to assess and support AAC users.
- Where a specialist speech and language therapist existed, the post had in one instance been under threat because of local need for efficiency savings, and was felt likely to be under threat in several other speech and language therapy services.
- Speech and language therapists, whose advice is central to appropriate provision of AAC, typically receive 6-10 hours of relevant training (for adults and children) in their four-year degree course.
- 27% of the speech and language therapy managers interviewed reported problems with securing funding for aids, once an assessment had recommended that one be supplied. In these areas, multiple applications to charities often had to be made by professionals, or parents had to fundraise to buy an aid themselves.

The full report from Jean Gross 'Augmentative and alternative communication: a report on provision for children and young people in England, September 2010' can be found at <http://www.thecommunicationcouncil.org/aac/>

¹ Blackstone, S. (1992) Re-thinking the basics. *Augmentative Communication News*, 5, No.3

² Parrott, R. Wolstenhome, J. and Tilley, N. (2008) Changes in demography and demand for services from people with complex needs and profound multiple learning disabilities. *Tizard Learning Disability Review* 13, 3 26-34