



AAC Myths

Myth 1: Introducing AAC to my child will stop their speech development.

False. The current evidence shows that AAC does not reduce or stop speech development. AAC is sometimes introduced with children who, due to physical or intellectual difficulties, may never verbally communicate and with these children it is used to give them a means of communication. With children who don't have these limitations, it can help provide increased exposure to language, which can in turn improve speech development.

Myth 2: My child must demonstrate certain skills before they can use AAC.

False. AAC is used to support children to learn to communicate. When determining the right type of AAC we consider a child's frustration, engagement, and current means of communication but these do not limit a child's ability to use AAC. AAC is created to support a higher level of language functioning than the child can currently produce. Children are not required to understand cause and effect or have a high cognitive level, as the use of AAC can support improved cognition, cause and effect, as well as, of course, language levels. There are no skills that are required to use AAC, according to current research.

Myth 3: AAC is expensive.

Partially false. AAC has low tech and high tech options. These options differ in price quite significantly and vary from simple pictures that cost nothing to more expensive speech output devices. Typically, children use multiple different types of AAC to support them in various environments (e.g., low tech visual schedules, and high-tech speech generating device). Devices are typically trialled to determine their suitability to each child's communication. Price is discussed and funding options are explored to support the family to acquire the required AAC option(s).

Myth 4: People only use AAC because they aren't smart.

Absolutely false. Some highly intelligent people use AAC to communicate very complex ideas. Some AAC users have completed university degrees and written books. There is a wide range of intellectual abilities in people who use AAC. AAC users can demonstrate average receptive language (understanding) abilities but demonstrate difficulties producing speech and language. Some people have physical disabilities that make speech extremely difficult (e.g. dyspraxia or Cerebral Palsy) and therefore, they need an option that can help make communication possible. Other people may have intellectual delays who learn to use AAC as a means of finding a voice to communicate.

Myth 5: AAC is implemented only by Speech Pathologists.

False. AAC is a versatile means of communication which is supported and used within many environments. Communication requires the support of Speech Pathologists, other health professionals, families, carers, and friends to plan and implement AAC options. Typically, a multi-disciplinary approach is required to implement AAC, this team incorporates the AAC user, their family, teachers, physiotherapists, occupational therapist and speech pathologist.