

CAF/25/NM/28 - Co-designing a psychosocial intervention to support adults with acquired communication difficulties to use Augmentative and Alternative Communication (AAC)

Communication impacts all aspects of life.

Up to 14 million people in the UK will experience communication difficulty at some point in their lives which, if not properly supported, can lead to loss of independence, greater reliance on health and social care, barriers to employment and mental health challenges.

Adults may acquire communication difficulties suddenly due to stroke, brain injury or cancer or because of degenerative conditions like motor neurone disease, multiple sclerosis or dementia.

People can be supported to maintain or regain their ability to communicate—and, by extension, their involvement in everyday life —through using Augmentative and Alternative Communication (AAC).

AAC refers to a range of strategies, tools, and technologies that help people communicate and connect with others when speech is not possible. Examples of AAC include signing, pointing to pictures on a chart, and using computer-based voice-output systems.

Effective AAC use helps individuals maintain or regain family and work roles, make their own decisions, and access greater life opportunities. Research has shown that using AAC improves quality of life, reduces costs associated with health and care and enhances relationships with friends and family through positively impacting wellbeing.

Despite benefits, it is known that many people stop using AAC after it is introduced. This often happens because they need more than just the tools — they need help learning how to integrate AAC into their everyday interactions. Speech and language therapists (SLTs), who provide AAC support in the NHS, often feel unsure about how to help people use AAC beyond just teaching them how to operate it.

There isn't enough research on how to help adults use AAC. We don't know enough about how psychosocial factors impact AAC use. Psychosocial means how a person's feelings and thoughts (mental health) are connected to their relationships and the world around them (social interactions). There are no interventions to help SLTs guide people in exploring their thoughts and feelings about using AAC, or how to manage using AAC in their relationships and social life.

This project will address this knowledge gap by developing a psychosocial intervention that SLTs can use to help adults with acquired communication difficulties use AAC more effectively.

This project uses a co-design approach to ensure that the views of AAC users, their families, and SLTs are included in intervention design, making sure it is practical and easy to use in real-world practice.

Task 1: Explore, Understand and Build Knowledge

This project will work together with a group of AAC users and communication partners to create a description of the intervention. This is called a programme theory, and it will help everyone understand the purpose of the intervention and how it might work. This will be based on looking at psychosocial research from other areas and talking to SLTs about their AAC practice.

Task 2: Intervention Co-Design

AAC users and their communication partners will work together to create ideas and design how the intervention will look and work in real life. A therapy manual and resources will be developed.

Task 3: Looking towards Evaluation

A plan for testing the intervention in future research will be made. It will explain how researchers can try out the intervention to make sure it works in practice and has positive effects for AAC Users.

The project's findings will be shared in academic journals and through presentations at conferences, clinical networks, and dedicated sharing events. AAC Users, communication partners and SLTs will be actively involved in sharing findings, ensuring a direct link between the project and impact on practice. The findings will be made available in accessible, easy-to-read formats to ensure broad reach.