

Stuttering

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Stuttering is a disorder in which affects communication as a result of the flow of speech being broken by repetitions (li-li-like this), prolongations (lllllike this), or abnormal stoppages (no sound) of sounds and syllables. There may also be unusual facial and body movements associated with the effort to speak.

The exact cause of stuttering is still unknown however, although stuttering is not caused by anxiety or emotional trauma, family dynamics can contribute to stuttering. Children who stutter tend to do so more when they are tired, upset, excited and nervous.

Approximately 20 percent of all children go through a stage of development during which they encounter disfluencies severe enough to be a concern to their parents. The best prevention tool is early intervention.

Today there are a number of treatments available for stuttering. These programs can be most effective in treating preschool children. Research suggests that treatment is ultimately quicker and easier in the preschool years compared to treatment of school-aged children and adults. One effective program exists for preschool-aged children who stutter: it's called the [Lidcombe Program](#). It is best to consult a speech pathologist for advice as soon as possible after your child begins to stutter.

Developmental Areas

Children may display some of the following characteristics

Social and Emotional Development

- May become easily upset and frustrated with him/herself or others
- May exhibit inappropriate behaviours that result in negative attention from peers
- As a result of negative interactions with others, child may develop a low self esteem
- May exhibit inappropriate behaviours in order to gain attention
- May be withdrawn and go unnoticed

Language and Communication Development

- May require professional speech and language evaluation
- May also exhibit expressive language problems
- May lack communicative control

Cognitive Development

- May have difficulties concentrating and paying attention

Stuttering Inclusion Strategies

Each child diagnosed with Stuttering will be different and individual. It is important to gain information from the parents as to what characteristics of Stuttering their child displays. It is important to work closely with the parents as well as any additional support specialists e.g. therapists who may be involved with the child. It is also important to gain an understanding from the parent as to what is the most important aspect of their child attending your service. What is it that parents hope to gain from using your service? The following inclusion strategies are just some examples which may be applied to support the inclusion process. This list is only the start and it is dependant on a variety of factors such as environment, length of time child is in care, child's interest, likes, dislikes and skills already achieved. The strategies are divided into developmental areas however some strategies overlap and assist in a variety of developmental areas.

Social and Emotional Development

- Support children's social development by recognising and positively reinforcing their successful social interactions.
- Provide picture cues to prompt children's language e.g. sharing, listening, keeping hands and feet to themselves etc.
- Focus on what the child can do and provide opportunities for the child to engage in experiences that they are really interested in. This helps to build their confidence and self esteem.
- Maintain a calm environment that promotes emotional security through consistency.
- Planned relaxation & quiet activities can assist children in maintaining a calm state.

Physical Development

- Provide opportunities for children to challenge themselves and expend excess energy.
- Use strategies such as playing soft music or redirecting to a quiet activity when the child becomes over-active.

Language and Communication Development

- Provide a plan for the daily events/routine and discuss this with the child so they know what comes next e.g. morning greeting, outdoor play, morning tea, music, indoor play, lunch, rest etc.
- Provide pictorial cues to accompany the routine so that children can anticipate what comes next. Establish a routine for transitions e.g. when indoor play is about to finish, give the children a warning by playing music for them to tidy up to.
- Use clear and simple instructions, ensuring instructions have been understood before giving more.
- Refrain from criticizing or reacting negatively to the child's speech.
- Avoid punishing the child for any disfluency.
- Avoid asking the child to repeat stuttered words until they are spoken fluently.
- Resist encouraging the child to perform verbally for people.
- Listen attentively to the child when he or she speaks.
- Speak slowly and in a relaxed manner.
- Wait for the child to say the intended word. Don't try to complete the child's thoughts.

Cognitive Development

- Set achievable goals and tasks for the child that they are capable of achieving.
- Ensure experiences provided are within the child's capacity for maintaining attention.
- Remind children of routines regularly.
- Give instructions that the child is able to understand.
- Reinforce learning with concrete representation.
- Avoid tasks that frustrate the child.

References

National Institute on Deafness and Other Communication Disorders

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1991-2007 Stuttering Foundation of America.

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