

Stuttering/Fluency Therapy Activities

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The Speech Therapy Solution

thespeechtherapysolution.speechandlanguagekids.com

Symptoms:

- Signs and symptoms of stuttering include primary behaviors, such as
 - monosyllabic whole-word repetitions (e.g., "Why-why-why did he go there?"),
 - part-word or sound/syllable repetitions,
 - prolongations of sounds,
 - audible or silent blocking (filled or unfilled pauses in speech),
 - words produced with an excess of physical tension or struggle.

Source:

[http://www.asha.org/PRPSpecificTopic.aspx?folderid=8589935336§ion=Signs and Symptoms](http://www.asha.org/PRPSpecificTopic.aspx?folderid=8589935336§ion=Signs%20and%20Symptoms)

Symptoms:

- Secondary, avoidance, or accessory behaviors that may impact overall communication include
 - distracting sounds (e.g., throat clearing, insertion of unintended sound);
 - facial grimaces (e.g., eye blinking, jaw tightening);
 - head movements (e.g., head nodding);
 - movements of the extremities (e.g., leg tapping, fist clenching);
 - sound or word avoidances (e.g., word substitution, insertion of unnecessary words, circumlocution);
 - reduced verbal output due to speaking avoidance;
 - avoidance of social situations;
 - fillers to mask moments of stuttering.

Source:

<http://www.asha.org/PRPSpecificTopic.aspx?folderid=8589935336§ion=Signs and Symptoms>

Risk Factors for Persistent Stuttering

- sex of child, as boys are at higher risk for persistence of stuttering than girls (Craig et al., 2002; Yairi & Ambrose, 2013);
- family history of persistent stuttering (Kraft & Yairi, 2011);
- time duration since onset of greater than 6 to 12 months or no improvement over several months (Yairi & Ambrose, 2005);
- age of onset-children who start stuttering at age 3½ or later (Yairi & Ambrose, 2005);
- co-occurring speech and language impairment (Ntourou, et al., 2011; Yaruss et al., 1998).

Source:

<http://www.asha.org/PRPSpecificTopic.aspx?folderid=8589935336§ion=Causes>

Treatment Options: Preschoolers

- **Indirect**

- Counseling families about how to make changes in their own speech and how to make changes in their child's environment.
- These modifications are used to facilitate speech fluency and may include reducing communication rate, using indirect prompts rather than direct questions, and recasting/rephrasing to model fluent speech (Millard, Nicholas, & Cook, 2008; Yaruss et al., 2006).

- **Direct**

- Changing the child's speech in order to facilitate fluency.
- May include speech modification and stuttering modification strategies to reduce disfluency rate, physical tension, and secondary behaviors (Hill, 2003).
- Direct treatment also can target children's communication attitudes (Yaruss et al., 2006).

- **Operant**

- Incorporates principles of operant conditioning and uses a response contingency to reinforce the child for fluent speech and redirect disfluent speech (the child is periodically asked for correction).
- Parents are trained to provide verbal contingencies based on whether a child's speech is fluent or stuttered (Jones et al., 2005; Onslow, Packman, & Harrison, 2003).
- Positive reinforcement is used to increase or strengthen the response of fluency (the desired behavior).

Source:

<http://www.asha.org/PRPSpecificTopic.aspx?folderid=8589935336§ion=Treatment>

Treatment: School-Aged

- Goals to focus on increasing fluency as well as other goals, such as
 - "increasing acceptance of stuttering and of being a person who stutters
 - reducing secondary behaviors
 - minimizing avoidance
 - improving communication skills
 - increasing self-confidence
 - managing bullying effectively
 - minimizing the adverse impact of stuttering on the child's life" (Yaruss, Coleman, & Quesal, 2012, p. 537).

Source:

<http://www.asha.org/PRPSpecificTopic.aspx?folderid=8589935336§ion=Treatment>

Treatment Options for School-Aged

- **Speech Modification Strategies**

- (including fluency shaping) strategies (Bothe, 2002; Guitar, 1982, 2013) include a variety of techniques that aim to make changes to the timing and tension of speech production or that alter the timing of pauses between syllables and words. These modifications are used regardless of whether a particular word is expected to be produced fluently. Strategies associated with speech modification include
 - rate control,
 - continuous phonation,
 - prolonged syllables,
 - easy onset,
 - light articulatory contact.

Source:

<http://www.asha.org/PRPSpecificTopic.aspx?folderid=8589935336§ion=Treatment>

Treatment Options for School-Aged

- **Stuttering Modification Strategies (Reducing Physical Tension/Struggle)**
 - Stuttering modification strategies, originated by Van Riper (1973), aim to reduce associated physical tension and struggle by helping children to identify core stuttering behaviors, recognize physical concomitant behaviors, locate the point of physical tension and struggle during moments of disfluency, and ultimately reduce that physical tension.
 - Preparatory set (before stutter)
 - Pull-out (during stutter)
 - Cancellation (after a stutter)

Source:

<http://www.asha.org/PRPSpecificTopic.aspx?folderid=8589935336§ion=Treatment>

Reducing Negative Reactions

- **Desensitization:** systematically desensitize themselves to their fears about speaking and stuttering by facing those fears in structured, supportive environments. One example of a desensitization activity is the use of voluntary stuttering in different (and increasingly more difficult) situations where the client might fear the occurrence of real moments of stuttering (e.g., Reardon-Reeves & Yaruss, 2013; Sheehan, 1970).
- **Cognitive Restructuring:** change the way they think about themselves and their speaking situations; they learn to identify the thoughts underlying their negative attitudes and emotional reactions and examine the link between their thoughts, attitudes, and emotional reactions and their speech. (Murphy et al., 2007a).
- **Self-Disclosure:** communicating to others information that reveals one's identity as a person who stutters. Can involve revealing that identity directly, talking about stuttering or treatment of stuttering, explaining or interpreting symptoms of stuttering, providing advice on how to respond to someone who stutters, or, in the case of school-age children, advertising through a classroom presentation with the guidance of the SLP or classroom teacher (Murphy et al., 2007b).
- **Support:** Connecting the child with others who stutter to reduce feelings of isolation.

Source:

<http://www.asha.org/PRPSpecificTopic.aspx?folderid=8589935336§ion=Treatment>

Activities: Indirect for Preschoolers

- Modeling slow, smooth speech during fun activities with the child and explaining to parents that they should do that at home as well
- During activities with the child, model indirect prompting instead of direct questions and explain to parents how to do that at home (ex: “I wonder what you had for lunch”)
- Repeat the child’s dysfluencies more fluently and show parents how to do this at home (ex: if the child says “Wh-, wh-, where is the cat?”, you slowly say “Where is the cat? I’m not sure!”)

Activities: Direct for Preschoolers

- Fluency Shaping:
 - Model slow vs. fast speech and have the child practice both when saying sentences
 - [Speeding Tickets for Stuttering](#) (Click to Open)
 - Model bumpy vs. smooth speech and have the child first identify and then practice both ways:
 - [Bumpy Vs. Smooth Worksheet](#) (Click to Open)
- Stuttering Modification (do fluency shaping first):
 - Teach pull-outs and practice them in controlled situations (p-p-plllease)
 - Teach cancellations and practice them in controlled situations (p-p-p <pause and relax> please)

Activities: Operant/Response Contingency

- **Reinforce fluent (non-stuttered) speech**
 - While playing with the child, comment on utterances that the child says that do not have any stutters. You can say “oh I like how smooth that was” or “you say that without any bumps!”.
 - If the child stutters frequently, try an activity that requires the child to use shorter utterances. For example, you could play a game that requires the child to say a short sentence, like “Go Fish” (ex: “Do you have a ball?”). If the child still stutters on these, back up to even shorter sentences, like having the child use one word to name an object in a picture. Then, praise the fluent speech as above.
 - If you need to shorten the utterance length down to have stutter-free speech, gradually build the utterance length back up by choosing slightly more demanding tasks.
- **Give direct corrective feedback for stuttering**
 - As soon as the child begins to stutter, corrective feedback should be given. The research has shown that many different types of corrective feedback have worked so it doesn’t much matter what it is. One study found that turning off the lights over a puppet that the child was talking to was effective. Here are some ways that Bothe and Ingham suggest you can try:
 - Say, “stop”
 - Say, “that was bumpy, try it again”
 - Say, “oops, hold on”
 - Say their name as a reminder
 - Model the sentence without stutters
 - Hold up a hand and raise an eyebrow
- If the child is stuttering so much that you would be doing this kind of correcting constantly, try choosing just the most severe stutters or just some of them. You can also try choosing activities that require a shorter utterance length as described above.

Source: <http://www.asha.org/Events/convention/handouts/2010/1528-Bothe-Anne/>

Activities: School-Aged (Fluency Shaping)

- Discuss how the speech mechanism works first
- Have the child practice talking in one of the following ways. Practice one type of speech per day so you don't overwhelm them
 - Model slow vs. fast speech and have the child practice both when saying sentences
 - [Speeding Tickets for Stuttering \(Click to Open\)](#)
 - Practice Continuous Phonation to produce smooth speech
 - Have the child practice saying sentences while holding the vowels out longer
 - Teach easy-onset (like the yawn-sigh) to ease into words. Practice this with single words and then with more complex chunks
 - Talk about tapping the articulators lightly and have the child practice speaking like this
- When the child is able to do these, start having the child use them during conversations with you in the speech room

Activities: School-Aged (Stuttering Modification)

- Practice the following techniques on controlled, pre-planned stutters. Start with single words and work your way up to longer utterances:
 - Preparatory Set: Ease into a word that you think you might stutter on by slightly elongating the first sound, using easy onset, or using light articulatory touches
 - Pull-Out: In the middle of a stutter, stretch out the sound you're stuck on, relax, and ease on through the word
 - Cancellation: Stop the stuttered word entirely, pause and relax any tension, and say the word over using easy onset or light articulatory touches

Activities: School-Aged (Desensitization)

- Identify the types of stuttering that the student uses
- Have the child practice those stutters in the speech therapy room (pseudo-stutterer)
- Gradually increase the anxiety level of the speaking situations:
 - Bring in new people into the room/activity
 - Move your conversations to more stressful rooms in the building
 - Have the child pseudo-stutter when talking to others around the school (go for a walk)
 - ...when talking to friends at school
 - ...when answering a question in class
 - ...when giving a presentation at school

Activities: School-Aged (Cognitive Restructuring)

- Help the child explore his feelings and emotions about stuttering:
 - [Exploring Negative Emotions about Stuttering \(Click to Open\)](#)
- At first, acknowledge all feelings as legitimate and OK
- Then, identify to yourself any misconceptions or negative reactions that are impacting the child's ability to speak fluently
- Address each negative thought/reaction by helping the child restructure or get better perspective on the issue
 - Examples:
 - If the child thinks he stutters because he's dumb, explore the research on the causes of stuttering
 - If the child thinks that his friends hate talking to him because of his stutter, help him interview his friends about his stuttering
 - If the child thinks that he will never be able to hold a job because of his stutter, help him interview adults with stutters who have awesome jobs

Activities: School-Aged (Self-Disclosure)

- Help the child prepare several different ways to self-disclose his stuttering to others. Create a notebook or resource he can refer back to when needed.
 - Presentation that he could give to his class (if he wanted to)
 - Information sheet/handout that he can give to new teachers with a few talking points that he can bring up with them
 - A short explanation that he can memorize and tell to new peers to talk about his stuttering
 - Responses to common questions that he gets about his stuttering
 - Links that he can save on his phone to show peers great information on stuttering or examples of famous people stuttering

Activities: School-Aged (Support and Counseling)

- Connect students who stutter with other students who stutter
- Allow them to ask each other about common problems they face
- Pose prompts to the group that will open discussions about the difficulties associated with stuttering
- Bring in counselors or other professionals to talk to the group about big issues, like bullying (or whatever the students are interested in)

An Additional Resource:

Speak Freely: Essential Speech Skills for School-Age Children who Stutter

- Provides activity sheets to help children practice the fluency-shaping and stuttering modification techniques
- <http://speakfreelypublications.com/ess-sa-student-workbook/>

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- Let me know if you are outside the US or are not a certified member of ASHA (you'll get a different certificate)

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