



Preschool Stuttering: Parent Information Handbook

What is stuttering?

Stuttering is a communication disorder characterized by disruptions in the forward flow of speech. **Examples:**

- Repetitions of words or parts of words (e.g. c-c-c-can I have juice?)
- Stretching or prolongations of sounds (e.g. wwwwhy can't I have juice?)
- Blocks where there is no airflow or voice for a moment (e.g. can I have ____juice?)

Stuttering may be accompanied by physical tension or struggle as if the child needs to "push" the words out. Some children try to avoid stuttering by talking less or choosing different words. Some children try to get "stuck" words out by waving, stomping, shouting, touching their mouth, or whispering. Stuttering is highly variable. Sometimes a child will stutter a lot and at other times very little. Stuttering can also be cyclical; it can be quite severe for a period of time and then seem to disappear for weeks before coming back again.

How do you know if your child is really stuttering?

All children are disfluent sometimes. It is often difficult to tell the difference between normal disfluencies and true stuttering. The best way to know if your child is stuttering is to consult with a speech-language pathologist, but here are some general guidelines:

Normal Disfluencies

Normal disfluencies are easy and free of tension. They give us the sense that the child is thinking or figuring out his idea or sentence. They usually only have only 2-4 units.

Examples:

- Insertion of um/well/like ("I want the um um um bicycle")
- Revision of a phrase ("You know what...you know who I saw today?")
- Repetition of a phrase ("Can I-can I-can I have some juice?")
- Easy repetitions of a word or syllable ("We went to to to the pool be-because it's hot")

Normal disfluencies are not rushed, forceful or rapid. They don't change in loudness, rhythm or pitch. Part-word repetitions can be normal if they happen less often than every 10 sentences, are loose and easy and don't consistently exceed three units. Normal disfluencies tend to come and go. They are usually signs that a child is learning to use language in new ways.

True Stuttering

True stuttering is more likely to be tense or rushed. Stuttered disfluencies give us the sense the speech is sticky or stuck. They are more likely to cause a word to be broken up.

Examples:

- Tense or irregular whole word repetitions ("I-I-I-I-I want the blue one")
- Tense or rushed part-word repetitions, especially with a change in rate/loudness/pitch or exceeding four units (e.g. "I li-li-li-li-li-like going to the park")
- Prolongation or stretching of a sound in a word ("wwwwhen is it my turn")
- Blocks with no airflow/voice ("Can I go--outside?")

If your child stutters on more than 10% of his sentences, stutters with effort and tension, or avoids stuttering by changing words and using extra sounds to get started, he will benefit from treatment with a speech-language pathologist for stuttering. Complete blocks, increased consistency of stuttering and frustration are signs that the problem may be more severe.

Will my child outgrow stuttering without treatment?

About 5% of children begin to stutter, usually between 2-4 years of age. Research shows that about 75% of these children will grow out of stuttering on their own within 12-24 months. Severity of the stutter does not seem to predict recovery. It is not possible to know for sure which children will recover on their own and which will require therapy, but a child is more likely to outgrow stuttering naturally if:

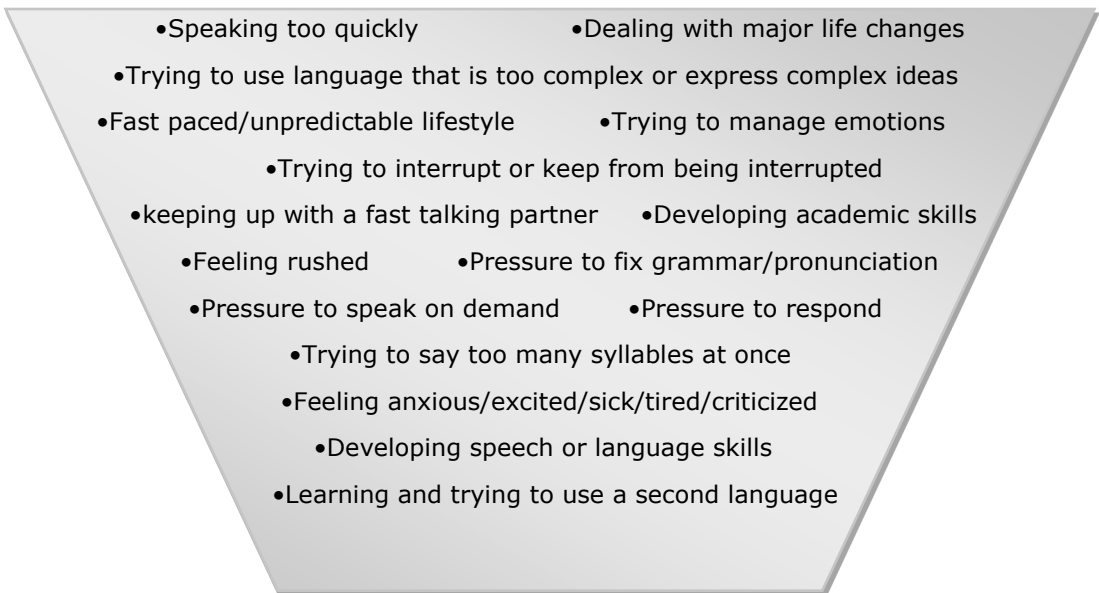
- **There is no family history.** There is evidence that the risk of a child continuing to stutter increases if they have a family member who has persistent stuttering.
- **The stuttering started early.** Children who stutter before age 3 1/2 are more likely to outgrow stuttering.
- **The stuttering has lasted less than six months.** If your child has been stuttering longer than six months, he may be less likely to outgrow it on his own.
- **She is a girl.** Especially within the first six months, girls are more likely to outgrow stuttering.
- **Other speech and language skills are normal.** A child who speaks with few speech errors is more likely to outgrow stuttering. Recent research shows that children who have advanced language skills and stutter are at a higher risk for persistent stuttering.

What causes stuttering?

Current research indicates that there is a *genetic vulnerability* for stuttering. Whether stuttering develops, the severity, and how long it lasts depends on a number of factors including the child's motor skills, language skills, temperament and reactions to his/her environment. When stuttering emerges in early childhood, it is a sign that the neurological pathways for speech are not being laid down correctly. This is why early intervention is preferred. Stuttering is not learned from others, parents do not cause stuttering and it is not a sign of a psychological problem.

Why does my child stutter more at some times and less at others?

Stuttering seems to be affected by a number of demands. Each child has a certain capacity to handle demands of communication—this capacity can be represented by a “bucket”. Each demand adds a little more to the child's bucket. When the bucket gets too full, stuttering happens. Our job is to reduce whatever demands we can in early stuttering intervention. Here are some demands that might fill up your child's bucket:

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- Speaking too quickly
 - Dealing with major life changes
 - Trying to use language that is too complex or express complex ideas
 - Fast paced/unpredictable lifestyle
 - Trying to manage emotions
 - Trying to interrupt or keep from being interrupted
 - keeping up with a fast talking partner
 - Developing academic skills
 - Feeling rushed
 - Pressure to fix grammar/pronunciation
 - Pressure to speak on demand
 - Pressure to respond
 - Trying to say too many syllables at once
 - Feeling anxious/excited/sick/tired/criticized
 - Developing speech or language skills
 - Learning and trying to use a second language

STRATEGIES THAT CAN HELP YOUR CHILD BE MORE FLUENT

It is important to remember that parents do not cause stuttering, however there are some strategies that parents can use to help children speak more fluently. When we notice our child stuttering, it is natural to feel the urge to jump in and make it stop, but the best thing to do is to wait, listen and make talking easy for your child. Here are some strategies:

1. Be Patient.

Listen calmly and patiently and give your child time. Be face-to-face and on his level when possible. Avoid interrupting your child in the middle of his thought or filling in words. We want children to know that we are confident in his ability to speak for himself. Avoid instructions like “slow down”, “stop and think”, or “start again”. These instructions may seem like we are impatient with stuttering. Listening patiently lets your child know that we value what he says over how he says it.

2. Go Slow.

Children tend to be more disfluent when people around them talk more quickly. It is NOT generally helpful to TELL children to slow down, but if we slow our own speech, most children will naturally become more fluent. This is because they feel less rushed. Try to use slow and relaxed speech. Don't speak so slowly that it sounds abnormal, but keep it unhurried and use lots of pauses. Try to imagine how you would talk if someone were trying to write down everything you were saying.

3. Pause Before Talking.

When your child talks to you or asks a question, try to pause a second or so before you answer. This will help make talking to your child less hurried and more relaxed. It will help to ensure you don't accidentally talk when your child is still thinking of what to say. It will show your child that it isn't necessary to rush into talking.

4. Keep Your Talking Simple.

Keep your talking simple. Keep your own language simple when speaking with your child. Use sentences that would be easy for your child to produce. Don't “dumb down” your talking but choose ideas and vocabulary that are appropriate for your child's age. Limit yourself to one idea at a time and pause between ideas.

E.g. More complex: “We shouldn't shout in the store because it's not polite and not allowed and we might disturb the other shoppers who might have headaches”

More simple: “We shouldn't shout in the store.” PAUSE “Shouting isn't nice.” PAUSE “Someone might have a headache.”

5. Make Talking Easier For Your Child.

Talking is a very complex task. Your child will do better if you make his job easier. Avoid putting him in a position where he feels pressure to talk. Don't bombard him with questions or pressure him to tell stories. It can help to replace questions with comments, and let your child choose whether or not to talk. For example, instead of asking “What was the movie about?” try a comment like “I think there was a super hero in that movie” and wait to see what the child says next. Try to avoid questions that are meant to “test” your child, and try to avoid asking a second question before the first is answered. Ask questions that are supportive and easy to answer e.g. Instead of asking “how was school?” try “did you go outside for recess?”. Give your child lots of time to answer and respond positively. Eliminate corrections of speech and grammar. Never correct or punish stuttering.

Make Time for Special Time

No one can apply the above strategies all the time. It is best to set aside five minutes each day for undistracted one-on-one time with your child. Turn off the TV, computer and phone. Allow your child to take the lead and be a good play partner. Have fun and play with your child as another child would. Have no expectations during this time for speech, language or learning and accept your child's communication as if it is already perfect. Make sure that your child can see your face and smile a lot. Some example "special time" activities include: play store, play picnic, play restaurant, play treasure hunt. Special time should happen each day and each parent should do some of them. This is also a good way to find out which strategies help your child the most. Choose one of the following strategies to focus on during special time, such as

- **Listen patiently**
- **Model a slower rate**
- **Pause between ideas (one idea at a time)**
- **Imagine someone is trying to write down what you say**
- **Pause before responding to your child's talking**
- **Use shorter, simpler sentences**
- **Use comments instead of questions and WAIT for your child to talk**

After each special time, write a quick note on how easy or difficult it was to apply the strategies, how it affected your child's fluency and what other things you were able to do to help make talking easier for your child.

Other Things That May Help Your Child Who Stutters

1. **Encourage good family turn-taking habits.**
Parents can help to reduce time pressure by encouraging good turn taking habits for the whole family. Reminders may be needed to let the speaker finish their short turn and to identify who the next speaker will be (e.g. "Let's let Emily finish her idea and then it will be Ethan's turn."). Every family member should get a similar amount of talking time.
2. **Reduce developmental pressures.**
Many children stutter more at times when they are pressured to develop skills faster than they are ready. Consider where your child may be under pressure to develop too quickly. Is your child being encouraged to develop language skills too early? Is there too much demand to use a second language? Are your child's speech sounds or grammatical errors being corrected unnecessarily?
3. **Slow the pace of life.**
Parents can reduce time pressure by reviewing daily routines to make sure the child's schedule is not so busy that there is no time to talk about experiences in a slow, unhurried manner. It is good for children to have full and active lives, however some children may benefit from participating in fewer activities at a slightly slower pace.
4. **Protect sleep and health.**
Many parents report that children stutter more when they are tired or sick. Do your best to keep a regular eating and sleeping schedule.
5. **Build confidence.**
Focus on what your child does well and offer positive praise. Use descriptions such as "I like your drawing. I can see you worked hard on that, or "You really know how to pick up your toys. You are so helpful!" or "I love your stories. You have a great imagination!".
6. **Be consistent.**
Set clear expectations for behaviour and be consistent about consequences. For example, If your child hits at the park you will leave the park immediately, every time, without exception. All children benefit from consistent limits. Children who stutter should have the same expectations as any other child.

What do I say if my child is stuttering?

There is no evidence that acknowledging stuttering in a caring way will make the stuttering worse. Acknowledging the stutter in a kind way can have a positive impact. Mocking, punishing or correcting a child's stutter may have a negative impact. Remember that parents discuss everything with children, from brushing teeth to using manners. A child may think that a stutter is really "bad" if no one will talk about it. Treat stuttering like any other matter. Don't comment unnecessarily, however if you notice frustration in your child you can reassure him or her (e.g. Child: "My words are stuck" Parent: "It's okay. Lots of kids get stuck sometimes, I don't mind"). The most important thing is to keep the child happy and confident about talking. They should know that what they say is more important than how they say it.

Warning Signs to Watch For

Normal disfluency can be hard to distinguish from emerging stuttering. Stuttering may also change over time. Some signs that may indicate that the severity of the problem is increasing include:

- Stuttering is happening more often (e.g. few bumps in five mins of talking, now 20)
- Stuttering is more consistent (e.g. few times a day, now in every conversation)
- More repeated units in repetitions (e.g. I-I-I-I-I want that)
- More prolongations than repetitions (e.g. wwwwhy can't I have it?)
- Complete blockages of speech (e.g. child opens mouth to speak, but sound is stopped)
- Noticeable physical tension or struggle when talking
- Changes in pitch during prolongations or irregular rhythm in repetitions
- Signs of concern or frustration before or after talking
- Indications that the child is substituting words to avoid stuttering
- Indications that the child is avoiding talking in certain situations or to certain people

If you are concerned that your child's stuttering is increasing in severity, contact One Kids Place to complete a referral for a stuttering assessment.

What If Treatment Is Needed?

The current thinking is that early intervention is preferred over ignoring the stuttering. Treatment is most effective in the preschool years before grade one. Stuttering left untreated may begin to negatively impact the child and can lead to the development of a more serious problem.

Early intervention often involves helping parents to make small changes early on that result in the development of normal disfluency—this is called "indirect intervention". For other children, more direct forms of intervention may be recommended such as the Lidcombe Program or teaching fluency skills such as "easy breathing". In any option, parents are very involved in the delivery of the treatment and most treatment happens at home.

Most importantly, stuttering treatment is focused on positively empowering parents and helping children to improve their fluency while maintaining happy, healthy feelings about talking.

Helpful Websites

- Stuttering Foundation of America *
- Stuttering Centre of Western Pennsylvania
- British Stammering Association
- Michael Palin Centre
- Australian Stuttering Research Centre

* The Stuttering Foundation of America website houses a very helpful video called "7 Tips for Talking With the Child Who Stutters": <http://www.stutteringhelp.org/content/7-tips-talking-child-who-stutters>



SUMMARY OF STRATEGIES TO HELP INCREASE FLUENCY

1. Listen Patiently

- Listen patiently and positively when your child is talking; give him lots of time to finish (this doesn't mean you must drop everything every time your child speaks)
- Avoid jumping in to fill in words or give advice such as "slow down", "stop and think", or "start again"
- Never mimic, correct or punish stuttering.

2. Slow Down the Pace of Talking

- Keep your own speech slow and relaxed- take time to pause between ideas
- Try to talk as if someone was trying to write down what you were saying

3. Pause Before Beginning to Talk

- Wait a second or so before responding to your child to help to calm the pace of conversations and to let your child know that rushing isn't necessary when beginning speech
- Pausing reduces the chance of accidentally interrupting when your child is still thinking

4. Model Language that is Appropriate for your Child's Level

- Spend some time modelling language that isn't too long or complex for your child to say easily; practice saying one idea at a time and pause between ideas

5. Avoid High Pressure Questioning

- Avoid asking too many questions or asking a second question before the first is answered
- Ask questions that help your child to communicate (e.g. "Who did you play with today?") rather than those that test your child's knowledge or memory (e.g. "What did you do at school? Tell grandma what you're learning at school").
- Use comments instead of questions sometimes and wait for your child to be ready to talk

6. Reduce Corrections

- Avoid correcting your child's speech sounds or grammar for now; your child will learn from hearing your correct model in natural conversations
- Respond positively to your child's talking and ideas as they are; avoid constant "teaching"

7. Support Good Turn-Taking Habits

- Help all members of the family take turns talking and listening; only one person should speak at a time and everyone should get a turn to talk; no one should "hog the stage"

8. Make Time for Talking

- Make time each day for talking with your child that is unhurried and undistracted; this is the best way to learn which strategies are most helpful; five minutes a day can make a big difference