



...FOR PEOPLE WITH SPECIAL COMMUNICATION NEEDS

I think my child is stuttering. What should I do?

Many children between the ages of 2 and 4 years go through a stage when they seem to stutter. This disfluent speech can be very disturbing to parents. Is this a stage the child will outgrow or the first sign of a long-term fluency problem?

Early stuttering may be variable in its appearance; that is, children have "good" days (with very little stuttering-like speech) and "bad" days (with lots of stuttering-like speech) or even good weeks and bad weeks. Because a child may visit a speech-language pathologist on a "good" day, it's helpful if the parents are able to describe precisely the child's bothersome disfluencies, perhaps by making a list of them as they occur in the days/weeks before a visit to the speech-language pathologist.



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Most children will become more fluent as they get older and their language skills improve. Disfluent speech is more common in the preschool years when a child is learning to talk, and particularly so when a child is learning to express abstract concepts.

However, you may not want to just wait and see whether your child will outgrow a disfluent speech

pattern. Early intervention for the treatment of stuttering is generally more effective than waiting until a child is in school. Just as pediatricians are trained in children's physical growth and development, speechlanguage pathologists are experts in children's speech and language development. If you are concerned about your child's fluency, an evaluation by a speech-language pathologist certified by the American Speech-Language-Hearing Association is recommended. A speech-language pathologist will be able to tell you whether your child's hesitations and sound or word repetitions are similar to those of other children of the same age or whether they may be early signs of stuttering.

Is It Stuttering?

Mommy, mommy, I-I-I want to-to-to-go to-go out and play.

That's Matt, age 4 years. Is he stuttering or simply showing the "normal disfluency" many children experience as speech develops?

It's common for children between the ages of 2 and 7 years to repeat whole words or phrases and to interject uh and um in their speech. As children mature and sharpen their communication skills, these developmental lapses drop to very low levels.

But stuttering often begins during these same years. Thus, it may be difficult for you to determine if your child is beginning to stutter or just has normal disfluency.

Children who stutter will have normal disfluency, and children with normal disfluency may sometimes



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stutter. What you need to decide is what your child's speech sounds like most of the time.

If you think your child is beginning to stutter, schedule an evaluation with an ASHA-certified speechlanguage pathologist. You should also seek the advice of this professional if

- you are concerned about his or her speech,
- the disfluencies begin to occur more often, or
- the disfluencies begin to sound effortful or strained.

Many children grow out of their disfluencies, but millions do not.

Characteristics

The child at risk for **stuttering**

• repeats parts of words, either sounds or syllables (*t-t-table*, *ta-ta-ta-ta-table*); prolongs a sound (*ssssun*); or breaks up words (*cow. . .boy*)



- often repeats part of the word at least three times (ta-ta-ta-table), although some reports indicate that these children may repeat only one or two times
- during repetitions, substitutes an *uh* vowel for the vowel in the word (*tuh-tuh-tuh-table*)
- may use a broken rhythm during repetitions (*b. b. boy*)
- has 10 or more disfluencies every 100 words
- opens the mouth to speak but no sound comes out or turns off the voice between sound repetitions
- sometimes appears to struggle physically to produce speech
- has other family members who stutter

The child with normal disfluency

- often repeats whole words or phrases (-I-I-I want to go out and play.)
- typically repeats part of the word no more than one or two times (ta-table)
- during repetitions, uses the vowel sound normally found in the word (ta-table)
- has rhythmic repetitions (b. .b. . boy)
- has 9 or fewer disfluencies every 100 words
- starts speech easily; keeps speech going even though may repeat a phrase or word later in the sentence

Myths About Stuttering

Research has not shown that children who stutter are different from children who do not stutter in terms of their intelligence or psychological wellbeing. That is, stuttering is not necessarily a sign of psychological problems, anxiety, abnormal parent-child relationships, or other forms of trauma.

(Based on an article in Speech News, Baylor College of Medicine, November 1983, by Martin R. Adams, PhD, and on a personal communication with the author, 1988, and personal communication with Janis Costello Ingham, PhD, 1999)

Other Organizations With Consumer Publications About Stuttering

Inclusion on this list does not constitute endorsement of the information by the American Speech-Language-Hearing Association, nor is this intended to be all-inclusive.

National Consumer Board for Stuttering

P.O. Box 8791 Grand Rapids, MI 49581

National Institute on Deafness and Other Communication Disorders

National Institutes of Health Building 31, Room 1B-62 9000 Rockville Pike Rockville, MD 20892 Phone: 301-496-7243

National Stuttering Project

5100 E. La Palma Ave., #208 Anaheim Hills, CA 92807 Phone: 800-364-1677 Fax: 714-693-7553

E-mail: NSPmail@aol.com

Speak Easy International Foundation, Inc.

233 Concord Drive Paramus, NJ 07652 Phone: 201-262-0895

Stuttering Foundation of America

P.O. Box 11749

Memphis, TN 38111-0749 Phone: 800-992-9392 Phone: 901-452-7343

The following Web site contains additional information:

http://mankato.msus.edu/dept/comdis/kuster/stutter.html3personal

If you have concerns about your child's speech or language development, please contact an ASHA-certified speech-language pathologist. Go to ASHA's website at www.asha.org for information and referrals or call 800-638-8255.



10801 Rockville Pike Rockville, MD 20852 1-800-638-8255 (Voice or TTY) Email: actioncenter@asha.org

Website: www.asha.org

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