



Support for Stuttering

Self-help is a valuable supplement to speech-language pathology services.

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By John A. Tetnowski, PhD, CCC-SLP, BRS-FD, and James A. McClure

When Christopher Aubert started speech therapy last year at age 12, his clinician recommended participating in the local chapter of the National Stuttering Association (NSA) in addition to speech therapy sessions. Christopher's mother, Martha, credits the self-help group with jump-starting the process of change.

"The first few meetings gave him a new perspective on stuttering from hearing the experiences of others," she said. "He's made a lot of progress and is gaining self-confidence."

Combining therapy with self-help groups helps speech-language pathologists address some of the most difficult aspects of stuttering therapy: the role of counseling; motivating clients to make documentable change in their communication ability; and maintaining change after successfully completing traditional stuttering therapy.

While the NSA is known as a support organization for people who stutter, "self-help" is a more accurate description of what it actually does. Traditional support groups are run by professionals who help people with a particular disorder. Self-help groups, by contrast, are run by the members themselves in a peer-counseling environment in which the experts are group members who share their experiences.

This group dynamic is especially powerful for people who stutter, who often had never talked with another person who stutters about stuttering until they attended a self-help group. SLPs are welcome in stuttering self-help groups and many attend them regularly, but do not deliver therapy or "solve" all the issues of the group members.

A Nice Complement

Self-help participation is a valuable supplement to the SLP's role in counseling clients who stutter. Counseling is included in the scope of practice, yet many speech-language pathologists have a strong preference for providing fluency shaping therapies for their clients who stutter.¹ This may be due to their reliance on behavioral principles that do not include the use of counseling strategies.



However, in a 2009 survey by the NSA (people who stutter reported therapies that "change their attitude about stuttering" are significantly more successful than therapies that "teach techniques to eliminate stuttering" (fluency shaping) or "teach people to stutter more fluently" (stuttering modification).² Counseling and acceptance at least are critical factors in stuttering modification therapies but are not part of fluency shaping therapies.

Watching other self-help group members live successfully with stuttering is a strong motivator for clients to make progress themselves. The 2009 NSA survey showed people who attended stuttering self-help groups self-reported better outcomes in therapy. A study by Trichon and Tetnowski showed attending even a single self-help conference can greatly impact successful change in a person who stutters.³

Long-Term Success

Self-help groups also reinforce speech therapy and help clients maintain long-term change. Plexico, Manning and

DiLollo found "ongoing support" was one of the key factors described by clients who had completed "successful" stuttering therapy.⁴ At NSA meetings, members are encouraged to practice speech modification techniques if they choose to do so.

Self-help, when used correctly, does not replace traditional stuttering therapies but serves as a valuable adjunct to traditional therapies in motivating progress, developing healthy attitudes and maintaining long-term change.

The NSA, <http://www.westutter.org/>, has more than 100 local chapters and holds a national conference and regional workshops. A similar organization, FRIENDS, the National Association for Young People Who Stutter, <http://www.friendswhostutter.org/>, has a national conference and regional workshops.

References

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John A. Tetnowski holds the Ben Blanco/BoRSF Endowed Professorship in Communications disorders at the University of Louisiana at Lafayette. He has authored more than 50 publications on stuttering, assessment procedures and research methodologies and has worked clinically with people who stutter for more than 20 years. James A. McClure is a director of the National Stuttering Association and is the consumer representative for the Specialty Board on Fluency Disorders.

CLINICIAN'S CORNER



Peer Connection

Kathleen Scaler Scott, PhD, CCC-SLP, BRS-FD, helps clients connect to other

people who stutter through self-help groups.

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