



A joint venture of Children's Hospital of Pittsburgh and the Department of Communication Science and Disorders at the University of Pittsburgh

Stuttering Center News

August 2004
Volume 2, Issue 4

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Inside this Issue

- 1 Stuttering Center on KDKA
- 2 SLP Corner: Stuttering Treatment Game
- 2 Message from the Stuttering Center
- 3 ASHA Convention Update
- 3 Clinical Update: Finding Your Comfort Zone
- 3 Spotlight: ASHA Elections
- 4 Profile: Debra Butkiewicz, MA, CCC-SLP

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Stuttering Center on KDKA-TV News

On July 16, 2004, the Stuttering Center of Western PA was featured on the KDKA-TV News, a Pittsburgh affiliate of CBS. Dr. Maria Simbra interviewed Craig Coleman, Co-Director of the Stuttering Center.

The feature highlighted the importance of treating all aspects of stuttering, including the affective, behavioral, and cognitive reactions that people who stutter may have because of their speaking difficulties.

In the interview with Dr. Simbra, Mr. Coleman stated "Sometimes people incorrectly perceive stuttering as an emotional or psychological disorder, when in fact it is not. Stuttering tends to run in families, which indicates a genetic component. There are also motoric and linguistic components."

When asked about the use of electronic devices to treat stuttering, Mr. Coleman replied "There is a tendency in today's society to want a quick-fix. I would caution people against that by saying that stuttering treatment for older children and adults is typically a life-long process. Electronic devices have their place with a certain population, but they are not the best treatment for everyone and I certainly wouldn't advocate their use in children at this point. We just don't know enough about their long-term effectiveness yet."

In addition to discussing these issues, KDKA-TV also interviewed Zachary Bigham and his mother Laurie Jones. Zachary is an 11-year-old who stutters and receives treatment at the Stuttering

Center through Children's Hospital of Pittsburgh. Zachary told Dr. Simbra that he did not see his stuttering as a problem and that he has learned to become very comfortable with his stuttering.

Both Zachary and his mother reported that speech treatment has not been a "cure" for Zachary, but that both of them have learned a lot about stuttering and about strategies to control stuttering more effectively. This makes it easier for him to say what he wants to say, without worrying about whether or not he will stutter.

Finally, the feature highlighted the need for early intervention to help young children who stutter. It is important for everyone in a child's life (parents, teachers, and pediatricians) to learn that early intervention is key in stuttering treatment. If any of the following risk factors are present, a speech-language pathologist who specializes in stuttering treatment should be consulted:

1. Family history of stuttering
2. Child has been stuttering for several months
3. Child is aware of and concerned about his stuttering
4. Child is exhibiting physical tension with stuttering
5. Child is beginning to change words or avoid talking

If you have any questions about when to refer a child for treatment, or if you would like more information about stuttering, please contact us or visit our website at www.StutteringCenter.org!



SLP Corner: A Game for Facilitating Stuttering Treatment

Courtney McMaster,
Graduate Student Clinician

I designed a game to help school-age children who stutter. It addresses many factors that are considered in treatment. These include: increasing knowledge about speaking and stuttering, reducing negative feelings about stuttering, practicing speech strategies, and more!

The activity is a board game with different colored spaces (red, green, yellow, purple, and blue). Each space representing activities the child must perform in order to proceed in the game. For each turn, the child spins a spinner and moves 1, 2, or 3 spaces, depending upon how she responds to the activities.

There are several types of spaces on the board. For example, when the child lands on a *red* space, she picks a “challenge” card. The “challenge” cards each have a statement about what the child would do in a given situation. The

child must complete the statement with the “best” answer choice. There are either 4 or 5 choices on each card, and each answer has its own point-value assigned to it. The better the answer, the more spaces the child gets to move forward. For answers that indicate that the child is avoiding situations, demonstrating negative feelings toward stuttering, or demonstrating a lack of knowledge about stuttering, there are negative point values.

Other spaces on the board give the child the opportunity to move forward a certain number of spaces, go back a certain number of spaces, spin again, lose a turn, practice a speech strategy, or give an example of different types of disfluencies.

Specifically, the green spaces allow the child to move forward or spin again. There is a statement on each that the child did something positive in regards to their stuttering, such as practiced their speech strategies or taught a friend about stuttering. Yellow spaces require the child to move back spaces or lose a turn. They contain statements that reflect something negative in regards to

stuttering (for example, having someone order food for them instead of ordering themselves). The purple spaces instruct the child to practice a speech or stuttering modification technique, such as a pullout or a cancellation, or they require the child to give an example of different types of disfluencies (repetitions, prolongations, or blocks). The blue spaces are just blank and if the child lands on one of them then it is the next person’s turn.

The clinician can also play. For red “challenge” cards, you can demonstrate what happens when the “best” answer is given and what happens when a “not-so-good” answer is given. You can also ask the child what *they* would do. Currently, there are 10 situations on the “challenge” cards (though you can add your own). If both the child and the clinician play, just use more “challenge” cards. This allows the child to think about what they would do in a wider variety of different situations.



To incorporate other treatment goals, the clinician could for example have the child practice using a speech strategy in a sentence prior to each turn. There are lots of ways to modify the game to support your therapy activities. It’s fun, and the child will benefit from participating more in therapy!

More Treatment Ideas

Denise Kurelko, an SLP, suggested an activity for helping children distinguish between “hard” and “easy” stuttering. She suggests having children push heavy items (while doing hard purposeful stutters) and light items (while doing easy purposeful stutters). This gives children both a visual and a verbal representation they can associate with stuttering. Thanks Denise!

Send your own treatment ideas to Craig Coleman (craig.coleman@chp.edu)

Message From the Stuttering Center
Craig Coleman J. Scott Yaruss



Please let us know if you have any comments or suggestions. You can also submit articles or an ideas for future articles. We now have more than 300 people receiving the *Stuttering Center News*, and we look forward to have even more colleagues join us soon!

Clinical Update: Finding Your Comfort Zone

Craig Coleman, M.A., CCC-SLP

Many speech-language pathologists (SLPs) report feeling uncomfortable treating stuttering. While it is true that much of this discomfort likely comes from a lack of exposure to stuttering, there are also other factors that can contribute to these feelings that so many excellent professionals report.

In treating any disorder, especially stuttering, it is critical that the SLP have a high comfort level, for your feelings about your treatment skills come across to both the client and family. Here are some ways you can help increase your comfort level with stuttering:

1. Try to have at least one client who stutters on your caseload on a consistent basis. This will help you continue to sharpen your skills in treating the disorder, and it will also allow you to view the disorder with a variety of clients over time.

2. Observe other clinicians who treat stuttering on a consistent basis. SLPs face enormous pressure to be the “master of all” disorders—and we all know this is an impossible task. Don’t be afraid to ask for help. People who do specialize in stuttering recognize that they are in a unique position and that other SLPs may not be able to focus on just one disorder. So, often, you’ll find that specialists are more than happy to be observed. (Here at the Stuttering Center, observers are always welcome—just give us a call or send an email!)

3. Read the journals and attend seminars. Knowledge is power, and if you continue to develop your knowledge in stuttering, you will feel more comfortable when teaching others about stuttering and when treating the disorder itself!

4. Attend a local meeting of the **National Stuttering Association** from time to time. This is the largest non-profit support group for stuttering in the United States, and we have a local chapter here in Pittsburgh. Participating in NSA events can help you keep “in touch” with people who stutter. More information about the NSA can be found at www.WeStutter.org

5. Try some activities to help you identify with the person who stutters. This may include stuttering in public, trying various treatment strategies (like easy starts or pull-outs) in public, asking people what they know about stuttering, etc. These and other activities can help you determine appropriate treatment suggestions when you see a person who stutters in your clinic.

Even if you do not treat stuttering on a regular basis, you can still increase your comfort level for the future. For more information, contact us here at the Stuttering Center! We will be glad to help you find (and expand) your comfort zone with stuttering.

In the Spotlight: ASHA Elections

Craig Coleman, M.A., CCC-SLP

From August 1st to September 10th, voting will be open for the ASHA Executive Board and Legislative Council. ASHA members will receive their ballots in the mail (unless they opted for internet voting done at www.asha.org/elections-04.htm).

Also, remember that Craig Coleman, Co-Director of the Stuttering Center is running for PA Legislative Counselor. For more information on how to vote and Craig’s position statement, visit www.stutteringcenter.org

Be sure to vote!

Upcoming Events

Stuttering Center staff will present several workshops in the coming months. For more information, check out our website at www.StutteringCenter.org or send email to craig.coleman@chp.edu.

Workshops Include:

- Carlisle, PA (9/2)
- Warwick, RI (9/30)
- Grand Rapids, MI (10/14)
- Detroit, MI (10/15)
- Dallas, TX (10/20)

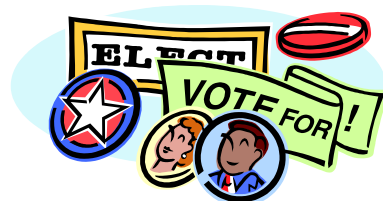
You can view handouts from presentations by Scott Yaruss and Craig Coleman at:

www.stutteringcenter.org/Handouts

*If you would like information about scheduling an in-service presentation with either Scott Yaruss or Craig Coleman, let us know!

Coming Up: ASHA Convention in Pennsylvania

The 2004 convention of the American Speech, Language, and Hearing Association will be held in Philadelphia, PA. The conference will run from November 18-20 at the Pennsylvania Convention Center. Please visit www.asha.org for more information, including registration information and a schedule of presentations. Several presentations will be given by staff of the Stuttering Center of Western PA.



Clinician Profile:

Debra Butkiewicz, MA CCC-SLP

Debra Butkiewicz received her Bachelor's Degree from the Univ. of Maryland and her Master's from the Univ. of Pittsburgh. She works at Children's Hospital of Pittsburgh in Oakland and supervises students from the Univ. of Pittsburgh. She performs a wide variety of inpatient and outpatient assessment and treatment functions. In addition to her work with the Stuttering Center, she is a team member with the Children's Hospital Swallowing Team and Cochlear Implant Program. We asked Miss Butkiewicz several questions about her work at Children's Hospital:

Q: What is one thing clinicians who treat stuttering should know?

A: You are treating the *whole* child, which means that all of the people and activities that influence the child's daily routines should be part of therapy. The child is at the center, but family members, peers, teachers, and daily activities are all part of the child's success in managing fluency skills. I always urge those working with the child to remember that the therapist will make the least amount of difference in the child's life and that it is clinician's primary job to coach those in the child's innermost circle on "becoming the speech therapist." Older children and teens can feel empowerment and greater control when taught to be their own therapist. I teach them how to take ownership of their fluency strategies, feelings, and attitudes and how to address them in independent and positive ways.

Q: What changes do you see happening in the field of stuttering in the next 10 years?

A: Within the next 10 years I expect to see a more definitive explanation of the cause(s) of stuttering. The continual advances in medicine, particularly with imaging and studying electrical activity in the brain, are helping researchers better study the etiology of stuttering. Once we identify where and when the breakdown in fluency occurs from a neurological, motoric, and language-based viewpoint

then our treatment of stuttering will be more effective and hopefully more permanent. It is my dream (as well as that of many people who stutter) that we will find a "magic pill" to cure stuttering. Unfortunately, we are not at that point yet, so we must rely upon traditional methods of behavioral treatment that have been empirically proven to help (but not cure) those who stutter.

Q: What are the biggest challenges that we still face in stuttering?

A: The biggest challenge is the complexity of the disorder itself. Human existence is based on communication and interaction with others. Stuttering can interrupt that social connection. It affects not only the messages that we are trying to convey, but also how the person who stutters sees himself and how others perceive them within a social network. Therapists can provide strategies to help people control disfluencies. We can work to reduce any concomitant behaviors that occur during stuttering. We can even help people identify feelings and attitudes about stuttering. But it is rare that we can eliminate stuttering all together, despite our client's very best efforts. We need to be good teachers and expert counselors. And, one of our biggest challenges is figuring out how to engage in activities that will generalize to the client's real so they can maintain their fluency over time.



Q: How did you become interested in stuttering?

A: I first became interested in stuttering when I was in the fourth grade. My friend Michael stuttered and brought me to his speech therapy. His therapist taught me about what Michael was doing to improve his fluency and gave me a chance to practice those strategies. I remember how hard it was to use easy onsets during reading, and I gained a new respect for

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The *Stuttering Center* offers evaluation and treatment for children who stutter through Children's Hospital of Pittsburgh in Oakland and at our satellite offices in Bethel Park, Monroeville, and Wexford. Visit the Children's Hospital website at www.chp.edu for directions.

Find us on the Web!

www.stutteringcenter.org

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Michael for all of his hard work. Years later, during my studies, I participated in research studies about stuttering. Now, I enjoy the treatment aspect of the disorder. I think the complexity of stuttering and the uniqueness of people who stutter is what fascinates me most.

Q: What other areas of speech-language pathology are you interested in?

A: My passions seem to change over time. For the past few years one of my loves has been working with deaf and hard-of-hearing children who have or are about to receive cochlear implants. It is amazing to work with children who are given the gift of hearing. Once they can hear at new and improved levels, they are more likely to develop verbal communication skills. We teach the children how to interpret the sounds they hear, what a string of sounds (words) means, and how to produce words. One of the greatest gifts is to hear a child's first intentional sounds or words and to know that you have been a part of that. But a gift far greater than that is seeing the new connectedness between a child and their parents when they have a new way to communicate with each other.