COMMON QUESTIONS ABOUT STUTTERING

What is the prevalence of stuttering?

Prevalence studies suggest stuttering affects about 1% of prepubertal children. Conservative estimates of stuttering prevalence in the general population is .5%, which translates into about 30,000 Albertans and 290,000 Canadians.

Is stuttering inherited?

Studies indicate that stuttering runs in families and is influenced by genetic factors. However, environmental factors also play a role in the pathogenesis of stuttering. Stuttering appears to be the result of several inherited factors and several environmental factors interacting rather than the result of a single inherited trait.

Family studies show an average of 1/3 to 1/2 of people who stutter report presence of other or current stutterers in family background. This is in contrast to 5-18% of nonstutterers reporting a family history of stuttering. Risk of stuttering among first-degree relatives of stutterers is estimated at more than 3 times the population risk (Andrews et al, 1983).

Twin studies estimate 71% of variance in data attributed to genetic factors and remaining 29% attributed to nonfamilial environment.

What causes stuttering?

The exact cause of stuttering is not yet known but research is helping us to gain a better understanding of its origins.

Studies tell us that stuttering results when a combination of factors come together – these include genetic, physiological and environmental or experiential factors. For many children the predisposition to stutter may be transmitted genetically. The speech mechanism of such children seems to be vulnerable to disruptions in the flow of speech. Some scientists believe that the complex part of the brain that controls the muscles used for speech does not work as efficiently as it should in all circumstances. The result is that the flow of speech breaks down, and we hear the repetitions and prolongations that characterize stuttering. There is also evidence to suggest that the problem can be aggravated and maintained by environmental stressors, negative reactions from listeners and the child’s own sensitivity to the speech interruptions. Therefore, early identification and treatment is important to prevent the problem from becoming established and interfering with the child’s development.
What are the common misconceptions about stuttering?

One of the most common misconceptions about stuttering is that people who stutter are nervous, emotionally insecure or less intelligent than others. This is not true. Studies show that there are no differences in the psychological, emotional or intellectual make-up of people who stutter. The only consistent finding is that people who stutter tend to lack self-confidence and withdraw from social situations. However, these characteristics are likely to be the result of stuttering and can’t be used to explain its onset.

Another common misconception is that people who stutter could stop if they just tried hard enough. In fact, trying not to stutter often has the reverse effect of making it worse. It can cause more tension in the speech muscles resulting in more severe stuttering or the development of struggle behaviour. It can also result in the person trying to hide the stutter by avoiding talking or using tricks to get around the difficulty. Avoidance can become a serious handicap by interfering with social-emotional development and educational performance and by causing low self-esteem. People who stutter need help to manage the condition and they need the support and understanding of others.

When does stuttering begin?

Stuttering usually begins in early childhood between two and five years of age. It is often episodic and can come and go or wax and wane in severity. Often the stuttering comes at a time when rapid language development or increasing communication demands outstrip the development of adequate speech control. When speech control catches up, stuttering may remit. But for some people this does not happen or it happens too late. The longer stuttering persists the less likely it is to resolve naturally and those who are still stuttering may face a lifetime of difficulty unless they receive appropriate treatment.

Do most children who stutter recover without any treatment?

Some children do outgrow stuttering. Estimates are that 36-79% of children who begin to stutter recover spontaneously. Unfortunately, it is not possible to tell which children will outgrow it. Many children do not get better and the problem is that the longer the stuttering persists, the harder it is to treat and the more likely it is to interfere with the child’s social and emotional development. New treatment programs for preschool children who stutter are very effective and parents should seek help when the problem first appears.

What does treatment involve?

The type of treatment given depends on the stage of stuttering development and the age and particular needs of the individual. In treatment of very early stuttering, parents are often taught how to strengthen the child’s fluency.

Generally, the longer stuttering has been present, the longer treatment takes. If a child is properly treated, especially before the age of five or six, normal speech can be attained in many cases. Older children and adults may not achieve normal fluent speech. However, they can learn methods to help them speak more fluently and control their speech so that it doesn’t interfere with communication. Intensive treatment programs are often the most effective approach to treating stuttering in older children and adults.

What can listeners do to help the person who stutters?

There are several things listeners can do to help the person who stutters.
First, maintain natural eye contact. Just wait patiently and naturally until the person is finished. You may be tempted to finish sentences or fill in words but it is best not to do so because it can be very frustrating and demeaning for the speaker.

Refrain from giving advice such as slow down or take a deep breath. Such advice usually hinders rather than helps. It would be far more helpful if you yourself speak in a slow and relaxed way.

Be aware that people who stutter usually have more trouble controlling their speech on the phone. Please be extra patient in this situation.

In general, let the person know by your manner and actions that you are listening to what he or she is saying, rather than how he or she is saying it.

Being a good listener is the most effective way you can help the person who stutters.

Where should a person who stutters go for help?

Help for stuttering may be available from speech pathologists who work in schools, hospitals, health clinics and private agencies. It’s best if young children are treated by speech pathologists who are experienced in the treatment of early stuttering.

Organizations such as the Canadian Association of Speech-Language and Audiology Canada (SAC), Canadian Association of People Who Stutter (CAPS) and Stuttering Foundation of America (SFA) may be able to provide guidance or referral lists.

In addition, there are a few centres in Canada that specialize in the treatment of stuttering and offer intensive therapy on a year-round basis — the Institute for Stuttering Treatment and Research in Edmonton, and the Rehabilitation Centre in Ottawa.

There are also self-help groups in many communities and cities across Canada. These groups provide help and support to people who stutter. For information about self-help groups in your area, you can contact the Canadian Association for People who Stutter (CAPS) at 1-888-STUTTER.

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