







Stuttering: A guide for parents



The Northern Sydney Local Health District provides Speech Pathology services to children who live in the relevant Local Government Areas. Please contact your relevant department if you have any queries.

Northern Beaches:  9951 0299
Ryde:  9926 5844
RNS Community Health:  9462 9200
Hornsby Ku-ring-gai:  9485 7569



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What is stuttering?

Stuttering is a communication difficulty in which speech is interrupted by repeated movements (e.g. repeating words and sounds) and / or fixed postures (e.g. blocking and prolonging sounds). Signs of struggle and tension may accompany these interruptions.

- Stuttering is thought to be a **physical disorder**.
- It is **not** caused by psychological factors such as nervousness or stress, parenting practices or the way parents communicate with their children when they are young.
- Stuttering is **variable** and often **fluctuates** in severity. There may be periods of severe stuttering, and then periods where there are no stutters.
- Stuttering may start gradually or suddenly.
- It usually **starts during the pre-school years**, i.e. between 2 - 5 years of age.
- It may start when children have a big increase in vocabulary or sentence length.
- Not all children 'grow out' of stuttering.

What does stuttering sound like?

Different types of stuttering include:

- **Repeated movements**, such as repetitions of sounds (e.g. "c-c-c-come and play"), repetitions of words (e.g. "come...come...come and play") and repetitions of phrases (e.g. "come and...come and... come and play").
- **Fixed postures**, such as **blocks** when it may seem like the word is 'stuck' or the sound can't come out (e.g. "I wa.....nt to play"), or **prolongations** which involve the uncontrolled extension of a sound within the word accompanied by a pitch rise (e.g. "coooooome and play").
- **Overuse of fillers** - fillers are considered words that don't provide any extra meaning to the statement (e.g. "um", "you know...", "like...").
- **Secondary behaviours** are physical movements that may also go with the spoken stutter in more severe cases, such as eye blinking, facial grimaces and movements. These behaviours often disappear as the stuttering reduces.



Risk Factors

There is no definite answer to who will and will not stutter. Research shows that:

- By 3 years of age **8.5%** of children will have begun to stutter, and more will begin later.
- **Boys** are more likely to stutter than girls.
- If there is a **family history** of stuttering then a child is more likely to stutter and require treatment to control their stutter.

Does stuttering resolve without treatment?

Some children recover from stuttering naturally, although the exact rate of recovery and the average time taken to recover is not known.

It is difficult to predict which children will recover from stuttering without treatment.

It is important to treat stuttering during the preschool years (prior to beginning school). Delaying treatment until children start school is not recommended.

It is recommended that children see a Speech Pathologist as soon as stuttering starts.

Information about Stuttering Treatment

Pre-school children who stutter generally respond well to treatment. It is more complex to treat stuttering in school-aged children and adults. Also, the typical outcome of stuttering treatment with pre-school children is the elimination of stuttering, while the outcome of stuttering treatment with older children and adults is the control of stuttering.

The Lidcombe Program is a well-researched behavioural intervention approach, which has shown excellent results with pre-school aged children. Therefore, it is the treatment program adopted in the North Sydney Local Health District.

It is important to refer your child to a Speech Pathologist as soon as any signs of stuttering are noticed. Following assessment there may be a wait to commence therapy using the Lidcombe Program

It is recommended that during this period of waiting, the child's stuttering severity is regularly monitored by yourself under the guidance of the Speech Pathologist.

The Speech Pathologist will provide you with instructions on how to record the severity of your child's stuttering, so you can document daily ratings.

The commencement of treatment is determined by a number of factors including the child's age, the length of time they have been stuttering, the severity of their stutter, possible family history of stuttering and the emotional distress caused by stuttering.

****Important:** The Lidcombe program should only be carried out by a speech pathologist, who will individualise the program for your child.

What is the Lidcombe Program?

The Lidcombe Program is a behavioural treatment program for children under 6 years of age who stutter. It was developed at the University of Sydney in the 1980's.

Worldwide research has shown excellent results in the treatment of stuttering in children under 6 years of age. Lidcombe Program treatment has been proven to be equally successful in individual, group or telehealth formats.

- The treatment is administered by a parent or carer each day in the child's everyday environment. Daily practice is essential.
- Parents learn how to do the treatment during weekly visits to the Speech Pathologist. The focus is on parent training and reviewing the child's progress.
- The treatment is direct. This means that it involves the parent commenting directly about the child's speech. This parent feedback needs to be generally positive.
- Parents also learn how to take daily severity ratings of the child's speech to monitor their progress and determine suitability for entry into Stage 2 of the program.

The Lidcombe Program has two stages:

- Stage 1 - the parent conducts the treatment each day and the parent and child visit the Speech Pathologist once a week. This continues until stuttering either is gone or reaches an extremely low level.
- Stage 2 - starts after certain criteria are reached and lasts around a year. The aim of Stage 2 is to keep stuttering from returning. Speech Pathologist visits gradually become less frequent.

It is very important to complete both stage 1 and 2 of the program. The maintenance component (stage 2) of the program is essential because it is well known that stuttering may reappear after successful treatment. It is vital that Stage 2 is completed with a Speech Pathologist in order to maintain long term stutter-free speech and avoid a relapse.

Studies have shown additional parental benefits of the Lidcombe Program to include increased quality time spent with their child and increased knowledge of stuttering and management of stuttering.



Speech Pathology for Children in NSLHD

Research shows that stuttering intervention in the preschool years is the most effective, and that early referral and management of stuttering is ideal for young children.

Parents can refer their child to speech pathology by calling their local service. These telephone numbers are listed on the front of this booklet.

Eligible children are offered a Speech Pathology Assessment. After the assessment children are placed on a waiting list to start the Lidcombe Program.

Your speech pathologist will guide you through how you can support your child whilst you wait for weekly therapy sessions.

Your child's speech pathologist may discuss whether seeing a Private Speech Pathologist whilst you wait may be possible for your family.

What can you do while you are waiting for an assessment?

- Allow time for your child to respond and wait for them to finish words and sentences on their own.
- Do not comment on their stuttering.
- If your child mentions their stuttering, acknowledge that they get stuck on words and also reassure them that they frequently speak very well.

References

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Onslow, M., & O'Brian, S. (2013). Management of childhood stuttering. *Journal of Paediatrics and Child Health*, 49, 112-115.

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What to ask when choosing a private therapist to provide therapy for your child's stuttering

Some parents decide to access private Speech Pathology whilst they are waiting for either an assessment or therapy in the Northern Sydney Local Health District. The following questions may be useful to ask a private Speech Pathologist if you are considering this:

- Have you been trained in the Lidcombe Program?
- Will you conduct the Lidcombe Program as in the treatment manual?
- Will you provide weekly therapy for Stage 1?
- Will you recommend daily homework tasks?
- Will you provide training and monitoring of daily Severity Rating measures?

Useful Contacts

For more information on stuttering and the Lidcombe Program please visit these websites:

- The Lidcombe Program Website: www.lidcombeprogram.org
- Australian Stuttering Research Centre: <https://www.uts.edu.au/asrc>
- Bankstown Stuttering Unit: <https://www.swslhd.health.nsw.gov.au/bankstown/stuttering>