Stuttering – Tips for Teachers

(5 Critical Ideas)

1. Causes
Stuttering usually begins between the ages of two and four. While the causes of stuttering are not known, researchers agree that it likely results from an interaction of factors including child development, family dynamics, genetics, and neurophysiology.

2. Facts About Stuttering
• More boys stutter than girls. At age two, the ratio is approximately two boys for every girl but by fifth grade, approximately four boys will stutter for each girl.

• Approximately 5 percent of all children go through a period of stuttering that lasts six months or more. Three-quarters of those will recover by late childhood, leaving about 1% with a long-term problem.

• If a child has been stuttering longer than three years, however, it is very unlikely she will outgrow it. Because most children begin stuttering during their preschool years, a child who stutters in elementary, middle, or high school is much less likely to outgrow the problem.

• There is no known cure for stuttering, including speech therapy. Instead, speech therapy helps the child learn to talk in an easier manner, even quite fluently, and to have healthy attitudes and feelings about talking.

• Stuttering is not caused by psychological differences. Children do not begin stuttering because they are more anxious, more shy, or more depressed than other children.

• Children who stutter show no differences in intelligence from children who don’t stutter.

• Children who stutter may be self-conscious about their stuttering and choose not to participate in class.

3. Teacher’s Checklist for Referral (from Stuttering: Straight Talk for Teachers)

<table>
<thead>
<tr>
<th>Teacher’s Checklist for Referral</th>
<th>Probably Normal Disfluencies</th>
<th>Probably Stuttering</th>
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</thead>
<tbody>
<tr>
<td><strong>Speech behavior you may see or hear:</strong></td>
<td></td>
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<tr>
<td>□ Occasionally (less than once every 10 sentences), brief (less than 1/2 second), repetitions of sounds, syllables, or words like this. Sounds, syllables, or words only repeated once or twice, for example “hey-hee, ca-ca-car.”</td>
<td>□ Frequent (3 or more every 10 sentences), long (longer than 1/2 second) repetitions of sounds, syllables, and some short words. I-I-I-like this. Sounds, syllables, and short words usually repeated 3 or more times, f-f-f-for e-e-e-e-ex-em-em-am-pie. Occasional prolongation of sounds like this, or blockages.</td>
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<td><strong>Other behavior you may see or hear:</strong></td>
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<td>□ Occasional pauses, hesitations in speech, or fillers such as “uh,” “er,” or “um.” Usually noticed when the child is changing words or thoughts.</td>
<td>□ Repetitions and prolongations may be associated with eyelid closing and blinking, looking away, and some muscle tension in and around the mouth. May also hear changes in pitch or loudness as child struggles to say word. Child may say extra sounds or words as fillers, e.g., “Well it’s well it I-I-I need a crayon.”</td>
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<td><strong>When problem is most noticeable:</strong></td>
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<td>□ Tends to come and go when child is: tired, excited, talking about complex or new topic, asking or answering questions, or talking to unresponsive listeners.</td>
<td>□ May come and go in similar situations, but is more often present than absent. If noticeable in most speaking situations and is consistent, problem may be more severe.</td>
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<td><strong>Child’s reaction:</strong></td>
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<tr>
<td>□ None apparent</td>
<td>□ May show concern, embarrassment, frustration, fear of speaking. May be reluctant to participate in classroom activities such as show-and-tell, reading aloud, or raising hand during question-answer periods.</td>
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<tr>
<td><strong>Peer reactions:</strong></td>
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<tr>
<td>□ None apparent</td>
<td>□ May show concern, embarrassment, frustration, fear of speaking. May be reluctant to participate in classroom activities such as show-and-tell, reading aloud, or raising hand during question-answer periods.</td>
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<td><strong>Parent reactions:</strong></td>
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<tr>
<td>□ None to a great deal</td>
<td>□ Some degree of concern</td>
<td></td>
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<tr>
<td><strong>Referral decision:</strong></td>
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<td></td>
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<tr>
<td>□ No referral</td>
<td>□ Refer for screening</td>
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4. **Two Main Goals in Speech Therapy for Stuttering:**

   - To make talking easier
   - To develop healthy attitudes and feelings about talking

Keep in mind, however, that making talking easier does not mean eliminating all stuttering. Children learn to manage stuttering by learning speech tools, but using them consistently can be difficult. Reasons why using speech tools can be difficult:

   - unsure about using tools
   - excited or rushed
   - fatigue or illness
   - language complexity

Speech therapy can be a long-term process. Children may show changes in how they talk and how they feel about talking.

5. **Teaching Tips**

   **It is important to let children know that it is always ok to stutter.**

   **What to do when the child is having a difficult speaking day**
   Depends on the child, so talk to them before hand about what they would like. For some children be patient, wait for child to raise hand and don’t fill in what that child was going to say as some children would like the opportunity to confront the issue. Others, do not what to be called on when they are having a difficult talking day.

   **When a child who stutters interrupt others**
   Handle it as you would the other children. They too need to learn the rules for good communication.

   **Oral reports – how to make it a positive experience**
   Make the student feel comfortable by developing a public speaking plan with him/her. Factors to consider: order of students, ways to practice, extra time, and whether or not to give the report privately, in a small group or whole class.

   **Should a student’s stuttering be addressed to the whole class**
   Only when the child wants you to. Discuss it with them first. If the child would like stuttering to be discussed – not to make a big issue – tell students what it is and what to do with it – read a story - famous people who stutter

   **Teasing**
   Deal with teasing as you would with any other child. Continue to have high behavioral expectations. It is important to make your classroom a safe place for all students. Everyone deserves respect! It may help to explain what stuttering is in order for all students to understand what is happening.

   **How to encourage students who stutter to talk more in class**
   Let them know that stuttering does not bother you and that you are glad that you are glad that they are talking – good to share ideas in class, tell me that I am glad you are talking

**References**


