

If You Think Your Child Is Stuttering...

Is Your Child Stuttering?

If your child has difficulty speaking and tends to hesitate on or repeat certain syllables, words, or phrases, he may have a speech disfluency or stuttering problem. But he simply may be going through periods of normal disfluency that most children experience as they learn to speak. This will help you understand the difference between stuttering and normal language development.

Stuttering Risk Factors

1. Family history of stuttering (specifically family members who still stutter)
2. Stuttering onset after 3 ½ years of age
3. Stuttering 6-12 months or longer
4. Other speech-language delays (e.g., speech errors, trouble following directions, etc.)
5. Gender – Girls are more likely than boys to outgrow stuttering

The normally disfluent child

1. The normally disfluent child occasionally repeats syllables or words once or twice, li-li-like this. Disfluencies may also include hesitations and the use of fillers such as "uh", "er", "um".
2. Disfluencies occur most often between ages one and one-half and five years, and they tend to come and go.

They are usually signs that a child is learning to use language in new ways. If disfluencies disappear for several weeks, then return, the child may just be going through another state of learning.

The child with milder stuttering

1. A child with milder stuttering repeats sounds more than twice, li-li-li-like this. Tension and struggle may be evident in the facial muscles, especially around the mouth.
2. The pitch of the voice may rise with repetitions, and occasionally the child will experience a "block" -- no airflow or voice for several seconds.
3. Disfluencies may come and go but are now present more often than absent.
4. Effortless repetitions or prolongations of sounds are the healthiest form of stuttering. Anything that helps your child stutter like this instead of stuttering tensely or avoiding words is helping.

The child with more severe stuttering

1. A child with more severe stuttering stutters on more than 10% of his speech, stutters with considerable effort and tension, or avoids stuttering by changing words and using extra sounds to get started.
2. Complete blocks of speech are more common than repetitions or prolongations.
3. Disfluencies tend to be present in most speaking situations now.

What Parents Can Do...

1. **Be a good speaking model** for your child by keeping your speech slow and relaxed. Stretch out the words a little and take time to pause between ideas. Try not to use language that is too complex for your child to imitate. Stick to short sentences and words that are appropriate for your child's level.
2. **Listen patiently to *what your child says***, not only how it is said. Nod, respond, or reiterate your child's message so that he/she knows you have understood. Maintain natural eye contact and remain positive
3. **Pause for a second or so before responding to your child.** This helps to calm and slow the pace of conversations and speech
4. **Avoid filling in words for your child.** Giving your child enough time to finish on his/her own reduces time pressure and reduces the impression that you don't have time to wait. Waiting for your child lets your child's words be his/her own and lets your child know that you believe that he/she is competent and capable of saying the words on his own
5. **Reduce competition and interruption.** Allow your child to complete his/her thoughts without interrupting. Establish a family rule that everyone must take turns when speaking and try not to interrupt others
6. **Make time for talking.** Spend some time each day devoted to talking with your child in an unhurried, relaxed manner. Let your focus remain on your interaction without dividing your attention. When combining talking with other activities (such as crafts or cooking), let your child know that you are listening even if you aren't looking at him/her.
7. **Avoid constant questioning.** Try not to ask too many questions – Instead, focus on what your child wants to discuss (follow your child's lead). Avoid asking a second question before the first is answered. Encourage communication by commenting and listening to your child's response
8. **Reduce Performance Demands.** Model things such as "please", "thank you", and "goodbye" rather than demanding your child to say them
9. **Avoid treating stuttering like a secret.** Remain relaxed and attentive when your child is stuttering. Avoid looking away, pretending not to notice, or reacting with emotion or pity. If your child asks, discuss stuttering as openly and honestly as you can (can talk about "bumpy" speech sometimes)
10. **Try not to make "unhelpful" suggestions.** Telling your child to slow down, calm down, or to repeat stuttered speech is rarely helpful and suggests impatience with your child's stuttering. Successful strategies for fluency should be selected and introduced by a speech-language pathologist who can counsel parents about how to support their children effectively

Speech Therapy Services for Children with Stuttering

1. Preschool aged children (Junior Kindergarten year and under) – Toronto, York Region, Durham, and Halton-Peel Preschool Speech & Language Services
2. Children, teens & adults (4 years and up) - The Speech & Stuttering Institute (416) 491-7771 ext. 224.
3. School aged children – Speech therapy may be available at your child's school (Speak with your child's principal or classroom teacher for a referral)
4. Private Speech therapy – OSLA: www.osla.on.ca or CASLPO: www.caslpo.com