

Speech and Language Therapy – Supporting adults with a stammer

- What is a stammer?

A stammer (also referred to as dysfluency/stutter) is a fairly common speech difficulty. There are two main types of stammering: developmental stammering and acquired stammering. Developmental stammering begins in childhood, on some occasions it may resolve but on other occasions it may persist into adulthood. Acquired stammering can start at any age and is triggered by a certain event, some examples being a head injury, neurological condition or emotional trauma,

Stammering affects people in different ways and some people may have a more severe stammer than others. Individuals who stammer often have the following features in speech:

- Repeating sounds, for example “mi-mi-mi-milk’
- Lengthening sounds, for example – ‘mmmmmmilk’
- Forming the mouth into the position for the word but no sound comes out.

Adults who have had a stammer since childhood may have developed their own coping strategies. They may also find that they have ‘triggers’ that make their stammer worse, for example stress at work, new situations. Often adults with a developmental stammer will have had Speech and Language Therapy at some point in the past.

- How can Speech and Language Therapy help?

Speech and Language Therapists know about the different approaches to stammering. Speech and Language Therapists are trained to help individuals learn about their stammer, including the triggers. Speech and Language Therapists can help to improve the individual’s fluency and communication skills.

It is common for people who have a stammer to feel fear, frustration, low confidence and self-esteem and embarrassment because of their stammer, Speech and Language Therapists may wish to focus on these issues too.

If you had Speech and Language Therapy as a child and you feel it did not help your stammer, you may feel reluctant to try again. However therapy approaches and the evidence base are constantly evolving so it is worth persevering with therapy.

- **What is involved in the assessment?**

To begin with, the Speech and Language Therapist will take a case history. A case history is a number of questions. The Therapist will ask questions about you and your life, including your job, social life, family history of stammering and past Speech and Language Therapy. The Therapist will also ask you questions about your stammer, including how it affects you, what triggers it and what you do in times of dysfluency. The Speech and Language Therapist will give you time to answer questions and you do not have to answer anything that you do not feel comfortable with. You may wish to write down some of the answers to the questions yourself if you do not feel able to speak to the Therapist just yet.

The Therapist may take notes on how your speech is affected by the stammer, Sometimes; the Therapist may wish to complete a formal assessment of your speech as long as you are happy to do so.

- **What might happen in therapy?**

It is impossible to say what your therapy plan may include as there is not a set plan that is suitable for everyone. Using the assessment findings, the Therapist will design a tailored therapy plan. The therapy plan may include direct work on the stammer but also may focus on a number of different things some of which may include confidence, relaxation and social skills.

The therapy usually takes place on a 1:1 basis with yourself and the Therapist. In between sessions, the Speech and Language Therapist will set specific and achievable goals for you to work towards.