

Prevent Stuttering

(Tips & Tricks to Help Combat Stuttering)

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Introduction

Stuttering is a speech impediment that is caused when the regular speech pattern is interrupted by repeated syllable or letter sounds. This happens when a person cannot say the word all at once. The person may also experience tremors and eye blinking while stuttering.

Stuttering can happen while they're talking to a bunch of people or to one person. In the UK, stuttering is referred to as stammering or disfluent speech.

There are about three million Americans that have been diagnosed with stuttering. It can affect anyone, but the group that it affects the most is children between the ages of 2 to 6 years old. This is the time that they are learning to talk and make sentences. In this age group, boys outnumber the girls in stuttering. With adults, the stuttering rate hovers around 1 percent.

Some research has shown that stuttering may be genetically related. However, most stuttering has seemed to produce a developmental pattern. This is in reference to young children that are just starting to speak and form words and sentences.

With them, they stutter when they try to form the right word or sentence to speak out of their mouths. Usually with this type of scenario, the children will outgrow it.

There is another type of stuttering that originates from the brain area. This is called a neurogenic disorder. The signals with the brain, nerves and muscles do not connect properly. In this case, the coordination is lacking. This type of stuttering is also present if a person is or has suffered with an injury from the brain or a stroke.

Another type of stuttering is called psychogenic. This has to do with the mind and thinking. Usually people that have some form of mental illness or related condition experience this. For a while, this type of stuttering was supposedly a major portion in regard to origination. Now, psychogenic stuttering accounts for a minimal amount.

People that stutter sometimes are apprehensive about getting to know other people or talking on the telephone due to their speech impediment.

Stuttering can be diagnosed by a speech language pathologist. This is a person that is trained to test people that may have this problem. If they have been diagnosed with it, the speech pathologist works with them to get treatment.

They work with the voice, speech and language. Also factored into this is when the stuttering came about and how it came about. The speech pathologist will conduct a thorough evaluation to see what needs to be done.

Even though there is no actual cure for this, there are treatments that are available to help with this speech disorder. Therapy can help developmental stuttering from continuing. If a child has stuttered for more than six months, the speech pathologist will conduct an evaluation to see if there is a behavioral pattern along with that.

The behavior of stuttering can be defined as a breakdown of fluent speech. Along with repetition of sound, syllables words or phrases, there are also silent blocks and sounds that take longer to pronounce.

These disorders are opposite of the normal way that people speak. It is also a fact that people who have these difficulties mentioned above will experience them on a more frequent basis. In addition to that, it takes more out of them to get their sounds out than it would a person that just speaks normally.

There is also a certain quality in regard to stuttering. The person will usually speak in a word repetition or phrases or a portion of same.

To get more detailed, stuttering can be broken down in to three different characteristics:

- **Repetition** – This is when a part of a person’s speech that can include syllables, sounds, words or phrases are repetitious. This usually happens in young children who have just started stuttering. An example of this would be “b-b-baby”.
- **Prolongations** – This refers to continuing sounds that are pronounced longer than usual. An example of this would be “rrrrrrrrrrrrrrrrrrrrrrred”. This characteristic also happens to young children who just started stuttering.
- **Blocks** – This is unusual stoppage of sound and air. This happens when the tongue, lips or vocals stop moving. Blocks are known for happening later in life and are connected with effort and strained muscles.

Some people who stutter exhibit additional behavioral patterns that have nothing to do with their speech. They’re considered behaviors that are learned and end up being connected with the superior behaviors of stuttering.

With these secondary behaviors, people that stutter try to end their speech impediment on their own. This is usually done in a physical manner, which can include:

- Blinking eyes
- Head jerking
- Hand tapping
- Less eye contact

- Mouthing things like “ah”, “um”, etc. (called starter sounds and words)

Stutterers also use secondary behaviors to avoid situations where they have to use words to be fluent in speaking. They also exhibit a sense of anxiety and fear of not speaking correctly.

Most people that stutter portray negative feelings about their condition. They have feelings of:

- Shame
- Embarrassment
- Fear
- Anger
- Frustration
- Guilt

These feelings are common for people that stutter. They can also add to their tension and effort to speak better. This may lead to them stuttering even more. Unfortunately, some stutterers may portray their feelings to other people. They start to feel self-confident because they feel that other people think that they are beneath them because of their speech condition.

Causes Of Developmental Stuttering

There is not one thing that stands out as causing developmental stuttering. There have been different factors and theories that exist. There is a strong tie to genetics. Children with immediate relatives are more likely to develop stuttering.

However, studies have shown over half of those that stutter have no connection to genetics. It has been found that there are more children that stutter that have speech, language, motor or learning difficulties.

In addition to that, other factors could include:

- Cerebral palsy