Primary School Children who have Dysfluent Speech (Stammering/Stuttering).

Information for parents, teachers and carers

For more information, please contact Speech & Language Therapy on:

For York and Selby Area: 01904 724366
For Scarborough Whitby, Ryedale Area: 01723 342472
UNIVERSAL LEVEL: ‘What you need to know’

Support, enable and include your child through;

- Attendance at our training courses in relevant areas of Speech Language and Communication Needs (SLCN);
  - Supporting Children who Stammer

(Please contact the Speech and Language Therapy department to express interest in attending and to find out when this training course is running).

- Knowing that learning to talk, like other skills such as walking, doesn’t happen straight away. Young children will often stop and start again and stumble over words when they are learning to talk. It is normal for young children to repeat whole words and phrases and hesitate with ‘ums’ and ‘ers’ whilst they are trying to decide what to say and how to put their sentences together. Up to 8% of children experience stammering when they are learning to talk.

- Stammering often occurs between the ages of 2 and 5, when a child’s speech and language skills are developing. 4 out of 5 children who start to stammer will resolve either naturally or with help. However, as we don’t know with 100% certainty which children will resolve naturally, and which ones will need help, it is important the right support is in place to encourage a child to develop more fluent speech. Early intervention is the most effective and therefore timely referral to a Speech and Language Therapist is really important.

- Knowing that a child is likely to be presenting with a stammer if they are putting extra effort into saying his/her words, which can make the sounds come out in a more tense way. You may hear some or all of these features when they talk:
  - Repeating the first sound or syllable of a word e.g. m-m-m-my or pa-pa-party.
  - Stretching sounds out e.g. mmmmmum
  - Difficulty getting started or moving through a word, no sound may come out for a second or two because the sound is getting stuck e.g. m….um.
  - Disrupted breathing
  - Tension in their face or neck as they speak
• Being aware that it is normal for stammering to come and go. A child may not stammer for a few days or even months, but then the stammer might start again. A child’s stammer may vary depending on the situation (relaxed or rushed environment), the person they are speaking to (friends, family, strangers), how they feel (tired, anxious, excited etc.), or what they are trying to say (complicated or simple sentences, new or familiar vocabulary).

• Knowing that even if a child’s stammer isn’t there all the time, it is still important to get the right support from a Speech and Language Therapist, to make it more likely their stammer will resolve or to reduce the impact the stammer has on the child when it is present.

• Stammering is a neurological condition, subtle changes within the brain result in a physical difficulty in talking. However, stammering is complicated and there is not one single cause. There is usually a combination of factors that result in a child stammering. Things that happen in the environment at home or school do not cause stammering. However, here are things in an environment that might make it more difficult for a child to speak fluently if they do have a stammer.

• Stammering often, but not always, runs in families. About 60% of people who stammer have another family member who stammers. Stammering initially affects boys and girls equally but later on there are about 4-5 times as many boys who stammer than girls.

• Reading about stammering on the following reliable websites:
  - https://stamma.org (British Stammering Association)
  - https://actionforstammeringchildren.org

• Watching the following video clips (can be found on YouTube):
  - ‘Wait! I’m not finished yet’ by the Michael Palin Centre.
  - My Stammering Tap by My pockets Ltd.
 These video clips are short films which aims to raise knowledge and awareness about how to support an individual who stammers.
• Accessing information from relevant sources such as;
TARGETED LEVEL: ‘What you do, in light of what you know’

Boost your child/young person’s fluency skills further by;

- Discussing the child’s particular needs with your local Speech and Language Therapist.

- **Trying to slow** down your **own rate of talking** to suggest that there is plenty of time, especially in a 1:1 situation.

- Don’t ask them to slow down or ask them to take a deep breath or to start what they are saying again, as this might make them self-conscious and worried that they are doing something wrong with their talking. The child will be doing his/her best.

- Give them time to finish off their sentences and always try not to interrupt!

- Asking fewer **questions**, this can be helpful as questions can put the child on the spot and make it harder for them to speak fluently. Try instead, to make comments e.g. ‘that’s a lovely picture’ rather than ‘what have you drawn?’ the child can then speak if they want and in their own time. If you do ask a question, it might be helpful to simplify your questions, asking one that only requires a short response or a single word (e.g. by giving a choice such as ‘do you want the red or green paint?’).

- Making friendly and easy **eye contact** throughout a conversation to show you are listening.

- Keeping your language at a similar developmental stage to that of the child; use similar length sentences and vocabulary.

- Being aware that there may be some activities in school which are harder for the child who stammers e.g. learning phonics, reading aloud, answering the register, answering questions in front of the class. Some flexible teaching may be helpful here to reduce the pressure on the situation.

- Knowing that every child who stammers is different. It can be helpful to make a note of situations that increase fluency for an individual child so that you can do these things more often.

- Taking teasing and bullying very seriously. It can obviously really knock a child’s confidence if they hear themselves being copied/mimicked when stammering, even when it’s not meant to be unkind. It is important for any teasing/bullying to be dealt with immediately as these situations can make a child’s stammer worse.
• Using plenty of specific praise where possible and encouraging the child who stammers to find their own strengths.

• Understanding that many children do grow out of their dysfluency but making the above adaptations early on could make all the difference as to how long this time of difficult speech continues.

• Being aware that generally the following speaking situations tend to increase stammering:
  ➢ Speaking to adults who talk very quickly.
  ➢ Speaking when they think they will be interrupted.
  ➢ Speaking to someone who is not really listening.
  ➢ Anticipating a turn to speak e.g. reading aloud, answering the register etc. particularly if they have to wait a long time for their turn (gives chance for anxiety to build up!)
  ➢ Speaking when they fear the consequences of what you say.
  ➢ Speaking when they do not want to or when they have nothing to say.
  ➢ Speaking when very tired, upset, or feeling unwell.
  ➢ Speaking in a rush when they have a lot to say or a complex idea to express.
  ➢ When they have been asked a question requiring them to express complex ideas.
  ➢ When they are using new vocabulary and/or sentence structures.
  ➢ When they are in situations where they have to compete to speak.

• Being aware that generally the following things can make it easier for a child to speak fluently:
  ➢ Looking at the child and getting your face on the same physical level
  ➢ Using sentences and vocabulary which can be easily understood.
  ➢ Talking about the present (the here and now) and things that can be seen.
  ➢ Reducing the number of questions that you ask, allowing the child to choose when to tell you things.
  ➢ Giving the child time, slowing your own speech down, showing that you are listening and interested.
  ➢ Using familiar material that is well within the child’s level of ability to reduce the communicative pressure, which can allow more fluency.
  ➢ Maybe return to some of his/her favourite books, rhymes, games and activities to help the child feel the security of the familiar.
  ➢ Flexible approach to oral tasks e.g. allowing a variety of verbal or non-verbal responses at register time rather than having to say a set phrase.
  ➢ Speaking and reading in pairs/unison.
  ➢ Singing and possibly some acting.
  ➢ Reciting familiar lists like days of the week or poetry with a strong rhythm.
Tell us what you think
We hope that you found this leaflet helpful. If you would like to tell us what you think, please contact

Teaching, Training and Research
Our Trust is committed to teaching, training and research to support the development of staff and improve health and healthcare in our community. Staff or students in training may attend consultations for this purpose. You can opt-out if you do not want trainees to attend. Staff may also ask you to be involved in our research.

Patient Advice and Liaison Service (PALS)
Patients, relatives and carers sometimes need to turn to someone for help, advice or support. Our PALS team is here for you.
PALS can be contacted on 01904 726262, or via email at pals@york.nhs.uk
An answer phone is available out of hours.

About Us
Providing care together in York, Scarborough, Bridlington, Whitby, Malton, Selby and Easingwold.

Caring with Pride:
Our ultimate objective is to be trusted to deliver safe, effective and sustainable healthcare within our communities.

Our values:
- Caring about we do
- Respecting and valuing each other
- Listening in order to improve
- Always doing what we can to be helpful

Speech and Language Therapy: Dysfluency Primary School