AIS AMERICAN INSTITUTE FOR STUTTERING
Speak Freely. Live Fearlessly.

Stuttering Information for Pediatricians

Since the pediatrician is often the first person parents speak to when they notice their child stuttering, it is important that pediatricians be aware of current research findings regarding childhood stuttering, and how to provide proper recommendations to parents.

There is no "cure" for stuttering; however, specialized therapy can minimize the physical struggle, and negative thoughts and emotions that often make stuttering more challenging. For young children, working with the entire family is critical to help create a home environment that is more conducive to fluent speech, as well as to help establish healthy ways to talk about stuttering.

What we know:

- Stuttering is an inheritable, neurologic condition
- 5-8% of children will demonstrate noticeable disfluency at some point in their speech
- Approximately 20% of children who stutter will continue to stutter into adulthood
- Stuttering is multi-factorial; Genetic make-up provides a predisposition and epi-genetic and environmental factors serve as triggers
- The majority of physical struggle and secondary movements evidenced during stuttering are conditioned responses to escape moments of stuttering
- Many children and adults stutter "covertly," successfully hiding stuttering by diminishing speaking and avoiding and substituting feared words

Therapy for Childhood Stuttering

Parents are often bewildered as to how best address their child's stuttering. It is important to note that there are currently fewer than 160 Speech-Language Pathologists who have received certification as a specialist in fluency disorders from ASHA (The American Speech-Language-Hearing Association). The vast majority of speech therapists who treat stuttering are trained as generalists, without the proper necessary training to treat people who stutter. The therapists at the American Institute for Stuttering are all either board certified, or in the process of completing the requirements.

While therapy does work on minimizing stuttering, whether the child continues to stutter or not, proper treatment aims to ensure that the child speaks freely and confidently and has the tools and language to self-advocate. Recent research has called into question some of what was previously considered "evidence-based practice" in childhood stuttering, namely the use of contingencies (i.e. having parents praise fluent speech and sporadically make direct requests of the child to 'correct' moments of stuttering). Preferred methodologies

currently include modifying the child's environment so as to minimize that child's individual triggers and working to help minimize the child's physical struggle while speaking.

The Role of the Pediatrician

Prevailing wisdom has long dictated to advise parents who are concerned about stuttering to not worry and to "wait and see" for six months or so. While 75-80% of children between the ages of 2-5 do spontaneously recover, certain risk factors can help predict which children are more likely to continue to stutter. These include:

- Family history of stuttering
- Gender: Females show recovery rates about 4 times that of males
- Profile of delayed language and/or phonologic skills
- Sensitive reactive temperament
- Stuttering has been present for over 12 months

It is advisable for pediatricians to advise parents to seek a Speech-Language Pathologist (SLP) who specializes in stuttering treatment in the following cases:

- The child shows one or more of the above risk factors
- The child has started to show physical struggle or avoidance of speaking situations
- The parents show significant and persisting concern about their child's speech

About the American Institute for Stuttering

AIS is a leading non-profit 501(c)(3) organization whose primary mission is to provide universally affordable, expert speech therapy to people of all ages who stutter, guidance to their families, and much-needed clinical training to speech professionals wishing to gain expertise in stuttering. Our mission extends to advancing public and scholarly understanding of this often misunderstood disorder.

