

Treatment Approach "KIDS" - Groups for Children Who Stutter

Lukas (7): "We are here to talk about our problems!"

Denis (6): „No, we are here to talk about stuttering!"



Origins

Based on the stuttering modification approach of Van Riper (1973) for adults and Dell (1979) for school aged children Patricia Sandrieser and Peter Schneider (2001, 2004,2008) developed KIDS – an approach for stuttering children between the age of 2 and 12 years.

KIDS means "Kinder dürfen stottern" - "children are allowed to stutter".

Why should children be allowed to stutter?
 It prevents dysfunctional coping strategies.

If it is not allowed to stutter it is a failure if it occurs.

In consequence the children show efforts to get out of it and start to struggle.

Or they attempt to avoid it.

Negative reactions of environment induce secondary emotions such as shame and guilt > risk for self-esteem

Why should it be allowed to talk about stuttering?

It prevents dysfunctional coping strategies.

If it is not allowed to talk about stuttering it becomes a taboo.

The child is troubled by imagination and concerns about reasons and future, but can get neither relief nor consolation, because there is no permission to talk about it.

This is a burden for both - child and parents.

We should show them good coping strategies that frequently induce recovery!



Phases of KIDS

- **Desensitisation** against stuttering and triggers
- **Identification** of overt/covered stuttering behaviour
- **Modification** of stuttering behaviour using techniques like Pullout and Prolongation
- **Generalisation** of easy assertive stuttering in every day life
- **Parental counselling** is one of the supporting columns > well-informed parents are more likely to intervene in a supporting way if other persons show negative reactions to the stuttering child.

Benefits from stuttering peers in a group

- they demonstrate a realistic model to each other
- they are motivated by a competitive atmosphere
- they offer a learning environment that they are familiar with from kindergarten or school

Setting

- In younger children smaller groups (4 to 6 children) have proved to be successful. They can be managed by one SLT while bigger groups (up to 12 persons) need two or more SLT's.
- Sessions can take place once a week for 90 min or for several Saturdays or for a whole week during vacation
- Parallel parental groups are recommended especially for the younger children.

Group therapy is not an alternative to individual sessions, but offers an supplementary option.

Indications for a Group Format

KIDS for school age children combines individual and group sessions.

A group format is recommended as soon as the following indications emerge:

- no contact with other stuttering children
- poor self-esteem concerning communication skills
- low motivation to transfer techniques into every day life
- prejudices, taboo and poor knowledge concerning stuttering
- fear of negative listeners' reactions and teasing
- fear of being a person who is different from others, whose stuttering is time consuming and not "cool".
- low motivation for individual sessions



Goals

Functional coping:

- Decrease of tension and time-pressure during symptoms
- Decrease of shame or guilt
- Increase of tolerance concerning mistakes
- Increase of self-esteem as a competent speaker
- Pragmatic competency to communicate successfully with stuttering symptoms

Group dynamics

Children learn in a controlled real environment to act with their peers in a group and to reflect their emotions, cognitions, actions and the consequences.

The SLT has to observe and to support group processes. According to the different stages for a group adequate activities and interventions are necessary. E.g. in the forming stage, in the storming phase:.

Tuckman's stages for a group (1965) :

Forming (pretending to get on or get along with others)
 example for a specific activity: rituals in order to become familiar with each other

Storming (letting down the politeness barrier and trying to get down to the issues even if tempers flare up)
 example for a specific activity: encourage the children who are involved in a conflict to express their different positions and to listen to each other


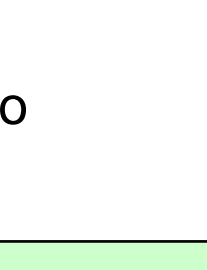


Norming (getting used to each other and developing trust and productivity)
 example for a specific activity: preparation of visiting and informing a class, training of speaking techniques, desensitisation in-vivo

Performing (working in a group to a common goal on a highly efficient and cooperative basis)
 example for a specific activity: every activity is performed in an efficient and cooperative manner. The group supports children with their individual problems, e.g. motivates for the transfer of speaking techniques

Mourning (mourning the farewell of the group)
 example for a specific activity: rituals of estimating the achievements of each child, anticipation of a future without the supporting group, fare well rituals

Issues and activities

Depending on the age of the participants, the stage of the development of the group and the individual needs of the participants the treatment can contain the following issues

Issue	Examples of activities
Confrontation and exchange with other stuttering children – they learn to support each other and to adopt their diversity and individuality with a broader focus than only on speaking and stuttering	A lot of this exchange happens during the informal conversation during the breaks. 
Development of an identity as a group which gives support to the participants	Contracts for the goals are negotiated with every child (and if required also the awards). The group gets the possibility to chose from alternatives, to discuss the degree of difficulty, to assess rules. 
Taking of the taboo and prejudices and providing knowledge about stuttering	Invitation of the parents and peers; questions about stuttering and reactions to it, about successfully solved problems, school situation, concerns for future etc. Presentation on stuttering at school 
Gradual desensitization against stuttering and the loss of time during symptoms, against being different, against negative social reactions towards stuttering and against stressful situations	Hierarchical increase of <ul style="list-style-type: none"> • Linguistic complexity • Social risk • Emotional stress • Type and duration of stuttering • Quantity of the behaviour Developing individual goals. Children do these activities in pairs Surveys and interviews - see video sample Asking people on the street for certain places (task-sheets) "Apple and egg": a pair or a little group of children get an apple which they have to change into another thing in different shops. How many things they are able to exchange within 15 min? 
Learning and training of speaking techniques in- and outside the practice or clinic	Establishing pseudo-stuttering and symptom-releasing-techniques in situations with increasing linguistic complexity, time pressure, external disturbing factors Easy: Find a town, a country and a river starting with a given letter of the alphabet and read it aloud. Difficult: the children make a survey about Christmas presents/ preference of a football team/ pets in the household of the interviewee
Generalisation of the techniques (because: stuttering therapy is only helpful if the skills are used in daily life)	Homework between therapy sessions and developing individual goals for the individual therapy following the group therapy. Involvement of parental help in younger children. Tests of courage in real situations combined with "tests of courage" where every child tries to ask as many persons as possible inside the clinic/on the street/in the shopping mall. The children remind each other when they forget to use the technique during a game or in their spontaneous speech.
Improvement of the self-esteem as a person who stutters.	Knowledge about stuttering and the ability to teach it other persons. The children learn that they have rights that they can defend themselves (e.g. it is not allowed to disrupt someone because of his/her stuttering) In younger children: support through parallel parental-groups Information about the self-help movement Self instructions like "I have important things to say!", awards for the most courageous action, rituals of estimation from the group and from the SLT for individual progress. Quiz with the parents with questions like "are cats able to stutter?" and "Do you think that children who stutter are less brave than children who do not stutter?"
Enhancement of social competencies and problem solving strategies	The group formulates rules of behaviour during the therapy session. They learn that disregarding them leads to consequences. In-vivo training including the training of pragmatic competencies e.g. greeting, saying good bye etc. See video of a role play of bullying in a class and a variety of different reactions, Stories of problem situations with an open end. 