



Case Study:

Team Improves Quality of Life for Child Who Stutters

SIG 4: Fluency and Fluency Disorders

Summary

An interprofessional team collaborated with the parents of a 10-year-old boy struggling with moderate-to-severe stuttering. By applying their expertise to group therapy, individual therapy, and family counseling services, the team members helped the boy and his family successfully manage his stuttering and enjoy better communication. After 6 months, formal assessments indicated improvement in the student's reaction to his own stuttering and increased interaction in classroom and social settings.

Student Info



JUAN
10-YEAR OLD

Current Diagnosis:

Moderate-severe stuttering

Meet The Team



School-based
SLP



Private SLP
specializing in
stuttering



Classroom
teachers



School
psychologist



Band
instructor



Student



Family

Continue for more 

Background

Juan is a 10-year-old boy diagnosed with moderate-to-severe stuttering. He has been receiving speech therapy services off-and-on since he was 4 years old. Juan received an individualized educational program (IEP) in first grade and has continued to receive speech therapy services. Juan is currently in fourth grade and will transition to a new school in the fall.

Juan was receiving speech therapy services for 30 minutes per week in a group setting. Therapy services focused primarily on speech modification and stuttering modification techniques. However, Juan's teachers and parents reported that he was becoming increasingly frustrated with his stuttering and with his difficulty in communicating with others. Juan began to withdraw from social situations and class participation because students made fun of his stutter. Juan's grades began to suffer, and he told his parents that he wanted to quit the band because he didn't want other band members to find out that he stutters.

Juan's school-based speech-language pathologist (SLP) and his parents agreed that an outside consultation with another SLP who specializes in stuttering—and perhaps individual treatment, as well—would be helpful.

How They Collaborated

The interprofessional team met to develop an assessment and treatment plan. The team was coordinated by an SLP, who was responsible for keeping a calendar and for ensuring that updated information was available to the team.

Both the school-based SLP and the private SLP who specializes in stuttering conducted assessments and formal testing with Juan to determine his current level of stuttering and its impact on Juan's quality of life. They also reviewed Juan's readiness for individual and group treatment in school-based and clinical settings.

Results of the stuttering assessment indicated disfluency rates ranging from 7% during conversational speech with the clinicians to 16% during oral reading, and 14% in classroom observation. Juan's stuttering had a moderate-to-severe impact on him, his overall communication, and his quality of life.

As part of the assessment, the school-based SLP collected input from Juan's teachers and band instructor. Classroom teachers reported that Juan was a bright student, but he was hesitant to speak in class and was reluctant to start conversations with his peers. They reported that Juan's peers often asked him about his stuttering, but he didn't know how to respond. Lacking a background in stuttering, Juan's teachers weren't sure how to help.

The private SLP worked with Juan's parents to get their input. Juan's parents reported that his stuttering, and resulting frustration, appeared to be increasing at home. Juan's parents reported that they sometimes had difficulty following through with behaviors at home (e.g., getting Juan to bed on time). They were referred to a family counselor.

The IPP team discussed the results of these assessments and agreed on a treatment plan. The school-based SLP provided group therapy focused on speech modification, Juan's knowledge of stuttering, his improved reactions to his own stuttering, and his overall communication skills. The private SLP's individual therapy focused on similar skills. The SLPs maintained close collaboration to ensure that both professionals were targeting similar goals.

How They Collaborated continued

In addition, family counseling sessions focused on helping his parents follow through with discipline at home. Juan's parents had previously worried that disciplining Juan could make his stuttering more pronounced. Collaboration with SLPs helped the parents understand that discipline should not be ignored for children who stutter. Ongoing consultation with teachers ensured that treatment goals for Juan were carried over into the classroom. Teachers were given a log to rate his progress in participation and his reactions to stuttering.

Outcome

After 6 months, a new assessment indicated that Juan's reactions to his stuttering have improved. Juan's teachers noted increased levels of participation and discussion with his peers. Juan gave a presentation to his classmates and teachers to help educate them about stuttering. His social interactions improved. He agreed to continue with the band and attended a summer camp for children who stutter.

Ongoing Collaboration

The IPP team communicates weekly to check Juan's response to treatment, and the team holds scheduled meetings every 4-6 weeks during the school year. The SLP will coordinate ongoing intervention services with Juan's family.

At monthly evaluation meetings, Juan's IPP team members discuss reflections, needs for adjustments in treatment, and conflicts.

Case Rubric:

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Family

Continue for more ↓

History and Concerns

(Share key information gathered from team)

Juan is a 10-year-old boy who was diagnosed with moderate-severe stuttering. He has been receiving speech therapy services on and off since he was 4 years-old. **Juan** received an Individualized Educational Plan (IEP) in 1st grade and has continued to receive speech therapy services in the schools since that time. **Juan** is currently in 4th grade and will be transitioning to a new school in the fall. **Juan** currently receives speech therapy services for 30 minutes per week in a group setting. Therapy services have focused primarily on speech modification (pausing and phrasing, easy onsets, light contacts) and stuttering modification (cancellations, pull-outs, and easing out) techniques. Recently, **Juan's** teachers and parents have reported that he is beginning to withdraw from social situations, other students are making fun of him for stuttering, and he is not participating in class discussion. Additionally, **Juan** has told his parents that he would like to quit the band because he stutters and he does not want other band members to find out.

Juan's parents and teachers also describe **Juan** as becoming increasingly frustrated with his stuttering and difficulty communicating with others. When others ask **Juan** about his stuttering, he does not know how to answer their questions, so he simply refuses to talk and walks away. **Juan's** grades are beginning to suffer, as he withdraws from classroom discussion and academic participation.

Assessment Plan

(Determine roles/responsibilities for evaluation)

Juan's school-based SLP and his parents agree that an outside consultation with another SLP who specializes in stuttering would be appropriate to help in collaborating with objectives and perhaps help **Juan** to receive individual treatment, in addition to the group treatment he is receiving in the school setting. Both the school-based SLP and the SLP who specializes in stuttering conduct assessments on **Juan** to determine his current level of stuttering, impact on quality of life and overall communication, and level of readiness for individual and group treatment in the school-based and clinical settings.

The above information is discussed at a team evaluation meeting. The team will meet regularly, tentatively every two weeks, to discuss progress in planning.

A shared file including information about scheduled sessions and outcomes is accessed by the entire team.

Assessment Plan

(Determine roles/
responsibilities for
evaluation)

The initial team of two SLPs, classroom teachers, school psychologist, family, and band instructor, met to develop an assessment plan. Upon review of the history and family concerns, the team developed an assessment plan. The two SLPs administered assessment protocols, with the school-based SLP focusing on getting input from teachers and the band instructor. The private SLP, who specializes in stuttering, then worked with the parents to get their input. Additionally, both SLPs administered formal testing. Based on input from the parents, a referral to family counseling was also recommended, as Juan's parents reported that they sometimes have difficulty following through with behaviors at home (e.g. getting Juan to bed on time, limited fighting between Juan and his older sibling, etc.). The team will be coordinated by the speech-language pathologist, who would be responsible to keep a calendar and updated information available to the team.

Assessment Results

(Summarize key diagnostic
results)

At the end of the assessment process, the team reviewed the results of the various assessments. Results of the stuttering assessment indicated disfluency rates ranging from 7% during conversational speech with the clinicians to 16% during oral reading, and 14% in classroom observation. Additionally, assessment focused on reactions to stuttering indicated that Juan's stuttering has a moderate-severe impact on him, and his overall communication and quality of life are moderately-severely impacted by his stuttering.





Classroom teachers reported that Juan is a bright student, but hesitant to speak in class and he avoids starting conversations with his peers. They reported that Juan's peers often ask him about stuttering, but Juan does not know how to respond. Juan's teachers also noted that they do not have background on stuttering and they are not sure how to help Juan.

Parents reported that Juan's stuttering appears to be increasing at home, and he is becoming more frustrated when he cannot speak fluently. Family counseling noted that Juan is a healthy child overall, but his parents have a lack of follow-through, as they worry that disciplining Juan may make his stuttering more pronounced.

IPP Treatment Plan

(Discuss, reflect, and modify recommendations to develop a coordinated plan)

The IPP team agreed upon the following set of recommendations:

-  1. **School-based SLP** to provide group therapy focusing on improved reactions to stuttering, speech modification, stuttering, modification, knowledge of stuttering, and overall communications skills.
-  2. **Private SLP** to provide individual therapy focusing on improved reactions to stuttering, speech modification, stuttering, modification, knowledge of stuttering, and overall communications skills. Close collaboration will be maintained between both SLPs to ensure similar goals are being targeted.
-  3. **Family counseling sessions** to focus on helping parents follow-through with discipline at home. Collaboration will be established with SLPs to help parents understand that discipline should not be ignored for children who stutter.
-  4. **Ongoing consultation with teachers** to ensure goals are being carried over into the classroom. Teachers will be provided with a log to rate progress in participation and reactions to stuttering.

Treatment Outcomes

(Discuss results of treatment)

Over a 6-month period, data and performance indicated that Juan improved his reactions to stuttering, as measured by formal assessment. In addition, Juan's teachers noted increase in participation and discussion with his peers. Juan was also able to give a presentation on stuttering to his classmates and teachers to help educate them on stuttering. Juan's social interactions improved. He agreed to continue with the band and is attending a summer camp for children who stutter.

Team Follow-Up

(Determine meetings & communication plan)

The IPP team communicates weekly to check Juan's response to treatment, and the team holds scheduled meetings every 4-6 weeks during the school year. SLP intervention services will be ongoing and coordinated with the team, including Juan's family.

Needs for adjustments are discussed by the entire team, which follows a process of specific interpretation and perspectives mutually respected and pursued. Additionally, follow-up/ reflection meetings will be pursued in monthly evaluation meetings. Finally, conflicts will be pursued by the team coordinator along with professionals involved.

Acknowledgement

ASHA extends its gratitude to the subject matter expert(s) who were involved in the development of the original version of this IPP case:

Craig Coleman, MA, CCC-SLP, BCS-F
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Citations

American Speech-Language-Hearing Association. (n.d.). Team improves quality of life for child who stutters. <https://www.asha.org/practice/ipe-ipp/case-studies/case-study-7/>

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