

Survey on Current Stuttering Services in the School Setting: A Nation-Wide Survey

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Introduction

Stuttering is a multifactorial disorder characterized by atypical disruptions in the forward flow of speech, avoidance behaviors, escape behaviors, restrictions, and limitations of participation and activities. Comprehensive stuttering intervention involves identifying, assessing, and treating the behavioral features of stuttering, the different feelings and responses related to stuttering, and the environmental factors that make communication more difficult (Yaruss & Reardon, 2002). For most children, stuttering begins in preschool, and school-based speech-language pathologists are frequently called upon to treat children who stutter (Chmela & Johnson, 2018). Little to no research has been done on how school-based speech-language pathologists provide service for children who stutter. Despite the research available, many SLPs may not connect research to their current practices. A current nationwide survey is warranted to better understand how school-based SLPs provide stuttering services to students who stutter.

Purpose

The purpose of this study is to recognize the current stuttering service level in the United States school settings relating to confidence levels, popular assessments/treatments, service delivery, and continuing education. This information will enhance our understanding of how to improve the service competence of school-based SLPs in working with students who stutter and strengthen fluency disorder education in speech-language pathology programs. This study will answer the following question: "What are the current practices of public school SLPs concerning students who stutter?"

Methods

The research team created the utilized survey following an expansive literature review. The survey consists of 5 sections with an average of 6 questions in each section: Demographics, Assessment, Treatment, Service Delivery, and Continuing Education. After the survey was established, three faculty members from the communication sciences and disorders field were invited to provide feedback. A board-certified fluency specialist, who also has

expertise in developing survey tools, reviewed the survey and provided substantial feedback. Two school-based speech-language pathologists were invited to take the survey using a "thinking aloud" procedure. All feedback, comments, and revisions were addressed in the final version of the survey. Participants were recruited via email sent to certified, school-based SLPs across the 50 states in the USA. Participants received a link through an emailed flyer or social media blast to complete the survey electronically through Qualtrics. A total of 187 responses were received, among which 149 were included in the final analysis. The remaining 38 responses were submitted with no questions answered. Participants were from 28 states in the United States.

Data Analysis

Data collected from the qualtrics survey was gathered and qualitatively analyzed.

Figure 1

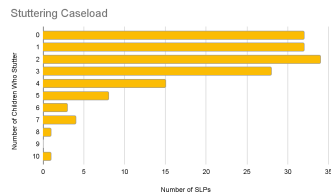


Figure 2



Figure 3



Results

The SPSS software was used to analyze the survey results. On average, respondents rated their confidence in assessing stuttering a 6, on a scale from 1-10 (1 being the lowest). See Figure 2. For the confidence on stuttering intervention, the average rating was also a 6 on the same scale. See Figure 3. When asked to rate the confidence level of using a new treatment approach, respondents on average rated their skills at a 5 on a scale of 1-10 (1 being lowest). Many respondents who had low confidence levels also reported that they had little experience with clients who stutter and had either zero or a low number of clients who stutter currently on their caseload. The SSI-4 was selected as the most often used assessment tool for stuttering. 46 participants reported that SSI-4 is the only available clinical tool for them to assess stuttering. 57 participants reported that they only use the SSI-4 to assess stuttering. When asked about graduate school clinic and class opportunities, 146 participants reported they had a fluency disorders course during graduate school. Only 3 reported they did not take a fluency disorders course. 125 participants reported they earned clinic hours working with stuttering clients during graduate school. 23 reported that they did not earn any fluency clinic hours. When asked about current caseloads, participants reported a minimum of 5 and a maximum of 188, with an average of 49 total students. Of those statistics, a minimum of 0 and a maximum of 10 with an average of 3 were reported as stuttering clients.

Conclusions

Based on the survey results, while current practicing SLPs may gain experience during their time in the field, there needs to be more graduate school opportunities to work with the stuttering population to gain valuable hands-on experience. Additionally, more training and education on different assessment tools besides the SSI-4 is needed. This is an our in our current practice SLPs and graduate students can advocate for. While many SLPs did feel somewhat confident, more needs to be done to ensure quality services are being provided to the children who stutter. Stuttering assessment and intervention techniques are essential for graduate students to learn and have experience in graduate school. This area offers student SLPs a platform to speak up for their own learning and training before embarking on their independent practice in the field. Additionally, this research offers crucial insights for graduate programs in SLP, particularly in the area of fluency disorders education. By shedding light on the importance of evaluating the current opportunities available to both students and faculty, it underscores the need for enhancing their understanding and knowledge of individuals who stutter.

Key References

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