

A CONSIDERATION OF SOME OF THE PSYCHOLOGICAL CAUSES AND TREATMENT OF STAMMERING

Mabel Farrington Gifford
California State Department of Education

From a personal experience with stammering, as well as years of contact as a teacher for thousands of stammerers, both children and adults, I have come to certain definite conclusions.

In the early years when stammering was thought to be due to physical causes, long hours of speech drills were employed. The theory was that lack of co-ordination or weakness of the speech muscles was responsible for the stammering symptoms.

While a certain proportion of cures were made with all the old methods, however fantastic, I am convinced now that the corrections made were due to other factors present sufficient to make the psychological adjustment, rather than the methods employed.

Causes

It must be fully understood in the beginning that according to my theory, the causes of these nervous speech disorders are psychologic and that the spasmodic manifestation of the speech organs is only the external symptom of the deep-seated mental conflict. It has now been definitely established that severe shocks and emotional conflicts in very early childhood remain as subconscious memories for many years, and may continue to disturb the speech function, which in itself is perfect, until such time as corrective measures are applied. We can more easily understand the relation between stuttering and the subconscious emotional memories and conflicts, when we consider that every normal speech reflects the momentary emotional state of mind. Embarrassment causes a hesitating reluctant speech, excitement an increase in the tempo, indifference a certain monotony, and so on through the various moods.

Environment Influences

Many influences enter into the causes and continued manifestation of the nervous speech disorders. Among them should be mentioned here:

Pre-school as well as later home environment.

School experiences, including the personalities of the teachers.

Treatment by classmates..

Types of Therapy Previously Used

The causes of these nervous speech disorders were for many years, in fact up to very recent years, confused with those of articulation defects, such as lisping, substitution of sounds, and infantile speech. Even now in several cities in this country, articulation drills are given to correct the nervous speech disorders. Certain speech instructors dismiss the whole problem by saying it is merely a bad habit.

Many causes and treatments have been suggested during the past centuries. Stuttering was attributed to any number of mechanical causes, among them the unsoundness of the muscles of the speech organs; weakness of the soft palate, uvula, root of the tongue, or abnormal formations of the tongue, or malformations of the tonsils and uvula, incorrect breathing, spasms of the articulatory organs as well as of muscles connected with the breathing and voice production. Gradually from the purely physiological cause of the organs themselves, the defect was laid to the central nervous system. Finally it became known as a psycho-neurosis and some authorities feel now that it is purely a psychic ailment, in the center of which stands the DREAD OF SPEAKING.

Naturally, cures were attempted for all these supposed causes--change of climate, change of diet, avoidance of alcoholic drinks, diets and drugs. Operations had their vogue, particularly the cutting of the root of the tongue, but frequent deaths resulting from this operation caused it to be abandoned. Electricity was tried in addition to certain medicines and cool demi-baths to attack the abnormal innervation which was considered the cause of the trouble.

Pedagogical methods aiming by means of instruction and exercises to recover control over the organs of speech, were instituted. These were time-beating methods, vocal exercises, reading exercises, breathing and intonation. All of these proved unsatisfactory.

Fallacy of "Big Breath" Idea

One of the most popular superstitions in regard to the control of stuttering is that the taking of a "big breath"

will cure the evil. While the momentary turning aside of a child's attention might temporarily relieve the speech struggle, this in itself will never effect a cure. In my treatment a certain amount of breath and voice control is given, not that in itself it cures, but that it is a tangible means of making the pupil realize that his speech mechanism is in no way defective. In all instruction for children, the procedure is from the concrete to the abstract. Therefore we give the child a concrete demonstration of his ability to control the entire speech mechanism, thus gaining the first step in confidence.

Time Beating Methods

An idea extensively practiced in the so-called "stammering schools" of this country, originating in Europe, was founded on the observation that practically all stutterers can sing without difficulty. Accordingly a "method" was evolved which consisted of an exaggerated inflection of the voice measured by a rhythmic "time-beating" action of the hand.

Those using this "method," however, did not take into consideration the full extent of the subconscious memory association which returns with full force the moment the "time-beating" is abandoned. While temporary relief was experienced, it was but the transferring of the point of attention.

The most serious effect of relapse, upon the pupil, is his loss of confidence in his ability to master his problem; secondly, his skepticism of other methods starts counter suggestions which hinder the reconstruction.

Stuttering not "Outgrown"

A third popular fallacy is the belief that the trouble can be outgrown, and that therefore no special attention need be given to it. It is true that certain light forms of speech disturbances, possibly caused by imitation, are outgrown, especially when the mental development of the child is such that it enables him to see and to correct his own mistakes. This does not hold good for the vast majority of cases, for it has been estimated that there are at least a hundred thousand adult stutterers in this country alone. Instead of being outgrown, the speech defect habit becomes more and more deeply rooted with the passing of years. It is important, therefore, to start the treatment for the correction as early as possible. Yet the older stutterer need not become discouraged by this statement, for as a matter of fact his determination

and incentive, due to experience in the world of competition, often more than offset the seeming advantage of carefree childhood with its lack of responsibility and vision for the future.

Injurious Effect upon Character

The risk incurred in delaying treatment during the early years is that in some temperaments stuttering may cause the character to develop along negative lines. Instead of growing into the extrovert type--the "doer," with poise and confidence in himself, the child tends to remain in the introvert stage of development, that non-initiative condition with its lack of self-expression and self-confidence, its aloof and detached manner and its avoidance of responsibility, which is allowed to dominate character, incapacitates the individual for the battle of life in this our modern civilization. Speech, "the intermediary between man and his environment," must be fluent and under the speaker's control, otherwise self-confidence is lost and self-expression impossible.

General Conclusions

In view of the opinions quoted as to the cause and the importance of emotional states, I have come to believe and practice along the lines that however important speech drills and relaxation exercises are, such therapy is insufficient to effect a cure for stammerers.

In the treatment of this disorder a study should be made of every factor entering into the case. Circumstances surrounding the early life of the child should be studied to see if there are still present any influences that are disturbing the emotional life. These obstructions should be removed before the reconstruction measures can become effective.

Some of these obstacles are:

The necessity of daily reciting in the school room; notice of the stuttering either by laughing or staring on the part of pupils; comment or criticism of the labored speech by parents; discussion of the child's nervousness in his presence; any behavior on the part of parents that increases the child's fear, conflicts, or feeling of inferiority and helplessness.

In the case of the adult stammerer, he must be convinced that much can be done to help him in his reconstruction by the re-education method. He must be shown how to relax both mind

and body, to free the whole speech mechanism, and to build up poise, confidence, and a positive attitude, not only in speech but toward all his life situations.

Confidence must be built up to take the place of timidity; positiveness and mastery to replace the fear of failure; a feeling of ease and poise to replace nervous dread and emotional flurry. This requires a training of both mind and body.

The conflicts which produce stammering may start in early childhood and exist for years, disturbing the speech function. The chief disturbing element is fear. According to Dr. Watson of Johns Hopkins, children are born with two fears only, the rest are acquired. These two fears are FEAR OF FALLING and the FEAR OF LOUD NOISES. Other fears which occur before the seventh year, which is believed to be the beginning of the development of reason, are fear of the dark, of thunder and lightning, of unpleasant dreams, unusual sights of new surroundings, strangers, water, barber's chair, dentist's chair, medical attention. Some of these fears have been SUGGESTED by overhearing adults discuss them; others have been associated in his mind with a former unpleasant experience; others come from too harrowing wild animal or ghost stories. Fear like all emotions, may develop a habit which if not checked by the time the child is seven years old, grows into an obsession or fixed idea which affects his whole psychological development.

In order to counteract this combination, we must discuss the psychological treatment of stuttering. We know that the student, whether he be adult or child, is emotionally keyed up, that he has a dread of speaking. Due to his many failures and humiliating experiences, he is self-conscious, lacking in poise and positiveness, tending more and more toward inferiority and indecision.

Because of our conviction of the truth of the emotional maladjustment theory, our treatment considers four distinct phases of the problem, -viz:

1. Physical Hygiene.
2. Mental Hygiene.
3. Re-education of the "Idea Association" toward speech.
4. Psychological rehabilitation.

These four phases are so inter-related that we feel that it is necessary to consider and to employ them in practically every case.

1. The Physical Hygiene is handled not only by the

Medical Staff of physicians and nurses connected with the School Department and Board of Health, but also by the Pediatrics Staff of the University of California Medical School and Hospitals.

2. Under Mental Hygiene, we feel that it is necessary that a case study be made by the trained speech teacher so that she may have an understanding of the various contributing causes which have led to the speech difficulty. Many of these causes may be detected by studying the developmental and environmental conditions which have been influential in molding the child's behavior.

Our Mental Hygiene treatment covers:

- a. Adjusting the attitude of the child toward his world.
- b. Adjusting the attitude of the parents, family, teacher, principal, and classmates to the child.
- c. Establishing a program of activity based upon the special abilities or disabilities of the pupil.

3. Explaining briefly our theory of the Re-education of the "Idea Association" toward Speech.

There are two distinct periods when stammering appears. The first type occurs during the acquiring of articulatory coordinations, when the child is fumbling not only for speech and language, but also is laboring under the stress of many intruding ideas. If no serious emotional disturbance comes at this time, the child sooner or later establishes the proper coordinations, and "outgrows" his stammering.

Occasional stammering or hesitation of this type is sometimes noticed in adults and is frequently due to a lack of organization and definiteness in thinking, and to temporary emotional disturbances.

The second period when stammering symptoms may appear is after speech and language have been completely acquired. Histories of these cases show that an emotional maladjustment, due to environmental disturbances is causing some emotional conflict. Since it is largely through speech that man is able to express his emotions, it is but natural that these conflicts should be manifested in speech. This is the type of stammerer mostly found in the speech classes in our schools.

At the onset of this symptom, the child's attention is repeatedly called to his speech failure by the alarmed parents.

In many cases the child is punished, and invariably is told to repeat the words over which he has stumbled.

This soon starts abnormal idea associations toward speech. The child accumulates his own particular difficult words or speech situations. Around these speech failures cluster many emotional memories, such as dread of failure, fear of ridicule, dislike of being different, and other disturbing emotions. This, then, forms the word blockade pattern, which is present both in the conscious and the unconscious.

When the necessity comes for speech, it is this blockade pattern which occupies the whole attention. Will power alone cannot control the situation, because of the very nature of the fixed idea which is a conviction of inability. According to authorities in psychotherapy, the law of "reversed effort" is responsible for the futile struggles of the stammerer. The "will to speak" is overpowered by the conviction that he cannot, and this conviction controls the motor centers.

The stammerer is a victim of his own wrong auto-suggestion. Through fear of failure, he suggests to himself failure, and this is automatically carried out through his speech mechanism.

We must teach him how to make his auto suggestion constructive, and these constructive and helpful suggestions must be constantly held in mind before the stammering is upon him.

In the psychological re-education, it has been found that it is possible to create new idea patterns, to displace undesirable behavior patterns. The technique of this treatment has been fully explained in the completed essay for publication.

The first step in the building of the new "fluency imate" is to experience concretely the hearing and feeling of the control of the speech mechanism. It must carry with it in the student's mind, the ideas of general relaxation, pouring out of the breathy tone, extremely loose mouth action, and the thought "It is impossible for me to stammer." The stammerer is then taught that it is possible to control his thought and therefore to bring into and to hold in consciousness, the fluency imate. This involves self-discipline, and is the only place where will should be used. The holding of the image of fluent speech results in control of the motor centers and ultimately in the habitual production of fluency. The subconscious conviction must be changed from "I can't" to "I can because I have proved that I can." In addition to the ideas he holds regarding himself there are also the ideas he holds toward certain people and situations.

A part of the idea association toward general speech situations is that involving certain individuals which in some way upset the stammerer. Some of these persons are uncontrolled, excitable, positive, dominating, or persons in superior positions.

Certain situations likewise may have an upsetting effect such as, the necessity for appearing well, definite and important communication to be given, or, with children, any exciting situation or break in the daily routine.

The technique of this theory cannot be fully explained here, but a general idea may be given as follows:

After the fluency image has been persistently cultivated as explained above, it should be deliberately employed every time the blockade image intrudes itself and held in the focus of attention until the blockade idea, as well as the stammering, is replaced by the quiet, controlled speech.

While a general technique is followed in overcoming these various difficult situations, special treatment must be worked out in each case, for in each one of these situations a definite set of ideas is causing the speech blocking, and new constructive ideas must be substituted.

4. After a child has become a confirmed stammerer, no matter what the cause, a certain amount of Psychological Rehabilitation is necessary to complete the correction.

Detailed description of this treatment has been given in the completed essay for publication. Briefly here, our treatment covers:

- a. Relaxation of mind and body.
- b. Relaxation of speech organs.
- c. Building up concepts of poise, cool self possession, and meeting life situations positively and adequately.
- d. Strengthening the "Fluency Image" by combining the correct idea of flowing speech with the experience (the sound and feeling) of fluency.
- e. Subconscious control of the motor centers through retraining of thought control.

To explain this last statement further, many psychologists believe, in a broad sense, that every thought tends to express itself in action unless deflected by some counter thought before it reaches the motor centers and sets them into

operation. The thought that reaches them first decides at that moment the action. There is a constant struggle among the thought forces for expression through action. The safeguard is to have in advance a well chosen set of clear-cut, strong counter-thoughts to come to the rescue, when the emergency arises (as when old fears assail us). The effect of a repeated thought is very powerful. Positive thinking can be made an automatic habit, trained to operate quickly and subconsciously.

Since opposites cannot occupy the same space at the same time, the student should be trained to fill his mind with constructive ideas--the destructive are then gradually displaced.

The concentrated thoughts or positive suggestion statements should be cultivated constantly, so that they become the controlling factor, and so deflect the old ideas before these can reach the motor centers. Positive thoughts bring about positive control.

f. Training for meeting life situations.

(1) Rehearsals.

(2) Actual experiences in meeting life situations.

This psychologic re-education work if carried out faithfully and over an extended period of time, cannot but show most gratifying results. Many have been cured and many others greatly improved.