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Clinical Nuggets: Fluency Toolboxes and Beyond

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The term fluency tool has been used extensively to refer to specific fluency shaping and stuttering modification target behaviors that provide the client with his own individual set of skills that facilitate more fluent communication. Bennett (1995) used visual imagery in her adaptation of the *House that Jack Built* in order to facilitate the use of fluency tools using a house-building analogy. This strategy helped to facilitate new learning and skill set development through a visual referent. Similarly, Allen and Emerson (2002) used a "toolbox" construct to develop associative relationships between fluency targets and analogous referent items typically cited in fluency development programs for young children (Runyan and Runyan, 1986; Fosnot and Woodford, 1992; Pindzola, 1987). In their work, Allen and Emerson used items such as a turtle and an elephant to, "symbolize ways to talk." Their young client then constructed a toolbox (from a shoebox) in which these items could be carried and used as reminders.

In our practice, we were able to use this strategy in a similar fashion and then, integrate several additional steps that we believed would be useful for school-age children who needed more assistance with transfer of target skills. Each of the children that participated in this activity was involved in our summer group treatment program, which incorporated a combination of individual and group treatment sessions that occurred consecutively. Following the development of fluency-shaping target skills, or tools, during the individual sessions, we spent time developing and brainstorming attitudinal tools that we believed were equally as important and in some cases even more so, for the continued transfer and maintenance of skills outside of the clinic. Tools such as *openness*, *assertiveness*, and *positive self-talk* were discussed, developed and experientially addressed with the assistance of clinicians. Once all of the tools were presented, we developed a pictorial representation of the toolbox and then discussed referent items that we could associate with each given tool. Ideas were freeflowing and each referent had its own specific meaning for each individual child. Items such as balloons, whoopee cushions and airpumps were chosen to represent the concept/tool of *full breath* (Bloom and Cooperman, 1999). Train sets and legos were associated with linking words together in phrase groups. Candy items such as "now and later" and "snickers bars" were referents for *pullouts*, because in the children's "thinking" these were things that could be changed rather quickly (from hard to soft and chewy) similar to making changes in tension within the vocal tract. The concept/tool of *openness* was represented by items such as a microphone, a cell phone and a mirror. None of the referent items were dismissed since each had specific value for any given child.

Once these items were chosen, they were listed and presented on the pictured toolbox chart. Then, we arranged that each child bring in their own shoebox which could be

assembled into a toolbox capable of holding their designated items. Each child decided how his toolbox would be decorated and this activity allowed for the use of skills in a more conversational setting within the clinic. Following this, we developed a functional transfer activity in which each child's specific items could be obtained. A mall trip was designed, each child paired with an assisting clinician, in which the items would either be purchased or pursued in another manner (e.g. discussing the price of a costly object or inquiring about the amount of time that was spent pumping up an inflatable pool). A charting system was used to determine the number of utterances that were managed with the use of tools – either fluency shaping or stuttering modification - during on-line performance with a variety of conversational partners in the mall setting. Following the trip, the entire group reassembled to discuss their experience and enjoy the fruits-sweets – of their labor.

We found that this type of activity had strong associative value and could be revisited with significant others with whom the child encountered in his daily life. Teachers were apprised of the project and used the toolbox concept to make reference to and reinforce the use of skills in the classroom. Parents were instructed as to how they could incorporate the concepts into further outside activities on an on-going basis. We believe that the use of this type of activity, one that links target skills and concepts together with immediate and useful transfer is highly beneficial.

As Ramig and Bennett (1995) stated, "*the success of this process (transfer and maintenance) is influenced by the following: the child's knowledge, understanding and mastery of the tasks required and the child's ability and motivation to take the time to work on the activity (p. 147).*" For the children in this group, motivation was high because the payoffs were immediate, useful and rewarding. Development of skills occurred within the context of a group environment, one in which ideas were valued and feelings shared. All of the children participated in some portion of the task design, which helped to facilitate motivation and ownership. Finally, knowledge and understanding of the therapy process was enhanced through the discussions and the chained associations that were developed.

References

- Allen, M., & Emerson, M. (2002). *Perspectives on Fluency and Fluency Disorders*, ASHA, Division 4, Vol. 12, Number 1.
- Bloom, C., & Cooperman, D.K. (1999). *Synergistic stuttering therapy: A holistic approach*. Boston: Butterworth-Heinemann.
- Fosnot, S. M., & Woodford, L.L. (1992). *Fluency Development System for Young Children*. Buffalo, NY: United Educational Services, Inc.
- Pindzola, R. H. (1987). *Stuttering intervention program: Age 3 to grade 3*. Austin, TX: Pro-Ed.
- Ramig, P.R. and Bennett, E.M. (1995). Working With 7- to 12 Year-Old Children Who Stutter: Ideas for Intervention in the Public Schools. *Language, Speech, and Hearing Services in Schools*, 26,138-150.
- Runyan, C.M., and Runyan, S.E. (1986). Fluency rules therapy program for young children in the public school. *Language, Speech and Hearing Services in Schools*, 17, 276-284.
- Walton, P., and Wallace, M. (1998). *Fun with Fluency: Direct therapy with the young child*. Bisbee, AZ: Imaginart.