Palin PCI – overarching aim

Palin PCI aims to establish the building blocks for confident and competent communication whether or not the child continues to stutter, by fostering a positive attitude to communication in the child and a non-judgmental and accepting attitude to stammering in the home.

Aims of Palin PCI continued

Thus our aims in therapy are:
• to reduce the impact of stuttering on the child and parents
• to enhance the child’s fluency and
• to increase the parents’ and the child’s knowledge about stuttering and confidence to manage it.

Which children need intervention?

The language we use
• ‘Persistent’ versus ‘recovered’
  or
• Persistent versus transient
• Stuttering resolving rather than recovering

Clinical decision making – the evidence

• Family history & gender
  – Many studies found children with family history of persistent stuttering more likely to persist (Ambrose, Cox & Yairi, 1997)
  – Gender ratios nearly even at onset and 5/6:1 in school age
  – Inconsistent research findings and some persist
• Length of time & pattern of change since onset
  – Studies have found stuttering resolves in 75% of children within 4-5 years post onset
  – Probability of persistence increases with length of time since onset
  – If stuttering is increasing or on a plateau over time, more likely to persist.

Clinical decision making – the evidence

• Brain structure & function
  – Recent studies aim to identify possible neural markers that differentiate between those children who become fluent and those that persist.
• Severity of stuttering & age at onset
  – Severity of stutter not predictive of outcome, except in some studies of 4-5-year-olds (Bostian et al, 2016; Walsh et al, 2018)
  – Inconsistent evidence linking age of onset and persistence
• Temperament, phonology, speech motor & language skills
  – At present no clear evidence linking temperament to persistence
  – Some evidence that phonological difficulty linked to persistence
  – Developing evidence base linking speech motor skills (rate, variability in movements, non-word repetition) to persistence
  – Conflicting findings – delayed or advanced language has been linked to persistence
So what does all this mean?

- No single factor sufficient for predicting outcome
- Many inconsistencies in findings (different populations, different measures used, some have had therapy)
- **IF A CHILD IS STUTTERING AND HE OR HIS PARENTS ARE ANXIOUS, WE ARRANGE AN ASSESSMENT**

Note: Palin PCI effectiveness study (Millard, Zebrowski & Kelman, 2018) boys and children with family history of persistence in ‘more successful’ group.

Key questions

1. Does this child stutter?
2. Is the stutter having an impact on the child or parents?

Multifactorial framework for assessing stuttering

Focus is the child’s profile of skills and how these affect his speech within the context of his family
- Physiological factors: family history, well-being, sleep, health
- Speech motor factors: speech motor skills, speech rate, stammering type and frequency
- Language & communication factors: language & social communication skills (advanced, delayed, mismatches)
- Psychological factors: temperament, awareness and impact of stuttering, negative reactions, parents’ anxiety.
- Environmental factors: family communication styles, routines, pace

Assessment of stuttering

Aim to establish severity of stuttering (in terms of frequency and duration of stuttering behaviours observed) & impact of stuttering
- Sample of spontaneous speech video recorded, transcribed & analysed using SSI 4
- Parents’ description of stuttering & associated behaviours
- Awareness of stuttering & impact (KiddyCAT Vanryckeghem & Brutten, 2007)
- Parents’ perceptions of the severity of stuttering and the impact on the child and parents (Palin Parent Rating Scales, Millard & Davis, 2016)

Therapists’ website: [https://www.palinprs.org.uk/secure/pprs_connect.php](https://www.palinprs.org.uk/secure/pprs_connect.php)
Parents’ website: [www.palinprs.org.uk](http://www.palinprs.org.uk)

Identifying the factors that are relevant to a child’s stuttering

- Child assessment:
  - Stuttering assessment
  - Child interview
  - Language assessment
- Interaction video
- Case history
What does this child need to be more fluent and develop their communication skills?

Analysis of parent child interaction video

Based on summary of findings from child assessment

Consider what the child needs to help his fluency and communication skills

Identify what parents are already doing that is helpful ie instinctive responses

Identify what parents may need to be doing more of

Interaction Strategies

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<thead>
<tr>
<th>INTERACTION STRATEGIES</th>
<th>A</th>
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<th>C</th>
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<tbody>
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<td>Other</td>
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A: Would this child benefit from this strategy?

B: Is the mother/father using this strategy at all?

C: Would it be helpful for the parent to be doing it more?

Parents’ understanding of stuttering

- Parents involved in assessment – observe child assessment, make interaction video, both give case history.
- Both parents given general information about stuttering and the research into contributory factors
- Parents and therapist discuss detailed formulation of the child’s stuttering and which factors may be relevant for their child.
- Parents and therapist agree therapy plan

Summary Chart - management
Palin PCI therapy

Identifying what parents are already doing to support the child and helping them to do more of this.

- 6 week period of weekly visits for both parents and child
- Interaction and Family Strategies
- 6 week Consolidation Period then review

Interaction strategies

- Special Times set up with both parents
  - 5 minutes one-to-one play
  - Focus not on stuttering
  - Each parent chooses number (3, 4 or 5 times per week)
  - Parents complete Special Time Task Sheet
- Parents view their own interaction video with the parents
- Parents identify what they are doing that is helpful
- Rationale for strategy explored
- Parents focus on doing more of this strategy in their Special Times at home

Questions to ask with PCI video

Discussion about what might help the child

- Question 1: What do you think your child needs to help him/her?
- Question 2: What do you think you might already be doing that could be helping your child?

After watching the Parent Child-Interaction video

- Question 1: How typical is the video?
- Question 2: What are you doing in the video that is helping your child?
- Question 3: How might that be helping?
- Question 4: What could you do more of?

Family Strategies

- Managing two languages
- Talking about stammering
- Building confidence
- Turn taking
- Dealing with feelings
- Tiredness
- High standards
- Behaviour management
- Routines
- Pace of life
- Other

Family Strategies

- Family strategies identified in the assessment
- Always include building confidence
- Often include family turn taking
- Typically give parent a handout the previous week to read in preparation for the session
- Focus on eliciting what parents already know, exploring rationale and encouraging them to do more
- 2 or three Family Strategies introduced in the 6 week therapy block.
Talking about stuttering

- How parents respond
- The conspiracy of silence
- It is fine to acknowledge it
- The language we use
- Helping parents to be more open and talk about stuttering:
  - Read hand-out
  - Discussion: why it is helpful to be open?
  - Brainstorm: what to say?
  - Discussion: how parents can help their child to see that we all make mistakes
  - Not giving advice

Confidence building

- Importance of specific, descriptive praise, e.g. “I can see that you’ve put all your toys away in the toy box. That was helpful / that was a helpful thing to do”. (Faber & Mazlish, 1980)
- Focus on behaviour, the effort, not the person (process praise), e.g. “I can see that you’ve put all your toys away in the toy box. You’ve worked hard tidying up”. (Dweck, 2017)
- Importance of sincerity and consistency
- Modelling how to receive praise
- Parents to praise daily and record on Praise Log

Turn-taking

Turn taking & stammering

- Concern re stopping a child who stammers from talking
- If the child stammers when he interrupts, he may be more successful at getting a turn
- If the child is interrupted he may speed up in order to finish what he wants to say
- A child who stammers may not be taking a turn in conversation

Turn-taking

Helping parents to improve turn-taking

- Read handout
- Feedback
- Brainstorm: why is turn-taking important in a conversation
- Discussion: turn-taking and stammering
- Play the ‘Microphone Game’
- Turn-taking at home
Dealing with feelings

- Read handout
- Feedback
- Discussion: let it happen
- Watch and describe
- Accept that he feels that way – try not to contradict him
- Putting the feelings into words
- Find ways to help him vent his feelings

(based on Faber and Mazlish (1980))

Child Strategies

Aim of therapy: to help each child to be a confident and competent communicator whether or not he continues to stutter.
- Importance of openness about stuttering and desensitisation to it
- Importance of maintaining confidence which is not based on fluency
- Addressing thoughts and feelings about stuttering directly with children
- Building knowledge of speech mechanism and what happens when we stutter
- Voluntary stuttering
- Speech modification strategies (Tortoise Talking/Bus Talking)
- Therapy for language/phonology

Openness

- Using child’s language then openly talking about stuttering
- Encouraging parents to talk openly
- Ask child how he would like his parents to respond when he stutters
- The language the child uses about stuttering

Confidence building

Alongside a focus on direct speech strategies continue focus on confidence building
- Things I like about me
- 3 things I am good at
- Positive words I have heard about myself
- What’s going well? (e.g. using Jenga blocks to build a tower)

Desensitisation

- Learning about talking
- Learning about stammering
- Voluntary stammering
Thoughts and emotions

- Exploring emotions
- Exploring intensity of emotions
- Identifying thoughts

Clinical decision making
direct or indirect?

- Wider context of child’s needs
- Maturity & concentration
- Cognitive & language ability
- Language & insight
- Temperament
- Readiness
- Parents’ expectations
- Parents’ priorities

Speech modification

Strategies:
- Tortoise talking – rate reduction \( \text{based on Meyers & Woodford, 1992} \)
- Bus talking – pausing to think

Adapting Palin PCI

- With families whose first language is not English
- With children who stutter who have additional needs, e.g. Autistic Spectrum Disorder, Selective Mutism
- With parents who are not able to attend clinic

The ‘magic’ of Palin PCI

- It’s not difficult for parents because they are already doing it
- The ripple in the pond
- Empowered parents (redundant therapist)
- Focus on confident communication, not fluency, leads to
  - confident children, with or without stuttering
  - parents’ awareness of the whole child, not just the mouth.

For more information

The Michael Palin Centre website

Contact: elainekelman@nhs.net

www.michaelpalincentreforstammering.org
References


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