Within schools there is an increasing emphasis on oral language and communicating skills. This can put extra pressure on the dysfluent child. You may need to discuss this more closely with a Speech and Language Therapist.

Therapist ………………………………
Speech and Language Therapy Services
The Gem Centre
Neachells Lane
Wednesfield
Wolverhampton
WV11 3PG

Tel: (01902) 444363 (answerphone available outside office hours)
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rwh-tr.speech-and-language@nhs.net
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Review – December 2012
Next review – December 2015
What is dysfluency?

Dysfluent speech is characterised by sound or word repetitions, prolonging sounds and getting stuck on sounds especially at the beginnings of words or sentences. The dysfluent child may show signs of tension, avoid speaking in certain situations or avoid eye contact when talking.

Each child is individual and will react differently and need different levels of support. Try to give some individual time to the child to discuss any concerns the child may have.

There are many situations in school that the child might find difficult. If possible try to modify your approach so that the child is not ‘singled’ out.

Dysfluency can lead to low self-esteem/confidence. Emphasize the child’s abilities in other areas like art, music, maths, sports, etc to boost self-confidence.

Registration time can be difficult, waiting for a turn to answer. Perhaps the child can put their hand up or say ‘yes’ etc.

Reading aloud can be difficult, especially in front of the whole class. The child may benefit from reading alone to his teacher, to a peer or in small groups. Dysfluent children often find it easier reading aloud in pairs. During whole class reading try to encourage a slower reading pace.

Answering questions can be a stressful situation. If the whole class is being questioned, ask the child to answer early on as waiting can increase anxiety and therefore reduce fluency. Questions that require short answers will be easier. Encourage the whole class to think and take their time before answering questions.

Teasing Children with dysfluency may be teased. It is important that this is addressed appropriately.