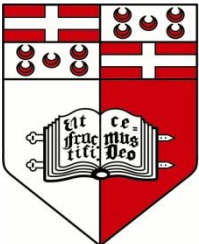


STUTTERING THERAPY: USING THE '*RIDICULUM!*' CURSE

Dr. Joseph Agius
University of Malta
ECSF

*3rd European Symposium on
Fluency Disorders*

Antwerp, March 2012

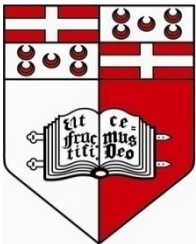


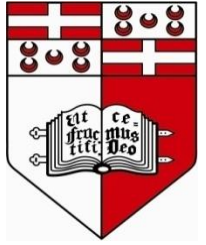
UNIVERSITY OF MALTA



EUROPEAN CLINICAL SPECIALIZATION FLUENCY DISORDERS

The repeated pairing of a
humour response
with exposure to a
feared stimulus
gradually *diminishes the*
feelings of anxiety evoked
by the stimulus.





**CLINICAL PRACTICE
SPEECH LANGUAGE PATHOLOGIST**

FLUENCY SPECIALIST



**LECTURER on
'*FLUENCY DISORDERS*'
UNIVERSITY OF MALTA**

What To Expect

- **Why Use Humour?**
- **Research, Theory and Rationale**
- **Application in Stuttering Intervention.**



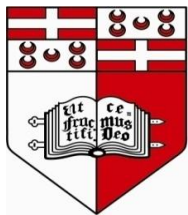
WHY

HOW

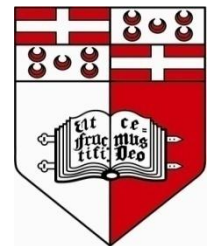
to use creativity and fun in your
sessions....and ...

**THAT IS WHAT THIS
PRESENTATION IS ALL ABOUT!**

WHY USE HUMOUR?



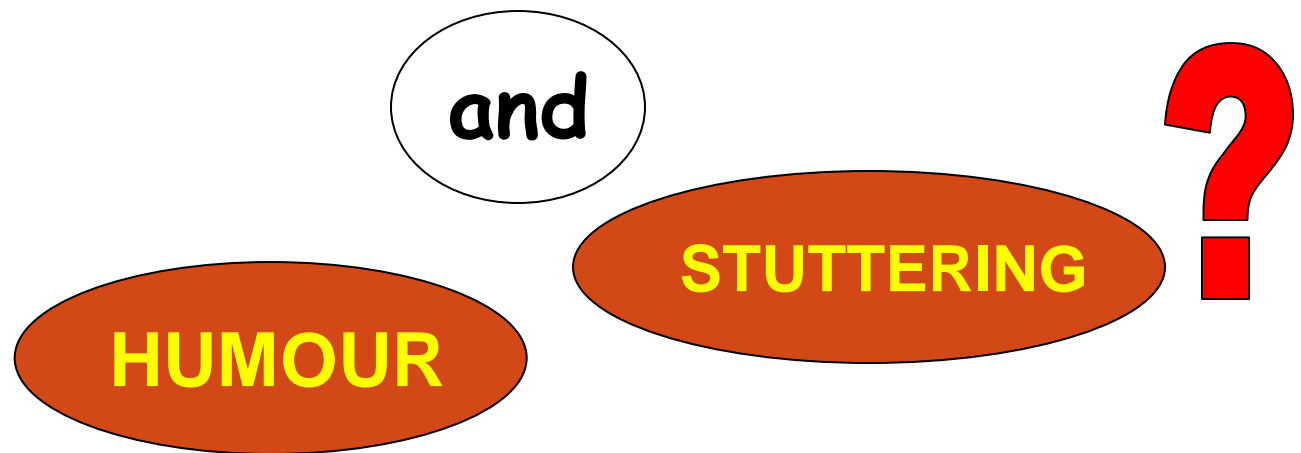
**Are we,
speech language pathologists,
on the same wavelength with
the people who stutter?**



*...passive recipients of our
wisdom !*

SPEECH LANGUAGE PATHOLOGISTS ARE
FROM MARS,
People Who Stutter Are
From Venus

What inspired me to
research on the
relationship between



I was inspired ...

- by a client of mine, *Kyle*, who was a lively young boy and who actively and joyfully participated in my group therapy sessions.
- He was full of fun, wit, and always smiling ...and he stuttered! He was an inspiration to his mates.
- Students were impressed by his popularity and charm.

Eight years later, now a young man aged 18 years, he was referred again for stuttering intervention.

He presented as a serious young man, anxious, tense and without a smile.

He claimed:

'I lost the young Kyle'.

He had lost his zest for life, his wit and his excitement. If only our intervention could bring back the harmony, serenity and wit of the ***'young Kyle'.***

Dr David Mibashan

in his forward to Catherine Ripplinger Fenwick's (2004)

*'Love and Laughter -
A healing journey'*

*' she discovered that humour
and hope were very important
elements in her recovery'.*

George Vaillant's (1977)
'Adaptation to Life'

- Two coping mechanisms for successful people are :



HUMOUR



and



ALTRUISM

Abraham Lincoln, during the Civil War

"Gentlemen, why don't you laugh? With the fearful strain that is upon me day and night, if I did not laugh I should die, and you need this medicine as much as I do".



- So from...

CANCER PATIENTS

PRESIDENTS

SUCCESSFUL PEOPLE

**HUMOUR COMES
FIRST!!**

AND SPEECH THERAPISTS?

**How many of you do NOT use
fun and humour with
your clients?**

What type of fun and humour do you use?

- A. Mild teasing**
- B. Making fun of yourself**
- C. Making fun of a therapy task**
- D. Joking about a complaint or
evaluation**
- E. Laughing about something
unexpected in the context of therapy**
- F. Making sessions fun!**

**Some interesting data on
Humour in Stuttering
Therapy!**

Humour used by SLP's in stuttering therapy:

- Sample: 21 SLPs

95 % claimed to use humour in stuttering therapy

Humour used by SLP's in stuttering therapy:

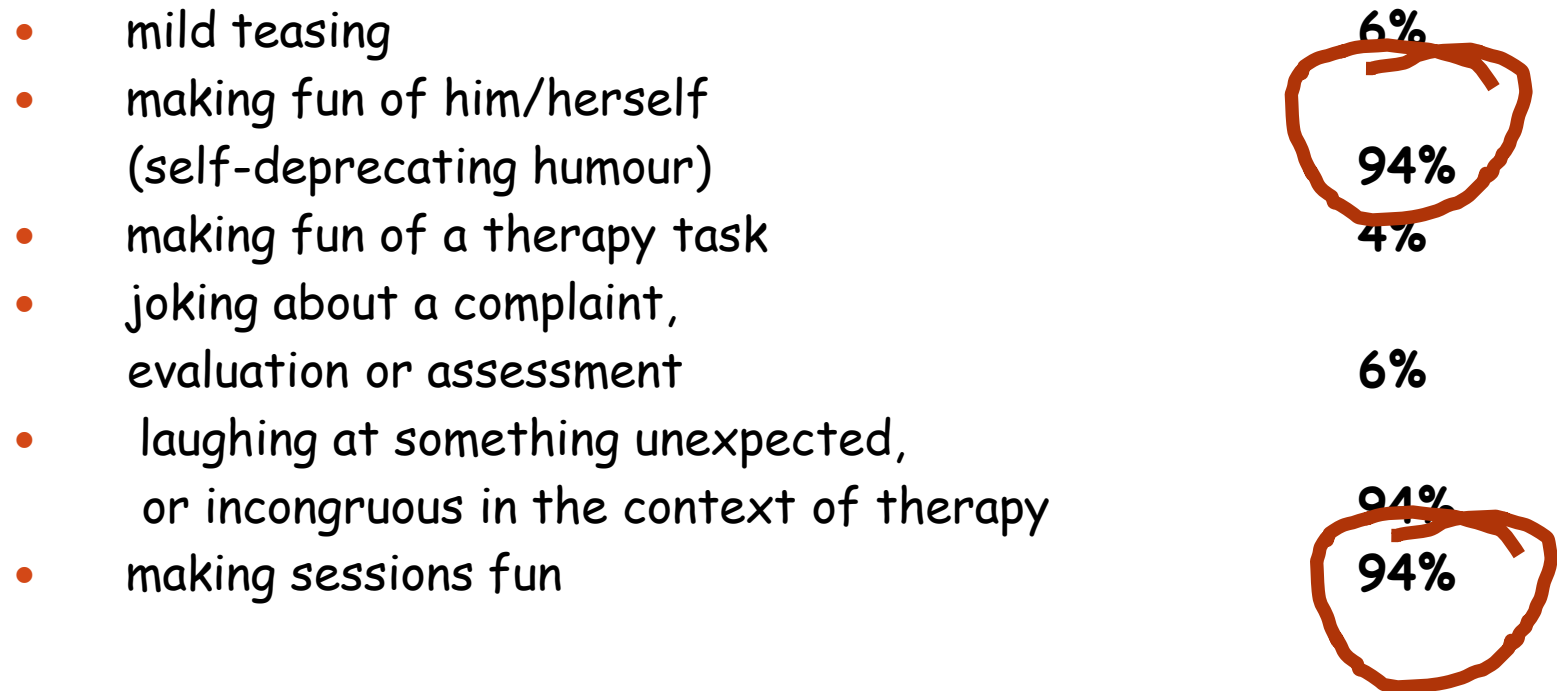
- Sample: 18 clients

Only **17%** claim humour is used in stuttering therapy.

WHAT CLIENTS WANT!

94% want humour in stuttering therapy

Types of humour service users would like SLPs to use in stuttering therapy:



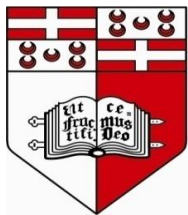
Categories of humour adapted from Simmons-Mackie & Schulz (2003)



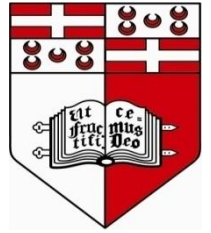
..... and clinicians who are perhaps overly stressed, tired, or having a bad day themselves. I cringe when this happens.

1991-2011 Stuttering Foundation of America

OVERVIEW OF CURRENT HUMOUR AND STUTTERING RESEARCH



WORK IN PROGRESS



EMOTIONAL REACTION TO TEASING AND RIDICULE OF PEOPLE WHO STUTTER

PLATT, T., AGIUS, J. & RUCH, W. (data analysis)

People Who Stutter avoid social situations
because of the fear of stuttering,
not because of social anxiety.

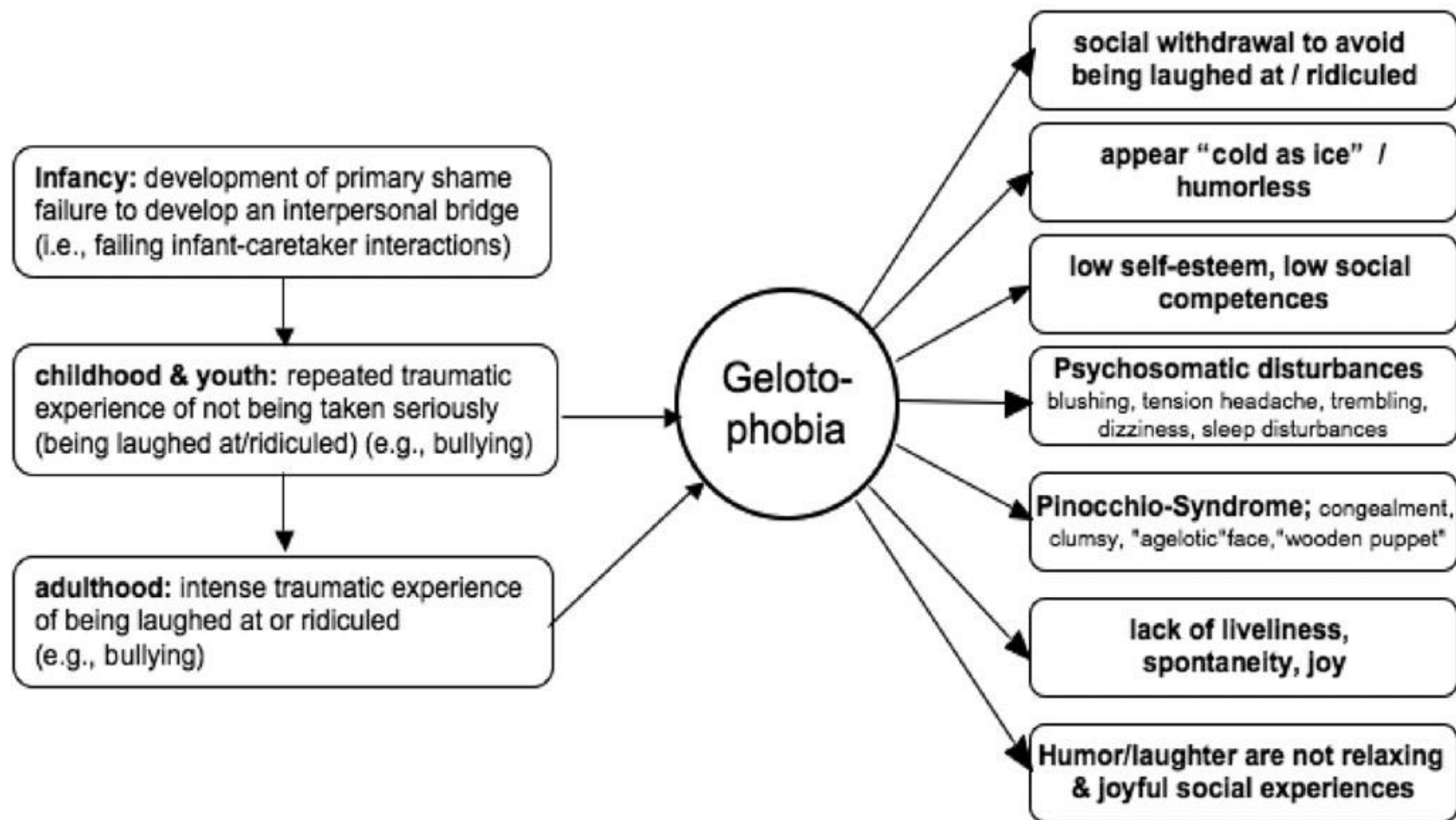
(Mahr & Torosian, 1999)

However, could it be that
People Who Stutter avoid social situations
due to being sensitive towards being
laughed at?

GELOTOPHOBIA AND STUTTERING

**GELOTOPHOBIA IS THE
FEAR OF BEING LAUGHED AT**

Causes



A model of the putative causes and consequences of gelotophobia as proposed by Titze (Ruch, 2004)

CAUSES:

- **INFANCY:** failing infant-carer interactions.
- **CHILDHOOD AND YOUTH:** repeated traumatic experiences to be taken seriously.
- **ADULTHOOD:** intense traumatic experience of being ridiculed.

CONSEQUENCES:

- **SOCIAL WITHDRAWAL TO AVOID RIDICULE**
- **APPEAR COLD AS ICE**
- **LOW SELF ESTEEM**

Ruch (2004)

CONSEQUENCES (cont.):

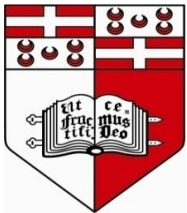
- **PSYCHOSOMATIC DISTURBANCES**
- **PINOCCHIO SYNDROME**
- **LACK OF JOY, FUN**
- **humour AND LAUGHTER NOT RELAXING SOCIAL EXPERIENCES.**

Apart from high fear, *gelotophobes*
experience feelings of high shame and
have low joyful emotions
(*even when this is in a friendly,
playful context*).

Platt & Ruch (2009)

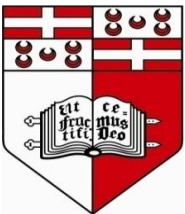
Gelotophobia blurs the emotional responses between *ridicule* and *good-natured teasing*.

Positive social interactions induce negative emotional reactions.

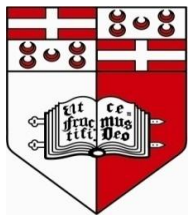


Platt T. (2008)

Ridicule should induce
negative feelings and
Teasing **happiness** and
surprise
in individuals not suffering
gelotophobia.



Gelotophobes make no connection between a stupid or embarrassing situation and the potential joy they could experience in sharing this with other people.

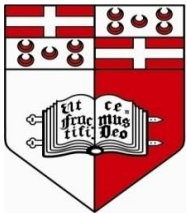


Platt, T. (2008)

The PhoPhiKat 30 (*Ruch & Proyer, 2009*) is a subjective assessment scale developed to measure the agents and targets of being laughed at and laughing at others, namely, the concepts of gelotophobia, gelotophilia and katagelasticism.

The Ridicule and Teasing Scenarios Questionnaire for Stuttering (*RTSq_stuttering*)

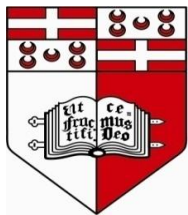
Platt & Agius (2011)



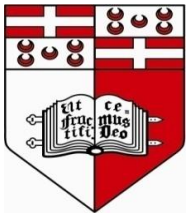
The RTSq-stuttering - 23 -item self-report instrument

- 4 = general ridicule,
- 4 = general teasing,
- 5= non-social laughter,
- 5 = stuttering specific ridicule,
- 5 = stuttering specific teasing.
 - After each scenario seven emotions :
joy, sadness, anger, disgust, surprise, shame and fear
are presented and rated on a
0 (*least intense*) to **8** (*most intense*) scale.

RESULTS RTSq_Stuttering



Results show that in
General Ridicule Scenarios
those who stutter does not correlate to
any of the emotions. However, the
higher the level of gelotophobia, the
more negative emotions:
fear, anger, sadness and shame are
elicited



In

General Teasing scenarios

the *gelotophobes* show a negative correlation to joy, as well as positive correlations to the negative emotions: fear, anger, sadness, shame, and disgust respectively. *People who stutter* only show negative correlation to joy.

In

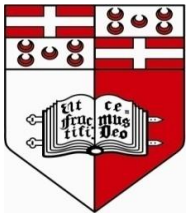
Stutter Specific Ridicule scenarios

both the *gelotophobes* and *people who stutter* experience negative emotions.

However, for *people who stutter* the highest relation is to **sadness** and **fear**, whereas *gelotophobes* experience more **fear** and **shame** in ridicule situations.

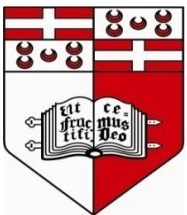
Stutter Specific Teasing

has a negative correlation both for *people who stutter* and *gelotophobes*. Both correlate highly with sadness, and anger. *People who stutter* also experience low joy emotions.



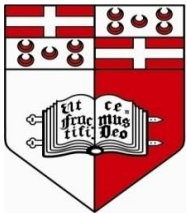
Results show that

Overall, it appears that although people who stutter have a sensitivity towards being laughed at, it is only in situations that are stuttering related, which differs from general gelotophobia group.



As the stutterer's negative sensitivity extends to the pro-social, playful teasing, this may detrimentally impact on the developing or maintaining positive social interactions, where laughter plays a significant part in social bonding.

PLATT, T., AGIUS, J. & RUCH, W. (in progress)



'Think Smart, Feel Smart'

Programme

- **10 group sessions**
- **Participation of 15 children aged 8 years- 12 years**
- **90 minutes duration**

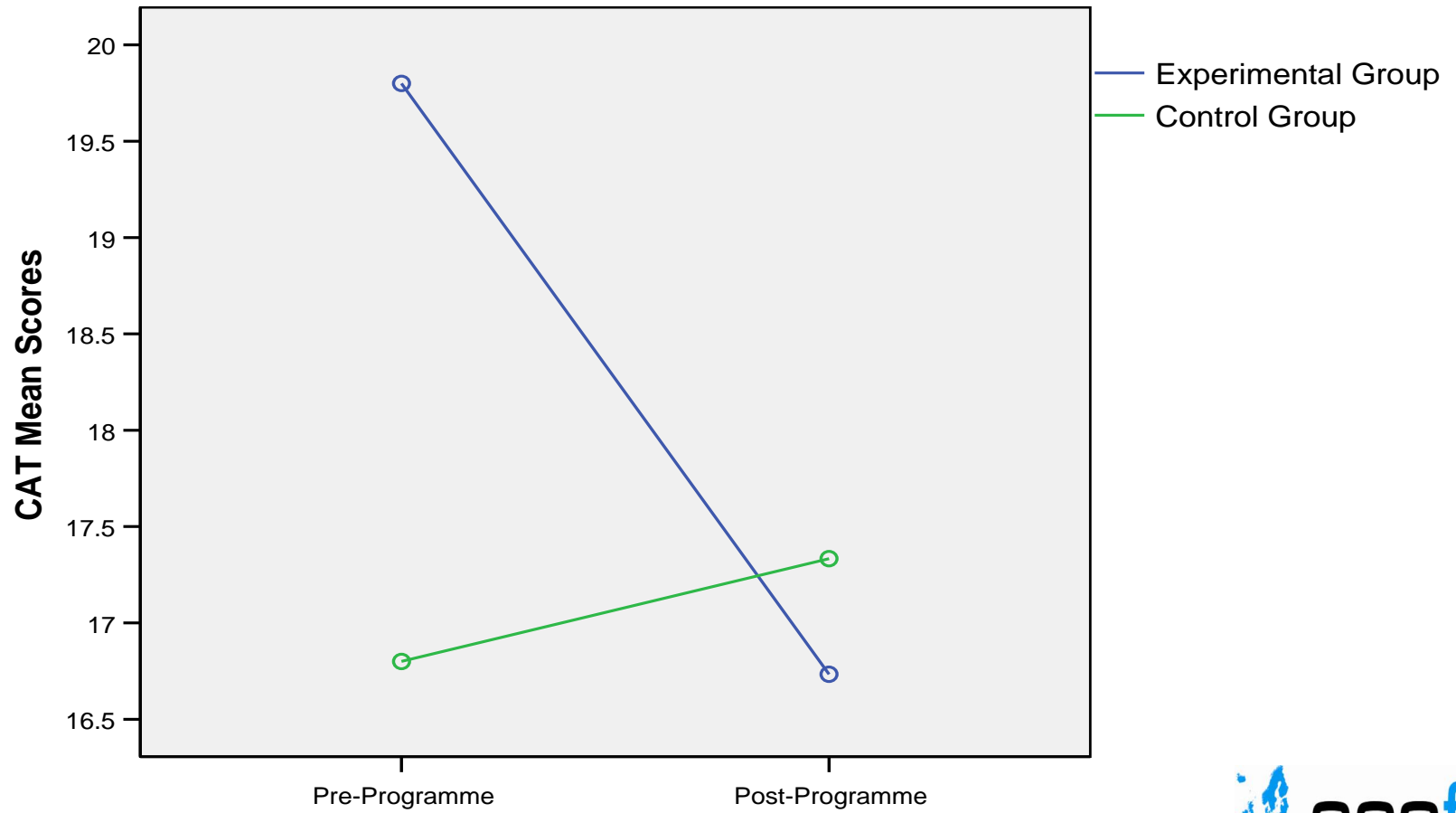
3 Main Components:

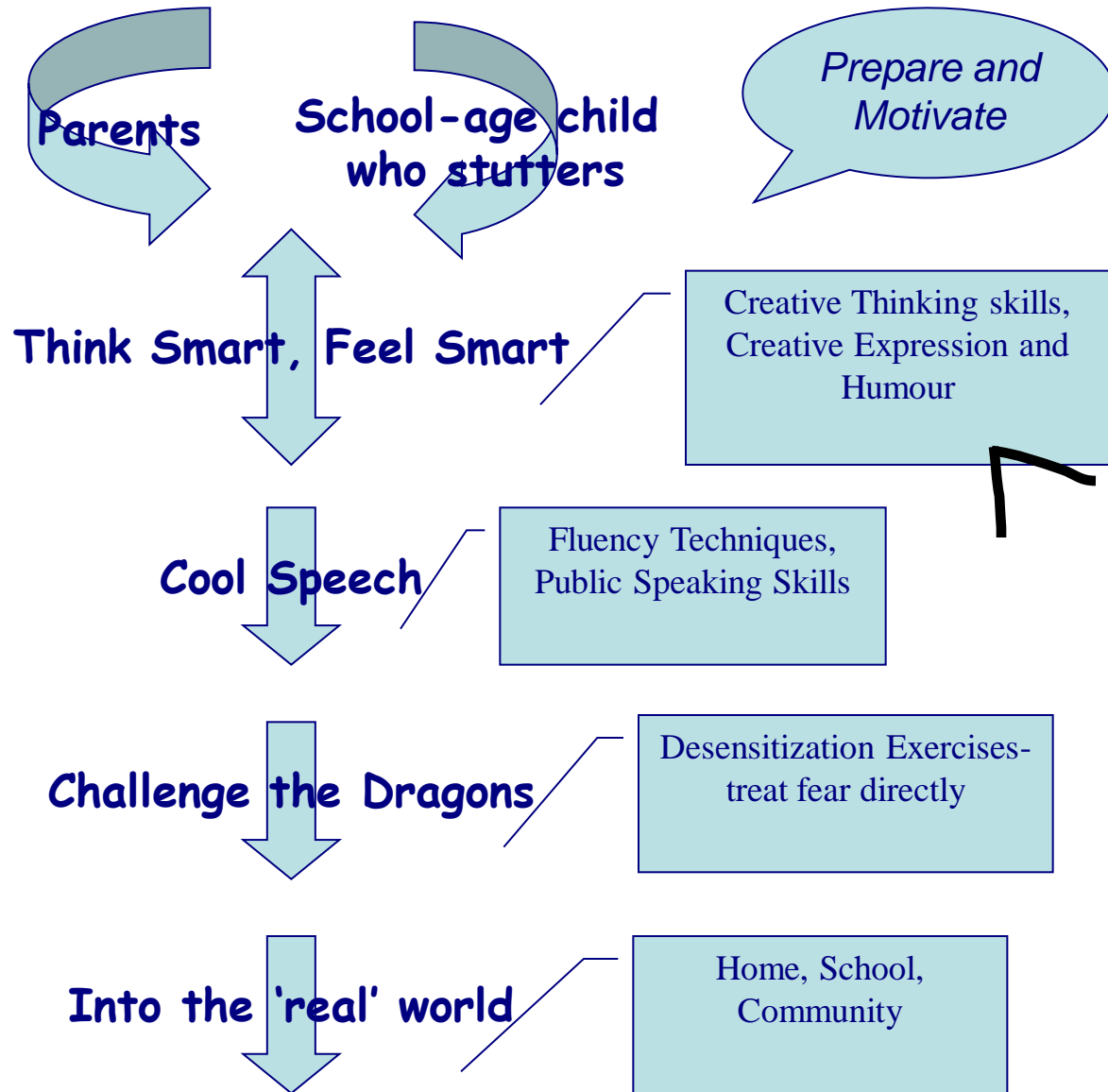
- **Relaxation exercise** based on the work of Edmund Jacobson (Gregory, 1995) and guided language visualization exercise (Marshall-Warren, 2004).
- **Thinking Skill Tools** based on CoRT 1 (de Bono, 1986)
- **Desensitization exercise**

RESULTS

Communication Attitude Test (CAT)

A more positive attitude to communication with a significantly lower score ($p < 0.05$) on the Communication Attitude Test (CAT) was recorded by the children who stutter in the experimental group.

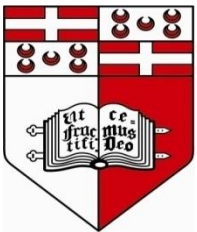




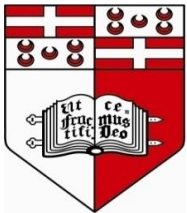
THE 'SMART INTERVENTION STRATEGY'

(Agius, 2007)

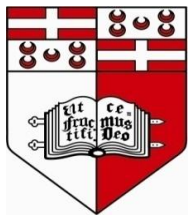
According to Buckman (1994:xv), the use of humour by psychotherapists '*enables greater insight, objectivity and perspectiveand a more open discussion of painful issues*'.



Humour changes
Feelings
Behaviour and
Thoughts.



APPLICATION IN STUTTERING THERAPY



THERAPEUTIC CREATIVITY AND HUMOR (HA-AH-HA) TECHNIQUES:

- SHIFTING PERCEPTIONS
- WORD PLAY
- EXAGGERATION
- PLAYFUL INCONGRUITY
- SELF DEPRECIATION

Agius (2012)

Concluding

LOOKING BACK...

- **PHILOSOPHY –**
WHY IS HUMOUR IMPORTANT?
- **SCIENTIFIC RESEARCH -**
FEELINGS OF PWS
- **CLINICAL APPLICATION-**
INTRODUCING FUN!



joseph.g.agius@um.edu.mt

THANK YOU FOR LISTENING



Joseph

