Stuttering Intervention for Children: Modifications to Two Common Programs

INTRODUCTION

Stuttering is a particularly challenging speech disorder that can have a significant impact on a child’s self-esteem, social interactions, and academic success. Many treatment programs and techniques exist to address stuttering, and clinicians are always looking for new and better ways to help children with this disorder. This journal self-study explores the use of two specific programs – the Lidcombe and Camperdown programs – in modified situations. Articles examine the Lidcombe Program, designed for younger (preschool and some school-age) children, and discuss how clinicians can adapt the program for use in groups and for webcam delivery. A third article explores the factors that may best predict treatment time and long-term outcomes. The Camperdown Program, a treatment more often used for teens, is studied as a telehealth application to determine outcomes and child and parent reactions. SLPs working with children who stutter will benefit from a better understanding of how these programs work and how they can be adapted for more resource-efficient treatment.

LEARNING OUTCOMES
You will be able to:
• explain the basic components of the Lidcombe and Camperdown programs for stuttering treatment
• discuss the benefits of providing stuttering treatment via telehealth
• compare outcomes from group treatment to those found with individual stuttering treatment
• describe how stuttering severity affects treatment duration and outcomes

CONTENTS

Webcam Delivery of the Lidcombe Program for Early Stuttering: A Phase I Clinical Trial, by Sue O’Brien, Kylie Smith, and Mark Onslow ......................................................... CE-1

Group Lidcombe Program Treatment for Early Stuttering: A Randomized Controlled Trial, by Simone Arnott, Mark Onslow, Sue O’Brien, Ann Packman, Mark Jones, and Susan Block ............................................................. CE-7

Predicting Treatment Time and Long-Term Outcome of the Lidcombe Program: A Replication and Reanalysis, by Barry Guitar, Danra Kazenski, Alan Howard, S. Freddie Cousins, Elena Fader, and Piper Haskell ......................... CE-20

Webcam Delivery of the Camperdown Program for Adolescents Who Stutter: A Phase II Trial, by Brenda Carey, Sue O’Brien, Robyn Lowe, and Mark Onslow .......................................................................................................................... CE-32

ASHA Self-Study 2751
PROGRAM HISTORY and IMPORTANT INFORMATION

Articles originally published in ASHA’s scholarly journals

Original start date: July 4, 2016

Peer reviewed: April 30, 2017

End date: April 30, 2020

To earn continuing education credit, you must complete the test with a passing score on or before April 30, 2020.

To see if this program has been renewed after this date, please search by title in ASHA’s online store at www.asha.org/shop.

This course is offered for 0.35 ASHA CEUs (Intermediate level, Professional area).

STATEMENT ON EVIDENCE-BASED PRACTICE

It is the position of the American Speech-Language-Hearing Association that audiologists and speech-language pathologists incorporate the principles of evidence-based practice in clinical decision making to provide high-quality clinical care. The term evidence-based practice refers to an approach in which current, high-quality research evidence is integrated with practitioner expertise and client preferences and values into the process of making clinical decisions.

Participants are encouraged to actively seek and critically evaluate the evidence basis for clinical procedures presented in this and other educational programs.

Adopted by the Scientific and Professional Education Board, April 2006