## Comparing the Fundamental Conflicts Between Fluent Children and Children Who Stutter

<sup>1</sup>M. Narimani, <sup>2</sup>M.B. Sotudeh and <sup>1</sup>F. Zahed

<sup>1</sup>Department of Psychology, Faculty of Literature and Humanities,

University of Mohaghegh Ardabili, Ardabil, Iran

<sup>2</sup>Department of ENT, Faculty of Medical Science, Ardabil University of Medical Sciences, Ardabil, Iran

**Abstract:** A causal-comparative survey was carried out to compare fundamental conflicts between children who stutter and fluent ones. Thirty students (15 students in each group) were selected from elementary schools (first and second year students) of Ardabil City. Stutter afflicted group was selected by simple random sampling and matched with control (fluent children) for level of education, age and gender. Data were selected by house-tree-person test. Results showed that two groups have significant differences in fundamental conflicts, with higher rate of fundamental conflicts and emotional distresses among stutter group than normal one.

Key words: Stuttering, fundamental conflicts, house-tree-person test

#### INTRODUCTION

One of the most common disorders of speech and language is stuttering. This disorder is a state mixed of theses items; word's break, protracted telling, repeating the first sound and lock and stopping but none of these items are lonely defined as stuttering. World Health Organization defines stutter as a speech tune disorder in which the one knows exactly what he/she wants to say, but he/she have difficulty speaking because of repetition, protraction, or involuntary lock. Stutter is a complex, multi-dimensional disorder that its presentation is due to complex and dynamic cooperation of several factors like, predisposition, motor genetic ability, speech, temperament, language skills and cognition of environmental factors (Zebroswki, 2003).

Stuttering is a state of tendency-avoidance conflict in which insistence on and tendency toward speaking oppose speech lock. It means that, on the one hand person tends to speak and insists on this and on the other hand speech locking inhibits speaking. Stuttering, usually, begins before the age of 8 year and stutter prevalence has been reported as 5% in different societies. 70-80% of these cases are recovering without treatment. Approximately, 1% of cases persist after 6 year of age and its effect on person's life is significant and considerable, if it isn't deleterious (Craing, 1990). In a study by Yaruss and Quesal (2004), emotional reaction of childhood stutter have been investigated. Comparison was made

between 65 stutter-afflicted children and 56 fluent children. They aged between 3-7 years; therefore their parents completed Behavior Style Questionnaire (BSQ).

Findings showed that stutter-afflicted children were arisen significantly more than fluent ones, they were significantly weaker in their attention adjustment and emotion's regulation was significantly at lower level among them, compared to fluent children. Findings support that children with stutter, are experiencing relatively more emotional reactivity during preschool ages. Furthermore, they can't control flexibility and can't regulate emotions, which they experience. This condition can be associated by their problems in language and fluent speech.

Mahr and Torosian (1999) surveyed anxiety symptoms in persons who stutter and persons with uncontrolled social phobia. Persons, who stutter, had the higher rate of social anxiety and avoidance than control group. However, persons who stutter reported lower rate of social distress and avoidance distress and, also, they reported more fear of negative evaluation, social phobia manifestation and fear of open areas. In any case, there wasn't significant difference between stutter and social phobia groups, in the general anxiety, Most people who stutter, have reported the speaking related fear, as their main and primary fear. Results of this study showed that, persons who stutter don't suffer from social phobia; however they may avoid social situation because of fear of their stuttering.

Relationship of stuttering and anxiety is a complex one. Anxiety is extensively reckoned as a causal factor in stuttering and it plays a main role in many theories related to stuttering (Iris and Ezrati, 2004).

Dilollo et al. (2003) in a comparison between persons who stutter and fluent ones, understood that persons who stutter show higher cognitive anxiety (problem in meaningful adding up of their experiences). These results showed that one's assessment and speech dysarthria's significant symptoms have major role in perception of person who stutter. In studies of Andersen et al. (2003) and Iris and Ezrati (2004), it was proved that anxiety, stress and sometimes depression, are being observed in persons who stutter.

In study of Klompas and Rass (2004) on life experience of individuals with stuttering from South Africa it was shown that stuttering have impacted on their quality of life. The main findings of study indicated that majority of participants perceived their stuttering to have impacted on their academic performance at school and relationships with teachers and classmates. People, generally reacts negatively to their stuttering and speech therapy had no positive impact on their quality of life. Most participants felt that stuttering had affected their self-esteem and self-image and they were feeling strong emotions during stuttering. World Health Organization have pointed in its multi-dimensional classification to this subject that experiences of stutter-afflicted persons can encompasses negative emotional, behavioral and cognitive reaction (either from speaker or environment).

In a study by Finn et al. (2005) semi-structure questionnaires method was used. This study showed that personal factors, which impact on persons who stutter, include their self-perception, beliefs and sentiments. Persons who stutter are worried about their speaking and don't have an appropriate attitude toward themselves. Since, stuttering is the most important dysarthria due to psycho-neurologic and emotional disorders and this is dominantly observed during childhood then, it seems necessary to investigate about children who stutter more and more. Regarding that childhood affects the personality development at adulthood, fundamental problems and conflicts of this period can permanently persist during personality development and reappear at next stages (Dilollo et al., 2003). Since, children with stuttering cannot express all their feelings due to speech problems and also they have other emotional problems which are induced by stuttering, then diagnosis of problems and conflict of such children is very important.

In this survey, of course, the projection concept of conflict has been considered. Regarding the fact what is interpreted in the projective tests are the perceived stimulants which are reflected from sentiments, needs, experiences and conditioned behaviors.

#### MATERIALS AND METHOD

Statistical population of current study includes children with and without stuttering, studying at second and third year of elementary schools of Ardabil City at 2008. Through, interview with teachers, children who stutter, were recognized (N = 30) and 15 male students of them were selected by simple random sampling. They were matched with 15 fluent male students (control group) for age, gender and level of education and projection tests (House-tree-person) was performed on these two groups. This test is invented by Craing (1990). Data collection was performed individually, in children's school and by researchers. A piece of paper was given to child and he/she was asked to draw a house, a tree and a person. The nature of this subject necessitates using causal-comparative method.

#### RESULTS

As it is observed in Table 1, existence of imaginary life (100%), consciousness (80%), controller house (73.3%), need to increase the ambient phenomenon (46.6%), warm emotional atmosphere of family, accessibility and being personally warm and friendly (40%) are significantly frequent among fluent children.

Following item, also, are frequently seen in children who stutter; imaginary life existence (100%), inactivation and lack of family's warm atmosphere (66.66%), tendency toward observing the word through imaginations (40%), bashfulness, seclusion, inaccessibility (33.33%) controller house (33.33%).

As it is observed in the Table 2, supporting oneself with more or less restraint (86.67%), seeking the accessible pleasures and wills (66.67%) being ambitious and diligent (46.67%), ego-strength, self-esteem and personality health (40%), anxiety (40%), are significantly frequent in children who don't stutter. Following items, however, are frequently observed in children who stutter; supporting oneself with more or less inhibition (66.67%), anxiety (53.33%), feeling of seclusion, rejection and separation from environment (33.33%), possibility of objectivity's sovereignty over subjectivity (33.33%), insecure adaptation level (26.67%), lack of self-reliance (26.67%), obsession with personal issues (26.67%), sever suppression, school obligation and state of separation between reality, thought and instinct (26.67%) and vulnerability, inactiveness and feeling of insecurity (13.33%).

As it is observed in the Table 3, existence of self-reliance (93.3%), infantilism and dependence (86.6%) good faith (73.3%), dependency upon father (60%) extroversions (53.3%), obsession with aesthetics (53.3%), lasciviousness and tendency toward corporeal issues

# J. Applied Sci., 9 (21): 3917-3921, 2009

Table 1: Frequency distribution of house drawing among children with and without stutter

		Without stuttering		With stuttering	
House test	Interpretation	Frequency	Perc ent	Frequency	Percent
Existence of ceiling	Imaginary life	15	100	15	100
Chimney with extensive smoke	Emotional distress, conflicts, mental tension	3	20	3	20
Chimney with little smoke	Warm emotional atmosphere of family	6	40	3	20
Being small	Rejection in life	2	13/3	3	20
Being big	Controller house	11	73/3	5	33/33
Small door and window	Bashful, secluded, inaccessible	5	33/33	5	33/33
Lucid wall	Weakness in reality experiment	0	0	0	0
Existence of different elements	Need to increase the ambient phenomenon	7	46/6	3	20
Ceiling with window	Tendency toward observing the word through imaginations	5	33/33	6	40
Sun	Symbol of consciousness	12	80	5	33/33
No chimney	Inactivity and lack of family's warm emotional atmosphere	4	26/6	10	66/66
No ceiling	Sensible orientation and self-restraint	0	0	0	0
Stair	Person's being accessible	1	6/66	1	6/66

Table 2: Frequency distribution of tree drawing among children with and without stutter

Tree test	Interpretation	Without stuttering		With stuttering	
		Frequency	Percent	Frequency	Percent
Closed Branches	Supporting oneself with more or lesinhibition	13	86/67	10	66/67
Existence of Fruit	Seeking the accessible pleasures and wills	10	66/67	3	20
Branch's attachment to trunk	Sever suppression, school obligation and state of separation between reality, thought and instinct	4	26/67	4	26/67
Closed base	Feeling of seclusion, rejection and separation from environment	1	6/66	5	33/33
Disproportion between trunk and branch	Possibility of objectivity's sovereignty over subjectivity	2	13/33	5	33/33
Circle foliage	Obsession with personal issues	3	20	4	26/67
Small tree	Lack of self-reliance	2	13/33	4	26/67
Big trunk	Ego-strength, self-esteem and personal health	6	40	4	26/67
Being horizontal	Relatively not accepting the reality	0	0	1	6/66
Existence of nest on tree	Need to escape from a threatening medium	0	0	1	6/66
Gnarl or hole in the trunk	Harmful experiences	0	0	1	6/66
Thin trunk	Insecure adaptation level	4	26/67	4	26/67
Upward branches	Being ambitious and diligent	7	46/67	0	0
Downward branches	Low level of energy	0	0	1	6/66
Light lines and inaccuracy	Vulnerability, inactiveness and feeling of insecurity	1	6/66	2	13/33
Drawing with pressure	Anxiety	6	40	8	53/33
Small and weak stem	Difficulty in facing and coming to term with life	0	0	1	6/66
Wrinkled stem	Absurdity and anxiety, tendency toward obsessive compulsive thoughts	0	0	0	0

Table 3: Frequency distribution of person drawing among children with and without stutter

		Without stuttering		With stuttering	
Person test	Interpretation	Frequency	Percent	Frequency	Percent
Distant feet	Self-reliance	14	93/3	2	13/3
Horizontal arms	State of tension toward surroundings and need to action	5	33/33	7	46/6
Person's small size	Chronic self-absorption	0	0	3	20
Person at middle place	Ego is real and present	1	6/66	1	6/66
Linear mouth	Existence of tension	2	13/3	2	13/3
Closed mouth	Distrust	0	0	5	33/33
Rounded mouth	Infantilism and dependence	13	86/6	4	46/6
Existence of eyes and eyebrow	Obsession with aesthetics	8	53/3	4	26/6
No hand	Inability in communicating wit others	1	6/66	4	26/6
Small size eye	Introversion	2	20	8	53/3
Large size eye	Extroversion	8	53/3	3	20
Immobile person	Lack of instinct need's satisfaction	2	13/3	6	46
Opened hand	Good faith	11	73/3	8	53/3
Face's coloration	Lack of realism	2	13/3		13/3
Small head	Self-humiliation, existence depression background, relation problems	1	6/66	3	20
Big head	Self-love, excessive ego spread, ethnical and rational conceit	2	13/3	2	13/3
Colorful lines	Lasciviousness and tendency toward corporeal pleasures	8	53/3	5	33/33
Light lines	Lack of self-reliance, hesitation and bashfulness	0	0	7	46/6
Avoidance from coloration	Doubtful sign	0	0	2	13/3
Closeness to house	Dependency upon mother	4	26/6	8	53/3
Closeness to tree	Dependency upon father	9	60	3	20

(53.3%) are significantly frequent among children who don't stutter. Whereas in children who stutter, following items are significantly seen; introversion, dependency upon mother, good faith (53.3%), lack of self-reliance, hesitation and bashfulness (46.6%), state of tension toward environment and need to reaction (46.6%) and dependency (46.6%), lack of instinct need's satisfaction (46.6%), distrust (33.33%).

#### DISCUSSION

The aim of this study was to compare fundamental conflicts between children who stutter and fluent children. Results obtained showed that existence of anxiety has been significantly higher in children with stuttering than normal children. The present finding is in accord to previous documented research by Iris and Ezrati (2004). Both explain that, anxiety is extensively reckoned as a causal factor in stuttering and play a fundamental role in many theories about stuttering. Relationship between stuttering and anxiety is a complex one. Our survey's results, also, accord with survey of Mahr and Torosian (1999) which say that persons with stuttering have the most frequency of social anxiety and avoidance. In our survey, it was demonstrated that following variables are more common in children who stutter than children who don't; feeling of seclusion and being rejected, separation from environment, lack of self-reliance, difficulty in facing and coming to term with life. Other variables, also, were seen in children who stutter including; harmful experiences, vulnerability, inactivity and feeling of insecurity. Researchers believe that stuttering impact on status and psychological emotions of individuals and make him/his anxious during speaking.

It is observable in our survey that children without stuttering were seeking accessible wills and pleasures more than children who stutter. Ego strength, self-esteem and personality health were higher in children who don't stutter and they showed more ambition and diligence. In this survey, children who stutter have less frequency of self-esteem, comparing to children who don't stutter. Tendency toward and dependency upon mother, were significantly higher in children whit stuttering than fluent ones. Bashfulness, chronic self-absorption and state of tension in front of environment were significantly higher in children who stutter. This finding accord with findings of Yaruss and Quesal (2004), which are saying that children, who stutter have higher rate of emotional reactivity and tension and they can't regulated their emotions. In current study, also, children who stutter showed inability for communicating with others and distrust. Just as Hyde's (1997) belief, stuttering is a complex disorder that affects the advancement and social, academic, emotional and vocational achievements. Results of this survey accord with findings of Klompas and Ross (2004), which say that stuttering affects individuals self-respect and they experience strong emotions during stuttering. Findings of this survey showed that existence of imaginary life, some conflicts and distresses, bashfulness and tendency to watch the world through imagination, were observed in both groups. There was no significant difference between children who stutter and fluent children, in institutional obligation, sever suppression and state of disassociation between reality and instinct. Normal children exhibited higher rate of family's warm atmosphere, personal warmness and accessibility, consciousness and need to increase of surrounding's events.

The noteworthy finding of current study is that, existence of inactivity and lack of family's warm psychological atmosphere were observed significantly higher in children who stutter than normal ones. This finding is showing that environmental factors have fundamental determinant role in commencement and continuation of stuttering because it includes all other factors and surrounds issues like relational stress, anxiety and negative counter action of parent-child.

### REFERENCES

Anderson, J.D., M.W. Pellowski, E.G. Conture and E.M. Kelly, 2003. Temperamental characteristics of young children who stutter. J. Speech Lang. Hear. Res., 46: 1221-1233.

Craing, E.M., 1990. An investigation into the relationship between anxiety and stuttering. J. Speech Hear. Disorders, 55: 290-294.

Dilollo, A., W.H. Manning and R.A. Neimeyer, 2003. Cognitive anxity as a function of speaker role for fluent soeaker and persons who stutter. J. Fluency Disorders, 28: 167-186.

Finn, P., R. Howard and R. Kubala, 2005. Unassisted recovery from stuttering: Self-perceptions of current speech behavior, attitudes and feelings. J. Fluency Disorders, 30: 281-305.

Hyde, C.H., 1997. Approach-Avoidance Conflict. Edition of Speaking Out, The British Stammering Association, London.

Iris, L. and R. Ezrati, 2004. The relationship between anxiety and stuttering. J. Fluency Disorders, 29: 135-148.

- Klompas, M. and E. Ross, 2004. Life experiences of people who stutter and the perceived impact of stuttering on quality of life: Personal accounts of South African individuals. J. Fluency Disorders, 29: 275-305.
- Mahr, G.C. and T. Torosian, 1999. Anxiety and social phobia in stuttering. J. Fluency Disorders, 24: 119-126.
- Yaruss, J.S. and R. Quesal, 2004. Stuttering and international classification of functioning, disability and health (ICF). J. Communicator Disorders, 37: 35-52.
- Zebroswki, P.M., 2003. Developmental stuttering. Pediatric Annals, 32: 453-463.