

PREFACE

Throughout the course of the past 75 years or more, much has been written regarding the clinical management of fluency disorders. The nature of these materials varies widely, but a considerable number of them (a) provide information regarding strategies for facilitating fluency or (b) advance particular approaches for fluency intervention. Moreover, much of the extant literature shares a common underlying approach in that the content is primarily geared toward the individual (child or adult) who stutters. For example, clinical textbooks are typically designed so that the *majority* of the information contained within presents diagnostic/treatment strategies, approaches, or techniques that clinicians apply for use directly with fluency clients. Clearly, this information is essential and the existing resources (as well as future publications in the same vein) should be viewed as highly valuable for both pre-service training and professional development in fluency disorders.

Unfortunately, however, relatively few of these reference materials provide comparably developed information pertaining to other areas germane to fluency management. While some of the available clinical resources do discuss such topics as counseling parents of children who stutter, these sections typically comprise a much smaller proportion of the total publication. Although the authors of these books recognize the value of such information, they are constrained by various factors (e.g., page length, production costs, potential for adoption as a required text in training programs, etc.) which affect content decisions.

This issue of *Seminars in Speech and Language* has been designed to be compatible with the widely available clinical references

described above. Including others who interact with individuals who stutter as adjuncts in the fluency therapy designed and implemented by the speech-language pathologist (SLP) is the focus of this publication. This issue seems timely in light of contemporary intervention models that emphasize team approaches in the treatment of communication disorders and the need for clinicians to address concerns in the various environments (e.g., home, school, and work) experienced by their clients. One major theme of this issue is to emphasize the SLP's role in developing *collaborative* relationships with those who have important roles in the lives of their fluency clients. In essence, this "network of adjuncts" stretches the fluency facilitating environment outside of the clinic and may increase the client's ability to transfer gains in fluency from the therapy room to daily life.

Both children and adults who stutter interact daily with various communication partners in diverse environments. For children who stutter, "home" and "school" environments may be associated with issues, concerns, and/or questions that the fluency clinician should address. Practical perspectives regarding parents as partners in fluency therapy (Logan & Caruso) and guidelines for developing effective teacher-clinician collaborations (Zebrowski & Cilek) are included in this issue.

With regard to adults who stutter, the results of a study in which spouses of adults who stutter served as participants provide a basis for incorporating spouses as adjuncts in fluency therapy (Boberg & Kully). Group fluency therapy (Ramig & Bennett) is often an effective method of intervention with adults, yet, this is one type of intervention

that is under-represented in recent literature. An interesting implication of this article is that other adults who stutter can serve as adjuncts to the fluency clinician to facilitate change for other group members who are either having difficulties in coping with their stuttering or in modifying their speaking behaviors. Another important area for clinicians who work with adults who stutter is, as the authors (Cassar & Neilson) so succinctly state, to “factor the workplace into fluency management.” This article addresses a topic that has received relatively little attention over the years and provides pragmatic information that will assist clinicians in developing collaborative relationships with employers of individuals who stutter. The last two articles in this issue provide information from the consumer’s (Bradberry) and

the fluency clinician’s (Gregory) perspective on support groups for adolescents and adults who stutter.

I would like to express my appreciation to these authors for their efforts. Their task was to draw upon their experiences with individuals who stutter and integrate those insights with current advances in fluency disorders. Clearly, these contributors succeeded in their mission! Each article is designed and written to maximize clinical meaningfulness. As a result, I am confident that you will find this issue to be a frequently used, valuable reference for both treatment planning and service provision with children and adults who stutter.

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Guest Editor