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Coping responses by adults who stutter: Part I. Protecting the self and others

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Abstract

Using a grounded theory approach, four clusters were identified that represent patterns of coping by adults who stutter. In order to understand the complexities within the coping responses of speakers to the experience of stuttering, this first of two companion papers summarizes the literature on the human coping response to stress and the nature of two of the four main findings identified. These findings describe a coping process that emphasizes strategies of protecting both the speaker and the listener from experiencing discomfort associated with stuttering. The companion paper describes the remaining two main findings that emphasize the characteristics of self-focused and action oriented coping responses.

Educational Objectives: The reader will be able to: (1) describe, from the perspective of a select group of adults who stutter, the themes associated with the process of coping with stuttering, (2) describe the basic rationale for the procedures associated with grounded theory methods, (3) describe the factors that influence the choice to use emotion-focused and problem-focused coping strategies, and (4) explain the factors that contribute to the use of methods of escape.

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1. Introduction

The literature describing therapeutic change for adults who stutter indicates that chronic stuttering is not likely to be eradicated but rather is managed or coped with to varying degrees. Some speakers manage the problem presented by their stuttering extremely well both with and without formal therapeutic experiences (Anderson and Felsenfeld, 2003; Finn, 1996; Plexico, Manning, & DiLollo, 2005). Some speakers are able to achieve mainstream, and in some instances, exceptional levels of fluency and communicative facility (Chmela et al., 1998; Daly et al., 1996; Hillis & Manning, 1996; Hood, 1998; St. Louis, 2001). Other individuals are less adept at coping with their situation and continue to demonstrate obvious and often effortful stuttering as well as patterns of helplessness, hopelessness, shame, fear and avoidance (Corcoran & Stewart, 1998; Daniels, Hagstrom, & Gabel, 2006; Plexico et al., 2005).

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Numerous investigators have described the profoundly negative and restrictive impact of stuttering on person's lives prior to or at the outset of treatment (e.g., Crichton-Smith, 2002; Corcoran & Stewart, 1998). In spite of the many detrimental consequences presented by stuttering, relatively few adolescents and adults who stutter seek treatment and many of those who initiate treatment drop out (Hearne, Packman, Onslow, & Quine, 2008; Manning, 2006, chap. 9). For those who continue with therapy, some respond better than others regardless of the treatment protocol (Franken, Boves, Peters, & Webster, 1992; Huinck & Peters, 2004). The literature on models of human coping can provide insight into the variability of speakers in responding to the stressful circumstances presented by stuttering.

1.1. *The process of coping*

Although there are several models and descriptions of the human coping response, there is some consensus regarding many of the fundamental concepts and essential features of this process (Carpenter, 1992). For example, the result of cognitive, affective or behavioral responses to exceptional demands or events that are perceived as harmful is often conceived of as *stress*. Lazarus and Folkman (1984) define stress as “a particular relationship between the person and the environment that is appraised by the person as taxing or exceeding his or her resources and endangering his or her well-being” (p. 19). Whether or not a particular person–environment relationship will be judged as stressful is dependent on how the relationship is appraised and the coping resources available to the individual. *Appraisal* refers to the process of making a judgment about whether or not a particular encounter will significantly influence one's well-being. The *process of coping* is defined as “constantly changing cognitive and behavioral efforts to manage specific external and/or internal demands that are appraised as taxing or exceeding the resources of the person” (Lazarus & Folkman, 1984, p. 141). Accordingly, coping responses are likely to change over time to include responses that occur in anticipation of the stressor or as a result of the stressor. An important feature of this description is that coping is independent of outcome. That is, the process of coping is not dependent on the success or failure of the individual's response to the stressor.

1.2. *The contextual model of coping*

One current way of conceptualizing the relationship between stress, appraisal and coping is the contextual model (Lazarus & Folkman, 1984). In contrast to models which view coping as an unconscious process or a stable trait of an individual's personality (e.g., the ego-psychological and trait/dispositional models; see Byrne, 1964; Haan, 1969; Menninger, 1963; Miller, 1987; Valliant, 1977), the contextual model views the coping process in terms of how an individual actively engages in the management of a stressful situation (Folkman, 1992). Initially, the individual appraises the person–environment relationship, including both a primary appraisal of the personal significance of the stressful situation and a secondary appraisal of possible coping options (Folkman & Lazarus, 1990; Lazarus & Folkman, 1984).

Appraisal of the person–environment relationship is influenced by precursors such as a person's pattern of motivation, beliefs about himself or herself and the world, and recognition of personal resources. The variability observed among individual appraisals could be explained by individual differences in personal factors, which explains how something that is perceived as threatening by one person can be perceived with neutrality by another (Folkman & Lazarus, 1990). Environmental or situational factors such as the nature of the stressor, its proximity, its ambiguity and duration, and the existence of social support are likely to influence the appraisal process (Lazarus & Folkman, 1984).

Within the contextual model, coping is viewed as having two functions. *Problem-focused coping* involves any effort to remove or reduce the impact of a threatening event, a response that is frequently employed in situations where an individual feels that something constructive can be done about a stressful situation (Carver & Scheier, 1994; Carver, Scheier, & Weintraub, 1989; Folkman, 1992). Problem-focused coping strategies can include but are not limited to defining the problem, generating alternative solutions, weighing alternatives in terms of cost and benefit, choosing among multiple solutions, and agentic behavior (i.e., thinking or acting differently than before; Van Inwagen, 1983).

In order to reduce any negative emotions associated with the threatening event the individual may also employ *emotion-focused coping*. Emotion-focused coping is more likely to be used when individuals believe that they must endure a stressor (Carver & Scheier, 1994; Carver et al., 1989; Folkman, 1992). Emotion-focused coping strategies could include but are not limited to avoidance, minimization, distancing, selective attention, positive comparisons, and finding positive value in negative events (Lazarus & Folkman, 1984).

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