Changing adolescent attitudes toward stuttering

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A B S T R A C T

Purpose: Live oral or recorded video presentations on stuttering were delivered to high school students in order to determine the extent to which their attitudes toward stuttering could be improved.

Methods: A classroom teacher administered the Public Opinion Survey of Human Attributes-Stuttering (POSHA-S) to two health classes before and after an oral live presentation by a person who stutters. She also gave the POSHA-S to two other similar classes before and after a True Life®: I Stutter video presentation. The stuttering person in the oral condition was one of three people featured in the video. Also, following the video condition, students filled out the POSHA-S a third time after a short oral presentation by the same person who stutters.

Results: Measured attitudes improved overall on the POSHA-S and on selected items.

Conclusions: High school students hold similar attitudes toward stuttering and stutterers as adults, and these attitudes can be improved, at least temporarily, by a presentation on stuttering but more via a live presentation than a professionally prepared video.

Educational objectives: (1) The reader will identify different ways to improve attitudes toward stuttering in high school students. (2) The reader will list advantages and disadvantages of live oral presentations and recorded video presentations as strategies to change attitudes toward stuttering. (3) The reader will identify characteristics of a speaker that can assist in attitude changes of high school students.

1. Introduction and rationale

Goffman (1963) is credited to have advanced a view of stigma as a source of legitimate study. He viewed stigma as the universal manifestation of a “spoiled identity.” A voluminous and rapidly growing literature now deals with stigma and stuttering. Those who do not stutter typically view those who do in stereotypic and negative ways, such as assuming that a person who stutters is nervous, shy, introverted, passive, and prone to psychological problems (e.g., Craig, Tran, & Craig, 2003; Gabel, Blood, Tellis, & Althouse, 2004; Hughes, Gabel, Irani, & Schlagheck, 2010; Langevin, 2009). Growing evidence of the so-called “stuttering stereotype” has even been found in 3–5 year-old and 6–13 year-old children (Griffin & Leahy, 2007; Hartford & Leahy, 2007). It has also been documented in adolescent students (Evans, Healey, Kawai, & Rowland, 2008; Kirsch, 2006).

As the ubiquity of negative attitudes toward stuttering has been established internationally, calls for public awareness and education campaigns to diminish stigma associated with stuttering have been advanced (e.g., Gabel et al., 2004; St. Louis,
The literature reviewed also documents wide differences based on the measure of attitudes utilized (e.g., Hughes et al., 2010). If a science of changing attitudes is to advance, we submit that, whatever else might be included in future investigations, there is a need for a “standard” instrument, results of which can be compared across investigations. The Public Opinion Survey of Human Attributes-Stuttering (POSHA-S) was designed as such an instrument which, like nearly all studies in the area of stuttering, measures attitudes explicitly, i.e., from self-report or questionnaires (Bohner & Dickel, 2011). Recently completed, the POSHA-S (St. Louis, 2011a, 2011b, 2011c) has been shown to manifest satisfactory readability and user-friendliness (St. Louis et al., 2008), test–retest reliability (St. Louis, Lubker, Yaruss, & Aliveto, 2009), concurrent and construct validity (St. Louis, Reichel, et al., 2009), internal consistency (Al-Khaledi, Lincoln, McCabe, Packman, & Alshatti, 2009), translatability to other languages (St. Louis & Roberts, 2010), sensitivity to differences between convenience and probability sampling (Özdemir, St. Louis, & Topbaş), and sensitivity to stuttering attitudes among diverse populations and ages (St. Louis, 2005; St. Louis, Andrade, Georgieva, & Troud, 2005).
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