Public awareness and knowledge of stuttering in Japan

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\textbf{ABSTRACT}

\textit{Purpose:} To determine laypeople’s knowledge and awareness of stuttering in Japan.

\textit{Methods:} A total of 303 respondents, recruited by street sampling, completed a questionnaire assessing the prevalence, onset, gender distribution, occurrence in different races, cause, treatment, association with intelligence, and hereditariness of stuttering. The questionnaire used was a Japanese version of that devised by Van Borsel, Verniers, and Bouvry (1999) for use in Belgium.

\textit{Results:} Although around half of the respondents had heard or met a stutterer, they tended to misunderstand the stuttering; e.g., respondents estimated the prevalence of stuttering as high. Knowledge also differed according to age, gender, and education level. Specifically, older individuals, females, and individuals with higher levels of education tended to have greater knowledge of stuttering. In comparing the results of the present study with similar studies conducted in Belgium, China, and Brazil, we observed several similarities and differences.

\textit{Discussion:} Although most respondents were to some extent familiar with stuttering, their overall knowledge of the condition was limited. Certain factors could be involved in having knowledge of stuttering, such as one’s life experience, cultural background, and social attitudes toward stuttering. The findings suggest the need for growing knowledge and awareness of stuttering.

\section{1. Introduction}

Developmental stuttering is a fluency disorder characterized by word or part-word repetition, prolongation, and silent blocks (e.g., \textit{Guitar}, 2014). Extensive clinical and experimental studies have been conducted on stuttering to clarify the condition and its causes. Stuttering occurs globally, with approximately 1% of the adult population and 5% of children having a stutter. It typically develops between two and five years of age (e.g., Andrews \textit{et al.}, 1983; Mansson, 2000; Ambrose, 1999, 2013;). Genetics are believed to contribute to its etiology (e.g., Kang \textit{et al.}, 2010; Kraft & Yairi, 2011; Yairi & Ambrose, 2013), and it is more prevalent among males than among females (Bloodstein & Ratner, 2008). There is no difference in the prevalence of stuttering between right- and left-handed individuals, and the average intelligence of persons who stutter (PWS) does not appear to differ from that of persons who do not stutter (PWDNS) (Bloodstein & Ratner, 2008).

There have been many studies on the public’s perception of people who stutter. \textit{St. Louis et al.} (2016) and \textit{Özdemir, St. Louis, and Topbaş} (2011a) described that many studies have shown the general public holds perceptions and beliefs about PWS that are biased.
negative, misinformed, stigmatized, or discriminatory (e.g., Al-Khaledi, Lincoln, McCabe, Packman, & Alshatti, 2009; Boyle & Blood, 2015; Cooper & Cooper, 1996; Craig, Blumgart, & Tran, 2009; Crowe & Walton, 1981; Doody, Kalinowski, Arsmon, & Stuart, 1993; Dorsey & Guenther, 2000; Gabel, 2006; Gabel, Blood, Tellis, & Althouse, 2004; Healey, Gabel, Daniels, & Kawai, 2007; Hughes, Gabel, Irani, & Schlagheck, 2010; Hulit & Wirtz, 1994; Klein & Hood, 2004; Panico, Healey, Brouwer, & Susca, 2005; Ruscello, Lass, & Brown, 1988). St. Louis (2005, 2011, 2012a, 2012b, 2012c) developed The Public Opinion Survey of Human Attributes-Stuttering (POSHA-S) as a standard measure of public attitudes toward stuttering that is practical, reliable, valid, and translatable. The POSHA-S has been used in many countries, considering participants’ gender, social position, and so on (e.g., Özdemir et al., 2011a; Özdemir, St. Louis & Topbaş et al., 2011b; St. Louis, 2012b, 2015; St. Louis et al., 2016; Walker, Mayo, & St Louis, 2016). These studies have been accumulating as a database on a website, and cultural differences are being discussed. However, there might be insufficient knowledge on perception of stuttering by people living in Japan. In Japan, although the POSHA investigation has been progressing, it is yet to reach a clear conclusion (not yet published). As increased knowledge of stuttering is associated with more positive attitudes toward stuttering (Crowe & Walton, 1981; Daniels, Panico, & Sudholt, 2011; Yeakle & Cooper, 1986), it is important to measure public knowledge of stuttering in Japan in order to identify ways to create a PWS-friendly society.

Another series of studies have investigated the public’s level of awareness and knowledge of stuttering using a questionnaire developed by Van Borsel, Verniers, and Bovry (1999). One study was conducted in Flanders, in northern Belgium (Van Borsel et al., 1999); another in Shanghai, China (Xing Ming, Jing, Yi Wen, & Van Borsel, 2001); and the last one was conducted in Rio de Janeiro, Brazil (de Britto Pereira, Rossi, & Van Borsel, 2008). The questionnaire was largely inspired by the findings of Andrews et al.’s (1983) meta-analysis, and is simple and useful to investigate public knowledge of stuttering. While all three studies found that most laypeople are familiar with stuttering, they also showed that laypeople tend to lack even basic knowledge of stuttering. These studies also noted differences based on participants’ age, gender, and education level. Xing Ming et al. (2001) indicated that female respondents had a more correct view about the heredity of stuttering. The study by de Britto Pereira et al. (2008) indicated that male respondents and respondents with a higher level of education expressed more accurate knowledge of stuttering, and younger respondents tended to have a more optimistic view on the possibility of treatment.

There may exist cultural differences with regard to public attitudes and knowledge of stuttering. In fact, the above-mentioned three studies found some differences among Belgium, China, and Brazil, which de Britto Pereira et al. (2008) suggested might be due to differences in cultural background. In the POSHA study, the public’s attitude was typically more positive (i.e., less stigmatizing, less ostracism) in Western cultures (i.e., North America, Western Europe, Australia) than in other parts of the world (Przepiorka, Blachnio, St. Louis, & Wozniak, 2013; St. Louis, 2012c; St. Louis, Sønsterud, Carlo, Heitmann, & Kvenseth, 2014; St. Louis, Weidner, Gabel, Hughes, & Coleman, 2014), though these results were inconsistent across studies (St. Louis et al., 2016). Asian countries, such as China or perhaps Japan, might hold beliefs and attitudes that are more negative toward stuttering (Bebout & Arthur, 1992, 1997; Ip, St. Louis, Meyers, & Sn Xue, 2012) such as stereotypes and prejudicial and discriminatory attitudes.

Japan is a country that is located in eastern Asia, surrounded by seas (Atlantic Ocean and the Sea of Japan), and is not so-called “West,” similar to China (Ip et al., 2012). Public opinion or attitudes toward stuttering have often contrasted “West” or western regions from the non-Western regions (Ip et al., 2012; St. Louis et al., 2016). In Japan, the history of treatment of stuttering is relatively short. For example, for over 50 years Japanese stutterers were forced to live with stuttering rather than treat this problem, because of a negative attitude towards treating stuttering (Chu, Sakai, & Mori, 2014; Sakata, 2012). Historically speaking, treatment of stuttering is quite recent, and stuttering is not likely to be treated in most hospitals, compared to other countries. This has been encouraged by the high recovery rate from stuttering in early childhood (Chu et al., 2014) and the influence of Wendell Johnson’s diagnostogenic theory of stuttering (Johnson, 1955), according to which stuttering is caused by misevaluating normal disfluencies as stuttering. Based on the latter theory, it was assumed that it is better not to pay attention to childhood disfluencies. In addition, Chu et al. (2014) noted that for the reason mentioned above, many parents lacked adequate knowledge about stuttering and normal speech development in children. Not only PWDNS, but also PWS lacked knowledge about stuttering or its treatment options (Sakai, Chu, Mori, & Yaruss, 2017).

We hypothesized that public awareness and knowledge of stuttering in Japan would be generally consistent with the studies of Belgium, China, and Brazil including the differences based on age, gender, and education level, but could have some differences that may reflect the different cultures of these countries. Specifically, the location of Japan as “non-West,” and its relatively brief history of treatment of stuttering may lead to inadequate knowledge of stuttering. Therefore, the purpose of the study was to investigate the Japanese public’s awareness and knowledge of stuttering, and to compare the results with other studies that also used similar procedures. It was expected that our findings would add new cross-cultural data on public knowledge of stuttering, and would encourage a campaign to spread awareness about stuttering in Japan.

2. Method

2.1. Ethics statement

The ethics committee of Tokyo Metropolitan University approved the procedure before data were collected, and the entire investigation was conducted in accordance with the Declaration of Helsinki.

2.2. Participants and procedure

Our procedure was similar to those of de Britto Pereira et al. (2008), Van Borsel et al. (1999), and Xing Ming et al. (2001), because...
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