



## Self-acceptance of stuttering: A preliminary study



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### ABSTRACT

**Purpose:** This study explored the relationship between self-acceptance of stuttering and (1) psychosocial factors (self-esteem, hostility towards others, emotional support, and perceived discrimination); (2) treatment history (support group participation, therapy duration, and perceived therapy success); and (3) previously reported variables in self-acceptance of stuttering, which include age and stuttering severity.

**Method:** Participants were 80 adults who stutter who were recruited with assistance from the National Stuttering Association and Board Certified Specialists in Fluency Disorders. Participants completed an electronic survey composed of an acceptance of stuttering scale, psychosocial scales, and a participant information questionnaire.

**Results:** Statistical analysis identified significant correlations between participants' reports of self-acceptance of stuttering and self-esteem, perceived discrimination, hostility towards others, and perceived therapy outcome. Self-esteem was positively correlated with self-acceptance, while hostility towards others and perceived discrimination was negatively correlated with self-acceptance. Participants who perceived their therapy outcome to be successful were significantly more likely to report higher levels of self-acceptance. No significant relationships were found between self-acceptance of stuttering and support group participation, emotional support, stuttering severity, and participant age.

**Conclusion:** This exploratory investigation has provided a foundation for future studies on the self-acceptance of stuttering. The findings indicate common psychosocial variables in self-acceptance of stuttering and of other disabilities. The significant relationships between self-acceptance of stuttering and psychosocial and therapeutic variables found need to be further explored to identify its causalities and clinical implications.

**Learning outcomes:** The reader will be able to (1) discuss the importance of assessing self-acceptance of stuttering, (2) summarize the literature on self-acceptance of disability, and (3) describe the significant findings related to self-acceptance of stuttering and psychosocial, therapeutic variables.

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## 1. Introduction

Self-acceptance of stuttering has been regarded as an essential component of stuttering management for several decades. Sheehan and Martyn (1970) highlighted acceptance as a fundamental component of recovery, and this continues to be emphasized by professionals (Guitar, 2013; Manning, 2009; Shapiro, 2011) and people who stutter (PWS; Plexico, Manning, & DiLollo, 2005; Plexico et al., 2009b; Wingate, 1964).

Stuttering can affect nearly all aspects of a person's life and it often imposes limitations in one's social, occupational, and educational experiences (Gabel, Blood, Tellis, & Althouse, 2004; Williams, 2006; Yaruss & Quesal, 2004). Although at times concealable, once exposed, stuttering may become just as visible and attract as much attention as physical impairments (Van Riper, 1992). Thus, the characteristics and limitations caused by the psychological and physical aspects of stuttering can easily develop into a disability (Yaruss, 1998). Whereas self-acceptance has been widely explored in disability studies and found to be associated with numerous positive factors, including better health outcomes (Marinelli & Orto, 1984), greater life satisfaction (Casier et al., 2011), and better rehabilitation (Chen & Crewe, 2009), this topic has received sparse attention in the stuttering research literature.

Acceptance of disability is defined as an adjustment of a person's value system such that their actual or perceived loss(es) do not negatively affect the value of existing abilities or the person as a whole (Dembo, Leviton, & Wright, 1975; Keany & Glueckauf, 1993). Although this theory and research related to it are decades old it continues to occupy a central position in the rehabilitation and disability studies literature (Keany & Glueckauf, 1993). This definition of acceptance proposed by Dembo et al. (1975) perceives disability as a misfortune or "value loss" which makes acceptance of disability an "acceptance of loss." The term "loss" refers to the absence of something valuable, giving way to personal misfortune. The term "acceptance" is perceiving the value loss as non-devaluating (Wright, 1983). If perceived as a misfortune or loss, disability can lead to devaluation of existing abilities and possible devaluation of the person as a whole (Keany & Glueckauf, 1993). By highlighting the individual's attitudes toward disabilities as pivotal to acceptance of loss, Dembo et al. (1975) proposed four major changes in one's value system. These values must be met in order to prevent or reduce devaluation and lead to acceptance of disability: (1) recognizing values other than those directly conflicted with the disability, (2) realizing that non-physical attributes are more important than physical attributes, (3) containing the disability from defining the person as a whole, and (4) evaluating personal attributes by their asset values instead of comparative values, by which one does not compare himself to others, but is able to recognize personal strengths and abilities. The association between these four value changes and increase in acceptance has been found in numerous disabilities research studies (Heineman & Shontz, 1984; Keany & Glueckauf, 1993; Li & Moore, 1998; Linkowski & Dunn, 1974; Starr & Heiserman, 1977; Wright, 1983), including one involving PWS (Plexico et al., 2009b).

In a study by Plexico et al. (2009b), PWS who exhibited self-acceptance also demonstrated the four value changes proposed by Dembo et al. (1975). Plexico et al. reported that (1) "participants began to develop a broader self-concept that encompassed attributes unrelated to stuttering," (p. 119), indicating enlargement of scope of values and subordinating the physique (stuttering behavior) relative to other values; (2) participants began "accepting that stuttering was a 'part of the self' rather than a defining characteristic" (p. 121), demonstrating that the participants were containing the disability from defining their identity; and (3) "participants were also able to facilitate greater self-acceptance by viewing stuttering from a different, broader and more positive perspective" (p. 121), suggesting that stuttering was viewed as an asset. These participants' accounts suggested that the value changes proposed by Dembo et al. (1975) are also associated with self-acceptance of stuttering.

Acceptance of stuttering has been found to be an important factor in successful management of stuttering (Plexico et al., 2005; Wingate, 1964) and has been associated with greater quality of life (Swartz, Irani, & Gabel, 2014). Acceptance of stuttering has the potential to reduce the desire to hide stuttering and the pressure of always being fluent. This enables the individual to approach stuttering in a positive, non-devaluating, and direct manner (Plexico et al., 2009a, 2009b; Swartz et al., 2014). Furthermore, accepting stuttering may encourage a person to become more willing to use stuttering modification techniques (Van Riper, 1992). These techniques include eliminating escape or avoidance behaviors and reducing physical tensions associated with stuttering. These changes may lead to improved management of stuttering (Sheehan, 1979; Van Riper, 1992). These positive aspects of self-acceptance require additional research to explore variables that might be related to increased self-acceptance of stuttering. There are many variables to consider when investigating acceptance of a disability, including self-esteem, emotional support, perceived discrimination, and hostility. Other variables of interest when exploring self-acceptance and stuttering include support group participation, age, stuttering severity, and therapy history. These variables will be discussed in the following section.

### 1.1. Variables of interest

#### 1.1.1. Self-esteem

Feeling good about the self, or self-esteem, has been discussed as an important factor in acceptance of disability (Wright, 1983). According to Wright (1983) an attribute, such as an impairment, has the potential to greatly influence self-esteem depending on (1) the self-perceived connection between the attribute and the individual's identity and (2) the status value of the attribute. Therefore, if the attribute is positively evaluated it has the potential to elevate self-perception and status-value, thus increase self-esteem. Stuttering has been found to have a strong influence on identity, for some it is even more

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