An investigation into the experiences of individuals who attended the Dublin Adult Stuttering (DAS) speech and language therapy course.

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Abstract

Objective: This study aimed to explore the experiences of individuals who attended a specific course the Dublin Adult Stuttering (DAS) speech and language therapy course. It focused on the participant’s personal perceptions and experiences of their stutter and its impact on their lives before, throughout and after the course.

The DAS course is designed on a therapy approach that focuses on reducing the participants’ avoidance of specific words or situations which enables the participant to become accepting and more comfortable with their stutter.

Methodology: A qualitative research design was chosen for the study. Four participants consisting of two males and two females who had attended the DAS course over the past seven years took part in semi-structured interviews. They talked about their experiences and perceptions of the course. The data was analysed using thematic analysis. Thematic analysis identified and analysed patterns or themes within the data. The themes that emerged were categorised before, throughout and after the course and common themes were grouped across all participants.

Results: Different themes emerged from each participant’s responses. Some of the common themes that emerged amongst the participants after the course included an increase in confidence and how completing the DAS course had produced an acceptance of their stutter. They reported that meeting similar people throughout the DAS course was a positive experience that produced an effective system of support.

Conclusion: From the themes that emerged, the participant’s perception of the therapy approach and design presented in the DAS course has impacted positively on their lives and of their perceptions of themselves. It has enabled them to increase their confidence and become more accepting of their stutter.

Key Words: Stutter, DAS course, Qualitative, Thematic Analysis.
Introduction:

Stuttering is the production of disruptions in the flow of speech. It can be characterised by blocks, repetitions of words and prolongations of sounds (Guitar 2006; Bloodstein and Bernstein-Ratner 2008; Manning 2010) and is referred to by Yaruss (2007) as a complicated communication disorder that can and does affect many aspects of an individual’s life. It is associated with avoidance of particular words or situations.

There are many different therapy types or treatment approaches to stuttering. (Turnbull and Stewart 2010). One therapy approach is an avoidance-reduction approach, an approach most associated with Sheehan which overlaps with some of Van Riper’s work which encourages the person to reduce avoidance behaviours and accept their stutter.

In relation to adults and therapy approaches and treatment in stuttering, relapse is the rule not the exception and this is highlighted in literature by Bloodstein and Bernstein-Ratner (2008). They describe the importance of maintenance in therapy and the importance of a ‘booster’ or follow-up group of therapy in stuttering management. This is highlighted throughout the literature by Cream et al (2004) who also discuss the need of ‘booster’ programmes and self help groups. This theme also arises in other studies such as Hughes et al (2011), whereby contact between individuals who share similar experiences is encouraged and aids to limit the effect of a relapse. Trichon and Tetnowski (2011) discuss in their article the importance of the person who stutters to attend self-help conferences. The same study also informs the clinician of the importance of the conferences as a type of supplementary therapy process to add to successful stuttering management. On-going support groups can aid in the desensitisation of stuttering and may encourage an attitudinal change for the individual with regard to their stutter (Craig 1998).

Quantitative Methods and stuttering:

According to Bothe and Andretta (2004), research on stuttering and stuttering treatment has been obtained mainly quantitatively. Literature concerning stuttering has focused on quantitative methods and the measurable aspects of the individual’s stutter such as syllables stuttered. It tends to investigate the complexity and features of it through ways
which Quesal 1989 (p.104 cited in Corcoran and Stewart 1998) believes portray the individual who stutters ‘more as a research subject and less of an individual with a problem we need to deal with’. By just referring to quantitative methods, Corcoran and Stewart (1998) note that stuttering is defined as a fluency problem. When this occurs the person is ignored.

**Quantitative Experience of Stuttering**

This type of research is used to provide evidence that aids clinical management decisions (Huber et al 2004) such as assessing overt symptoms of stuttering (Stewart and Richardson 2004 cited in Irani et al 2012). Research regarding genetic links to stuttering has and continues to be discussed throughout the literature (Ambrose,Yari and Cox cited in Bloodstein and Bernstein-Ratner 2008). In Andretta and Bothe (2004), the examination of specific areas in the brain while stuttering occurs is investigated to understand the phenomenon further (Fox et al cited in Tetnowski and Domico 2004).

**Quantitative Research and Stuttering Treatment:**

In a study by Saltucklaroglu et al (2009), stutter frequency was assessed and recorded to determine which method of auditory feedback aided a reduction in stuttering. Similar to this study the investigation of choral speech whereby the person who stutters speaks alongside another in unison assessed stutter frequency with a positive outcome of a reduction in stuttering (Kalinowski and Saltucklaroglu 2003). However functionally on a daily basis, this approach has limitations. In another study by Ingham et al (2001), the Modifying Phonation Intervals (MPI) programme was discussed which trains participants who stutter to reduce the frequency of short phonation intervals during connected speech again with the objective of reducing stuttering and increasing their speaking rate.

**Mixed Methods Approach**

Recent literature has discussed a mixed method approach in their studies in stuttering. Daniels et al (2011) focuses on university instructors and their perceptions of students who stutter. The methods used here consisted of both quantitative methods through closed questionnaires and qualitative methods demonstrated through open-ended questions at
the end of the questionnaire. A limitation to closed questionnaires includes the inability to probe responses further and by doing so deciding possible answers.

Another study that included a mixed methods approach was that by Irani et al. (2012). This study looked at treatment efficacy and outcomes from both a quantitative and qualitative perspective of intensive stuttering therapy. It focused mainly on qualitative data to explain the meaning of the individual’s experience of treatment while the quantitative method measured the individual’s perspective of treatment effectiveness through stuttering severity.

While quantitative research methods have their place in stuttering treatment, it is imperative to include the individual and their experience of stuttering and this is done thoroughly through qualitative methods. In order to explore the lived experience of those that stutter and for the purpose of this study the traditional scientific method of quantitative research will not suffice. The human experiences of stuttering can only be assessed and thoroughly described using qualitative methods (Huber et al. 2004). This ensures data-rich information about the individual’s perceptions of stuttering.

**Qualitative Research and experience of stuttering:**

There are a limited number of studies on stuttering that use qualitative methods to discuss the individual’s stuttering experience. In order to gain an understanding of a person who stutters' perceptions and lived experience, qualitative methods of investigating the phenomena are more suitable through methods such as focus groups or semi-structured interviews.

A common typology within qualitative methods that is used within the limited literature is phenomenology. Cream et al. (2003) refer to this typology as an attempt to understand fully the structure and meaning of the human experience as it is immediately experienced. It refers to gaining insight from within.

This research question aims to use phenomenological research to uncover patterns and relationships of meaning (Finn and Felsenfeld 2004) and to do so specifically through the use of semi-structured interviews which allows the researcher to probe further with open-
ended questions. Through listening to their responses, the researcher can gain a richer understanding of their experiences of stuttering (Corcoran and Stewart 1998).

In a study by Crichton-Smith (2002) who interviewed fourteen adults who stuttered, the method chosen was semi-structured interviews as it presented the same set of questions to each person but enabled each individual to elaborate on their own unique story. Hughes et al (2011) also used semi-structured interviews to investigate families’ experiences of people who stutter and chose this method to allow participants to answer freely, like in a conversation. Through the use of semi-structured interviews, questions can be easily modified unlike set questions in a questionnaire (Trichon and Tetnowski 2011). It is important to note that using phenomenology requires the researcher to ‘bracket’ or set aside all previous habits of thought (Cream et al 2003). This ‘bracketing’ is done in order to approach the data from a fresh perspective (Plexico et al 2010) and to ensure no researcher bias is present (Hearne et al 2008). Through these phenomenological studies the researcher develops a common understanding of the phenomenon in the form of themes. These themes according to Braun and Clarke (2006) identify and report common patterns while describing the data in rich detail. The themes that emerged from Crichton-Smith (2002) and Hughes et al (2011) studies included low self-esteem throughout their childhood, inability to reach full potential in education, lack of support from family and lack of role model or example of somebody who had stuttered themselves. The limitations of these phenomenological studies affected the findings. As the results are based on specific cohorts of populations generalisability across other cohorts of those that stutter cannot occur. The lack of generalisation to other populations is indicative in qualitative research (Irani et al 2012).

Qualitative Methods and Treatment of stuttering

Huber et al (2004) investigated the use of focus groups on the comparison of three treatments for stuttering and found that with adolescents the focus group provided an opportunity for them to be supported in views by their peers, something that is not present during individual interview data. Kitzinger (1994) in her study described focus groups containing clusters of people who knew each other from the community or who worked
together, as a means to ‘reach parts that other methods cannot reach revealing dimensions of understanding’ (p.109). One limitation of knowing members of the focus group may cause people to refrain from answering truthfully or elaborating on specific topics if familiar people are present.

A study by Cream et al (2003) discussed the objective to obtain participant’s experience of prolonged speech (PS) treatment using qualitative methods. It involved making the individual’s speech ‘smooth’, as a means to ‘suppress stuttered speech’. (p.380) The themes that emerged from this research were similar to that of Crichton-Smith (2002) discussed previously. These themes included embarrassment, anticipation of stuttering associated with fear, anxiety, and frustration at people’s responses. These themes were present amongst the individuals before the therapy and remained after therapy as PS does not eliminate stuttering.

The use of qualitative and quantitative methodologies in stuttering and stuttering treatment tend to be viewed as alternatives rather than complimentary (Hayhow 2011). This is evident throughout the literature. However some studies mentioned discuss a mixed methods approach which through the use of quantitative methods can replicate findings and through qualitative methods, gain a further understanding of the individual.

From the literature, gaps that have emerged include the lack of qualitative research to obtain a more comprehensive profile of the individual and their perceptions of their stutter and its impact on their lives. This information would enable those around them as well as the speech and language therapist to ‘learn the personal meaning given to the experience’ (p.261 Corcoran and Stewart 1998; Beilby et al 2013).

The purpose of this study was to gain a comprehensive profile of the individual and their experience and perceptions of a course that was based on a specific therapy approach of avoidance –reduction therapy. Through thematic analysis, the themes that have emerged in the literature from similar research discussed included fear, embarrassment and low self esteem during childhood. This study, through the emergence of themes asks the question
how has the DAS course impacted on the individual’s life experiences before, throughout, and after the course?
Methodology

Research Aim:

The objective of this study was to investigate individual’s perceptions and experiences of the Dublin Adult Stuttering (DAS) speech and language therapy course. Avoidance is a common factor in stuttering and this course contained specific elements of avoidance-reduction therapy which aimed to encourage the individual to avoid situations less and become comfortable with their stutter. The research aimed to gain an in-depth insight into the experience of the person who stutters and investigate the impact it has had on their lives.

Participants:

Four participants were purposively selected from a previous therapy maintenance group that had attended the DAS course. They consisted of two males and two females. Their mean age was 32; 9. When determining participation eligibility, the following criteria was adhered to (1) participants were over the age of eighteen, (2) diagnosed with a stutter, and (3) had attended the DAS course in the past seven years. Participants M and S were male and participants A and N were female.

Participant M was 39; 10 and attended the DAS course in 2010. He attended third level education and was working. Participant S was 29; 3 and attended DAS in 2007. He attended third level education and was working. Participant A was 28; 4 and attended DAS in 2008. She attended second level education and was working. Participant N was 34; 8 and attended DAS in 2010. She attended second level education and has a young son at home.

Outline of study design:

A qualitative design was chosen as the most appropriate research design for this study as it enabled the participants to use their own words to describe their experiences with rich detail. Within qualitative research a phenomenological research design was chosen as it would enable the researcher to gain a comprehensive understanding of the participant’s experience and perceptions of the course from within, through their lived experience of it.
Semi-structured interviews were chosen to use as a research method to enable the researcher to probe any necessary responses further. The interviews consisted of eighteen questions that invoked responses about the participant’s lives and the impact of their stutter before the course. It investigated their experiences of the course and what they had learned after the course. The questions were open-ended and flexible. Participants were allocated as much time as possible to respond. The questions were derived loosely on questions formulated for similar research in Corcoran and Stewart’s (1998) ‘Stories of Stuttering: A Qualitative Analysis of Interview Narratives’. In this study Corcoran and Stewart question the participant’s experiences of their past and hopes for the future (Full question list see Appendix A).

**Thematic Analysis:**

The participant’s responses were analysed using thematic analysis whereby each response was coded and grouped with other similar responses from the other participants to form common themes. Initially the data was hoped to be grouped inductively or bottom-up however as the interview questions were categorised within a structure of experiences before, during and after the course, the data was analysed from a top-down or deductive prospective. The participant’s responses were analysed using Braun and Clarke’s (2006) six-step framework of thematic analysis.

**Bias:** To minimise researcher bias, the student researcher had no involvement with the running of the DAS course. The student researcher had no previous knowledge about the course or therapy approach used within it and the student researcher had not been placed on any fluency placements throughout clinic placements. However during the analysis of the data, lectures on fluency disorders had began in college and some therapy methods had become known to the student researcher. Any previous anticipations or expectations were bracketed in order to limit researcher bias.

**Procedure:**

Approval for research was obtained by the Ethics Committee of the University. Ethical considerations included voluntary participation, freedom to withdraw from the study at any
time without an explanation and assurance of strict confidentiality. The gatekeeper from the DAS course sent emails to past participants of the DAS course and those that responded were chosen to take part in the study (Participant recruitment email see Appendix B).

All participants were interviewed over two days. Participants M and A were interviewed on the first day while participants S and N were interviewed on the following day. Each interview was conducted in a quiet room with the student researcher and a fellow student researcher present. Participants were given a consent form to sign before the commencement of the interviews to enable their responses to be audio-recorded using an Olympus VN-8500PC dictaphone (Consent form see Appendix C).

Interviews:

Each interview lasted approximately forty minutes. All interviews were transcribed verbatim by the student researcher using a standard word processing programme. Any word or sound repetitions were omitted. Personal names and names of Health Centres or hospitals were also omitted (Participant Transcripts see Appendix D). A fellow student researcher reviewed a section of interview transcript for inter-rater reliability purposes.

Thematic Analysis:

Based loosely on Braun and Clarke’s (2006) phases of thematic analysis, the data was analysed using the following steps. Familiarisation with the data: Each interview transcript was analysed with initial ideas noted. Quotes were chosen that contained information-rich detail that pertained to the research question. Generation of codes: From the responses, codes were generated manually across all participants’ responses. Searching for Themes: The codes were then gathered into common themes. The generation of themes was based on commonalities across the participant’s experiences before, throughout and after the course. Reviewing Themes: Themes were checked and thematic maps of all relevant themes were developed. Inter-rater reliability of the codes generated between the student researcher and supervisor of the research occurred.
Validity and Reliability:

The themes that emerged were validated through member checking amongst the participants. The participants were sent an email containing the themes that had emerged. Each participant was asked to comment on the findings and to add any missing information they felt necessary. Two of the respondents sent back further information to add to the themes which enabled the data to be saturated once this information was added. Further validity of the findings occurred through triangulation of similar themes throughout literature based on similar research methods.
Results

Thematic maps are displayed for all three result sections illustrating themes expressed before, throughout and after the DAS course.

![Thematic Map](image)

Fig 1. Mindmap of Themes (Before DAS course).

The four main themes that emerged within the ‘Before DAS’ category included (1) Avoidance, (2) Personal Perceptions of Stuttering, (3) Therapy and (4) Effects of Stuttering on... Within these themes, various sub-themes emerged.

**Avoidance**: All participants mentioned that they avoided particular words or situations or people; mainly strangers or persons in authority. They would fear the possibility that they may stutter so would avoid the possibility of it occurring.

Participant S: ‘I avoided everything, I avoided life’.  
Participant M: ‘I wouldn’t rush into talking to people’.  
Participant A: ‘If I had to ask for anything in the shop, I would completely avoid that’.  
Participant N: ‘There was a stage where I avoided people’.
Within this theme of avoidance, subthemes emerged such as the phone. All participants expressed a dislike or difficulty with using the phone.

Participant N: ‘I hated using the phone; it was terrible’
Participant A: ‘If I have a bad day, usually on the phone, if they can’t see me on the other end, they don’t now I’m there’.
Participant M: ‘Your voice is all you have, that is the only way they know you’re there’.
Participant S: ‘Putting off phone calls or getting other people to make phone calls for you’.

Perception of Stutter: Within this theme the subthemes of physical aspects and psychosocial aspects emerged. Three of the four participants described their stutter physically with two referring to physical tension they encountered.

Participant A ‘It would be really bad blocks that I’d suffer from; I didn’t have a problem repeating the words.’
Participant N: ‘I do feel it all here in my chest; tension’.
Participant S: ‘I used to get stuck on a word and didn’t let the breath out and I used to pull muscles in my shoulders and neck’.

The subtheme of psychosocial aspects of their stutter was demonstrated across three of the participants. It affected their confidence and their personality.

Participant N ‘I was so quiet growing up’.
Participant A ‘I was quite introverted as a teenager and hated telling stories’
Participant S: ‘I hated speaking, absolutely hated it’.

Effects of Stuttering on:. This theme also contained subthemes highlighting school and work in particular. Three of the four participants found reading aloud in class difficult and would use tricks and avoidance techniques frequently.

Participant N ‘I would get my friend to tell the teacher I was sick so we could leave the room and I wouldn’t have to read’.

Of the four participants, the two male participants found school ok when it came to social groups but the two female participants found it difficult.

Participant A: ‘I was always conscious of what people would think’.
Participant N: ‘I used to feel embarrassed for the listener because they’d have to listen to me’.
Therapy: Three of the four participants attended therapy at some stage throughout their lives. All three attended public therapy and two of the three attended private therapy. One participant attended many different types of therapy. During one specific therapy he became fluent however within two months, he became non-fluent. One participant did not attend any therapy.

Participant M: ‘All the therapies I did were all well-meaning but unsustainable, probably because they focused on speaking more fluently or not stuttering’. ‘They were part of the journey’.

Participant N: ‘In my day there was nothing.’

The three main themes that emerged under the ‘During DAS’ category included: (1) Group, (2) Techniques and (3) Follow-Up Group.

Group: Within this theme the subthemes of support, sharing similar experiences and different severity levels emerged.

All participants found the group at DAS supportive throughout their time spent there and developed strong friendships within the group.
Participant M: ‘It was a really nice group; we encouraged each other’.
Participant N: ‘They didn’t judge me, and I didn’t judge them’.
Participant A: ‘I’m actually still really good friends with one of the guys who were on the course, we still keep in contact.
‘Participant S: ‘You felt really comfortable with them’.

All participants stated how reassuring it was to be surrounded by similar people who had experienced similar experiences.

Participant S: ‘You realise straight away, you’re not on your own’.
Participant A: ‘It was great to be able to talk to people with the same experiences’.
Participant M: ‘Everyone was pretty similar’.
Participant N: ‘There are other people like me’.

All participants stated that they had never met anybody with a stutter before and two of the participants reported how shocked they were at the different levels of severity within the group.

Participant S: ‘Meeting people with different grades of stuttering, you kind of realise you’re not that bad when you meet other people’.
Participant N: ‘I was shocked’.

Techniques: Within this theme the subthemes of sliding, situations and role-play emerged.

Sliding was a method that all participants found extremely helpful to learn and use as it desensitised the stutter and gave them a sense of control over their stutter.

Participant M: ‘It can help you down the path to stutter and not mind the stutter’.
Participant A: ‘I found sliding on words massively useful’.
Participant S: ‘Sliding on words, I would never have done before’.
Participant N: ‘I found sliding on words very good’.

Situations: During the DAS course, in accordance with the type of avoidance-reduction therapy approach, the participants were put in situations that were uncomfortable for them such as talking to strangers face to face or ringing people on the phone. All participants found this a positive experience due to the peer support and leader support that they encountered. Participants would have role-played these situations out within the group before they engaged in the situations, again as a means of desensitisation.
Participant N: ‘I had to ring up a hotel and the person hung up on me but (the peer in group) she said ‘no come on ring them back’. ‘
Participant M: ‘It was great to have leaders that were so knowledgeable’.

**Follow-up Group:** Within this theme the sub-themes of review techniques and support developed.

Review techniques: Three of the participants found the follow-up group important to review all that they had learned but also as a means to see how the others were getting on and to meet with a group that were supportive.

Participant N: ‘I liked being with people I felt comfortable with’.
Participant A: ‘I thought it was important for me, I didn’t want to forget anything I had learned’.
Participant M: ‘I enjoyed them, it was a very nice group’.

Participant S did not attend the follow up groups after the initial one. He felt that it was more of a support group and not something he needed.

Participant S: ‘I didn’t really get anything from it. I didn’t really need a support group.’

Support: Two of the participants felt that the follow-up groups offered a ‘booster’ of therapy techniques or support which is recommended for therapy maintenance in stuttering. One of the participants participated in a phone support group.

Participant N: ‘If you’re feeling down, I find it really helpful’.
The two main themes that emerged from the category of ‘After DAS’ include (1) Acceptance and (2) Perceptonal Change.

Acceptance: Within this theme the subthemes of acceptance of stutter, acceptance from other people and openness emerged.

Acceptance of stutter: All participants state that since the course they have learned to accept their stutter. Although they may not like it, they accept it.

Participant S: ‘I’d love to not have my stutter in one way but then again its part of who I am’. Participant N: ‘I hate it but it’s a part of me, it’s not going to go away’. Participant M: ‘It’s the way I speak, its part of who I am’. Participant A: “Now I think it’s made me who I am and it sounds crazy but in a way I’m kind of glad I have one’.

Acceptance from others: Two of the participants spoke exclusively of this. Participant S mentioned how he always had people around him that supported him such as his friends and family but mentions how when he worked in a pub, they accepted him for who he was.

‘People saw me for who I was. They saw past the stutter’.

Participant A mentioned how in school people accepted her stutter and how her fiancé described how her stutter made her who she was.
‘People were a lot more accepting of it, they knew I had a stutter and still wanted to be friends, I found that really comforting’.

Openness: Three of the participants stated that they were more open about stuttering and one participant reported how he writes a daily blog on it.

Participant M: ‘I am more open about stuttering. I will drop stuttering into conversations randomly’.
Participant A: ‘I can talk more openly about it now’.
Participant S: ‘I write a blog and I get people to contribute their experiences of their stutter’.

Perceptual Change: Within this theme the subthemes of avoid situations less, increased confidence and ‘it doesn’t define me’, emerged.

Avoid situations less: All participants said that although they may still avoid some situations, they are aware that they do with one participant stating that when he becomes aware of this avoidance he has ways to help himself.

Participant M: ‘The only way to stop that (avoidance) is to go and do something positive, to go out of my way to speak, or do some voluntary stuttering’.

Increased confidence: Three participants reported a clear increase in confidence after the course.

Participant S: ‘When I came out of it I felt I could stand up in front of the world and speak’.
Participant N: ‘I felt great coming out of it’.
Participant A: ‘There’s no way I would ever have done a public speaking course if it wasn’t for DAS’.

‘It doesn’t define me’: All participants have reported that there is more to life than stressing about stuttering. All have changed their opinion of what stuttering used to mean for them and all are much more comfortable with their stutter.

Participant S: ‘Your stutter should never define you; it’s just another part of you. If you worry about it all the time, you’ll never move on. It used to be a struggle; it still is but not as much.’
Participant M: ‘I focus more on not getting stressed or feeling bad about it. It’s still a hassle. There are times when it is easier to be ok with stuttering than others’.
Participant A: ‘It used to be the worst thing ever, I would always think about it. You have to face your fears and now it’s made me who I am.’
Participant N: ‘Before the course, stuttering used to be a curse. Now I don’t let anybody away with anything! I have more friends now too. There’s more to life’.
Discussion

This study focused on participant’s experience of the DAS course which contained elements from an avoidance-reduction therapy approach. Although the question dealt with the participants’ perceptions of the course, it was imperative to investigate their experiences before and after the course also. By doing this, the student researcher was able to gain a comprehensive understanding of the impact that their stutter has had on their life and how the course has affected their perceptions of themselves and their stutter.

As the results emerged on a structure of before, throughout and after the course, the discussion will also be based on this framework.

Before DAS:

As avoidance is deeply associated with stuttering, subthemes of avoidance of words, people, situations and the phone were common amongst the participants. One participant avoided daily tasks such as going to the bank while two participants avoided asking for items in a shop.

Phone:

This subtheme was expressed by all participants and all described their dislike of using the phone. Two of the participants (S and N) spoke about how introductions are the hardest part when using the phone and similar findings emerged in an article by James et al (1999) that look specifically at phone use by those who stutter. The remaining two participants (M and A) also mentioned that your voice was all you had when you made a call and this was highlighted in the same article when the author mentioned how should a blocking difficulty occur, silence is not acceptable (James et al 1999). It is one area that concerned all participants and one which affects one participant still. Participant S stressed that although he uses the phone daily, it does not get any easier. However it is something that all participants use on a daily basis for business and pleasure and is unavoidable. They have learned to deal with it. This finding also appeared in Klopas and Ross (2004) whereby one of the most commonly feared situations was reported as talking on the phone (Leith and Timmins cited in Klopas and Ross 2004).
Within the theme of ‘Effects on Stuttering on’ the subthemes that emerged included effect on school, effect on work and effect on personality.

School

For three of the participants reading aloud in school was difficult. One participant (M) reported that he did speak up in class regardless of his stutter and M along with the other male participant S found school to be ok. This was the opposite for the two female participants who found school ‘terrible’ and social situations like telling a story difficult for fear of the silence that may occur (Participant A). Participant N found it difficult to talk to girls and both participants reported feeling lonely and described themselves as very quiet throughout their teenage years. Similar experiences occurred in a study by Beilby et al (2013) whereby social situations in school were difficult for those participants. Negative experiences in school may have impacted negatively on the participant’s future educational choices in this study. It is interesting to note that although two of the four participants continued onto third level education in this study, the two that did were the male participants. It would be interesting to investigate if the female participant’s experience in school impacted on their choice not to attend third level education.

Within the theme of Personal Perceptions of Stuttering the sub-themes of physical attributes and psychosocial aspects of stuttering emerged. While some participants described stuttering physically as a tension and stress, the majority of the participants commented on the psychosocial aspect to it.

Psychosocial Aspect of Stuttering:

This sub-theme described how three of the four participants referred to their personality and confidence levels before the course as being introverted and always conscious about what other people thought. Participant M, described himself as a shy person generally. It may be interesting to investigate how his stutter may have impacted on his personality. In the literature Bleek et al (2012) look at the relationship between personality characteristics of those that stutter and feelings of anxiety or shame and note how important it is for the clinician to consider all of these characteristics in assessment and in treatment of the
individual. Participant A mentioned how readiness plays a part in addressing the problem and how as a teenager, she was not ready but how as she got older, she felt ready to focus on her stutter.

**Therapy:**

Therapy was a theme that emerged amongst all participants with three of the participants experiencing different therapy settings such as private and public therapy and different therapy groups such as individual and group. One participant had experience of many different typologies of therapy treatment. The remaining participant N did not experience any therapy as it was considered that she would ‘grow out of it’ which led to N expressing a slight resentment towards her mother for not getting her help earlier.

**Public/Private:**

All the participants that attended public speech and language therapy explain how it was unsuccessful and how visits were sporadic within the public health care system. Participant S described a therapy session that consisted of reading out a page of text and then being asked to leave the room so the therapist could discuss the results with the parent. One participant recalls feeling bad at the end of a private therapy session block as it had not worked as she still had a stutter (Participant A).

**Individual/Group**

Of the participants that had experienced therapy two of them had experienced individual therapy and the other participant had experienced both group and individual therapy. Participant A had stated that she didn’t feel that individual therapy benefitted her. She felt that individual therapy with a therapist who did not have a stutter was not beneficial and how being able to speak out in a group with similar individuals worked better for her. Participant M also stated how important it is to have a knowledgeable leader or therapist in therapy. This is reiterated in the literature amongst older people who stutter who reported that they would rather work with a speech therapist who had specific knowledge of stuttering (Bricker-Katz et al 2010). Irani et al’s study (2012) reiterate this point also when participants reported that a clinician’s knowledge about stuttering and non-judgemental
nature were crucial in therapeutic gains. The importance of this finding is also in agreement with Plexico, Manning and Dilollo’s study (2010).

Types of therapy

All participants that attended therapy were familiar with a type of therapy that focused on breathing and had all heard negative reports about it. Participant M had attended a programme based on this as a teenager and had become fluent within a weekend and then two months later, became non-fluent. In current literature there are many types of therapy available but one mentioned by Woods et al (2000) looked at breathing techniques and stuttering and concluded that further investigation into it was necessary. As this occurred when participant M was a teenager, the impact it had on him was unforgettable however he states that it enabled him to focus on therapy that moved away from the idea of gaining total fluency which is reported in a study by Plexico, Manning and Levitt (2009) and further encouraged the process of acceptance.

During DAS

The themes that emerged included Group, Techniques and Follow Up Group.

In the theme Group, the sub-themes of similar experiences, support and different severity levels emerged. All participants referred to the group as a support system that encouraged each other throughout. Within the group, different severity levels were remarked upon with participant N expressing her shock at how there were other people like her while participant S reported how you realise that there are others who are more severe. All participants had never met anybody with a stutter before and found being surrounded by similar people beneficial, calming and enjoyable.

Different techniques were highlighted by the participants as a means of desensitisation during the course such as role-plays, sliding (modifying the stutter) and situations. With the therapy approach of avoidance-reduction, the participants were encouraged to move toward their fears rather than avoid them (Manning 2010) and did this through previously feared situations such as making a phone call.
Within the theme of Follow-up Group the sub-themes of review techniques and support appeared. During the follow up groups the participants discussed theory and techniques that had been introduced throughout the course. Participant A felt that the follow up groups were imperative because she did not want to forget anything. By reviewing these techniques, it enabled the participant to be prepared for any difficulty they may encounter away from the group (Crichton-Smith 2002).

In relation to the sub-theme of support all participants attended the follow-up groups. Participant S only attended the initial group meeting. He felt that he had gained a lot from the course therapy-wise and did not need the support group aspect to it. The other remaining participants attended the meetings for as long as they could.

Within the literature relapse is discussed with regard to stuttering therapy and taking into account the duration since the participants were active in the course, it is inevitable that relapse will occur. Craig (1998) mentions that successful stuttering management occurs through attendance at self-help groups. Boberg and Sawyer 1977 (cited in Craig 1998) showed that follow-up sessions reduced the risk of relapse. Plexico, Manning and Dilollo (2005) also note the importance of self-help groups and support groups for continued social support.

After DAS:

The themes that emerged included Acceptance and Perceptual Change. The sub-themes associated with acceptance included acceptance of stutter, acceptance from others and openness.

All participants spoke of acceptance of their stutter being something that attending DAS had taught them to do by looking at stuttering in a different way. Three of the participants reported how more open they were about their stutter and how they discussed it openly through various mediums such as blogging and taking part in research associated with stuttering. After his participation in the DAS course one participant spoke to the following group on his experience of it (M).
Participants S and A spoke exclusively about how others had accepted them and their stutter both in work and at home and had according to participant S managed to ‘see past the stutter’. He noted that DAS taught him to realise how important it was to learn not to let it bother him and by doing this, any previous tension he had felt physically, was alleviated. This stress was also experienced by participants M and N and M also recalls that DAS enabled him to stress less when he stuttered.

In Perceptonal Change, the subthemes avoid situations less, confidence increase and ‘it does not define me’, appeared.

As previously mentioned avoidance is deeply associated with stuttering and all participants reported that although avoidance may still occur, their avoidance behaviour has reduced. Participant M expressed how when he does engage in avoidance behaviours, he engages in sliding techniques or confronts a situation he previously avoided to reduce this behaviour.

All the participants responded how their confidence has increased since the course. DAS focused on empowering the participants to overcome difficult situations by facing difficult situations and not allowing their stutter to define these situations that they may or may not take part in. Plexico, Manning and Dilollo (2005) described how successful management of stuttering occurs through confidence that participants encountered through techniques and behavioural changes. These behavioural changes and cognitive changes are reflected in the sub-theme ‘it does not define me’.

All of the participants reported how they have realised that their stutter is a part of them and that it does not define them. Participant N expressed how there was more to life than worrying about stuttering. Participant S stated that he had accomplished a lot with his stutter and would not let it hold him back. Plexico, Manning and Levitt (2009) report similar findings in their study whereby, having a stutter enabled the participants in that study to overcome other obstacles in their life.
Limitations and further research

One limitation of this study concerned the thematic analysis process of the data. This research question used a top-down or deductive structure on the data and if the data was analysed from a purely bottom-up or inductive process, the data may have produced richer themes than outlined above. Another limitation to the study may have been the sample size. This research was part of a larger study containing eleven participants and if all were included in this study, the added results may have increased the validity of the findings outlined here.

This research focused on participants of the DAS course over the past seven years. From the four participants discussed in this paper, one took part in the residential course and the remaining three took part in the weekly course. Research on the experiences of the residential course and the weekly course with attention to stuttering management may be an area for further study to highlight the various experiences encountered.
Conclusion:

Through a qualitative phenomenological research approach, this study looked at the experiences of individuals who stuttered and who attended a specific therapy course based on aspects of avoidance-reduction therapy. Through the themes and subthemes that emerged, all participants felt that this therapy approach had impacted positively on their lives.

Some of the important findings throughout the literature and specifically related to this study included the importance of clinician’s knowledge concerning stuttering and stuttering therapy approaches. The relationship between the therapist and client is crucial in all therapy but in stuttering therapy an insight into their lived experience can consolidate the meaning of what it is to have a stutter and can affect the therapy approach chosen. (Crichton-Smith 2002).

The participants spoke of an increase in confidence after the course and how it taught them to view their stutter in a different way. It enabled them to accept their stutter. These cognitive changes lead to behavioural changes which lead to a reduction in avoidance behaviour, a theme commonly associated with stuttering. Continued attitudinal changes can aid in the postponement of relapse, a common complaint amongst those that stutter. Another factor that can aid in postponement of relapse is the attendance at ‘booster’ sessions or follow-up groups, a theme that emerged in this study and in other literature (Plexico et al 2005; Irani et al 2012).

Yaruss 2010 suggests that it is the clinician’s job to address the clients’ quality of life and explore their life experiences (cited in Beilby et al 2013). Through this study the phenomenon of stuttering was explored through the participant’s experiences of the course and the positive impact it had on their lives.
References


Kitzinger, J. (1994) ‘The methodology of Focus Groups: The importance of interaction between research participants’, *Sociology of Health and Illness*, 16(1), 103-121.


Appendices: A  List of Participant Questions

Questions for Research Interview:

1. Tell me about your life before the course?
2. What was your speech like before the course?
3. Would you have avoided situations? /Did it have much of an impact?
4. What is your speech like now?
5. Do you feel stammering has less of an impact now?
6. What does stammering mean to you?
7. What did it mean to you before?
8. How long has it been since you completed the course?
9. Tell me about the therapy course you attended?
10. What has your life been like since the course?
11. How do you feel your speech has been since the course?
12. What do you remember about the course?
13. Did you attend follow up group(s)?
14. How long after you finished the therapy course did you attend the follow up group(s)?
15. Why did you attend the follow up group(s)?
16. What was your experience of that?
17. What are your thoughts about the future?
18. What are your feelings about stammering now?
Dear DAS course participant,

As part of a Final Year MSc Project at the University of Limerick, Student Speech and Language Therapists are investigating the experience of individuals who stutter who have attended the Dublin Adult Stuttering (DAS) speech and language therapy course.

The project will involve hour long semi-structured interviews for individuals. This data will be transcribed and a shorter follow-up meeting will take place with you to check the transcribed findings of the initial interview. The data will then be analysed and written up. All data will be used anonymously in the project.

Findings from this study, it is hoped, will provide further information to speech and language therapists on the exact nature of stuttering, how it presents and changes and how it can be treated more effectively.

If you would like to take part and contribute to the research please email us on info@stutteting.ie.
Appendix C: Participant Consent Form.

CONSENT FORM

Research title: The experience of individuals who stutter who have attended the Dublin Adult Stuttering (DAS) speech and language therapy course.

Researcher:

Please initial each line after the following:

1. I confirm that I have read and understand the information sheet dated ........................ for the above study. I have had the opportunity to consider the information, ask questions and have had these answered satisfactorily.

2. I understand that my participation is voluntary and that I am free to withdraw at any time, without giving any reason, without my medical care or legal rights being affected.

3. I give my permission for the audio/video recording of me to be used in part or in whole for the purpose of research. I understand that my anonymity will be ensured.

4. Do you wish the results of the assessments to be made available to your speech and language therapist? Yes □ No □ (Tick as appropriate)

I agree to take part in the above study

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Name of subject  Date  Signature

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Name of researcher  Date  Signature
Appendix D: Transcripts of Participants

Participant A:

**Can you tell us about your like before the course?**
Eh I found I kind of realised I had a stammer when I about like I’d say seven or eight and I was very quiet just eh as I was growing up eh .I’d say I was very introverted and like I hated school ,being picked to read in the classroom and everything was really, really hard. But I did meet some speech therapists beforehand but I did and I also did the Irish stammering association groups here. My mam actually brought me here when I was fifteen and I was like the youngest here and I cried for the entire duration (laughs) of it so I just don’t think I was ready then to actually accept the fact and then I met I think I met ______ just through something, actually no, the internet .I arranged to meet up with him anyway and he was great .He told me about the course anyway and yeah it kinda started from there.

**Great so how would you describe your speech before the course?**
Eh I would I’d say I thought I had a covert stammer which was like where you I’m sure you probably know what it is but where you avoided using words blah,blah, but it was obvious I had a stammer but eh yeah I’d just be , in nervous situations now it would be really really bad and I’d just get really bad block but I didn’t really have a problem just em repeating the word like it would just be bad blocks that I would suffer from.

**So would you have avoided situations then?**
Yeah ,(often- +researcher talking over with ‘yeah’)yeah.

**And were there specific situations you would have avoided?**
Em I remember when I first got a mobile phone and when you used to have to go in to buy the credit and you used to have to ask for that I always used to avoid that and always ask somebody to do that for me. If I had to ask for anything in shops I would just completely avoid it like and just ask my mam to do it or somebody else to do it. Awful lot of situations just where I had to speak to somebody that I didn’t know ,I’d have trouble with that.

**So now how would you describe your speech?**
Completely different. I just, I don’t even think about it really anymore. I do get the odd down day where like if something has happened in work or eh usually it’s on the phone that it happens and eh if the person can’t see me on the other end they don’t know I’m there or and that would knock my confidence a bit but other than that I don’t even think about it anymore really.

**So you mentioned that you would block and others have said specific sounds or words are hard for them so for yourself is it just blocks or does it depend on..**
It just kind of depends like I know before I even kind of have said the sentence the word that I was actually going to block on yeah like I always found when I was telling a story or I had to tell a joke, when I came to the punch line I could never get it ,because I knew that’s what everybody kind of wanted to hear and that’s the bit that people would be listening to most and so I’d be kinda under pressure to get that out.

**Do you feel now that stammering has less of an impact now on your life ,would you felt it would have impacted on you growing up?**
Em I feel like I’ve just accepted it now I don’t really notice it anymore and sometimes I ask people like ‘do you know I have a stammer?’, and they’re like ‘oh yeah, the odd time when you get stuck on a word’, but em I don’t think it would, it definitely now doesn’t affect. Like I don’t avoid situations at all when that happens with the phone .When I can’t get the words out I immediately
ring back and just do it again because it’s worse to do. That’s what the course has taught me just do it like because you make yourself feel worse, but totally different to how I used to feel.

**Can you tell us what stammering means to you?**

Oh my god! Em stammering used to be the worst thing ever but em I used to be really, really sad and always used to be conscious about what people thought about me and so on and you just always be thinking about it. This constant fear about what’s coming up and like I would always be thinking about the future and I was like ‘I’m never getting married, no one’s going to marry me or I’d just be on my own’ and that kind of stuff. What it means to me now is I think in a way, it’s kind of made me who I am and as my boyfriend or fiancé *(congratulations!)* he’d say ... actually I remember the first time, when I started going out with him he didn’t realise at all and there was one day we were up in his house on the couch and I had a really bad block and I hadn’t had one before and he burst out laughing and was like ‘what’s wrong with ya?’, and I was like ‘I’ve to tell ya something, I’ve got a stammer’, and he was like ‘really? I didn’t even notice!’, so eh but he just says it makes me who I am so. It sounds crazy to say but in ways I’m kinda glad I have one, yeah.

**Can you tell us about the course you attended?**

Yeah I’ll never forget the day I went the first day of the course and I almost turned around I’d say about twenty times on the way over because I really didn’t want to do it but I had been on to Jonathon and he was like ‘oh I’m really looking forward to meeting you and there’d be loads of other people on the course’. I was just so nervous about doing it but and the first day was really hard, and em but it was great to be in a room full of people because I hadn’t been, I hadn’t met anyone else before who actually had a stammer, apart from Jonathon and it was great to be able to talk to people with the same experiences. It was really good.

**So what has your life been like since the course?**

Completely different. Em it just em I went to the course and basically I had it in my head ‘ok I’m going to go on this course for a few weeks and hopefully by the end of it I’m not going to have a stammer’, *(giggle)* as I did with everything just as I was going to other speech therapists and that but when I came out of the course I was like ok feeling a lot better about myself and also went to a few of the follow up meetings and that and that was really good and I actually haven’t been to one in ages but like I actually feels as time goes on, I feel a lot more better about doing the course now and how much I’ve learned and like the techniques that were taught like I don’t use them as often as I like but I do use them and em just with myself em how did I remember when Jonathon was telling us about the iceberg and how at the top is what everyone else sees and down below is a huge big other range of feelings that you feel and that really kind of stuck in my mind and yeah so it was really good.

**What year did you attend?**

Em I think it was 2007.

**Was it a weekly one?**

Yea that was the weekly one. I think that was the first course they did weekly or yeah once a week because they did one for a whole week or something.

**Yea there was a residential one too.**

**So you mentioned that you would have used techniques, he would have looked at different techniques and that you don’t use them as much so what do you remember most from the course?**

Well one of the techniques we were taught was called sliding on words, I found that massively useful and I had other techniques from the McGuire programme, you probably know about that.
programme and I actually didn’t do that course now because I heard from a few people it’s crazy (laughs) but eh that’s actually the first time I ever heard about that technique and like even with ______, he’s like the calmest person in the world, like when he was showing us how to do it you just feel so calm and it was really easy to use and the other thing was I before I did the course I had really bad eye contact and I’d always be looking away and if I had a block I’d always look away now I do still do that sometimes but definitely not as often.

So that was another technique you would use?
Yeah, yeah.

And you mentioned that you did attend the follow-up groups, so how long after you attended the course, did you attend the follow-up group?
I think it was the following month I think. Yeah and it was great to see how everyone else was getting on and how you were getting on and I’m actually still really good friends with one of the guys who was on the course. We still keep in contact and he actually moved to Russia so it’s like I was emailing him the other day and I was like ‘how are you getting on with the Russian?’, and he was like ‘I can’t even speak English, let alone Russian!’ (laughs)
What made you attend the follow-up group?
Eh I just thought it was important to myself to like because I wanted to make sure I kept up with the techniques and I was able to, I didn’t want to forget anything I had learned and I wanted to keep it fresh in my head. But I haven’t been to one in a long, long time. (laughs)

So what are your thoughts about the future?
Really good, yeah really good. Em I think a huge boost for me was two years ago, because I always find it, before I did the course I found it really tough in work because I applied for a couple of promotions and I didn’t get them and had it in the back of my head, it’s because I have a stammer, and when I look back now, it just wasn’t. And eh when I did the course then I afterwards, this is like a year afterwards, I decided to do a public speaking course and I found that massively beneficial and eh everyone in the class was really supportive because like and I never would have thought that I’d ever sign up to do a public speaking class but after doing the course I was like right I want to do something else and it was good to do it with people who didn’t stammer. I found that really good and sorry I forgot the question..

No that was it and just about the future...

The future yeah so two years ago I got promoted in work anyway and I was absolutely thrilled with myself and it was just a great moment I knew I had put a lot of work into getting it, I had to work a bit harder than everybody else basically but and I have another interview booked in for a promotion in a few weeks!

Just that you mentioned that buying credit was a situation that you would have avoided, so what about now, is there any situation you may avoid or do you just go with it?
I might have had one the other day, a couple of weeks ago actually, but usually no I wouldn’t have any problems. When I was up here the other week, I had actually completely forgotten where the place was because I hadn’t been up there for so long and I was like ok I’m going to ask somebody in the street so I asked somebody and it was fine, I don’t have any problem. And I actually find now I’m real, I used to be very quiet and I’m a very chatty person now as everybody in work tells me.

You mentioned that you were brought here to an ISA meeting when you were fifteen, but would you have had any previous contact with speech and language therapy?
Oh yeah, my parents brought me to speech therapy up until the age of eleven I think and I actually remember the last day because em I had the same speech therapist for a long, long time and she
was like oh it’s your last day today and I just felt so bad because it obviously hadn’t worked like!
And I remember when I came up here first, I was really upset for the day like I feel terrible now but
I think I was really upset because everybody else was much older and I was like oh I hope that I
haven’t got this when I’m older because so many people had said to me ‘oh you’ll grow out of it,
usually now when you’re eighteen’, then I got to my eighteenth birthday and was like for God’s
sake (laughs)

**Some people have said that school wasn’t a great time for them so what was your experience of
school?**

I think I know in my second week in secondary school, our form teacher actually, I was off one of
the days and she told the whole class ‘now I have to tell you about M__, she has a stammer’, so she
told the whole class. When I found out that afterwards I wasn’t very happy about it but in a way it
was kind of good. Everybody understood what it was and blah,blah,blah, because then again, it was
in the back of head, that everyone’s going to think I’m different to them or I’m less-able but em I
think as school went on I was, people were a lot more accepting of it and I realised ok, they
obviously know that I stammer now and they want to be friends with me and I found that really,
really comforting yeah but it was really tough in school now I have to say.

**You mentioned that when you came here when you were fifteen, and felt that you weren’t really
ready for it, and so did you take a break then from thinking about doing anything about it then?**

I did yeah

**And then was there one thing that kind of pushed you to looking up information for say like the
DAS course?**

Ehm I kind of, em I just kind of of always said to myself Oh I have to do something about it, I have to
do something about it and em P____ my boyfriend is really supportive and he was like oh why don’t
ya see.. someone from work had heard it while I was answering the phone and eh I was in a
department where you had to ring people up and ask them for money, which when you have a
stammer, in a recession is not very easy to do (laughs) so I was finding that really hard so he was
kinda helping me look up things and eh yeah but it was me that wanted to do it because I always
said that I would go back and do something else. I just will never regret it, it was just the best
decision I ever made. I’m so much happier in myself now.

**Do you think readiness is a big part of it?**

Yeah I do yeah because I think when you’re younger like you just have this idea when it’s going to
be gone soon and like as I was growing up that’s what everybody kept saying to me like ‘oh, don’t
worry, it’s just a phase, you’ll get over it, blah,blah,blah’, and I was like ‘oh grand’ and like I still
have it and the only way to get rid of it is to actually go out and do something about it myself and
being part of the group and having those people around was just absolutely wonderful because em
doing individual speech therapy, I wouldn’t have found that helpful at all because and just being
able to talk to people who have the same problem is great, it’s the same with anything I’m sure.

**Why do you think individual therapy wouldn’t have been good for you?**

Because I think in I find it hard to like being one to one with someone who hasn’t got a stammer,
like obviously they’re completely qualified and they will tell you what to do but like I just found it
so much more beneficial being in a group with people and being able to talk out loud in front of
people and not be worried what people think And that’s all part of it, worrying what people think
and you get to practice in a room full of people like it’s great like and I think it works, I think it would
work, well for me it worked an awful lot better in the group, yeah.

**So was it easier to speak with Jonathon then?**
Oh yeah god, when I met him I was like, He’s my saviour! (laughs)

Somebody else mentioned that they wished there was more earlier intervention when they were very young, they mentioned that when they were young they weren’t aware that they had a stammer but they wished it had been picked up sooner so it could have been ‘nipped in the bud’, but then you were saying that you didn’t feel that speech and language therapy wasn’t all that useful throughout when you were young.

Yeah eh I have to say about my mam and dad they were brilliant, they brought me like, they obviously picked up on it and my older sister she had also kind of a stammer as well but hers did go away (chuckle) and she also came to speech therapy as well but I think it’s just how, how it used to be the speech services would give my mam an awful lot of work to do over the weekend and she’d have another four kids and she didn’t really have the time to do it and when I was a teenager it was like ‘oh, she never had the time to do it, she could have helped me’, blah blah blah but I totally understand it now when you have a whole load of other kids but yeah I think it just works for different people.

Maybe could you in general tell us about the course, what you would do every week?

Ok, the first day we just kind of did introductions and were just around in a circle and it was very like, you didn’t have to talk if you didn’t want to and then we just kind of spoke about our feelings and em I remember we didn’t really talk about stammering at all, it was just more about your feelings, how you felt eh and then as the weeks went on we just did exercises where oh Jonathon showed us the techniques then and then we would practice them by like breaking up into groups and you’d have to each say a word that began with ‘s’ or ‘g’ or any of the ‘b’ s and go through them and then oh I remember the class where we had to ring someone like a hotel or something and eh that was a really tough class because like you’d break up into your groups which was really good because you’d have like two people in your group and they’d be there to help you with the call blah, blah, blah and yeah that was really scary doing that for the first time. God when I think about it now it’s just like ‘oh my God, that’s so easy!’ (laughs) What was I thinking? But the really good thing about the course was you didn’t have to speak if you didn’t feel ready to speak and it was just all in your own time, when you build up the confidence you’ll be able to talk more because I wouldn’t have been one for in a group speaking out loud and it did take me a while to build up the confidence to actually do it ...I don’t think there was anything else, oh we had to go outside and ask people the time and ask for directions which was also scary but yeah a great experience just great they really pushed you to just go out and do it.

So it was a positive experience?

Yeah definitely, definitely. I would completely recommend it to anyone who has a stammer.

And then did that catapult your confidence to go and do the public speaking course?

Yeah absolutely, there’s no way I would have ever done that course if I hadn’t have done it and when I was doing the public speaking course the girl that was doing it, she emailed everyone the day before and asked could you have a ten minute presentation prepared. So I was like God, I didn’t know what to do. The next day anyway I went last and everyone else had done theirs on their holiday or something easy enough, I did one on stammering. The lady was like, she was really, really impressed. She said she never had anyone who like had a stammer in her course before and she was really impressed and I just felt really proud of myself then because she was like ‘God, you were great’, and I was talking to everyone afterwards and they were really supportive. Now as I was doing the presentation I was very nervous and was stammering an awful lot. Those kind of situations I would, would bring on the blocks like but eh not it was great to do it, great to do it.
because I always think when you do these things like, it helps build your confidence. Before I took the course I had to do a presentation in work and I remember going into work and I remember waking up the morning and saying I have to call in sick, I have to call in sick ,I can’t do it and I drove into work and I was in the car, crying my eyes out all the way into work just and I was on the phone to P___ and he was like no you have to go in and do it ,you’ll be able to do it and if you don’t do it, you’ll feel worse. And I did it anyway and it was an absolute disaster , a complete disaster but just doing it I felt great afterwards and I knew it was terrible but the only way you’re going to get better is if you put yourself in those situations unfortunately. 

It’s with everything really isn’t it , you have to face it.
Yea you have to face your fear.
Participant M

Can you tell us about your life before the course?
Eh yes um well I’m forty now um so yeah I always stuttered em as long as I can remember, as early as I spoke eh as far as I know. Em...I went through a lot of different types of speech therapy for stuttering eh from the time that I was a kid. I can remember being like a very young kid and eh going to speech therapy em in C____ Hospital. Em and then actually as I got older too eh I did more eh different types of speech therapy too. Em I can remember doing some er like as an early teenager as well .And they were mainly em in like a public health system. That one I was about 13 or so was in a group of kids as well who eh were around the same age as me .Em then when I was a little bit older so I think I was in about second year in school or so em I did a course that was similar to the McGuire course em and so it was done over a weekend and then became instantly fluent (laughs) for about two months and then became instantly not-fluent again eh so that was kinda an interesting experience. Then when I was about eh early twenties eh I did some more, it was private and em again it was kinda concentrating on breathing but actually with a little bit of psychology in it as well em .Then I did when I was say thirty or so , I did em, I did some therapy that was based on transactional analysis eh and then I didn’t do anything eh as regards to it for a long time and then I decided , I don’t know why but I just decided to see what actually was available and then I got in touch with ______. Em so I’m not sure if that answered your question but act(stopped and changed (word) em basically like I always stuttered em I’m not sure that it had a major effect on my life or the things that I did em I think it didn’t particularly hold me back like I think I’m like somewhat of a shy person anyway so I don’t know whether it like kind of held me back that much if it did I was able to like kinda speak to people and I spoke up in class in school em it didn’t really have a very negative effect on me job wise ,I didn’t find it like a major issue getting a job or actually getting other jobs or getting on work or in personal relationships em at the same time em it’s always kinda there and I kinda deal with it on a daily basis or whatever em yeah that’s it.

Ok, so what was your speech like before the course?
Before the DAS course?
Yeah..
Eh I’d say it was probably similar to what it is now em but at the same time it’s very variable so like my speech and kind of how much I stutter , how much it bothers me or how obvious it is , is very ,very changeable. So it’s kind of changeable from day to day, situation to situation depending to who I’m talking to and what the situation is and how I’m feeling. And I think like it actually varies on em if I’m kinda under pressure for like a prolonged period of time and it’s compared to being down but it’s very variable. So yeah it’s just very changeable. I think probably before DAS and compared to now, em I probably struggle less in terms of speaking. I think the stuttering probably bothers me less when I am stuttering so I mean that’s a change but its so change dependent.

Would you have avoided situations throughout?
Em yeah...

Or did it impact....
Yeah it’s actually kinda hard to say like, I think I mean, I’m kind of steely...in that I would push myself to do things you know, em but possibly on a micro level, that there are kinda like conversations that you wouldn’t get into em because you stutter or that I’d be a little bit more reserved or that I wouldn’t rush into talking to people but maybe sometimes. That’s actually still true but eh I think I am maybe more conscious of it now.

**What is your speech like now?**

Em I think in general eh it’s fine, it doesn’t really bother me. Eh like in the job that I do, eh I work for kinda very much a kind of a virtual organisation and I’m actually on the phone a lot in teleconferences etcetera and I have to talk a lot and I eh like when you’re on the phone in that situation I mean your voice is all you have, it’s literally, that is actually the only way people know that you’re there em and I think that what going through the DAS course helped me to do is to do that and to stutter and not to mind it so I’m more kind of open about stuttering whereas I think beforehand and I was doing something similar that I would have been more stressed in a situation like that so eh I obviously still stutter but I I’m a little more conscious of a I cannot be stressed about this if I choose to be or if I think about it

Okay ..

but that at least that’s a possibility.

**What does stammering mean to you?**

Eh it’s for me I think it’s really just the way that I speak. So eh it’s interruptions, yeah I actually saw well I’ve given talks about it and stuff and em I’m kinda a scientist by training so I’m used to working with definitions and em obviously there’s all sorts of definitions of stammering but there was one very good one that I saw and that I remembered and I think it was involuntary interruptions in speech so that’s it and from a technical level that’s actually what it is and there is all the emotional side that goes along with that. But that’s part of the reason why I actually like that definition because it boils it down to something kinda practical so yeah em I think it’s a part of me, it’s how I speak and emm like a lot of the time I don’t mind.

**And how long has it been since you’ve completed the course?**

I think it was about two years now. Possibly two and a half years.

**Can you tell me about the course?**

Yeah, eh I think it was really good. Em it very much operated on a group level. I think the way it was done was very good because it was very much behavioural so that you actually got to do things so there wasn’t like a lot of theory kind of presented to you, there was a bit now but it was more experiential, you did stuff and you got your homework and you did stuff in the group and em I think the theory bits were more subtle but eh I think it was always kinda heading in the same direction as well and I think it was quite open to listening to the experiences of everybody in the room so I think that that was good as well. It wasn’t like well look here’s the answer to your problems so and I remember there were certain techniques and stuff that we were introduced to and that we were sort of encouraged to try, things like voluntary stammering and that’s a really good thing and so I think there was a big emphasis on that and there was an emphasis on actually learning how to do it, so doing it practically and then doing it in the course and then going and doing it on your own time and then coming back and talking about that. And I think that that was a really good aspect of it. I think that at the time I did it, it was on for about eight weeks, one night a week, for a couple of hours and I think that that was very good because it sort of reinforced it and I
think having it in the group that was very good because you had the leaders or whatever and then you kinda had your peers and that was a great aspect too coz you were sort of able to see how other people were doing and everyone was pretty similar. And em we watched videos like from shows of Sheehan as well from that so it was all driving in the same directing and there was very much about how it was up to you whether you wanted to try to speak more fluently but I think a greater emphasis of it was about being ok with the stammer and I think that was kind of something that I hadn’t really considered and I think that is why the behavioural part to it is very important because I think that you hear something and ok you hear it and you might understand it but it’s by going and doing it that it actually really becomes real and em something like the voluntary stammer that that can help you down the path to stuttering and to not minding the stuttering and I think that that’s a much more realistic goal for me and it was one that I hadn’t really considered before the DAS course and I think that for me to go down the road of actually trying to stutter less eh is not very healthy. It’s not very effective so I think the alternative eh is a lot better.

So that kind of answers one of the questions I had about what you remember most about the course?
Yeah eh I think it was probably voluntary stammering and eh to that concept and that actually was an ok idea and to be encouraged with that because it was something that I had never really come across or that if I had I would have just ignored it or said well that’s nonsense.

There were follow-up groups to the DAS course..
Yeah,yeah

And did you attend ?
Yeah

And how long would you have attended the follow-up groups after the course?
Em for as long as I could eh for like a good year or a year and a half or so em and then there was another there was things about it not being funded and so I attended up until the last one where it was possibly in some way funded and I think I would have certainly continued.Eh I kinda didn’t really wanna do it privately eh had it remained public then I certainly would have eh I’d like to. Em I think partly that is because I think it was actually a very nice group and I think there was a part of it when we were sort of encouraging each other and I was afraid that that would actually be lost in a private group where it’s more exclusive or something ,I just didn’t really want that. No I actually certainly enjoyed those and em I went in to speak to like the following DAS group like the next course I actually went in and talked to them about my experience.

And how did you find that?
Em it was really good yeah ,I really enjoyed it and there was a good few people who were very sceptical which I think I am myself but I just said well this was my experience.

What are your thoughts about the future?
Eh I think it’s a journey,yeah so I think it’s more of the same .I’m happy enough em I think as I said it is very variable so there are times when it’s easier to be ok with me stuttering than at others. There are situations when it’s still difficult and still a hassle but I think em that those are probably the opportunities in the long-term to reinforce it and keep it up so there are things I do now to help myself eh I think I saw something about avoidance there (on
question sheet) and that is kinda key to it. I think that if there are times when I’m not careful that I will avoid and I’ll fill and do all that kind of avoidance behaviour and that the only way to stop doing that is to go and do something positive, to sort of go out of my way to eh speak or to do some voluntary stuttering or the other one is advertising—that’s kind of a real good and powerful thing to do, which is basically just to talk about stuttering with like anybody. I will drop stuttering into conversations eh here and there just randomly, I think that’s a very good thing to do. Em but it is a matter of sort of remembering to do that when eh say if I’m struggling like there’s a kind of context to it, eh it’s about kinda recognising that and eh doing stuff about it. And I think that’s fine and I think that I will certainly continue on doing that.

Just at the start you mentioned the different therapy you attended, so can we just explore them a little further and can you tell us a little bit about them?

Yeah like I suppose I kind of did lots of various things, and they were all well meaning. But they were all ineffective. I think that it was probably because they aimed at speaking more fluently or not stuttering and that’s I actually think it’s just not sustainable. I don’t know particularly why I stutter, whether it’s neurological or just a behavioural thing. But I certainly do. And I think it’s permanent. For me at this stage. Maybe for young kids or whatever, they can be encouraged out of it. Or maybe some children can. But I think I mean certainly when I stuttered into my twenties it was always going to be a part of me. So I think like trying to fight that is exercising frustration em so they were fine, I think they were part of the journey that I like had to do. And that I probably wouldn’t have taken to do something like DAS if I hadn’t have gone through that experience and have them essentially not work. So I think they were actually on the path. Eh the one, the one with the breathing, which was eh, where actually I was very fluent for a couple of months, was a little bit in some ways, like it was a bit unfortunate. Because I was kinda like at an age or whatever, in my teens, and then it was stressful to stutter again. But I think it just wasn’t built on firm foundations and I think it was kinda built on a falsehood. And it was always going to come to an end. But I think to be told oh yeah actually this is the thing to do and you will be fluent and you’re not going to stutter anymore, that wasn’t really right.eh..yea.

And then there was another one after that before the DAS...

Yes so transactional analysis and I think I mean again it was well meaning and it was something that I chose to do like eh at that stage I was an adult so I knew what I was getting into. There was no indication of it being another go at fluency(recheck?) well not much anyway and it was really understanding stuttering and understanding my reactions to stuttering and I mean that was good again it kinda led me to meditating which is something that I do still many years later so I think all of these things are learning experiences anyway.

With DAS was there something in particular that made you choose that course?

Eh it was free (laughs) I think that is always a good consideration. Eh yeah I think the fact that it was available, that it was local, it was in Dublin, I think I was open to go and see what was going on and not really having a lot of expectations about it. So I think that was a useful attitude to go into with. I wasn’t going into it saying I want this to happen, I’m glad I went to it and I just went through it. Em plus there’s not really a lot more out there available anyway.

Did you say that your sister stutters as well?(other student)

Yes
And did she do all the therapies that you would have done?
She did some. She did that same, it actually wasn’t the McGuire programme but it was similar, it was about breathing yeah

And was that the programme you said it was like falsehood..
Yes

You had become fluent and then..
Stopped

And was it a gradual effect?
Eh no. It was a weekend course and it was intensive and I walked out of it. Now it’s kinda breathing techniques so as I was doing that breathing technique, I wasn’t stuttering and then I think over the course of like two months, it trailed off and then it didn’t work at all.

And your sister had done that course as well?
Yeah and she would have been that bit older than me so I think the affect on her probably wasn’t as marked.

What’s her attitude about the DAS course after hearing your experience?
Yeah she actually loves it, she’s she became a speech therapist, she’s actually very open about it and we talk about stuttering. She would be of the same mind and we’d share a lot of the same thinking. Yeah she’s gone through similar things to yourselves and kinda learning the science behind it too.

Can I ask just with the breathing therapy, why do you think it just stopped working?
Eh I think it’s an element of distraction, distraction and probably like a placebo effect as well so if you’re so focused on it and you think it’s going to do something but I think stuttering is very open to distraction anyway. So practically anything like tapping your leg, if you distract yourself from the moment of stuttering eh it works for a period but then it stops working because you become accustomed to it and you’re no longer distracted by it and so it just stops working. So I think that was the moment.

So your feelings about your stammer now?
Yeah I mean I think it’s just the way I speak. Its part of who I am, that’s just it really and I think where I ‘d be more focused on is encouraging myself not to get stressed out about it, not to feel bad about it. Sometimes I’m better at that than others but at least if that’s the intention, that’s a good thing.
Participant S

So we’re in our second year of our Masters now in our last year we’re student speech and language therapists so em we’re just kind of learning about fluency now and stammering and all that and we don’t really know that much about it, we kinda just started it a while ago so em any information you can give us will be great. So I just have a few questions here

Yea no problem yeah

So do you wanna just tell me apart from your speech, how was your life before you did the course, the DAS course?

Eh.. how was my life as in.. my speaking life? As in my speech

Yeah yeah and as in how are you in different situations? Did you avoid things?

Yeah I avoided everything (laughs) life in general, the phone, mostly the phone, speaking on the phone is hard. Always. But I think like it is for most people. Em yeah like I worked in a pub so I had a lot of avoidance techniques, just little tricks you use to get .. different situations like showing someone a receipt rather than having to say the amount-eight is always hard for me to say, so if the bill came to 8.40 I used to just print off the receipt and show it to them and then by the time they looked at it on the counter I would have got the word out. Which sounds like a real roundabout way but they’re the things you do like , different things like that so eh yeah I would have avoided situations the bank going in , that’s something that I’ve wrote about a lot where the windows in front of ya so you’ve already got a barrier in your head and you’ve got another barrier coz the screen like so stuff like that yeah but em I suppose I didn’t focus on it as much when I was younger, I just kind of got on with it. You know I was kinda lucky in a way , my friends never emphasised on it , people would jeer ya in school, stuff like that obviously but they’d jeer everyone ya know that kind of way.

And did you find school difficult?

Eh yeah well speaking out in school, so they used to have like if they wanted you to read a certain paragraph in a book so they might start at that end of the class and work their way through the tables

Okay yea

So you count the people ahead of ya and you find your paragraph and then you’d read it and read it and read it and read it until it got to ya, different things like that but em school wasn’t too bad. As I said I was quite lucky like I was always kinda in not the popular crowd but I never didn’t have friends so I was kinda lucky like that I suppose whereas other people... I kinda lost my stammer for a couple of years like when I was like ten until I was about twelve or nine until I was about twelve , not that I lost it, I just didn’t, my Mam says I didn’t really have it that bad so em but then once thirteen , around that age it came back then. It’s been like that ever since so it’s kinda not been worse or better, but school was, school was ok. Obviously yeah speaking out in class or stuff like that was difficult yeah.
What age was your stammer noticed?
I think when I was about five or four in and around that and I had done a bit of speech therapy up in T____ in The D____ Health Centre there, somewhere in T____, trying to think where that is now, eh yea I done a bit of speech therapy but it was very old-school therapy where it was you went in with your parent and they sat you down and they got you to read like a page and you went out of the room and they spoke to your ma about it and that was it then for six months. And then you went back and they done the same again.

And did you do that for long?
Not that long, no a couple, well, you didn’t go a lot coz obviously there was HSE and whatever or it was the old Eastern Health Board then before they merged so em it would have been, I would have gone a good few times but it would have been over a long period of time maybe four years I used to go but em I could read the Bible and not stutter like, that’s not my problem. It’s more situations like and different things and eh you associate a situation with a past experience that’s really where the problem is.

And when did you do the DAS course?
Eh seven,. seven years ago when I was twenty, it was either two thousand and oh trying to think now, if it was seven years ago it would have been 2004, it was around 2005. I think I might have done the last one DAS 6 or do you know how many they done?
No
I think they might have done seven. I think I might have been on six so eh it was around 2005, 2006, it was September one of the years, it could have been, I’m just trying to think because I came back off holiday that day and came straight to the course from the airport, I think it was 2006.

Would you then when you went to speech therapy when you were younger, did you attend any speech therapy then until you did the DAS course?
No, no. I just went online. I just, in work I was just getting so, I was getting pains across my shoulders coz I used to. I’ve gone through loads of different tricks so there was a stage where I used to take really deep breaths in and then I used to get stuck on a word so I didn’t let the breath out and I used to pull muscles in my shoulders and in my neck and all so I was just getting stressed out like I hated speaking, absolutely hated it and I was working in a pub so that’s not good coz ya hafta speak all the time so it just got kinda on top of me then. I just went online, I think I found it online, I went on to the Irish Stammering Association page and there was a link up there from _____ from DAS and I got through it that way and then I met Jonathon for an assessment out in B___, they have a one of the Health Centres out in B___ I met him and another girl, but em I met them out there and they kinda assessed me and then they said yeah it would be right for you.

OK and so can you kinda tell me about the course, like what would your opinion or what would your thought of stammering be like, if I said to you give me one word about stammering before the course what would you have said?
Struggle.

Struggle...
Every day, struggle. From the minute you get up coz every situation is struggle, you think of stammering before you think of anything else. So if you hafta go to the bank, you put it off for four days and then you know you hafta go in four days so then that builds up anxiety and you’re anxious and you get more anxious and then you just put it off and off and off and
putting off phone calls or getting other people to make phone calls for ya like ,they’re called facilitators, I think, I came across it before but em yeah just struggle, all the time and then the course, yeah the course was good it was the first time I was ever actually in a room with other people who stammered like at that age do ya know ,even in therapy when I was younger it never would have been like that. Because it was just one on one with your parent there so that was kinda meeting different people who had different grades, I suppose grades of stammering so there were some people who might not be able to put a sentence together and there were other people who were overt so they or who were covert so they just wouldn’t speak at all until they knew they could get the stammer or the sentence out and then overt, I’m quite overt ,like I don’t tend to try and hide it em so eh it was good .I mean you kinda realise straight away you’re not on your own and then Jonathon, the fact that he stammers as well, it kinda puts you at ease straight away so that part of it was good. And em,I suppose I don’t mean to be bad when I say this but you kinda realise that you’re not that bad when you meet other people, coz there are some people who really can’t put two words together and that it doesn’t make you feel better but it makes you kinda just say well my problems aren’t as bad kinda gives you an insight ya know but it dealt with, as _____ always says it dealt with the person first and the stammer second, which is the best thing because your stammer should never define you as a person ,it’s just another part of ya. So that kind of thing was good. They done a lot of situational things where they brought us into different ,it was on the North side and they brought ya into different places and put you into an environment that you already told them you weren’t comfortable in and then they told you to use different techniques so it was quite progressive in that way that you were kinda you were using what you had learned that day and you were going out that night or even that night if you met, coz we were there ,I think it was the last time they ever done that you had stayed over ,so we were in the hotel for the week whereas then the next one after that they used to go into a course for the day and I think they done it over six weeks so that was the last time they had done it over that so you were kinda in an environment that you were sticking with it every day whereas I suppose if you’re doing it once a week, you go back and then you undo everything you learned and you go back in and you feel great when you come out and then you undid it all again whereas in that kinda environment where you were going to sleep and waking up in the same environment with the same people it kinda built like ,when I came out of it I felt like I could stand up in front of the world and speak .Now I still stammer but it just made you look at it differently like.

So you feel that the everyday thing was better than the once a week one?

Definitely yeah, it’s more beneficial. I mean em you got a kinda eh the fact that it was continuous ,it kinda helped ya build on things and then at night even sitting down with the group when it wasn’t even in a therapy format it was just kinda like we were having dinner or a drink at night ya know and you just kinda felt much more comfortable with people and stuff like that so em I can only imagine it was better than the other way, I was never on the other one but that’s how I’d envisage it happening and it would be that all the good work done in a day would be lost over the next six days where you’re going back to step one every week so some of the techniques they taught us like sliding techniques on words so like focusing on the first letter rather like I think a lot of stammerers tend to get stuck on say if the second letter is a vowel in a word so say ‘vowel’ ,they’ll go ‘vv’ and then they’ll get stuck on the o so it kinda focused you to stick with the v say and slide on that as long as you need
to get into the word, stuff like that, that I would have never done before rather than the
McGuire Programme say where it’s all about breathing and stuff like that which I suppose is
quite an aggressive therapy they do but em.

**Did you do the McGuire Programme?**

No. No I looked into it eh and I went to an open afternoon, don’t know where that was, a
long time ago now and but I just found it kinda aggressive like. It was very like, they kinda
like monitor you every week or like month and if you’re not, you have to do breathing
techniques every day for like twenty minutes or something like that and then they kind of, if
you haven’t made so much progress the next time you go back, they’re kind of they put a
strap around your chest and get you to breathe in so that kind of freaked me out like that’s
not what I want to do.

**So did you find that the DAS course, the fact that it was more person-centred, focused on
you and then the stammer, did you find that that is what drew you to it?**

Yeah, yeah. Like the focusing in on the person first so that the stammer comes second like, to
know the person first because it’s all in your mind like now, once you’ve stammered for a
certain period of time, the stammer stops and it’s just all in your mind like you over think
every situation instead of just trying to blank it out and go into a situation and just say ‘if I
stammer, I stammer, it doesn’t matter, I’m going to get through it,’ whereas before I never
would have thought like that. I just couldn’t see the light at the end of the tunnel, not that
like I’m there now but it was just better, it was much better to focus on yourself and it also
taught you to listen to other people speak and you kinda realise that other people who
speak fluently as they say, they take pauses and they take their time and em even when
you’re on the phone sometimes like they, people tend, don’t speak straight away, they take
their time whereas you’re thinking I have to get the word out now, now like right now I
have to say it whereas people tend to take their time and eh they mightn’t even be listening
to ya or something like that so they done all stuff like that and they done group work as well
where they split ya into groups and I can’t even remember what we done in the groups now,
it’s just different techniques and they kinda just got ya to speak about situations and
analysing different situations and saying like I got really worked up over this and then other
people saying like some of the tricks you hear like people going into pubs and they only
drank Guinness but they couldn’t say Guinness first so they’d ask for a Heineken and a
Guinness and they’d end up with four pints of Heineken on the table and no Guinness left
and the barman be like ‘is your friend not coming?’ and they be like ‘ah he’ll be here soon’,
you’d say to yourself like anyone who doesn’t stammer will think that’s just crazy but that’s
just what people do like you know or paying for the bus, you’d always make sure you had
the exact right amount of money to drop into the machine, even turning the money around
like having it all in your hand and dropping it so the driver can see it and then people used
to say to me why don’t you get a bus card and then you’d have to go into the shop and ask
for the bus card which is another situation, (laughs) you know what I mean so yeah yeah.

**So did you enjoy it or did you find it kind of challenging?**

No I enjoyed it yeah I thought it was really good, the whole environment. It was really good
yeah. I liked it now em it was a pity it had to end coz ya kinda come out of a bubble then,
you’re kinda in that bubble and then I came in for one of the meetings, month or two
afterwards in here and that was the last time I came back then I just didn’t, I kinda got a lot
out of the course and took a lot form it you know but then I suppose you go through your
good times and your bad times like up and down you know.

Was that the follow-up group you attended?
Yeah, yeah I came in here for one of the meetings. They run the meetings once a month so
there are people, probably everyone on it has done DAS at one point or another or else
they’ve been on a different course maybe with ______ or something the Dublin Adult
Stammering group yeah that’s the DAS, yeah they do that once a month so I came in here
with a lad who was on the course with me em coz he lived near me and we came in and it
must have been the following course, the following month so the October and then em I
just never came back in not that I didn’t want to its quite far away, that’s another
excuse you make in your head aw it’s long eh Tuesday evenings ,I might be working on a
Tuesday evening well I used to when I worked in the pubs so just different things but I kept
in contact with Jonathon and that and I kept up to date with the ISA and that but the
meetings, I didn’t really get that much from the meeting. I mean it was more of a support
group and I didn’t really need a support group ,that’s not something I needed, other people
do I suppose but I kinda wanted the therapy and I took as many different things from the
therapy as possible ,all the little sliding rules and that kinda stuff so I tried to implement that
for as long as I could but eh life tends to unravel all the good work eventually (laughs)

So what would you think about stammering now or what would you think about your life
now with a stammer?
It doesn’t really bother me anymore ah no it does every day but I try and tell myself
everyday that it doesn’t. I think that’s the best way like I write a blog ______its called and
I just always say on that like if you worry about it all the time you’ll never move on ,you’ll
never live. I’ve accomplished loads with a stammer and I’ve met people through the blog
who have accomplished loads do ya know em I think , I don’t know whether it’s healthy or
unhealthy to live like that but it seems be working out alright at the moment (laughs) so eh I
suppose I’d love not to have my stammer in one way but then again it’s part of who I am
and everyone’s accepted me for having it so I suppose there’s certain..On the phone is the
big , like I’m studying journalism now and I work in a newspaper you know and like I spend
all day on the phone which is my worst nightmare but you do it every day and you make
phone calls every day and I would have never done that, I would have put it off so I suppose
I probably took that from DAS as well not then that was 2006 and I didn’t start doing the
newspaper until 2010 ,2011 but even then you kinda just, I think the older I got you just
have to get on with it. Everybody has their flaws ,everyone has like I know people in my
class and they’re beautiful speakers fluent and they’re afraid to pick up the phone and ring
people so if they’re afraid ya know what I mean I might be alright here.

So it’s changed how you’ve kind of thought about the future , or things you thought about
doing? Would you ever have thought about working for a newspaper before?
(Laughs) Nah, never. But those circumstances change and stuff like that like I never would
have thought about speaking on the phone and I decided to do journalism it just didn’t pop
into my head and the first day I went on work experience somewhere and it was like oh we
want you to ring the Dublin captain there and get a few words off him about the match
yesterday and I was like ‘oh no’ but I done it that day after two hours of looking at the
phone and putting it off I done it and he was probably a bit uncomfortable for a couple of
minutes but then once ya get into it, the introduction’s the most difficult for me it’s like a
The ringtone is like a clock and I’m just waiting and then when they answer I’m like I have to speak right now ya know, but I don’t.

Do you think now that you’re more comfortable with it, you’re more secure with it that people react to you differently?

Eh..yeah definitely, definitely. The less conscious you are about it, the less, I think people read that in your body language, yeah even the way you come across em I think people can tell kinda that like I went through a period of telling everyone I had a stammer the minute I met them coz I thought that would be better like. But then I kinda got past that again I suppose you have to think again that people can look at ya in a way and sometimes a look can be worse than slagging ya or jeering ya do ya know if they give ya a look so I suppose you tell them first I have a stammer but then some people don’t even pick up on it other times. Like I’m really bad in some situations, here I’m ok now speaking and that, it’s not too bad but em then on the phone or speaking to someone in authority or something like that like if ya get stopped at checkpoint ya know, you’d roll down the window and I’d just want to say oh’ how’s it going guard?’, and he’d think I’m after been drinking or something do ya know, coz you’d just get stuck on that word like and he’d ask ya to get out then and you finally say I actually have a stammer and the guard and sure he’s probably thinking this lad is having me on, different situations like that, you see the lighter side of it. I mean if you can see the lighter side, some people can’t like you know, some people have just been, some people have probably had really bad childhoods and they have this defence mechanism up and they see everyone as the enemy. I’ve met loads of people like that on the blog and Face book and stuff and they’ve had constant bad experiences and they haven’t been really able to get past that. But I’ve always been quite lucky like that that em different experiences. My view of it now is that I suppose I’m not going to let it get in my way anymore and now it still does everyday do ya know but not, it’s kinda hard to describe, like not in a big way.

So you described it as a struggle before, what would you describe it as now?

Aw it’s still a struggle, it’s like before I remember someone said to me a stammer is like you’re pushing a car up a hill and you’re on your own. Do ya know? You make it a little bit of the way but you can’t get all the way whereas now I’m kinda in the car and I’m driving slowly rather than pushing from behind I suppose I thought of that the other day, I must put that up on the blog! Em no but yeah it’s kinda like you’ve broken down little bits of the barrier over the last few years and you just kind of like there’s more important things to be worrying about than that dya know and the more I spoke on the phone, it doesn’t get any easier the introduction, but you notice, it’s very hard to step back when you’re in a speaking situation but if you can do it, it kind of, it can open your eyes hugely if you can manage to step back and actually look at people. People are talking to ya, they tend not to bother like. They have their own problems to be thinking about and that’s something used to say to us on DAS, he said everyone has their own problems in life and they’re all worried about different things. They’re not, the majority of people aren’t worried about your stammer. Like it’s not their problem yet you’re kinda making it as if it’s going to be their problem as much as it is your own, whereas it’s not. It’s your problem but if they’re not worried about it, why should you be worried about it yourself? I suppose em but then as I said if you’ve had real bad experiences there’s a lot more layers to peel away to get to that point. Whereas I suppose I didn’t really have a lot of layers to peel away. I’ve always been kind of out-going and confident in one way so that was a benefit I suppose but people
always say that to me ‘aw you’re real confident and all’ but if you were inside me head you might think differently!
But there are people like that, sure people are obsessed with the way they look or they’re angry with the way they look or sound or they’re too big or small or round do ya know that kind of way?

And when, just out of interest, when did you set up your blog?
I started it in November em I had to do it for college, we had to set up a blog and eh I just set it up in November but sure it’s after going through the roof now.

You got a good response?
Yeah yeah with the British Stammering Association and loads of the American associations have I get them retweet the stuff and put it up on their Facebook pages and _____ in the ISA. The British Stammering Association have been good and one up in Northern Ireland and the Scottish Stammering Association ,they’re re-developing their website so they’re going to put the link up on their website and stuff like that so . You should go on it like I just mean ,someone was saying to me yesterday, my wife’s dad works in Enable Ireland and they have speech therapists in there and he was getting them to read it and they were saying it was really good to get like an insight into the struggles that people who stammer have. So I get other people to put up stuff on another page in the blog so they can contribute their experiences so there’s some good stuff on that as well from people in Ireland and England, there’s a guy who wrote big poem and then he preformed it at his Cambridge Stammering, yeah he preformed it at that yeah.

What’s it called?
Diary of a stutterer , if you type it in its number one on Google now.

Well Done!
I’m going to make a few bob out of me stammer now! (laughs) After it’s held me back for so long ya know?

Do you find from the blog that people are kinda open enough to talk about or are they open to therapy?
Well probably not like I mean I’m averaging a hundred views a day. I always ask people to leave comments at the end of the posts to get people talking about stammering do ya know and some people do .There are some people who will always leave a comment or on the British Stammering Association I’ll put it up on their Facebook page and there are a couple who’ll always have a positive thing to say but I find Americans more negative about a stammer than British people I don’t know about English or Irish people. I don’t know why that is ,maybe it’s just the specific ones I’ve spoke to ,they tend to ,like I got a couple who’d say oh it’s the world’s problem that I’m the way I am , they’ve put me down for so long ,stuff like that and you’re kinda like well it’s not their stammer, it’s yours. That’s the way you’re seeing it ya know, they’re not. I mean I don’t blame anyone for reacting in an awkward, like I’ve put loads of people in uncomfortable positions because of my stammer but it doesn’t mean they didn’t still like me , it’s just uncomfortable sometimes like even back when I done DAS, there was a guy from Cork, he’s actually an engineer now in Wexford.. Waterford and em like he was really bad ,like he couldn’t put a sentence together. And that was the first time I’d ever met someone like that you know. I was kinda uncomfortable not in a like I don’t mean I was looking down on him it’s just kind of an uncomfortable situation to be in sometimes .
Do you find that hurtful when people react to you that way or can you understand why they’re doing it?

Yeah you do feel hurtful a little but I suppose you try not to dwell on it like if someone actually slagged me about it I’d probably freak now whereas I wouldn’t have years ago I would have just brushed it off but I try to confront them now and say listen there’s no need to be like that I have a stammer but at least I’m trying ,I’d say that now but years ago I wouldn’t. Different people slag, like kids do or teenagers but eh once I started working in the pub like I was pretty good like, my stammer got probably worse but people seen me for who I was and they seen past the stammer and stuff like that and I was quite lucky but em I suppose everyone reacts differently ,everyone’s had different experiences. That’s the thing about stammering, you’re carrying around maybe twenty years of baggage, everyday with ya , in your head, thinking of things like every situation like if you go into the bank ,every bad situation you’ve had in the bank in your whole life comes back to you every time you go into the bank. Or every time you get on the bus so it’s hard to leave that at the door and go in fresh like with a clear mind and not bring that with ya so that’s the reason I think so much of it is psychological ,like you’re already creating a huge block before you’ve even attempted to speak so what chance are ya given?

Do you think that will ever go or do you think you will always feel like that when you go into those situations?

I think you’ll always have it. Unless you went in and you had like ten good experiences in a row ,that’s never happened! (laughs) I’ve never had one! Ah no I have I tend to get by the first part of it and then you’re fine but em I don’t think it will ever go just you kinda carry it with you for so long now .Like I suppose it’s the same like if you ate something and you didn’t like it the first time or you had a really bad experience then every time you thought about it eating it again you’d think ‘oh no that last time wasn’t too good’, so maybe like that. It’s kinda like that as well but em but then you don’t, I was kinda only saying this last week , you don’t remember the good times. The good speaking experiences, I never remember any good speaking experiences in a bank , but I must have had some do ya know coz I’ve been in the bank thousands of times but there are certain bad experiences that always stick in my mind and different things like that. You don’t tend to remember the good ones. The bad ones stick in your head ,that baggage like, just so much to be carrying around with ya, like you know, you get very anxious then ,I used to I don’t , not that much anymore. I suppose people who again people who have had different experiences , worse experiences and then there are people who get long blocks like they actually freeze, and they can’t get out of it, or they won’t attempt to say it again. They’ll just hold on the word ,then they might start going red or something and like a person might laugh nervously or they might just laugh coz they think it’s funny at ya and sure that’s like sticking a knife in ya ,d’ya know that kind of way so if that’s happened to ya a couple of times you couldn’t continue on with it or the next time you go back it’s going to be bad. Ya know yourself.

So you’ve had a good experience of it overall?

Yeah DAS was thoroughly enjoyable yeah. I thoroughly yea I don’t think they do it like that anymore, I don’t think there’s any group like that within the HSE that they put you up in a hotel for five nights.

No I think they do it now the weekly one , I think there are no courses running at the moment ,there’s no funding at all for it.
I know the McGuire programme take ya for a weekend and em but ya have to pay for that yourself. I mean and they get you to stand up on a box on ______ and totally embarrass yourself and then they beat ya down with a strap! (laughs) No they put a strap around and they get you to breathe right out so your diaphragm is completely closed down and then they tighten the strap on ya not in an aggressive way, but it’s quite an aggressive therapy I suppose and then they get you to speak but it’s either that your diaphragm gets really small and then they get ya to speak but you can’t breathe the way you used to breathe obviously because you can’t breathe in. I think it likes trains ya to breathe another way ,take like short, little stabby breaths like (demonstrates it ) like if ya see Gareth Gates talking ,he’ll take lots of little breaths over the words. I know people who done, I know one girl who done the McGuire Programme and she just didn’t like it. A lot of people seem to be I think that’s your mind as well you see different reaction like psychologically must be like and then there’s a lot of research now I’m sure you know all about it genetics as well from families ,like no one in my family had it but my Dad would have had probably like a tiny stammer not even noticeable but he would have like got stuck on a letter in a word ,just a split second on the first letter of a word or stuff like that but em the more people I talk to would say oh my Mam said my uncle had a stammer when he was small or my Dad said his sister used to have a stammer or something like that so maybe but em.

Would you have found that when you were younger, people didn’t know that much about stammering?
Em I didn’t know too much about it myself

Has awareness kind of improved over the years do you think?
Eh the King’s Speech done a lot for it didn’t it ? (laughs)I suppose everyone says that but it was the first ,like I’m doing a study in college a research kinda dissert well a small 5000 word research project on looking at how people who stammer are portrayed on television and film and em The King’s Speech was the first the majority of people who stammer on television and film would be for comedic value so have you ever seen that Open All Hours?
Go on to YouTube you’ll find it, it’s your man who played Del in Only Fools and Horses and he’s a shop assistant.

Oh yeah yeah ,I know the one
Ronnie Barker is the shop owner and he has a stutter but it’s very much for comedic value and a lot of the things are like that but em there’s not too many that focus on the person who stammers like as a problem it was more for comedic so I suppose you can’t expect people to understand it I don’t know how much awareness can you raise of it without...I don’t mean this to sound bad like without kinda putting them in the spotlight. So then people would notice you stammer more ,would that be better? I mean if you were trying to hide it ,which the majority of people who stammer would try and hide it well in my experience em then if everybody knew exactly what to look out for with a person who stammers then

Would it make any difference?
Yeah or would it work the opposite way .I don’t know. But there was a good movie in 1956 called eh ‘Tongues of Angels’ and it’s about a farm boy he’s like a wanderer and he goes to this farm looking for work and they think he’s a mute and it’s the furthest back I can find where they actually focus on the person with the stammer as not for comedy, not for anything. And he ends up falling in love with the guy’s daughter and then he speaks and
they all thought he was a mute but it’s coz he had a stammer so but the majority of them are for comedy and I suppose you can’t expect really people to be aware, everyone just has so much more going on. Like that’s what ya have to keep telling yourself, you know, people have their own problems, eh their own worries and stuff like that but em and there’s no study groups going on at the moment? No therapies going on?

I don’t think so
I know there’s girl in ______doing research at the moment ______is her name

Yeah yeah
You know her? I’m mad for helping out research. I went into her as well coz I thought her approach, she’s taking a life story approach so she gets you to split your life into chapters, so say you have three chapters, up to my age, and then you pick out three points in each chapter to talk about and stuff like that. I think that’s the first type of research in Trinity so em the more research, the more studies, like I’m doing a piece like a 3,000 word feature on the importance of early intervention coz that is key like and I’m doing it with a group up in T___CDI (Children’s Development Initiative, they have a couple of speech therapy things but there was a report released in November about how well the pilot project has worked so that’s where I see it working. I take my kids in at two and a half, three, four, and getting them up to the level they should be at and they seen a good turnaround of kids who came in and reached the what would you call it?, the certain level they should be at by a certain time so I think different things like that are good I mean maybe early intervention and stuff, could have done with some of that (laughs).
Participant N

**Can you tell me about your life before the DAS course?**

It wasn’t great really. I was terrible on the phone. And I couldn’t like make a phone call. It was eh..it was hard like,very,very hard. But I was worse when I was younger. But as well like when I met ______,I was so like ..well I was just saying well I have a stammer, but like and he said like we can make it like better or things and I’m like oh great like but em I was sort of reluctant to do it at first and like my speech therapist like told me about it and said there’s a group in town, like they meet and I can give your name and things and I’m there hmm ok then .(changed )initial words-block)For me I have never met a person like with a stammer and I was shocked like when I went there first like but life was hard but about seven or six like years ago I became a more like out of me shell like a bit and I wouldn’t speak my mind but now I’m more comfortable doing it and things. Like I was, the phone was a big issue. You get people and they’re like ‘hello, hello?’, and they just hang up and you’re there ‘oh my god like!’.

**So would you avoid situations and specific things because of it?**

Oh yea.

**Like using the phone?**

Oh yea.

**How would you describe your speech before the DAS course?**

Bad,bad.Like when I was stressed ,its worse I thought and when I get down. I used to get really down I used to hate it and cry and be all why am I like this? It was quite bad.

**Did you ever go to speech and language therapy?**

No, when I was younger, me mam never brought never brought me so I asked her when I was at ______ course : why didn’t you bring me? ‘aaghh’( imitating I just was himming and hawing but then she said I wasn’t that bad but when me daddy died, I got worse. I don’t know. I sort of like resent her for not putting me in speech therapy.

**How long has it been since you did the DAS course?**

eh I think it was three years or two years ,I forget now. 2010 ,yeah.
Can you tell me about what you did?
Yeah we used to eh sit down and like in a circle and things, things, and like I was nervous like at first and then people started talking and they make you feel like at ease and you just say 'hi, I'm N____ like blah,blah,blah and then and then he put us into groups and things and which I hate things! I hate things like that and I was like for god's sake (laughs) but it was interesting. We'd like...I forget now, what we'd do but like it was really good and I felt like great like coming out of it and hearing..oh and we'd slide words and things like which was really good. I do find that like good, sliding but I have to be calm. I can't like do it when I'm stressed.

Ok, so you learned different techniques?
Techniques(said with me), yeah

And for you it was the sliding?
Sliding(said with me) yeah

That was the most effective?
Yea and the eye contact. It really works though.

You mentioned there that in order for you to use the slide, you feel that you need to be relaxed and not stressed. So would there be times or situations where you would feel stressed?
Oh yeah. All the time.

And would that be talking to new people? (needed more probing questions to answer)
I just sort of em..like there was a stage I would like avoid people because I was, I thought ,I'd be like embarrassed for them. I know that's weird but I'd feel oh god, they have to listen to me now and things like that and I'd be Jesus N____ ,why did you stammer there? But I don't know when I'm going to stammer, It's just on the words I know and I get very tense here (points to chest) I can feel it now like and still like I do find the breathing good and for the past few months I'm talking and I do feel it all here (gestures to chest again) tension and where I should slow down and just do my slide.

So you said there that you don't know when you're going to stammer, some people would say it might happen on a particular sound or a particular word but for you, it can happen at any time?
Yeah.

And so you will try to use your slides, so can you tell me what you took from the course, something you learned?
Oh I learned like not to care what people think like and I don't now like really care. And I'm just like , it learned me not to care and there's other people like me which I didn't know really and you'd be shocked like and I'm there Jesus and like it just learned me not to care as much and things.

You said earlier that you'd never met anybody with a stammer.

No

So suppose going to the course and meeting others that stammered.
I was shocked like.

So did you attend any follow-up groups?
Yeah like I attended like a few because it's hard with my son. And like it's hard to like get a sitter, but I attended like a few. I used to look forward (doesn't complete) used to hate doing like courses but this was like the first course I used to look forward to going. I just
thought like it was too short. It was too short. I said to him would you not like make them longer? (laughs)

**The actual course was too short?**

Yeah, I just thought it I think it was eight weeks wasn’t it? I just thought it could have been longer I thought like twelve.

**Did you feel that you just wanted to learn more?**

Yeah I just felt that like so calm there and things like and meeting people they didn’t judge me and I didn’t judge them.Yeah it was just really nice people like.

**Do you try to attend any follow-up groups now if there is any I know you mentioned it’s difficult with your son?**

Yeah and I know like there’s meetings on here, I was never here so I do find it hard to like go to meetings but I do this eh talk thing on the phone and its every month I think is it? yea and it could be like five of us on the phone –V__ and S____ and a few others and it’s just talking and I find that like really good. Good as well I do and they’re lovely people.

**So you just ring up and chat?**

Yeah an operator would ring you and just say right I’m going to put you through and I think we have like about forty-five minutes on it or and I find it like really, really helpful .Like if you’re feeling down and things and even to say well like when you feel down and things then you have your speech thing especially when you were like a teenager, oh my god ,I was just so quiet ,never said a word and like no one, even the teachers were like not cruel but they’re not like as educated like at that time and I remember once I was in was it secondary? And I was in first year and they brought me to a hospital thing or a nurse and I heard her saying am I handicapped? I swear on my son’s life .I was just there like and didn’t I go home and I just said , I was about twelve like , ‘am I handicapped Mam?’ and things like that . ‘Who said that ya?’,and things yea I swear to God ,on my son’s life. So I told____ that and he said like no and if anybody had said that now ,they’d be like sacked .

**Yeah so you definitely feel that (interrupted)**

Oh years ago it was terrible ,really was.

**And at such a young age, hearing that?**

Yeah ,yeah, I remember that as plain as day yeah .

**And that happened in school? So how was school for you?**

Terrible ( both of us speaking- ‘you mentioned you were quiet’) I had like a circle like of friends , and things but it was just em like in other classes like I knew a few things I wasn’t thick like. And I’d be afraid to say it and then they’d do like a reading thing and the whole class would read and they’d be like coming up to me and my hands and things and I used to get me friend to say aw I’m feeling sick will you take me outside so we went outside three times and I think the teacher called me over once and said like’ look N____ don’t be like afraid ,afraid and like you don’t have to read like if you don’t want to’. A lovely ,a religion teacher .Lovely teacher. But em I just felt like it was really bad like years like ago, no speech and therapy, nothing and it was me ma’s fault too like. And when ya think about it like, if that was my son now and thank god he doesn’t have one but I’d be getting him all the help like.

**So would you say that it’s very different now?**

Oh yeah.

**To what it would have been?**
Yeah, yeah. Because there was a young girl there like in the group and she was em I think she like left school like that year and said like a few of the people in like that school had like a stutter and they had like therapists and things like working with them but like in my time, no. Nothing. Oh school was terrible. Seriously.

**So now if I can just go back to the DAS course, you did the course and then you attended the after group course, so what made you attend the follow-up?**

Just too like get out and just to like meet people, people who I was comfortable with and things.

**What does stuttering mean to you?**

If you would have asked me before the course I would have said a curse. (giggle) But em now it’s like part of me. It’s not like it’s going to go away. I like I hate it and I still hate it but it’s not like going to go away. So the course has like, how do I say it?, has taught me to accept it. Yeah, like I hate it and things but I have to like live it, I have like no choice.

**What about your thoughts for the future?**

Em. My thoughts for the future eh yea it looks good. I don’t let anyone like away with anything now. I feel like I can go up and go ‘you see you!’ (laughs) and things like that and if you asked about me friends, I have more friends now and I have like noticed since I did the course because I know it’s weird I could talk to men more but I found it harder like em with girls. Does that sound stupid?

No.

Oh I found it so hard with girls to talk to coz ya know how they can be bitchy like.

**So do you mean in general talking to girls?**

Yeah, yeah.

**So you felt it was easier to talk to.**

Boys (say it together) yeah and plus I have brothers and things so I could always talk to boys more and it’s only since the course like I have more I can talk to girls like more. If that makes sense?

**Do you feel that stammering has less of an impact now on your life?**

Em, yeah I feel like there’s more to life now I feel like. So I’m sort of like waking up to that because like there were a few deaths like in the family and like cancer and things and I’m just saying there’s more to life, yeah and if like ya got me on a bad day I would probably say something else but yeah. Like I can’t change it.

**Did you do the residential course or once a week?**

Oh the once a week. Yeah.

**N____ was saying how she wished it was longer. (to other student)**

Yeah I found that when I got there and like it was great with the people and I felt like so comfortable, loved like going if I didn’t have a sitter, I’d crack up and go I’ll kill ya (laughs) and I just found the eight weeks, I think it just flew by and I would have loved it to be longer, yeah.

**Can you tell us about what you did- you did mention to me that you’d meet and introduce yourself and then practice your techniques like the sliding.**

Yeah and we’d look at videos and things. It was like Americans on the sliding technique and we’d do like role-plays and things and we’d I think on our like second last week he put me with this other girl and like the therapist and I had to like ring up like a hotel to pretend like I was booking. So I said like ‘hello’, and she goes like ‘hello’ and I’m there I didn’t get a
chance to say anything and she hung up on me. I just felt oh my god and I forget like her name but she said no like come on ring back up so I got it then and things like that so but like things like that like hanging up, I’d be there oh god, that was the worst thing.

**The phone?**

Phone was terrible.

**How do you feel about the phone now?**

I like it. I feel like say if you said now ring my friend or I’ll be there right, I’ll ring in two minutes I can just calm down. I think it’s just first saying hello. Once you get like that bit out, I do be ok I think, yeah.

**Can I just ask how you found out about the DAS course?**

My doctor, he referred me to like a speech therapist like in S___ Health Centre and me seen her like a few times and then she just said it to me.

**About going to _____?**

Yeah and I’m like oh no but then I said alright and I loved it.

**So was this your first encounter with a speech and language therapist?**

Oh yeah because as I said me mam like got me no help at all ah sure you’ll be grand.

**How long was it since you’ve done the course?**

Em I think it was 2010. I’d love to do it again.

**If the opportunity came up, would you do it again?**

Oh yeah, because I think it’s just em I do be feeling great a few months and then you go back downhill and then you have to pick yourself like back up and go back downhill so I just think it should be more.

**Why do you think that you leave and you’re happy and then you go back downhill?**

Oh it’s just me, sometimes I get really down.