

## **THE IMPACT OF FLUENCY DISORDER ON THE ADJUSTMENT PATTERN OF ADULTS**

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### **Abstract**

Fluency disorders are prominently seen in our society in large. The impact of fluency disorder or stuttering can affect an adult in various ways throughout their life cycle. Because of their stuttering, they develop negative beliefs and attitudes about their speaking and also about themselves. They face various adjustment problems in many areas like society, work place and even in their home etc. They tend to be excessively worried, anxious, nervous and reserved. The present study focuses on the adjustment pattern of adults with fluency disorder. The subjects were 120 male adults (60 stutterers and 60 non stutterers) from different districts of Kerala. The tool used in the present study is The Adjustment Inventory (Adult Form) developed by Hugh M. Bell (1963) to assess the adjustment pattern in adults. The analysis was done in SPSS version 20, and t-test was the main statistical analysis employed. The results showed that the adults with stuttering had lower levels of adjustment pattern than those who do not stutter.

**Keywords: Fluency Disorders, Stuttering, Adjustment**

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Fluency disorder or stuttering involves disruptions, or “dysfluencies”, in a person’s speech. Stuttering has probably received the most attention because of the way in which it dramatically exposes many of the unpleasant sides of social living. It is difficult for the people who stutter to speak more easily and they themselves have a negative impression about themselves, their speaking ability and they were not able to communicate more effectively with others. Communication is important to the overall development of an individual, particularly in the cognitive, social-emotional, and adaptive development. According to the definition provided by the International Classification of Diseases, which draws on a definition offered by Andrews and Harris (1964), stuttering consists of: “disorders of the rhythm of speech, in which the individual knows precisely what he/ she wishes to say, but at the same time is unable to say it because of an involuntary repetition, prolongation or cessation of a sound”. For a person with stuttering, speaking in a formal situation is more strain than speaking in an informal situation. A child stammerer feels being trapped in social speaking situations and there is an increase in tension and anxiety in the child. As the child becomes a teenager speech becomes more demanding. Stutterers are capable of clear thinking and formulation of ideas, but when these ideas have to be translated into speech they become a prey to undesirable emotions like anxiety, fear etc. At this stage stammerer’s speech becomes disorganized whenever he attempts to speak. He feels tensed and anxious which lead to interruption of his speech. With repeated frustrating experiences, stuttering behavior gets strengthened and they show certain behaviors that can be characterized as primary and secondary behaviors. Primary stuttering behaviors include overt, observable signs of speech fluency breakdown such as repeating sounds, syllables, words or phrases, silent blocks and prolongation of sounds. Secondary behaviors include escape behaviors, in which a stammerer attempts to terminate a moment of stuttering.

Fluency disorders or stuttering in adults is a real distress when they can’t find the right words that they want to use to express and this can be very embarrassing for the person and tends to lead to some kind of discomfort. Many have found that by switching the words that make them stutter it will help them speak more fluently. Those who stutter into later stages in life have lower odds of recovering from the stuttering and greater odds of facing more negative social consequences. Stuttering may impact an individual’s employment opportunities, self- image or self –esteem, perception by others, relationship with peers and intimate relationships.

Employment opportunities can be limited for a person who stutters. The stuttering is usually noticeable during the job interview process, which may affect the way that the employer perceives the applicant. A study by Hurst (1983) showed that 85% of employers agreed that stuttering decreases a person's employability and opportunities for promotion. In social situations, there is an increase in tension and anxiety in stutterers and they may develop adjustment problems. Starting from a small family get together to a crowded social programme, this problem tends to keep the victim aloof. Such situations can serve as a source for the stutterers to develop many psychosocial problems leading them to withdraw from social gatherings. In this context, the study has much more importance.

### **Objective**

1. To find out the significant difference in the adjustment pattern of adult stutterer and adult non stutterer.

### **Hypothesis**

1. There will be significant difference in the adjustment pattern of adult stutterer and adult non stutterer.

### **Method**

#### **Participants**

The participants of this study consist of 120 subjects, 60 stutterers and 60 non stutterers. Only male stutterers were included in the study whose age ranges from twenty five to fifty. The data were collected from various stutterers belonging to different districts of Kerala. Purposive random sampling method was used for data collection.

#### **Instruments**

1. The Adjustment Inventory (Adult Form) - This inventory was developed by Hugh M. Bell (1963) to assess the adjustment pattern in adults. The inventory measures five areas of a person: home adjustment, health adjustment, social adjustment, emotional adjustment and occupational adjustment. It consists of 160 Yes-No questions. The reliability of the inventory was found to be .94 and the validity was found to be .72.

2. Personal Data Sheet- Personal information like age, sex, religion, occupation, marital status, type of family, birth order of the participants were collected using personal data sheet.

### Procedure

The investigator collected the data from Stuttering Foundation Kochi. Then the participants were directly contacted and explained about the aim of the study and the procedure prior to collecting the data. After completion the research instruments were collected back and checked for incompleteness. Scoring was done as per the manual and entered into a spread sheet for further statistical analysis. Similarly data was collected from the non stutterers also who were matched on the basis of age, sex, educational qualification, monthly income, birth order and marital status.

### Results and Discussion

The objective of the study was to find out the significant difference in the adjustment pattern of adult stutterer and adult non stutterer. To find out the significant difference, descriptive statistics was calculated and the results are presented in the following table.

Table 1

*Means, standard deviations and t value relating to the significance of the difference between the stutterers and non stutterers on adjustment.*

Variable	Group	N	Mean	Std. Deviation	t-value
Home Adjustment	Stutterers	60	11.40	5.368	2.610**
	Non stutterers	60	8.72	5.880	
Health Adjustment	Stutterers	60	7.95	4.749	2.049*
	Non stutterers	60	6.18	4.696	
Social Adjustment	Stutterers	60	19.13	4.545	7.291**
	Non stutterers	60	12.37	5.569	
Emotional Adjustment	Stutterers	60	14.73	6.300	5.637**
	Non stutterers	60	8.05	6.683	
Occupational Adjustment	Stutterers	60	12.37	5.722	3.396**
	Non stutterers	60	8.88	5.511	

Total Adjustment	Stutterers	60	65.58	18.843	5.437**
	Non stutterers	60	44.37	23.634	

\*\* Indicates significance at 0.01 level

\*Indicates significance at 0.05 level

Table 1 gives the means, standard deviations and t value relating to the significance of the difference between the stutterers and non stutterers on the variables of adjustment. It can be seen that there is high significant difference in the home adjustment between stutterers and non stutterers at 1% level. By taking the mean values, it is seen that non stutterers (Mean=8.72) are more significantly adjusted to home environment than the stutterers (11.40). High score indicates poor adjustment. This may be because in daily life most of the families are busy and demanding and so much to organize and the adults who stutter may find it difficult to go along with them. They may feel ashamed or feel inferior to talk or to start a conversation with family members even to their siblings. Parents may have different attitudes towards their children who have stuttering. Same time their siblings may also have negative emotion towards them. The results supports the qualitative investigation of Beilby, Byrnes and Young (2012) which revealed that siblings of children who stutter exhibited strongly negative emotions, and differing levels of responsibility associated with their involvement in the actual stuttering management programme. Furthermore, for the fluent sibling, secondary to having a brother or sister who stuttered, communication with and attention from their parents was variable.

In the case of health adjustment, it can be seen that there is significant difference in the health adjustment between stutterers and non stutterers at 5% level. The mean value for health adjustment was found to be lower for non stutterers (Mean= 6.18) when compare to the mean value of stutterers (Mean= 7.95). The low score indicates good adjustment. The significance at 5% level indicates that to some extent stutterers are adjusted to their health, but not more than that of the health adjustment of non stutterers. Stutterers quality of life is directly related to their health adjustment. The result of the study supports the study by Craig, Blumgart and Tran (2009), stating that in adults who stutter found that stuttering affects quality of life as adversely as life threatening conditions such as neurotrauma and coronary heart disease. The result also indicates that stutterers may have poor coping styles and it was supported by the finding of

Koedoot (2011). The result of his study indicated that moderate to severe stuttering has a negative impact on overall quality of life.

The means, standard deviations and t value relating to the significance of the difference between the stutterers and non stutterers on social adjustment was found to be very relevant. It can be seen that there is significant difference in the social adjustment between stutterers and non stutterers at 1% level. For non stutterers, the mean value was found to be lower (Mean=12.37) than that of the stutterers (Mean= 19.13). This indicates that non stutterers are more socially adjusted when compared to stutterers. The stutterers may felt greater difficulty to get along with other members in the society and may withdraw from interpersonal communications. The result is supporting the studies of Blood (2001). He examined the communication apprehension and self-perceived communication competence of adolescent stutterers and non stutterers. The results showed significant higher levels of communication apprehension and poorer scores on self-perceived communication competence in adolescents who stutter when compared with adolescents who do not stutter. Sub score test data revealed that adolescents who stutter had significantly greater fears about speaking in group discussions and interpersonal conversations than they had about public speaking and talking during meetings, and also had significantly poorer perceptions about their own communication competence when compared with those who do not stutter.

It can be seen that there is high significant difference in the emotional adjustment between stutterers and non stutterers at 1% level. For stutterers the mean value for emotional adjustment seems to be higher (Mean= 14.73) than that of the mean value of the non stutterers (Mean= 8.05). This indicates that stutterers have less emotional adjustment than non stutterers. The impact of stuttering on a person's emotional state may include fears of being caught stuttering in social situations, self-imposed isolation, anxiety, stress, shame, being a possible target of bullying (especially in children), having to use word substitution and rearrange words in a sentence to hide stuttering, or a feeling of "loss of control" during speech. The results support the findings of the study by Karrass (2006) in which the relations between stutterers emotional reactivity, emotion regulation and stuttering were examined. Findings indicated that when compared to normally fluent peers, the stutterers were significantly more reactive, significantly

less able to regulate their emotions, and had significantly poorer attention regulation, even after controlling for gender, age, and language abilities.

From the table it can be seen that there is high significant difference in the occupational adjustment between stutterers and non stutterers at 1% level. The stutterers were found to have less occupational adjustment (Mean= 12.37) than the non stutterers (Mean= 8.88). This may be due to the physical requirements, for example, becoming filter as a building worker or developing repetitive strain injury through data input or psychological adjustment to the pace of work. It may also be conceptualized as a complex biopsychosocial process of change. The results support the finding of Klein and Hood (2004). They conducted a study to examine the impact that stuttering has on job performance and employability. Results indicated that more than 70% of people who stutter agreed that stuttering decreases one's chances of being hired or promoted. More than 33% of people who stutter believed stuttering interfere with their job performance, and 20% had actually turned down a job or promotion because of their stuttering. The results also support the study by Hurst (1983) which showed that 85% of employers agreed that stuttering decreases a person's employability and opportunities for promotion.

The means, standard deviations and t value relating to the significance of the difference between the stutterers and non stutterers on the total adjustment was seen that there is high significant difference in the total adjustment between stutterers and non stutterers at 1% level. The mean value for stutterers were found to be higher (65.58) than that of the mean value for non stutterers (44.37). From the Table 1, it was found that stutterers and non stutterers score high significant difference in their social adjustment. Stutterers had very low social adjustment when compared to other variables. Next to social adjustment is the emotional adjustment, occupational adjustment and home adjustment. Health adjustment of stutterers shows low level of significance and it indicates that when compared to other variables stutterers are more adjusted in the area of health. The result was supported by the study by Green (1997) which examined the effects of stuttering upon psycho-social adjustment on stutterers who were classified into three groups on the basis of the degree to which they perceived themselves as agent in social interaction with respect to their experiences as persons who stutter. The meaningfulness of their communication, their manner of perceiving and reacting to psycho-social experiences, and their psycho-social

adjustment were assessed. The subjects who did not regard stuttering as a hindrance for attainment of their needs and objectives seemed to adjust well to most life situations. The subjects who regarded stuttering as a major obstacle with respect to attainment of these needs and objectives seemed to adjust ineffectively. The results support the view that stuttering may have devastating psycho-social effects.

## Conclusion

Adjustment is the extent to which a person's personality functions effectively towards the world around us. It can be a harmonious relationship between the person and the environment or it can be the relationship that comes among the organisms, the environment and the personality. In the case of people with fluency disorders adjusting to the environment around them was found to be discomfort. They seem to be less adjusted even in their homes and also in their relationships with their parents and siblings. Similarly they were less adjusted to their health, social situations, emotional states and occupational settings. These people tend to have trouble in handling the social situations and also in the interpersonal communications which is an essential part in any work settings. The finding of the investigation is helpful for psychologist and speech language pathologist who are working in hospitals, rehabilitation services and mental health services to develop greater insight regarding the psychological and social issues related to stutterers. They can also provide a better treatment for them and can also stress on the factors that the stutterers are facing throughout their everyday life.

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