

Understanding the complexity of stuttering experience through a self-identity lens

Harsha Kathard, Mershen Pilay

University of Cape Town, South Africa

This paper explains the complexity of personal experience of stuttering using self-identity as a lens. It draws on a narrative life history study of five male and two female adults with developmental stuttering. Their experiences of stuttering were subjected to a narrative, interpretive analysis. Two primary self-identity trajectories viz. DisOther and Able were identified in relation to their experience of stuttering. The complexity of the stuttering experience was revealed through understanding:

- i. variegated presentations and relationships between self-identity trajectories as Able and DisOther
- ii. the critical catalytic junctures and dynamic nature of self-identity formations over their life-courses
- iii. the influence of social contexts in shaping experience

The clinical relevance of using self-identity as a meaningful unit of analysis in clinical practice is considered.

Introduction

When a person who stutters is asked "What does stuttering mean for you?" he /she does not usually have a simple, neat explanation. Instead he/she has a story to tell about living with stuttering in his/her everyday life. S/he will relate events about what happened over his/her life time and explain how such life experience has shaped the personal meaning of stuttering. Importantly, to explain this experience he/she will tell the story from particular self-identity positions, for example, as a child at school or as a manager interacting with staff.

In the research stories, two robust self-identity formations emerged in relation to stuttering: Self-identity as DisOther and Self-identity as Able. Self-identity as DisOther refers to the understanding that an individual has of him/herself as different and "Other" on the basis of his stuttering (Disorder). This term, appropriated from post-colonial studies denotes a negative meaning. Self-identity as Able refers to the understanding an individual has about him/herself as being Able and does not define him/herself only on the basis of negative meanings commonly associated with stuttering.

Multiple presentation and relationships between self-identity formations

While the relationships between self-identity formations presented here have been separated for conceptual clarity, they were in dynamic states within and across contexts over time. The nature of the self-identity formations are described and supported with excerpts from research stories.

1. Self-identity formations and relationships

Singular self-identity

At varying points in the stories there appeared to be a singular self-identity, for instance during her early years and through adulthood, Kumari retains a dominant self-understanding of herself as DisOther.

Kumari: (female) I stuttered when I was four. I was detached, isolated and lonely. I was fashioned out of fear. Even if I had a small, simple request like leaving a few minutes early from work, I set my self up for failure. I feel (my abusive father's) imposing presence. I am a child again, terrified.

In contrast, other participants' stories revealed a dominant understanding of being Able over periods in their lives.

Hennie (male): The stuttering was never always such a big problem as a child as it is now. They (family) were easier-going than the rest. I really don't recall any talk or them being worried about my speech at that time. Life was very nice. Stuttering was there but I never let it rule my life. I was okay.

Siyanda (male): I am different now. I put my Director's hat on. I am in charge The African Renaissance gives me the power to celebrate who I am. For me, now it is normal to stutter.

While Hennie and Siyanda have dominant experiences of being Able, Hennie's experience unfolded as a child whilst for Siyanda this understanding emerged during adolescence /adulthood. In these instances, if one had a unitary and dominant self-understanding as Able, stuttering, although present, received minimal negative meaning. Stuttering therefore had little salience in shaping self-identity as Able. Instead, self-identity as Able was being constructed on the basis of other positive life experiences. Therefore, although the person stuttered he/she did not necessarily experience communication negatively. By contrast, a unitary self-identity as DisOther, created through complex social/personal processes over time, resulted in a negative self-definition. Stuttering and communication were therefore experienced as significant problems. When the person's self-identity as DisOther emerged, he/she felt disempowered and the story moved in a monological direction. The loss of potentiality was evident in rigid, inflexible closed positioning restricting self-innovation, as in Kumari's story.

Coexisting self-identity formations

The co-existing presentation occurred when both self-identity formations (Able and DisOther) were available in the biography but foregrounded differently across contexts. For example, on the playground one may have a self-identity as Able/Potential, and in the classroom as DisOther.

Gareth in the classroom: I was a different person on the playground compared with the classroom. I never got away with it altogether in the classroom. The stutter was there and growing. I wanted to forget about it and be like everyone else or better than everyone else. But they wouldn't let you forget.

The experience of stuttering unfolded differently across contexts as self-understandings changed across contexts. Depending on the person's self-understanding, the strategies to negotiate stuttering were managed in different ways. It was possible for participants to have understanding of themselves as both Able or DisOther - co-existing across contexts.

Competing self-identity formations

The self-identity formations also competed for dominance within a given context. Here, both formations were simultaneously available in a given context. The self-identity formations, underpinned by a particular set of beliefs and ideologies, competed for dominance within a context. As a consequence of the competing relationship and dialogue between the self-identities, there appeared to be a sense of struggle or conflict.

Hennie: Imagine this. I walk in the door Tall, Blond Macho Strappy, Rugby-playing, Hennie. I am feeling fine. Next to me is the guy on the wheelchair. His problem is obvious. I look normal. I am Ok for now (Feeling Able) I open my mouth to speak and ... NO. The game is not over yet. Not over till I stutter. Then it happens. So, now a new struggle starts. I have to struggle from being a stutterer to get back to a normal.

This competing relationship appeared prominently in the research stories. The dialogue of the selves competing for dominance from their different ideological positions gave the impression of struggle, as evident in Hennie's story. Despite the evident struggle, the situation of competing

selves could be seen as a positive development because it signalled that the self had an alternative position (Able) especially when working against a negative and powerful self-identity (DisOther). When improvisational coactivity occurred, the Self could find opportunities for innovation.

Harmonising

In some research stories there were harmonising relationships between the seemingly oppositional self-identities at particular points in the story.

Siyanda: The African Renaissance gives me the power to celebrate who I am. This includes my black skin, my African nose, and my stutter. I need to restore my pride in being human,

Sagren: I have reached a point where I socialise easily and enjoy being with people. I speak when I have to. I accept stuttering as part of who I am, like my limbs. It is part of me.

Gareth: In later years, the stutter was still there but a lot less frequent and I had my ways of dealing with it. The forces that held it together were no longer there. We were also a good team and we complemented each other. It didn't seem to matter so much that I stuttered.

In parts of the research stories the self-identities appear to "coalesce", suggesting that there was a "harmonising" relationship between them and an "acceptance" of DisOther. Whilst it seemed unlikely that a coalition of apparently different selves was possible, the "coalition of opposites" suggested that dialogical negotiation transcended a simple push-pull relationship. Rather, there seemed to be a "symbiotic relationship of ambivalence" which lived off each other in a dynamic loop. The ambivalence constructively became a useful basis for negotiating different selves.

2. Critical catalytic junctures

The emphasis in this part of the discussion is on temporality and change of self-identity formations over time. When and how are self-identities shaped and changed? The turning points, critical events, critical time periods, and Significant People are critical catalysts which significantly shape self-identities. For example, a classroom event becomes important in shaping one's self-identity as DisOther, highlighting the event and influence of Significant Others at a critical time period which shapes who one becomes.

Thabo (male): I was reading a book in front of the children in class. I was very shy and nervous and as a result I started stuttering suddenly. The children started to laugh. At that moment I wished the ground would just open so I could get under it and die. I was so very hurt that I nearly cried too

Sagren: There was one conference in Drakensberg which I remember like it happened yesterday. I had three pages of a financial report to present. Those were the longest minutes in my life. I stood at the front, nervous and tense, panicked and blocked. I gave up and told my teacher - no my manager, that I couldn't go on. I was so humiliated that we left there. On the way back he said "Why don't you try this Dale Carnegie course?" It will help you. I knew about it but it was far too expensive for me. He insisted and even offered to sponsor me. I joined and that was a turning point in my life.

Similarly, a parent who reinforced and encouraged the child who stutters to pursue a professional career, also became a catalyst shaping the trajectory as Able/Potential. In Sagren's story, a devastating experience became a critical turning point, as support is offered from a concerned colleague. The point emphasised here is that life events and Significant Others contribute to shaping experiences. Everyday life, over time, matters.

However, the events in themselves are not meaningful unless individuals attached personal meaning e.g. if Thabo didn't respond to the classroom event and Sagren to his mother's praise

these would have not had any impact. Participants therefore made crucial choices at these critical catalytic junctures which influenced the formation of their self-identities. The event, its impact, and the crucial choices made, influenced their actions and shaped identities in particular ways.

It was important to attend to patterns of self-identity formations at critical junctures. Some junctures reinforce static positioning whilst others create re-positioning possibilities. In a situation of static positioning e.g. Kumari's account of various critical events served to reinforce and sediment her self-identity as DisOther. Her story over time revealed many critical events which perpetuated a "sad" and continuous story of struggle. By contrast, Sagren's critical experience at the conference became a turning point, forcing a change in his positioning.

3. Social contexts and the shaping of experience

The process of self-identity formation was influenced by personal and social realities. The argument made here is that the complexity of experience is shaped by events unfolding in the social context at a particular time in history. The importance of the immediate contexts of home, work and school in shaping self-identity has been described. Here attention is drawn to the broader sociopolitical landscape in South Africa in which their experiences unfolded.

The research stories overlap with an important socio-political transition in South Africa from apartheid to democracy and during which time there were significant shifts in ideology, policies and practices in all sectors. Does this changing social and political landscape have any bearing on their self-identity and experience of stuttering? It would be naïve to assume that in any society there would be a neat, clean change from old to new ways. In a state of transition, old and new policies, values and ideologies coexist, and it is amid this reality that self identities are shaped.

Siyanda: In the transition from apartheid to democracy in the 1990s in South Africa I learnt to accept who I am and to understand myself differently. The concept of African Renaissance has given me the power to not look down upon myself. If I do my own thing which is different to yours then it does not mean I am uncivilised. We don't have to adopt the culture of another and try to avoid our own so we can be seen as "an educated somebody". The African Renaissance (The term is intended to signal a new African world in which democracy, peace stability, sustainable development, better life for all, non-sexism, non-racism, equality among people) gives me the power to celebrate who I am. This includes my black skin, my African nose, and my stutter

The analysis of the dominant discourse about stuttering in the research stories revealed that there were varying understandings and interpretations of stuttering in daily living contexts. However, the dominant discourse was that stuttering was considered a disorder or a problem at some point despite the variation in cultural and social realities.

Why does stuttering take on negative social-cultural interpretation? Human activity is directed in the interests of creating order. PWS live in this order-seeking world in which chaos and uncertainty are not preferred. When people stutter, they challenge and destabilise the interactional order at the communicative interface, creating disruption and chaos, both internal and external.

The interests in ordering can also be linked with social value systems in a particular context. The medical model and apartheid in South Africa have traditionally relied on order - fixed and single categories of difference e.g. race or disorder within a deficit orientation. For example, stuttering in a medical model and being black within an apartheid system are both deficit classifications - disturbing the (dominant) Order. The scenario gets more complex as the

multiplicities such as race, gender and class combine, creating multiple advantages or disadvantages.

Societies also change over time and in post-apartheid South Africa new ideologies became available. These ideological influences were appropriated in various ways into self-identity as evident in research stories. The transition to democracy in South Africa raised to consciousness a human rights agenda. Within a different discourse, the self-identities of people, particularly those at the margins, had potential to be reinterpreted. For example, what did it mean to be a black person, a person with a disability (stuttering) or a woman within a new political dispensation? Although categories remain i.e. we still talk about women and black people, their meanings have become more fluid and contextual. They have received revised interpretations offering potential for an alternative shaping of the self-identity which did not necessarily rely on a single (deficitting) construction.

Consequently, the response to the "Who am I?" question also changed, suggested that it was possible to both speak with a stutter, a difference, and still be communicative. There was hence a ReOrdering or "new ordering", not a DisOrdering. The discourses such as African Renaissance, democracy, and human rights illuminate how a socio-political consciousness filters into individual lives. The support group activities located within a realm of disability activism also challenged the dominant public stereotypical constructions of PWS and helped to reposition PWS as able and with potential. They did this by borrowing on broader enabling social discourses.

I use a metaphor "Multiple dialogues among selves, society and time" as a summarising discussion device for understanding the complexity of experience of stuttering in lifeworlds over time. The experience unfolds as a "polyphonic discursive" space between individuals, society and local contexts, changing over time. As a consequence, the experience is fluid and in a state of flux. The self-identity trajectories were in ongoing formations and dialogues with each other and were informed by competing beliefs, value systems and actions. The individual, a "heterogenous self", was in dialogue with changing and multiple discourses in society, shaping experience dynamically. The dialogue also extended over time. Societies and selves, past, present, and future, dialogue with each other, providing insights about the complexity of stuttering experience.

IMPLICATIONS

Using the self-identity lens in clinical practice

" By understanding the experience of stuttering through a self-identity lens, the meaning of stuttering and choices and actions can be understood in a subjective way. The value of using self-identity therefore lies in understanding the "person in context" as a basis from which to work. Such theory acknowledges that each life is complex and therefore the interventions cannot be seen as routine prescriptions.

" The description of self-identity formations offered in this study may encourage clinicians to listen to stories with intent to analysing the variegated self-identity formations. The interventions could be influenced by understanding the various formations and relationships between self-identities. For example, the varying opportunities for encouraging the development of self-identity as Able within the individual's experience will assist in creating personally relevant and creative interventions.

" The self-identity lens also illuminates that the shaping of self-identity occurs over time and clinicians should be vigilant about the critical events and life circumstances which have shaped self-identity.

" While the value of understanding and working within a self-identity frame is suggested here, there are inherent dilemmas about the extent of preparedness and competence of

clinicians working within an identity framework. We must question whether we have the theoretical base and skill to work within a self-identity frame.

" The influential role of social context presents a challenge about the focus of interventions. The role of significant others, as well as the values and prejudices in society must be understood to gain insights into the complexity of stuttering experience. The interventions must address social aspects of the stuttering experience as part of comprehensive intervention approach as we are shaped by the societies in which we live.

" It may also be argued that not every one who seeks help will necessarily be a good storyteller or want to share their stories or engage with narrative-based interventions. Therefore, the suitability of a narrative-based methodology both for the clinician and client must be weighed carefully. However, the outcomes of research e.g. understanding different self-identity formations could inform clinical processes which adopt different methodologies to the narrative tradition.

This paper explains the complexity of personal experience of stuttering using self-identity as a lens. It draws on a narrative life history study of five male and two female adults with developmental stuttering. Their experiences of stuttering were subjected to a narrative, interpretive analysis. Two primary self-identity trajectories viz. DisOther and Able were identified in relation to their experience of stuttering. The complexity of the stuttering experience was revealed through understanding:

- i. variegated presentations and relationships between self-identity trajectories as Able and DisOther
- ii. the critical catalytic junctures and dynamic nature of self-identity formations over their life-courses
- iii. the influence of social contexts in shaping experience

The clinical relevance of using self-identity as a meaningful unit of analysis in clinical practice is considered.

Introduction

When a person who stutters is asked "What does stuttering mean for you?" he /she does not usually have a simple, neat explanation. Instead he/she has a story to tell about living with stuttering in his/her everyday life. S/he will relate events about what happened over his/her life time and explain how such life experience has shaped the personal meaning of stuttering. Importantly, to explain this experience he/she will tell the story from particular self-identity positions, for example, as a child at school or as a manager interacting with staff.

In the research stories, two robust self-identity formations emerged in relation to stuttering: Self-identity as DisOther and Self-identity as Able. Self-identity as DisOther refers to the understanding that an individual has of him/herself as different and "Other" on the basis of his stuttering (Disorder). This term, appropriated from post-colonial studies denotes a negative meaning. Self-identity as Able refers to the understanding an individual has about him/herself as being Able and does not define him/herself only on the basis of negative meanings commonly associated with stuttering.

Multiple presentation and relationships between self-identity formations

While the relationships between self-identity formations presented here have been separated for conceptual clarity, they were in dynamic states within and across contexts over time. The nature of the self-identity formations are described and supported with excerpts from research stories.

1. Self-identity formations and relationships

Singular self-identity

At varying points in the stories there appeared to be a singular self-identity, for instance during her early years and through adulthood, Kumari retains a dominant self-understanding of herself as DisOther.

Kumari: (female) I stuttered when I was four. I was detached, isolated and lonely. I was fashioned out of fear. Even if I had a small, simple request like leaving a few minutes early from work, I set my self up for failure. I feel (my abusive father's) imposing presence. I am a child again, terrified.

In contrast, other participants' stories revealed a dominant understanding of being Able over periods in their lives.

Hennie (male): The stuttering was never always such a big problem as a child as it is now. They (family) were easier-going than the rest. I really don't recall any talk or them being worried about my speech at that time. Life was very nice. Stuttering was there but I never let it rule my life. I was okay.

Siyanda (male): I am different now. I put my Director's hat on. I am in charge. The African Renaissance gives me the power to celebrate who I am. For me, now it is normal to stutter.

While Hennie and Siyanda have dominant experiences of being Able, Hennie's experience unfolded as a child whilst for Siyanda this understanding emerged during adolescence/adulthood. In these instances, if one had a unitary and dominant self-understanding as Able, stuttering, although present, received minimal negative meaning. Stuttering therefore had little salience in shaping self-identity as Able. Instead, self-identity as Able was being constructed on the basis of other positive life experiences. Therefore, although the person stuttered he/she did not necessarily experience communication negatively. By contrast, a unitary self-identity as DisOther, created through complex social/personal processes over time, resulted in a negative self-definition. Stuttering and communication were therefore experienced as significant problems. When the person's self-identity as DisOther emerged, he/she felt disempowered and the story moved in a monological direction. The loss of potentiality was evident in rigid, inflexible closed positioning restricting self-innovation, as in Kumari's story.

Coexisting self-identity formations

The co-existing presentation occurred when both self-identity formations (Able and DisOther) were available in the biography but foregrounded differently across contexts. For example, on the playground one may have a self-identity as Able/Potential, and in the classroom as DisOther.

Gareth in the classroom: I was a different person on the playground compared with the classroom. I never got away with it altogether in the classroom. The stutter was there and growing. I wanted to forget about it and be like everyone else or better than everyone else. But they wouldn't let you forget.

The experience of stuttering unfolded differently across contexts as self-understandings changed across contexts. Depending on the person's self-understanding, the strategies to negotiate stuttering were managed in different ways. It was possible for participants to have understanding of themselves as both Able or DisOther - co-existing across contexts.

Competing self-identity formations

The self-identity formations also competed for dominance within a given context. Here, both formations were simultaneously available in a given context. The self-identity formations, underpinned by a particular set of beliefs and ideologies, competed for dominance within a context. As a consequence of the competing relationship and dialogue between the self-identities, there appeared to be a sense of struggle or conflict.

Hennie: Imagine this. I walk in the door Tall, Blond Macho Strappy, Rugby-playing, Hennie. I am feeling fine. Next to me is the guy on the wheelchair. His problem is obvious. I look normal. I am Ok for now (Feeling Able) I open my mouth to speak and ... NO. The game is not over yet. Not over till I stutter. Then it happens. So, now a new struggle starts. I have to struggle from being a stutterer to get back to a normal.

This competing relationship appeared prominently in the research stories. The dialogue of the selves competing for dominance from their different ideological positions gave the impression of struggle, as evident in Hennie's story. Despite the evident struggle, the situation of competing selves could be seen as a positive development because it signalled that the self had an alternative position (Able) especially when working against a negative and powerful self-identity (DisOther). When improvisational coactivity occurred, the Self could find opportunities for innovation.

Harmonising

In some research stories there were harmonising relationships between the seemingly oppositional self-identities at particular points in the story.

Siyanda: The African Renaissance gives me the power to celebrate who I am. This includes my black skin, my African nose, and my stutter. I need to restore my pride in being human,
Sagren: I have reached a point where I socialise easily and enjoy being with people. I speak when I have to. I accept stuttering as part of who I am, like my limbs. It is part of me.

Gareth: In later years, the stutter was still there but a lot less frequent and I had my ways of dealing with it. The forces that held it together were no longer there. We were also a good team and we complemented each other. It didn't seem to matter so much that I stuttered.

In parts of the research stories the self-identities appear to "coalesce", suggesting that there was a "harmonising" relationship between them and an "acceptance" of DisOther. Whilst it seemed unlikely that a coalition of apparently different selves was possible, the "coalition of opposites" suggested that dialogical negotiation transcended a simple push-pull relationship. Rather, there seemed to be a "symbiotic relationship of ambivalence" which lived off each other in a dynamic loop. The ambivalence constructively became a useful basis for negotiating different selves.

2. Critical catalytic junctures

The emphasis in this part of the discussion is on temporality and change of self-identity formations over time. When and how are self-identities shaped and changed? The turning points, critical events, critical time periods, and Significant People are critical catalysts which significantly shape self-identities. For example, a classroom event becomes important in shaping one's self-identity as DisOther, highlighting the event and influence of Significant Others at a critical time period which shapes who one becomes.

Thabo (male): I was reading a book in front of the children in class. I was very shy and nervous and as a result I started stuttering suddenly. The children started to laugh. At that moment I wished the ground would just open so I could get under it and die. I was so very hurt that I nearly cried too

Sagren: There was one conference in Drakensberg which I remember like it happened yesterday. I had three pages of a financial report to present. Those were the longest minutes in my life. I stood at the front, nervous and tense, panicked and blocked. I gave up and told my teacher - no my manager, that I couldn't go on. I was so humiliated that we left there. On the way back he said "Why don't you try this Dale Carnegie course?" It will help you. I knew about

it but it was far too expensive for me. He insisted and even offered to sponsor me. I joined and that was a turning point in my life.

Similarly, a parent who reinforced and encouraged the child who stutters to pursue a professional career, also became a catalyst shaping the trajectory as Able/Potential. In Sagren's story, a devastating experience became a critical turning point, as support is offered from a concerned colleague. The point emphasised here is that life events and Significant Others contribute to shaping experiences. Everyday life, over time, matters.

However, the events in themselves are not meaningful unless individuals attached personal meaning e.g. if Thabo didn't respond to the classroom event and Sagren to his mother's praise these would have not had any impact. Participants therefore made crucial choices at these critical catalytic junctures which influenced the formation of their self-identities. The event, its impact, and the crucial choices made, influenced their actions and shaped identities in particular ways.

It was important to attend to patterns of self-identity formations at critical junctures. Some junctures reinforce static positioning whilst others create re-positioning possibilities. In a situation of static positioning e.g. Kumari's account of various critical events served to reinforce and sediment her self-identity as DisOther. Her story over time revealed many critical events which perpetuated a "sad" and continuous story of struggle. By contrast, Sagren's critical experience at the conference became a turning point, forcing a change in his positioning.

3. Social contexts and the shaping of experience

The process of self-identity formation was influenced by personal and social realities. The argument made here is that the complexity of experience is shaped by events unfolding in the social context at a particular time in history. The importance of the immediate contexts of home, work and school in shaping self-identity has been described. Here attention is drawn to the broader sociopolitical landscape in South Africa in which their experiences unfolded.

The research stories overlap with an important socio-political transition in South Africa from apartheid to democracy and during which time there were significant shifts in ideology, policies and practices in all sectors. Does this changing social and political landscape have any bearing on their self-identity and experience of stuttering? It would be naïve to assume that in any society there would be a neat, clean change from old to new ways. In a state of transition, old and new policies, values and ideologies coexist, and it is amid this reality that self identities are shaped.

Siyanda: In the transition from apartheid to democracy in the 1990s in South Africa I learnt to accept who I am and to understand myself differently. The concept of African Renaissance has given me the power to not look down upon myself. If I do my own thing which is different to yours then it does not mean I am uncivilised. We don't have to adopt the culture of another and try to avoid our own so we can be seen as "an educated somebody". The African Renaissance (The term is intended to signal a new African world in which democracy, peace stability, sustainable development, better life for all, non-sexism, non-racism, equality among people) gives me the power to celebrate who I am. This includes my black skin, my African nose, and my stutter

The analysis of the dominant discourse about stuttering in the research stories revealed that there were varying understandings and interpretations of stuttering in daily living contexts. However, the dominant discourse was that stuttering was considered a disorder or a problem at some point despite the variation in cultural and social realities.

Why does stuttering take on negative social-cultural interpretation? Human activity is directed in the interests of creating order. PWS live in this order-seeking world in which chaos and uncertainty are not preferred. When people stutter, they challenge and destabilise the interactional order at the communicative interface, creating disruption and chaos, both internal and external.

The interests in ordering can also be linked with social value systems in a particular context. The medical model and apartheid in South Africa have traditionally relied on order - fixed and single categories of difference e.g. race or disorder within a deficit orientation. For example, stuttering in a medical model and being black within an apartheid system are both deficit classifications - disturbing the (dominant) Order. The scenario gets more complex as the multiplicities such as race, gender and class combine, creating multiple advantages or disadvantages.

Societies also change over time and in post-apartheid South Africa new ideologies became available. These ideological influences were appropriated in various ways into self-identity as evident in research stories. The transition to democracy in South Africa raised to consciousness a human rights agenda. Within a different discourse, the self-identities of people, particularly those at the margins, had potential to be reinterpreted. For example, what did it mean to be a black person, a person with a disability (stuttering) or a woman within a new political dispensation? Although categories remain i.e. we still talk about women and black people, their meanings have become more fluid and contextual. They have received revised interpretations offering potential for an alternative shaping of the self-identity which did not necessarily rely on a single (deficiting) construction.

Consequently, the response to the "Who am I?" question also changed, suggested that it was possible to both speak with a stutter, a difference, and still be communicative. There was hence a ReOrdering or "new ordering", not a DisOrdering. The discourses such as African Renaissance, democracy, and human rights illuminate how a socio-political consciousness filters into individual lives. The support group activities located within a realm of disability activism also challenged the dominant public stereotypical constructions of PWS and helped to reposition PWS as able and with potential. They did this by borrowing on broader enabling social discourses.

I use a metaphor "Multiple dialogues among selves, society and time" as a summarising discussion device for understanding the complexity of experience of stuttering in lifeworlds over time. The experience unfolds as a "polyphonic discursive" space between individuals, society and local contexts, changing over time. As a consequence, the experience is fluid and in a state of flux. The self-identity trajectories were in ongoing formations and dialogues with each other and were informed by competing beliefs, value systems and actions. The individual, a "heterogenous self", was in dialogue with changing and multiple discourses in society, shaping experience dynamically. The dialogue also extended over time. Societies and selves, past, present, and future, dialogue with each other, providing insights about the complexity of stuttering experience.

IMPLICATIONS

Using the self-identity lens in clinical practice

" By understanding the experience of stuttering through a self-identity lens, the meaning of stuttering and choices and actions can be understood in a subjective way. The value of using self-identity therefore lies in understanding the "person in context" as a basis from which to work. Such theory acknowledges that each life is complex and therefore the interventions cannot be seen as routine prescriptions.

" The description of self-identity formations offered in this study may encourage clinicians to listen to stories with intent to analysing the variegated self-identity formations. The interventions could be influenced by understanding the various formations and relationships between self-identities. For example, the varying opportunities for encouraging the development of self-identity as Able within the individual's experience will assist in creating personally relevant and creative interventions.

" The self-identity lens also illuminates that the shaping of self-identity occurs over time and clinicians should be vigilant about the critical events and life circumstances which have shaped self-identity.

" While the value of understanding and working within a self-identity frame is suggested here, there are inherent dilemmas about the extent of preparedness and competence of clinicians working within an identity framework. We must question whether we have the theoretical base and skill to work within a self-identity frame.

" The influential role of social context presents a challenge about the focus of interventions. The role of significant others, as well as the values and prejudices in society must be understood to gain insights into the complexity of stuttering experience. The interventions must address social aspects of the stuttering experience as part of comprehensive intervention approach as we are shaped by the societies in which we live.

" It may also be argued that not every one who seeks help will necessarily be a good storyteller or want to share their stories or engage with narrative-based interventions. Therefore, the suitability of a narrative-based methodology both for the clinician and client must be weighed carefully. However, the outcomes of research e.g. understanding different self-identity formations could inform clinical processes which adopt different methodologies to the narrative tradition.