

## **Human and social services in East European countries for persons who stutter and education of speech-language pathologists**

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### **Introduction**

Services for persons who stutter (PWS) are often perceived to be insufficient or limited in East European countries. The reasons are assumed to be the lack of nation-wide networks and standards and of sufficient exchange with international organizations and professionals, as well as publications in national languages or Russian with low international visibility. Therefore, the Fluency Committee of the International Association of Logopedics and Phoniatrics (IALP) made a survey in Eastern Europe to assess the therapy status of fluency disorders, service opportunities, and education of speech-language pathologists. This questionnaire-based was initiated in 2004, and its results may help to improve therapy standards and service opportunities for PWS in these countries.

### **Objectives**

The aim of this study is to describe the situation of human services for PWS and of educational and therapy standards of professionals in the developing East European countries.

### **Method**

Questionnaires were sent out by postal service and e-mail to our networks within fluency therapy and education of therapists.

### **Results**

Twenty-seven of the 60 contacted persons responded, namely from Bulgaria (11), Croatia (2), Czech Republic (2), Estonia (4), Lithuania (1), Poland (2) Russia (2), Slovakia (1), and Slovenia (2). Generally, stuttering therapy for children is mostly available in the educational systems, and for adults it is best organized in the health services. Some countries do not have therapy available for adults. The development in therapy approaches seems to be appropriate, but some older approaches are still used. Efficacy tools are not developed. Educations of logopedists are organized in all countries up to graduate level, and some countries also have a doctoral program. Only few countries have a formal specialization in stuttering therapy. Lack of resources, awareness and legitimacy are general problems.

#### *Details for the Participating Countries*

Some detailed responses from the informants are grouped into the following categories: Institutions which provide information and non-therapeutic support for PWS (SUPP), media and kind of information provided (INFO), providers of diagnostics (DIAG), therapists and cooperating professionals (THERAPISTS), institutions and forms of treatment (TREATM), therapy approaches (APPR), goals of therapy (GOALS), form and financing of therapy (FINANCE), early detection and prevention (PREVENT), general education of professionals and specialization in stuttering (EDU), needs for improving the situation of PWS (NEEDS), and problems which hinder better care (PROBL).

*Bulgaria:* SUPP: Public educational and social agencies; Stuttering Research Center (<http://logopedics.swu.bg>); Bulgarian Stuttering Association ([www.zaekvane-bg.com](http://www.zaekvane-bg.com)); Bulgarian Association of Logopedists; general practitioners. INFO: Broadcasts; brochures; websites; client and parent counseling; official reports and statistical data. DIAG: Logopedists, laryngologists;

psychiatrists; pediatricians; clinical psychologists; neurologists; general practitioners.

**THERAPISTS:** Logopedists. **APPR:** Parent guidance; counseling; family intervention; fluency shaping; Doctor Fluency; Gradual Increase in Length and Complexity of Utterance (GILCU); Soviet complex method, relaxation; contingent management linguistic hierarchy; desensitization; psychotherapy; art therapy; kinesiotherapy; occasionally stuttering modification and cognitive therapy. **GOALS:** Mainly fluent speech. **FINANCE:** Free therapy for preschool children in kindergartens and in two special logopedic schools (Sofia and Varna); at school-age free therapy partly available; at secondary school € 5 charge per session; therapy for adolescents and adults is not covered and seldom available. **PREVENT:** Ongoing research projects. **EDU:** University bachelor, master, and doctoral programs; clinical training of 160 hours (bachelor) and 200 hours (master); only few professionals specialized in fluency disorders; workshops by Stuttering Research Center according to international programs. **NEEDS:** Inclusion of logopedics into health sciences; coverage of stuttering therapy and counseling by health insurance; continuing education of logopedists; evidence-based practice; formalized specialization and certification in stuttering therapy; clinics for stuttering therapy; support for employment of PWS; self-help groups; better professional support and guidance for PWS. **PROBL:** Social problems for PWS; influence of Russian therapy tradition in professional practice; at some universities speech therapy is part of a special education curriculum but without explicit training in stuttering therapy; no health insurance coverage of stuttering therapy for adult PWS; no logopedists in all kindergartens and schools; no teamwork of therapists; traditional stereotypes in public opinion and policy.

**Croatia:** **SUPP:** Croatian Association for People who Stutter; logopedists in kindergartens, schools, hospitals, and private practices; pediatricians; general practitioners; self-help groups. **INFO:** Media; websites; telephone support and counseling; brochures; lists with therapists, institutions, and information about kindergartens, schools, and hospitals. **DIAG:** Logopedists; clinical psychologists; neurologists, and occasionally psychiatrists may be involved. **THERAPISTS:** Logopedists; psychiatrists may sometimes be involved. **APPR:** Fluency shaping; self-confidence; non-avoidance; identification; desensitization. **GOALS:** Predominantly fluent speech. **FINANCE:** Free therapy in public institutions; in private practice partial coverage by private health insurance. **PREVENT:** Early detection in kindergartens and schools. **EDU:** University master degree; no specialized training in stuttering. **NEEDS:** More educational activities, counseling, and support. **PROBL:** Too few logopedists and specialists in stuttering; long waiting lists; little awareness about stuttering among parents and teachers.

**Czech Republic:** **SUPP:** Association of Clinical Logopedists; Czech Logopedic Society; Institute of Postgraduate Study in Health System; <http://balbuticka.komunita.cz>; [www.volny.cz/balbus](http://www.volny.cz/balbus). **DIAG:** Logopedists; laryngologists; pediatricians; clinical psychologists; neurologists; occasionally psychiatrists. **THERAPISTS:** Logopedists. **TREATM:** Out-patient therapy; intensive in-patient therapy. **APPR:** No information about specific behavioral therapy approaches; for primary school children and adolescents bronchodilatation with  $\beta_2$ -sympatomimetics. **GOALS:** Facilitating fluent speech. **FINANCE:** Full coverage by the health system. **PREVENT:** Early detection by pediatric screening. **EDU:** University master and postgraduate programs, certification by Ministry of Health and Association of Clinical Logopedists; no particular specialization in stuttering therapy. **PROBL:** Non reported.

**Estonia:** **SUPP:** Estonian Logopedic Association; Estonian Stuttering Association ([www.kogelus.ee](http://www.kogelus.ee)); logopedists; family physicians; self-help groups. **INFO:** Counseling by specialists; brochures; websites; International Stuttering Awareness Day activities; media information. **DIAG:** Logopedists; also referrals by other specialists. **THERAPISTS:** Logopedists; also psychologists and neurologists. **TREATM:** Therapy in kindergartens, schools, special schools, and in health clinics for all ages; for adults logopedic health clinics in Tallinn and Tartu, and in

private practices; intensive therapy available. APPR: : Indirect approaches, parent counseling, and physiotherapy for young children; non-avoidance for older children and adolescents; non avoidance, fluency enhancing approaches, psychotherapy, family therapy, and self-help groups for adults. GOALS: For young children fluent speech; for older children fluent stuttering, less speech anxiety, self confidence, and improvement of communication. FINANCE: Therapy in kindergartens, schools, and health clinics free of charge; Estonian Stuttering Association sponsors summer courses and group therapies with funds from the Gambling Tax Foundation. PREVENT: Screening programs in kindergartens. EDU: University master degree, certified by Estonian Logopedic Association; clinical training of 260 hours; no particular specialization in stuttering therapy. NEEDS: Better coaching and supervision of logopedists; more clinical institutions; more therapy options for adults. PROBL: Too few logopedists for stuttering therapy; often insufficient knowledge among logopedists about stuttering; lack of information about stuttering, therapy, and the Estonian Stuttering Association.

*Lithuania:* SUPP: Family physicians; pediatricians; psychologists; psychological-pedagogical services; logopedists; Lithuanian Stuttering Problem Club (MPK). INFO: Rather sparse information about stuttering therapy for adolescents and adults; MPK offers booklets, articles, radio programs, and a website ([www.mikciojimas.tai.lt](http://www.mikciojimas.tai.lt)). DIAG: Logopedists, sometimes in cooperation with clinical psychologists, ENTs, or pediatricians. THERAPISTS: Logopedists, sometimes in cooperation with clinical psychologists and ENTs. TREATM: Therapy in kindergartens, schools, and pediatric clinics. APPR: Fluency shaping, sometimes combined with stuttering modification; self-confidence; improvement of communication; behavior modification; non-avoidance; identification; desensitization. GOALS: Fluent speech. FINANCE: Therapy in kindergartens and schools free of charge; in health clinics maximum coverage of 20 hours/year. PREVENT: Logopedic screenings at age 3 and before school enrollment in the pediatric clinic, and in first grade by the school logopedist; early intervention. EDU: University bachelor, master and doctoral programs; 250 hours of clinical training for bachelor education, including 14 hours training in stuttering; no formalized special training, but seminars and workshops about stuttering might be given; logopedic certification for general practice has to be renewed by a governmental agency every 5 years. NEEDS: Better knowledge about stuttering in the general public and among specialists; research and treatment centers. PROBL: Too little focus and interest for stuttering among logopedists; questionable therapy effectiveness.

*Poland:* SUPP: Polish Association for People who Stutter; Polish Logopedic Association; Polish Union of Logopedists; logopedists, also in kindergartens and primary schools; psychological-pedagogical centers; health services. INFO: Information about services, approaches, and therapists; workshops; magazine (Biuletyn Logopedyczny); websites; some associations and the magazine provide also vocational and labor market advice; at the International Stuttering Awareness Day conferences for logopedists and PWS, articles in newspapers and magazines, radio and TV features. DIAG: Logopedists; other specialists may be involved. THERAPISTS: Basic stuttering therapy by logopedists, but few specialists in stuttering; clinical psychologists, psychotherapists, special education teachers, neurologists, and rehabilitation specialists may be involved. TREATM: Logopedists in kindergartens, primary schools, psychological-pedagogical centers, health services, and private practices; intensive therapy only in private practices. APPR: Family therapy by logopedists and psychologists; for preschool children: Fluent speech play therapy and logorhythmic exercises; for primary school children: Family therapy; fluent speech; non-avoidance; improvement of communication and behavior modification; for secondary school children: Additionally self-confidence, less speech anxiety, psychotherapy desensitization, and complex therapy; for adolescents and adults: Additionally speak open about stuttering and Complex Psycho-physiological Therapy Program (Checiek, 2001). FINANCE: State provided therapy free of charge;

therapy in private practice is only reimbursed if contracted with the National Health Fund. EDU: Two years university postgraduation; 600 hours clinical training in logopedics and 350 hours in neurologopedics; 35 to 60 hours in stuttering specialization. University diploma implies certification, but specialization is not certified. NEEDS: Intensive postgraduate workshops and specialization in stuttering therapy; intensive therapy programs and stuttering therapy centers. PROBL: Deficits in stuttering specialization; little or no social support for PWS; no public funds for intensive therapy.

*Russia:* SUPP: Institute for Special Needs Education; pediatric clinics; logopedic kindergartens; logopedic departments in teacher colleges; logopedic centers; logopedists in kindergartens; school psychologists; logopedists and psychologists in polyclinics; advertising agencies; [www.stuttering.ru](http://www.stuttering.ru); [www.zaikanie.ru](http://www.zaikanie.ru); [www.logoped.ru](http://www.logoped.ru); websites of clinics. INFO: Advertisement of clinics and therapy centers in media; counseling. DIAG: Teams of logopedists, in cooperation with various specialists in state clinics. THERAPISTS: Teams of logopedists, psychologists, neuropathologists, and other specialists in state speech clinics and special kindergartens. TREATM: State speech clinics; childrens' clinics; special kindergartens; schools. APPR: Medication; psychotherapy; logopedic therapy; communicative rehabilitation. GOALS: Fluent speech; non-avoidance; self-confidence. FINANCE: Therapy free of charge for children; no reimbursement for adults. PREVENT: No screening, early detection, or primary prevention programs. EDU: University master, Ph.D. from pedagogical universities. Also special courses in speech therapy for school teachers as a 2 to 10 months supplement to the teacher's diploma. One-hundred hours of clinical training; certification as logopedists by governmental agency; a license is required for private practice; specialization in stuttering is possible within the university curriculum or by postgraduate studies at a medical academy; a clinical certification for stuttering therapy is achieved by the graduation diploma in stuttering. NEEDS: Educational and clinical institutions, counseling, and support. PROBL: Lacking availability of relative effective therapies; PWS are considered as handicapped, with lack of governmental sensitization for needs of people with disabilities.

*Slovakia:* SUPP: Logopedic Association; Center for Dysfluencies at Slovak Medical University; Ministry of Education; Ministry of Health; logopedic clinics and schools. INFO: Booklets; brochures; flyers; books; websites; [http://dysfluencie.szm.sk/Index\\_frames.htm](http://dysfluencie.szm.sk/Index_frames.htm). DIAG: Logopedists; phoniaticians; psychiatrists; pediatricians; clinical psychologists. THERAPISTS: Logopedists; psychiatrists; clinical psychologists when needed in integrated therapy. TREATM: Individual and group therapies. APPR: Phonographorhythmic method (slow, rhythmical speaking with pauses). GOALS: Fluent speech; controlled fluency; acceptable fluency. FINANCE: Short-term therapy free of charge. PREVENT: Screening program, early detection, and prevention according to Irwin (1988). EDU: University master; 80 hours of clinical training; certification by the Department of Health; specialization in stuttering: 200 hours postgraduation at the Center for Dysfluencies at Slovak Medical University. NEEDS: Counseling. PROBL: Insurance does not cover long term therapy.

*Slovenia:* SUPP: Association Vilko Mazi; Institute for Deaf and Hard of Hearing People; centers for hearing and speech; health centers; kindergartens; primary schools; school psychologists. INFO: TV programs, meetings, and written information for the public, parents, and professionals. DIAG: Logopedists; clinical psychologists. THERAPISTS: Logopedists; clinical psychologists. APPR: For children: indirect approaches with parent counseling; for adults: therapy approaches aimed at achieving fluency; therapy according to Brajovič and Valmond. GOALS: Fluent speech. FINANCE: Therapy free of charge if referral by family doctor. PREVENT: General medical screening at the age of 3 years, early detection, and primary prevention for infants and preschool children. EDU: University bachelor as clinical or hospital logopedist; regulated and certified by the university or the Ministry of Health, [www.uips.sk/download/ekviv/Slovenia.doc](http://www.uips.sk/download/ekviv/Slovenia.doc); no special training in stuttering.

NEEDS: Better organization of training for logopedists; more information for teachers, parents, and the public; better cooperation between parents, teachers, and logopedists. PROBL: Lack of therapists and financial resources for therapy, research, and support for PWS.

**Conclusion**

Appropriate education of speech-language pathologists and fluency therapies is available, but lack of resources for implementation in general is lacking. If social services are available they are not widespread and only mediated through NGO.

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