



Cooper Personalized Fluency Control Therapy

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- Revised edition 1985
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Cooper Personalized Fluency Control Therapy

- Treatment approach for fluency disorders in both children and adults
- Therapy process which leads to modification of fluency-impeding attitudes and feelings, as well as disfluent behaviors



Development of Theoretical Rationale

- Early 1960's, most research regarded meaningful interpersonal relationships between client and clinician to be a significant factor in therapy success
- Late 1960's, authors began questioning efficacy of behavior modification therapy programs that did not include identifying and modifying attitudes and feelings of stuttering



Development of Theoretical Rationale, Cont.

- Early 1970's, authors addressed the importance of including behavior and attitude therapy into the process of stuttering therapy
- Authors' current belief: therapy program must include identification and modification of client's fluency-impeding attitudes and behaviors



Current Therapy Approach

- The authors' purpose is to continue developing principles and procedures which assist adults and children in fluency therapy.
- Also hope to provide assistance to clinicians in the provision of fluency treatment



STAR Therapy Process

■ **Structuring Stage:**

1. Identify client's feelings, behaviors, and attitudes
2. Introduce the client to the goals and process of therapy

■ **Adjusting Stage:**

1. Assist client in adopting characteristics that enhance fluency
2. Assist client in self-reinforcement
3. Assist client to develop fluency initiating gestures (FIGs)

■ **Targeting Stage:**

1. Eliminate distractions
2. Establish client-clinician relationship
3. Target client's feelings, behaviors, and attitudes

■ **Regulating Stage:**

1. Assist client to develop feeling of fluency control
2. Regulate generalizations of FIGs to alternate environments



Ideal Treatment Presentation

- Clinician must acknowledge the client's capabilities prior to determining treatment presentation
- The authors' believe that for most clients, a long-term non-intensive program (such as a public school setting) is ideal
- This type of treatment would occur 1-2 sessions per week, lasting 1-2 years.



Success

- Definition includes changes in client's attitudes, and feelings, as well as changes in fluency.
- Determine success by using assessment instruments that measure client's attitudes and behaviors



Generalization and Maintenance

- Targeted within the final stage of therapy
- Clinician must acknowledge the individual client's needs and their ability to acquire the skills of generalization
- Client is dismissed when they feel they have control and are able to generalize treatment to all environments
- Maintenance is addressed by teaching the client to become a self-reinforcer



Success Rate of Children

- Four out of five abnormally disfluent children can achieve normal fluency from receiving the STAR treatment approach
- The attainment of normal fluency by a child is greater than that of an adult



Success Rate of Adults

- The authors estimate the chance for complete recovery from stuttering in adults to be 1 in 5
- Approximately 60% of adults treated and dismissed from the STAR approach experience prolonged periods of fluency
- Of that 60%, 20% continued to experience normal fluency
- Of that 60%, 40% continued to experience stuttering, but believed they were controlled stutterers
- Approximately 40% of adults treated and dismissed from the STAR approach perceive themselves as stutterers



Strengths of Program

- Comprehensive
- Beneficial for adults and children
- Therapy can be integrated into classroom or home environments
- Focuses on feelings, beliefs and behaviors as well as fluency
- Applicable to individual and group therapy
- Includes family counseling in therapy
- Therapy is individualized to achieve optimal results for the client



Weaknesses of Program

- Assessment instrumentation used to determine client's changes in behavior may not be reliable
- Too time consuming
- Success is dependent on the involvement of many people.



Recommendations

- We would recommend this approach to clinicians working in a public school because it includes information on IEP goals and suggestions for classroom teachers
- This approach can also be beneficial for establishing an internal locus of control in clients of any age
- Clinicians working with young children may value this approach because it includes treatment strategies for parent-focused management