"Easy Does It" for Fluency Preschool/Primary Roseman & Johnson (1998)

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Program Focus

Combined approach

- Main focus on Fluency Shaping and emotions (desensitization)
- Do not directly modify stuttering
- Designed for borderline/beginning children who stutter

Ages 2-6

 Not a rigid framework
– room for individualization

Underlying Theories

• Motor:

 Using slow easy speech decreases motoric demands

• Psychosocial:

 Addresses child temperament, interaction with the family and clinician, desensitization, and the influence of a positive attitude on the child's ability to adapt

Linguistic

Vocabulary arranged in ascending complexity

Frequency of Intervention

- Flexible to child's needs
- 1-2 hours a week in intervention setting
- Home activities dependent of level of parental involvement

Slow, Easy Speech

- Slowing the rate of speech
- Using relaxed speech
 - Light contacts (consonants)
 - Easy onsets (vowels)
- "Smooth," forward flowing

Basic Principles

Modeling:

Indirect for preschooler, Direct for early elementary

• Hierarchies:

- Words, phrases, sentences
- Increase grammatical complexity

Positive attitudes

- "I had fun playing, even if I didn't win."
- "Everyone makes mistakes!"

Family involvement

• Observe, participate, home activities

Language enrichment

- Provides language stimulation through tasks
- Child responsibility: Early elementary only
 - Self Evaluation, identifying speech

Phase One

Establishment of easy speech

- "I can be fluent"
 - Singing
 - Nursery rhymes
 - Talking in unison

Phase Two

Establishing easy speech

- Produce words, phrases, and sentences using easy speech in structured modeling tasks
 - Imitate words, phrases, sentences: Clinician "Say what I say: 'Fish.'" Child "Fish."
 - Carrier sentences:
 - "I pick a card, I got a _____."
 - Ask and answer questions: "Who needs it?" "I need it."
 - Formulate:

Clinician "Tell me about a fish."

Phase Three

Desensitizing to Fluency Disruptors

- Presence of:
 - People (parents, siblings, peers)
 - Verbal and nonverbal noise (talking, tapping pen, music)
 - Movement (while building with blocks or coloring)
 - Interruptions (sudden noises)

- Variety of locations (door open, new room, hallway)
- Contradictions (clinician disagrees with child)
- Time pressures ("We have to hurry up.")
- Emotional topics ("It makes me mad when...")
- Competition ("Oh, I'm getting close to winning!")
- Combined

Phase Four

• Transferring Fluency

- Slow easy speech while:
 - Informing (Sharing information)
 - Controlling (Ask for help)
 - Ritualizing (Familiar routines)
 - Expressing feelings
 - Imagining (Taking on another role. e.g. teacher, waiter)

Phase Five

Maintaining fluency

 Use easy speech as direct therapy contacts are reduced (not as much practice)

Pros Vs Cons

Pros

- Program can be individualized for child
- Child can move through the program at their own rate
- Combined approach
 - Flexible: allows room for both fluency shaping and stuttering modification techniques
 - "Best of both worlds"
- Materials are all included and can be photocopied/cut out
- Includes a CDrom
- Easy to follow (user friendly)
- Evidence based practice
 - Clinical expertise of the author
 - Successful response of the client

Pros Vs Cons

Cons

- Black and white materials (need to be colored)
- Manual is useful in providing materials, but provides little direction or explanation for the clinician
- Evidence based practice:
 - Has not been researched in the literature

Recommendations

- We recommend using "Easy Does It" Preschool/Primary for children ages 2-6
- The individual needs of the child should be taken into account.