## THE CONQUEST OF STUTTERING C. VAN RIPER

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For centuries the treatment of stuttering has wrecked itself on the rock of symptom avoidance. The various therapeutic methods used, relaxation, rate control, unusual modes of speech, have been focussed on the same goal which has betrayed every stutterer's own attempts to heal himself: the attempt to speak without stuttering. Such an effort carries within itself, even when successful, the seeds of its own eventual failure. For avoidance breeds fear. When we flee from fear, we magnify it. The situation and word fears so long conditioned in the adult stutterer can hardly be erased by such measures. According to modern learning theory, anxiety conditioned responses hever extinguish completely. One pairing of the shock with the conditioned stimuli restores them to almost full strength. And so we find the discouraging frequency of relapses in stuttering therapy. Moreover, much of the older methods did little more than to repress the symptoms. The powerful suggestion employed by most therapists can indeed produce such repression temporarily. But stuttering, like murder, will out! We may be able to hold down the coiled spring of the disorder for a time, but so long as it is intact and as strong as ever, it will eventually escape from our grasp. We are but mortals with no ability to sustain a repression for long. No matter how confident we become, existence will sooner or later cause morale to ebb. No

environment, however favourable, will be without its moments of trauma. To build fluency upon an attitude alone is to use flux instead of mortar for the foundation. And so at these inescapable moments of ego weekness, the fears invade our minds again, and the stuttering returns to haunt our lives.

Is there no way to exorcise this evil ghost whose strength seems almost of the supernatural? The psychoanalysts have tried and most of them confess failure since speech, their healing tool, is itself affected. The myriad devices, methods and tricks which have been used upon stutterers since the dawn of history give us little hope of surcease from that direction. Witchcraft and surgery, vocal training and hypnosis, in none of these have we found consistent effectiveness. Our inability to cope with the severe stutterer after all these years still reflects discredit upon our profession.

Perhaps we have been working in the wrong direction. The stutterer does not need to be taught how to taik normally. He already has that skill, as much of his speech attests. Suppose, instead of trying to keep him from stuttering with all of its attendant evils, we try to train him to modify his symptoms in the direction of fluency. The immense variety of stuttering symptoms suggests that among them there might be a few types which society would not punish. Among them there should be certain forms which would not frustrate communication and which would be tolerable both to the stutterer and his listener. author of this paper, once a severe stutterer, operating upon these principles, has learned to stutter so fluently, so briefly and easily that neither he nor his auditors react to it. He owes his basic concept to an old man, 82, whom he met long ago and who possessed a host of tiny blockings so small as to be almost unnotice-Queried as to whether or not he had able. had always blocked in that fashion, the cld man said, "Oh, no. Until ten years ago or so, I stuttered very badly, jerked and lought myself, struggled and contorted my mouth. But I'm too old and tired now to work that hard. So I stutter this way.'

The development of stuttering makes it clear that most of the abnormality of adult stuttering is largely that of learned avoidance reactions conditioned to phonetic or semantic cues or of struggle response conditioned to tremors in the articulatory, phonatory or respiratory structures. One stutterer learns one set of symptoms while another becomes the victim of a different set of learned responses. These are constantly being reinforced in three ways: by anxiety reduction, by repression, and by escape from punishment. The stutterer expects a certain amount of abnormality; the occurrence of its satisfies the fear, and so the word is uttered only when the anxiety has fed upon enough abnormality to satiate its hunger. Secondly, the stutterer often detaches himself psychologically, during the moment of stutter-ing. He almost "blacks out." He surrenders all responsibility for his behaviour. He gives up control. As soon as the word has been uttered he convulsively hurries on to the rest of his communication. There is much repression here. Thirdly, the struggle and avoidance are themselves highly punishing and unpleasant. The utterance of the word, therefore, is an escape from punishment. Therefore those struggle reactions occurring just prior to the escape are strongly reinforced. The tremors themselves are punishing because of their trustration. They convince the stutterer of his inability to move his recalcitrant tongue or mouth. Vibrating as they do at very fast speeds and maintained by tension, they provoke the stutterer to begin the random in-

terruptor struggle which creates so many bizarre symptoms. Unfortunately, the more one struggles, the greater the tension grows and the faster run the tremors. Occasional successes in jerking out of these tremors by some cut of phase movement merely lixates the interruptor device used. The case finds himself confronted by three alternatives, all evil; to stop and pastpone, to let the block run on until the fear is satisfied and the tension and tremor die out, or to struggle blindly in the hope that by chance he may be able to jerk himself out of the tremor and proceed. There is also a fourth alternative : voluntarily to slow down and, by decreasing the amplitude, to dampen out the tremor, but the stutterer seldom discovers this by himself.

During therapy, we encourage the stutterer to stutter openly but experimentally. We stress the need for varying the stereotyped reactions, for modifying them in the direction of normal utterance. We reward all modifications in this direction and fail to reward all those which increase the abnormality. We teach our cases to cease reinfercing their disorder in the way mentioned above. We train them to wrestle with their blockings, to learn to pull out of their tremors voluntarily, to insert prior to the emergence of the word some voluntary control. We get them to saily forth into the situations of real life hunting out their fears and then mcdifying the stuttering which they precipi-tate. We help them to maintain close contact with their stuttering rather than remain detached from it. We facilitate their realitytesting so that their paranoia will not augment their true social penalties.

In short we teach them to live with their stuttering easily so that instead of a curse it becomes at worst a minor nuisance. In essence, what we do is to teach them to stutter fluently. When they can, the fears subside and so do the blockings. Hidden in all of this is a potent psychotherapy leading to the understanding and acceptance of self and to self mastery. There are undoubtedly many possible routes up the formidable mountain of stuttering. Certain of these paths many therapists and stutterers have climbed, only to be confronted by failure. Here is another, poorly charted as yet, but one of great promise. We invite you to join our expedition.

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