

Straight Talk on Electronic Devices: SpeechEasy & Fluency Master

Background:

The makers of the SpeechEasy (SE) have enjoyed a recent splash of free publicity by appearing on Good Morning America, Oprah, and write-ups in some magazines. The SE's most immediate predecessor, the FluencyMaster (FM), has been on the market since 1989. Good Morning America, featuring the SE, had the subtitle "An End to Stuttering." Oprah had a subtitle across the screen stating "Stuttering Stopped by the SpeechEasy." That would presuppose that users of the SE would stop stuttering in all situations, wouldn't it? So, just put it in and become fluent -- simple as that. A quick visit to your internet search engine will result in you seeing marketing claims for these devices with teasers such as "Stop Stuttering now." Wow! I guess that is why speech clinics around the country have been bombarded by inquiries about these prosthetic devices. Family and friends of the afflicted are calling to share the news, and/or offering to buy one. The notion of a quick fix is mighty alluring. The FM has returned to the spotlight and been pulled onto the coat tails of the SE story.

The Skinny:

By attending to your own voice via an auditory feedback appliance in one ear, it may slow your rate. The SE attempts to simulate choral reading -- when someone reads in unison -- which has been known to induce enhanced fluency in the clinical environment. For example, PET scan studies of the brain use induced fluency by choral reading to get a "fluent" sample to compare to a stuttered sample.

There are people benefiting by these devices in some situations and I applaud that. Several people reported that the severity struggle of the stuttering blocks was reduced somewhat (Accurate measurement would, of course, require measuring severity in multiple speaking situations over 12 months or more.) I have had some clients do a trial with them. I am happy for anyone getting some relief with electronic devices.

After interviewing several people who own, or have returned, these above devices. Anyone considering buying one will want to consider the following limitations:

1. Ambient noise (i.e., restaurant, bar, cafeteria, shopping mall, etc.) may render it useless. The user must be able to listen to the signal (their voice) in one ear. Take it out of the clinic into a noisy environment and "test drive it."

2. Phone. Many people report that hearing their own voice delayed in one ear and listening to someone else on the phone is overwhelming. Make a call with it. Then make a call with it that you expect to stutter on. Does it serve you as desired on the phone?

One complaint I have heard specific to the SE is that the speaker hears his own voice, and other voices, altered to sound either higher in pitch (reported to sound like a chipmunk), or lower (reported to sound like Darth Vader.) Many have reported that to be annoying on the phone and off the phone.

3. Blocking. The devices require hearing oneself. If you produce silent blocks, you may want to explore this. Some soft sounds like /h/ can be a challenge.

4. Anxiety. Test it under your feared speaking situations. Can you benefit from it when you need it the most? Does anxiety overwhelm the ability to attend to the signal? If phone calling has been a feared situation for you in the past, it may further increase the difficulty of attending to the auditory signal. Again, put the device to the test.

Based on helping several hundred people who stutter in therapy, and recovering from it myself, I strongly believe that anticipatory anxiety will prove to be the pivotal factor for which the electronic devices will never compensate.

5. Will you be comfortable seen with it? If you are **self-conscious** about stuttering and would be sensitive to inquiries about it, consider this. I only mention this because it has been cited by a number of people who stutter. One 33 year old had been telling people he was hearing impaired. Another said: "...It was like letting my 'flaw' hang out there for everyone to see." Obviously, these people are not good candidates, are they?

I personally desire all people who stutter to get their break-through. Since these limitations were inadvertently left out of the reporting, I feel obliged to help people make an informed decision. I personally hope that the manufacturer of the SE asserts itself better in the stories about the devices- to include limitations. If you "stress test" one of these devices, and its performance is consistent with what you expected and find worthy of the price, go for it. I mean that.

The homepage of the [Stuttering Foundation of America](http://www.stutteringhelp.org), a recognized authority, provides good insight about portable devices. The SFA's 2004 survey, available on-line at www.stutteringhelp.org/research/survrslt.htm reported that less than half of the owners of these devices are happy six months after purchase. You might also want to get into a chat room for people who stutter and pose questions to others who have done a trial with portable devices.

I recommend careful consideration before fitting a young child with one of these prosthetic devices. The belief they inherit is that they must rely on an external aid for help. I recommend speech therapy with a specialist to help the child manage the disfluency and cope with emotions when they stutter in the situations where the device fails them. Some marketers have compared electronic devices to eyeglasses for the visually impaired. This is, at best, an awkward comparison. A good prescription works when you read at home, school, on a plane, on a bus, inside, outside, and everywhere there is adequate light. However, there are many situations in which electronic devices will not stop stuttering and not provide fluency.

Considering the significant price of these devices, will parents mandate use of them? I have already mediated family-child debates over mandatory use when the child refused to wear one. SLP's have always advised parents to refrain from badgering and correcting a child who stutters. layering guilt and shame on a child for not wearing on could backfire bigtime. The whole process of nurturing and supporting a child who stutters must be considered before prescribing portable devices.

It is interesting to point out that the FM has had a recent surge in sales. A colleague of mine, who dispenses the FM, said this: "...people heard about the SE and started investigating DAF...when they begin comparison shopping they may choose the FM (about \$3,500) over the SE (\$3,600 - \$5,000)." Both require an ear mold made by an audiologist. Both offer a 30-day trial. Returns forfeit the fitting fee. Check with the

manufacturers for exact prices and return policies.

Wisely, both manufacturers report that they recommend speech therapy to support use of the device. Be advised: these devices are not a quick cure. Perhaps a famous quote will summarize truly overcoming stuttering: "He who would have the fruit must climb the tree." Stuttering symptoms may be reduced in some contexts with the aid of these devices. However, the speaker will have to work very hard for a breakthrough.

© 2003 Tim Mackesey CCC-SLP, BRSFD/Mentor

Revised June 2004

Please request permission to quote or reproduce this article by sending an E-mail.