

Doctor Fluency: A Computerized System for Precision Fluency Shaping

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Julie Masterson: What is the main use for the Dr. Fluency software?

Klaas Bakker: Dr. Fluency was designed to be a computerized system for the treatment of stuttering. It was particularly designed with precision fluency shaping therapy in mind.

JM: Can you give a brief description of precision fluency therapy?

KB: Fluency Shaping (e.g., Webster, 1980) is one of the most frequently followed stuttering treatment methods of today. Unfortunately, because of its particular structure this treatment is difficult when implemented in traditional SLP settings. It requires that therapy is administered in an intensive format (several weeks; at least 6 hours daily), and clinician feedback tends to be notoriously laboured intensive and subjective. Needless to say, this therapy is feasible and affordable only when implemented with computerized feedback methods. Until now, the feedback specific to the Precision Fluency Shaping method was available only to clinicians who were connected with a number of specialized stuttering treatment centers (for example, the Hollins College program) that have specialized equipment for conducting this type of therapy. This situation appears to have changed with the arrival of Dr. Fluency.

JM: How does Dr. Fluency help?

Teresa Kuntz: The manual of Dr. Fluency states that its purpose is to help make fluency shaping therapy accessible to clients and their clinicians. As such, it was designed to (1) reduce the time demands on therapist and client, (2) reduce cost to the client, (3) maximize the effectiveness of the approach, while (4) providing assistance with post treatment fluency maintenance therapies.

JM: Who will benefit most from the use of Dr. Fluency?

TK: The populations targeted by Dr. Fluency are (1) stutterers, with whom at least part of their therapy is conducted at home (by using the client version of Dr. Fluency), (2) clients who have already acquired the targeted fluency shaping skills and are attempting to maintain and generalise the acquired fluency skills in their home environment, and (3) clinicians (clinician version of Dr. Fluency), who may find the system beneficial in that it saves costly clinician therapy time, while providing specific and objective feedback for the targeted behavioural skills.

JM: What types of feedback are provided?

KB: Dr Fluency includes five feedback tools: (1) a computerized stopwatch, (2) digitized tape-recording, (3) an oscilloscope feedback screen, (4) a breathing 1 speech coordination monitor (with separate feedback concerning thoracic and abdominal breathing), and (5) interactive speech analysis dialogues.

These tools facilitate effective training of the following techniques: (1) prolonged syllables, (2) correct breathing, (3) gentle onsets, (4) gentle transitions, (5) reduced air pressure, (6) reduced articulatory pressure, (7) correct voice curve patterns, and (8) volume control.

JM: How have you used Dr. Fluency in treatment?

TK: As beta testers for Dr. Fluency, we were in a position to experience how it can be applied in clinical situations. Although Dr. Fluency was specifically designed for precision fluency training, some components are clearly helpful as feedback tools in related therapies (e.g., gentle voice onset training, coordination of breathing patterns). Dr. Fluency is appealing and user-friendly for both the client and the clinician. Immediate, objective feedback allows the client to do self-evaluation and aids the clinician in providing strategies for improvement.

It is important that the Dr. Fluency be used as a clinical tool and not as a complete treatment program. Dr. Fluency provides instructions for correct productions, but does not provide remedial measures if the client is unsuccessful. Because the techniques targeted in fluency therapy (e.g., prolonged syllables, gentle voice onset) are often difficult for clients to master, clinician support is crucial to prevent clients from becoming discouraged. Once techniques are learned, however, Dr. Fluency could be used as a tool to allow the client to practice outside of therapy time.

JM: Are there any other benefits of using Dr. Fluency in treatment?

TK: Dr. Fluency is also very useful in guiding a clinician in the progression of skills that need to be taught as part of a fluency shaping program.

Dr. Fluency is well-organized in terms of units and lessons. It provides reasonable steps for the client to achieve in becoming a more fluent speaker. This type of organization is useful for the client as well as for the clinician in that it shows the client the skills, which they will need to acquire.

Where to find it?

Dr. Fluency is published by Speech Therapy Systems, Ltd. (845 third Avenue, New York, NY 10022, 1-888-DFL-UENC, Internet: <http://www.dfluency.com>,). Among the system requirements are a 486DX IBM compatible computer, or higher; a Windows operating system installed (Windows 95 recommended); a CD-ROM drive; and a Sound Blaster compatible sound system.

References

Webster, R. L. (1980). Evolution of a target-based behavioural therapy for stuttering. Journal of Fluency Disorders, 5, 303-320.