

# Knowledge and Attitude of Stuttering Among Teachers of Different Board in Tamil Nadu

Ishwarya H<sup>1</sup>, Dr.Satish Kumaraswamy<sup>2</sup>

<sup>1,2</sup>Dr.M.V.Shetty college of Speech and Hearing

**Abstract - Aim:** To assess the stuttering knowledge and attitudes of teachers of different boards (Matriculation (CBSE) in Tamil Nadu.

**Methodology:** A total of 37 teachers (matriculation (n = 18) and CBSE (n = 19)), participated. developed, validated, and distributed. The three components of the questionnaire are scored using a Likert scale (1-strongly disagree, 5-strongly agree). Data was collected, and it was statistically analyzed.

**Result :** The results revealed a significant difference between the two board levels in teachers' knowledge of stuttering, with a p value of 0.030, more knowledge on the matriculation board with a mean score of 42.06 than the CBSE mean score of 39.32, and no significant difference between the matriculation board's attitude toward stuttering with a p value of 0.094.

**Conclusion:** The findings show that teachers at both board levels generally know low awareness about the causes and signs of stuttering. However, score high awareness on need of early identification and rehabilitation. Both matriculation and CBSE have an overall moderately positive attitude. Teachers frequently struggle with management because of lack of knowledge.

## INTRODUCTION

Stuttering is a disorder in which the rhythm or fluency of speech is impaired by interruption, or blockages (Bloodstein & Ratner 2008). It is characterized by core behaviors like blocks, prolongation, part word repetitions, syllable repetition and referred as primary stuttering and secondary stuttering is learned behaviour such as eye blink , hand tapping nodding, jaw jerk (Ward 2006).

Changing views and attitudes towards stuttering is important, which means educating about communication disorders and replacing stereotypes and misconception .The perception make people who stutter to avoid social interactions or other speaking situations, and so come across as shy or quiet. The inability to effectively communicate can have a significant impact on a person's mental and emotional

well-being and their sense of self-worth. Most people will rarely disclose their disfluency to others. Instead, they will develop strategies to mask their stutter

Preschool-aged children have higher incidence rates, with rates of 8.5 percent by three years old and 11 percent by four years old (Reilly, Onslow, Packman, Wake, Bavin, Prior, Eadie, Cini, Bolzonella and Ukaumunne, 2009). Between the ages of 2 and 6, when the children are either in preschool or primary school, stuttering typically begins.

Borderline stuttering, which impacts children between the ages of 2 and 3.5, is typically thought as normal non-fluency. According to published research, if normal non-dysfluency is made aware, it induces stuttering during the developing stage (Ratner, 1959). In developing stage, school-age stuttering (6–13 years) that is intermediate stuttering, advanced stuttering (14 years and more) occur and the vast majority of students will be aware of the problem with evident secondary behavior. In order to diagnose, refer, and assist , teachers play a vital role , by helping, refer for diagnosis and provide intervention by supporting the professional in the classroom setting and also create a better environment without negative attitude and misconceptions.

Literature review suggest that teachers who are more knowledgeable about the condition will be better able to support a student who stutters in the classroom and other settings. This relieves students and encourages them to use fluency techniques to enhance their speech and communication.

The aim of the current study is to evaluate teachers' awareness and attitudes for two different board schools (Matriculation-M and CBSE -C) by developing and administering a questionnaire.

## REVIEW OF LITERATURE

Many physical, psychological and mental variables contribute to stuttering. The teacher's perception is one of the things that has the biggest impact on the learner. The attitudes of teachers toward stuttering are crucial because they have a big impact on how stuttering children in school are handled. Vinati, Stansfield and Goldbart (2011) investigated the attitudes and beliefs of teachers in Mumbai, India, concerning kids who stutter and According to the findings, teachers thought that a child's environment affected their stuttering, and children who stuttered had the potential to overcome the condition.

Abdalla and Louis (2012) examined Arab school teachers' knowledge, beliefs, and responses regarding stuttering. The results show that many of them had inaccurate information about the causes of stuttering and held stereotypes about PWS. A 2013 investigation into stuttering knowledge, awareness, perception, management, and bullying by Plexico, Plumb and Beacham (2013). The majority of teachers acknowledged bullying as a problem, but most only showed a general understanding of the issue and were unsure of the best ways to handle it.

Kumar, Varghese and Liz (2018) evaluated teachers' knowledge of and attitudes in the Dakshina Kannada and results revealed that awareness of stuttering was at 63.16 %, while teacher attitudes were at 55.7 % and teachers' perceptions of how students interact with stuttering students were at 48.5%. According to the current study, teachers are knowledgeable about how fluency develop, and understanding the attitudes of teachers can help them mount extra consideration and make the proper referrals for assistance for children who stutter.

Chandrabose, St.Louis, Mariswamy and Raoof (2010) attempted to determine how potential teachers in Mysore felt about stuttering. Results suggest some domains showed decreased awareness of stuttering, others showed a favourable attitude.

Additionally, studies have shown that educating teachers on stuttering improves their understanding of the condition and changes how they view their students with stuttering (SWS). Hobbs, Lachole (2012) conducted research on teacher perceptions and knowledge of stuttering before and after an in-service training to as certain whether educating teachers about stuttering improves their understanding of it and results in more favourable attitudes toward their stuttering students (SWS). Results showed that after

the in-service training, there was a statistically significant difference in teachers' general awareness of stuttering. The findings revealed that following the in-service training, instructors' perceptions of their SWS varied statistically significantly. The findings of this study indicate a connection between teachers' familiarity with stuttering and their perceptions of SWS in their classrooms.

## METHOD

Aim : The purpose of the study is to determine the level of awareness of the knowledge and attitude on stuttering among teachers in two distinct board levels (Matriculation- M) (CBSE- C) in Tamil Nadu in order to facilitate early prognosis and intervention .

## OBJECTIVE

- To determine the degree of awareness of the knowledge and attitude of stuttering among matriculation teachers
- To determine the degree of awareness of the knowledge and attitude of stuttering among CBSE teachers
- To compare knowledge and attitude level among teachers of two different board levels

The present study was done in two phases

PHASE 1: The questionnaire was developed using a range of supporting literature. The prepared questionnaire were validated by speech language pathologists with experience. The correction and suggestions are incorporated in the preparation of questionnaire . The first of the questionnaire's three components, contains information about the teachers' demographics, work history, and education. The second section consists of 13 questions, including general knowledge of the signs, causes, diagnoses, and interventions, as well as the role of the teacher in stuttering. The third section consists of 17 questions that are focused on how teachers feel about stuttering. Both sections are graded by likert scale. The questions are attached below (Appendix 1)

PHASE 2: Participants with inclusive and exclusive criteria

A Total of 37 teachers in and around Chennai who work two different board levels, Matriculation(n - 18) CBSE (n-19) were contacted as part of an online survey by mailing them a questionnaire and survey forms. Teachers with more than a year's duration of work experience is included by excluding teachers working in inclusive setup.

PROCEDURE

The validated questionnaire was distributed. A consent was taken from all the participant. The participants were given enough time to finish the surveys, and participation was entirely optional. The questionnaire

had to be filled out by each respondent privately and anonymously. The participant required to fill up the questionnaire form by selecting the options from definitely disagree 1 - strongly agree 5.

ANALYSIS

The questionnaires data collected from the teachers and scored using likert scale, 5 for strongly agree, 4 for agree, 3 for neutral, 2 for disagree and 1 for definitely disagree. The gathered data was further given for statistical analysis and the results are discussed below.

RESULT

The statistically analyzed results are discussed below

Table 1: Showing percentage values for knowledge of stuttering among teachers of CBSE board level

	1.00		2.00		3.00		4.00		5.00		Total	
	N	%	N	%	N	%	N	%	N	%	Mean	SD
Q1	2	10.5%	8	42.1%	3	15.8%	5	26.3%	1	5.3%	2.74	1.15
Q2	2	10.5%	1	5.3%	5	26.3%	7	36.8%	4	21.1%	3.53	1.22
Q3	2	10.5%	6	31.6%	5	26.3%	4	21.1%	2	10.5%	2.89	1.20
Q4	0	0.0%	1	5.3%	1	5.3%	9	47.4%	8	42.1%	4.26	.81
Q5	0	0.0%	0	0.0%	1	5.3%	6	31.6%	12	63.2%	4.58	.61
Q6	0	0.0%	1	5.3%	2	10.5%	14	73.7%	2	10.5%	3.89	.66
Q7	1	5.3%	5	26.3%	4	21.1%	8	42.1%	1	5.3%	3.16	1.07
Q8	3	15.8%	9	47.4%	4	21.1%	3	15.8%	0	0.0%	2.37	.96
Q9	4	21.1%	12	63.2%	1	5.3%	2	10.5%	0	0.0%	2.05	.85
Q10	5	26.3%	11	57.9%	3	15.8%	0	0.0%	0	0.0%	1.89	.66
Q11	2	10.5%	11	57.9%	5	26.3%	1	5.3%	0	0.0%	2.26	.73
Q12	1	5.3%	9	47.4%	3	15.8%	5	26.3%	1	5.3%	2.79	1.08
Q13	1	5.3%	7	36.8%	5	26.3%	5	26.3%	1	5.3%	2.89	1.05

Table 1 indicates medium awareness mean score of 2.74 for stuttering can be a genetic disorder , 2.89 for stuttering is a congenital disorder, 2.89 for stuttering can be cured by intervention and and high awareness mean score of 4.26 for early identification, 4.58 for teachers vital role,3.58 for stuttering requires

rehabilitation, 3.89 agree stuttering varies with person\situation, 3.16 for stuttering varies with interest in subjects, 2.37 for not to stutter technique,2.05 for no cure for stuttering,1.89 for stuttering is myth,2.26 for stuttering a physical problem and ,2.79 for stuttering a mental problem.

Table 2: Showing percentage values for knowledge of stuttering among teachers of Matriculation board level

	1.00		2.00		3.00		4.00		5.00		Total	
	N	%	N	%	N	%	N	%	N	%	Men	SD
Q1	1	5.6%	3	16.7%	8	44.4%	6	33.3%	0	0.0%	3.06	.87
Q2	0	0.0%	3	16.7%	2	11.1%	9	50.0%	4	22.2%	3.78	1.00
Q3	1	5.6%	7	38.9%	6	33.3%	4	22.2%	0	0.0%	2.72	.89
Q4	0	0.0%	2	11.1%	0	0.0%	9	50.0%	7	38.9%	4.17	.92
Q5	0	0.0%	0	0.0%	0	0.0%	3	16.7%	15	83.3%	4.83	.38
Q6	1	5.6%	0	0.0%	1	5.6%	13	72.2%	3	16.7%	3.94	.87
Q7	0	0.0%	1	5.6%	1	5.6%	11	61.1%	5	27.8%	4.11	.76

Q8	0	0.0%	6	33.3%	6	33.3%	5	27.8%	1	5.6%	3.06	.94
Q9	5	27.8%	8	44.4%	2	11.1%	2	11.1%	1	5.6%	2.22	1.17
Q10	5	27.8%	10	55.6%	1	5.6%	1	5.6%	1	5.6%	2.06	1.06
Q11	3	16.7%	14	77.8%	1	5.6%	0	0.0%	0	0.0%	1.89	.47
Q12	2	11.1%	5	27.8%	1	5.6%	5	27.8%	5	27.8%	3.33	1.46
Q13	2	11.1%	7	38.9%	2	11.1%	5	27.8%	2	11.1%	2.89	1.28

Table 2 shows median awareness mean score of 3.06 for stuttering can be a genetic disorder , 2.72 for stuttering is a congenital disorder, and low awareness score 1.28 for stuttering can be cured by intervention and and high awareness mean score of 4.17 for early identification, 4.83 for teachers vital role,3.78 for stuttering requires rehabilitation, 3.94 agree stuttering varies with person\situation, 4.11 for stuttering varies

with interest in subjects, 3.06 for not to stutter technique,2.22 for no cure for stuttering,2.06 for stuttering is myth,1.89 for stuttering a physical problem and ,3.33 for stuttering a mental problem Figure 1 Shows the awareness on knowledge of stuttering among teachers of matriculation board and CBSE board for each questions

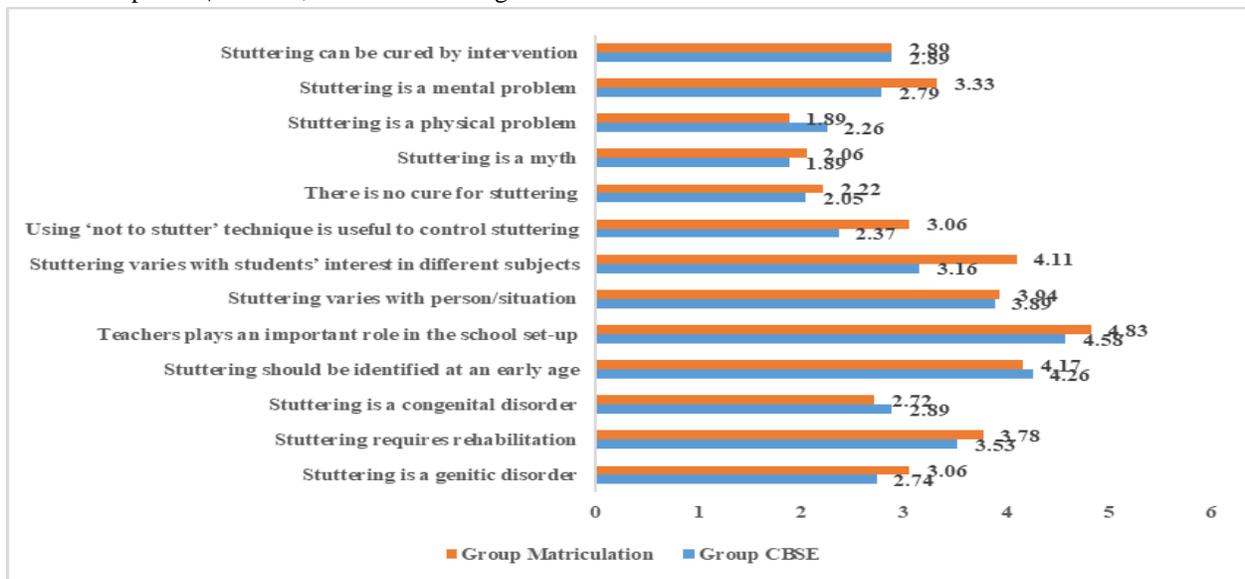


Table 3 Shows cross comparison values of CBSE and Matriculation

	CBSE		Matriculation		p value	
	Mean	S.D	Mean	S.D		
Q1	2.74	1.15	3.06	.87	0.296	NS
Q2	3.53	1.22	3.78	1.00	0.543	NS
Q3	2.89	1.20	2.72	.89	0.704	NS
Q4	4.26	.81	4.17	.92	0.827	NS
Q5	4.58	.61	4.83	.38	0.157	NS
Q6	3.89	.66	3.94	.87	0.559	NS
Q7	3.16	1.07	4.11	.76	0.004	NS
Q8	2.37	.96	3.06	.94	0.039	NS
Q9	2.05	.85	2.22	1.17	0.815	NS
Q10	1.89	.66	2.06	1.06	0.946	NS
Q11	2.26	.73	1.89	.47	0.081	NS
Q12	2.79	1.08	3.33	1.46	0.217	NS
Q13	2.89	1.05	2.89	1.28	0.924	NS

Table 3 indicates cross comparison values of mean, standard deviation and significance of awareness of knowledge of CBSE and Matriculation using

maanwhitney test for each questions and results suggest no significance difference with p value >0.000.

Table 4 Shows significance difference of CBSE and Matriculation on attitude of stuttering

Group	N	Mean	Std. Deviation	t test p value		
Awareness (13 - 65)	CBSE	19	39.32	4.04	0.030	sig
	Matriculation	18	42.06	3.28		

Table 4 shows p value and analysis reveals overall significance difference with p value 0.030 between two board level on knowledge of stuttering among

teachers of two board levels indicating more knowledge on matriculation board with mean score 42.06 compared with CBSE 39.32.

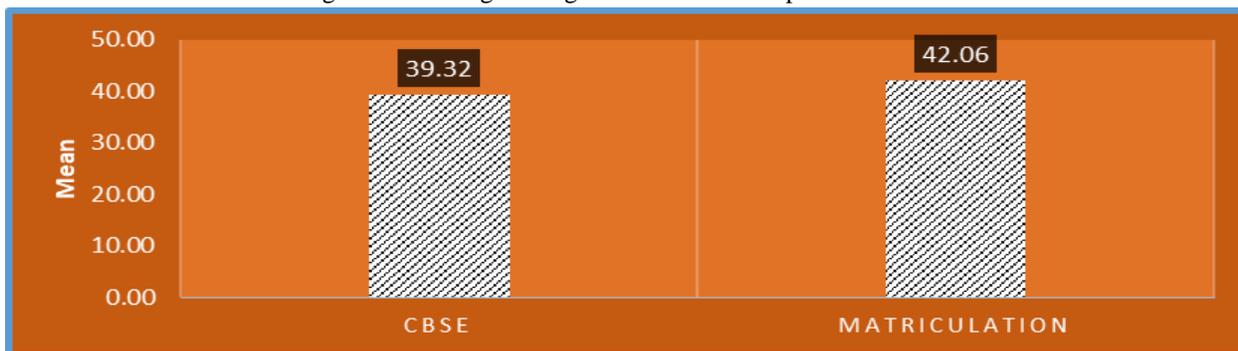


Figure 2 Shows the comparison of awareness of knowledge among two board levels

Table 5 Shows percentage scores on attitude of stuttering among teachers of CBSE board level

	1.00		2.00		3.00		4.00		5.00		Total	
	N	%	N	%	N	%	N	%	N	%	Mean	SD
Q14	0	0.0%	1	5.3%	4	21.1%	10	52.6%	4	21.1%	3.89	.81
Q15	0	0.0%	0	0.0%	0	0.0%	13	68.4%	6	31.6%	4.32	.48
Q16	0	0.0%	1	5.3%	8	42.1%	8	42.1%	2	10.5%	3.58	.77
Q17	0	0.0%	2	10.5%	2	10.5%	9	47.4%	6	31.6%	4.00	.94
Q18	3	15.8%	9	47.4%	4	21.1%	3	15.8%	0	0.0%	2.37	.96
Q19	0	0.0%	0	0.0%	3	15.8%	9	47.4%	7	36.8%	4.21	.71
Q20	5	26.3%	9	47.4%	3	15.8%	1	5.3%	1	5.3%	2.16	1.07
Q21	2	10.5%	6	31.6%	3	15.8%	7	36.8%	1	5.3%	2.95	1.18
Q22	1	5.3%	3	15.8%	3	15.8%	10	52.6%	2	10.5%	3.47	1.07
Q23	2	10.5%	9	47.4%	2	10.5%	4	21.1%	2	10.5%	2.74	1.24
Q24	0	0.0%	3	15.8%	3	15.8%	9	47.4%	4	21.1%	3.74	.99
Q25	1	5.3%	5	26.3%	7	36.8%	6	31.6%	0	0.0%	2.95	.91
Q26	4	21.1%	10	52.6%	2	10.5%	2	10.5%	1	5.3%	2.26	1.10
Q27	2	10.5%	9	47.4%	3	15.8%	5	26.3%	0	0.0%	2.58	1.02
Q28	0	0.0%	4	21.1%	7	36.8%	7	36.8%	1	5.3%	3.26	.87
Q29	4	21.1%	12	63.2%	2	10.5%	1	5.3%	0	0.0%	2.00	.75
Q30	10	52.6%	8	42.1%	0	0.0%	1	5.3%	0	0.0%	1.58	.77

Table 5 shows positive attitude by agree that teachers should make the student aware of the problem with mean score of 4.32 ,4.21 for bullying or teasing is a factor to increase stuttering and disagree that teachers should often correcting when student stutter with mean score of 4.32 , 2.37 for stuttering affecting academic performance,3.89 for stutter speech draws class attention,1.07 for not considering students who stutter as shy and quite, 3.47 for students feeling isolated,2.74

for ignoring stuttered speech in class, 2.95 for not completing students words before they correcting,2.26 for treating student who stutter different from others,2.58 for ignoring dysfluencies of the student, 2.00 for feeling difficult to communicate with students who stutter , 1.58 for not including student who stutter in group discussion and also indicate negative attitude that students are anxious to participate in school activities with mean score of 4.00, and disagree that

academic consideration should be given for students who stutter with mean score of 2.95, unnecessary attention given by peer group with score of 3.26, and

students should talk about the disorder to make adjustments with mean score of 3.74.

Table 6 Shows percentage scores on attitude of stuttering among teachers of matriculation board level

	1.00		2.00		3.00		4.00		5.00		Total	
	N	%	N	%	N	%	N	%	N	%	Mean	SD
Q14	0	0.0%	3	16.7%	2	11.1%	8	44.4%	5	27.8%	3.83	1.04
Q15	0	0.0%	1	5.6%	0	0.0%	8	44.4%	9	50.0%	4.39	.78
Q16	0	0.0%	2	11.1%	2	11.1%	7	38.9%	7	38.9%	4.06	1.00
Q17	0	0.0%	2	11.1%	2	11.1%	10	55.6%	4	22.2%	3.89	.90
Q18	1	5.6%	6	33.3%	3	16.7%	4	22.2%	4	22.2%	3.22	1.31
Q19	0	0.0%	2	11.1%	3	16.7%	5	27.8%	8	44.4%	4.06	1.06
Q20	6	33.3%	6	33.3%	2	11.1%	4	22.2%	0	0.0%	2.22	1.17
Q21	0	0.0%	4	22.2%	7	38.9%	7	38.9%	0	0.0%	3.17	.79
Q22	3	16.7%	3	16.7%	1	5.6%	7	38.9%	4	22.2%	3.33	1.46
Q23	4	22.2%	7	38.9%	0	0.0%	7	38.9%	0	0.0%	2.56	1.25
Q24	0	0.0%	2	11.1%	3	16.7%	10	55.6%	3	16.7%	3.78	.88
Q25	0	0.0%	4	22.2%	4	22.2%	8	44.4%	2	11.1%	3.44	.98
Q26	2	11.1%	9	50.0%	3	16.7%	4	22.2%	0	0.0%	2.50	.99
Q27	3	16.7%	7	38.9%	4	22.2%	2	11.1%	2	11.1%	2.61	1.24
Q28	0	0.0%	3	16.7%	4	22.2%	9	50.0%	2	11.1%	3.56	.92
Q29	1	5.6%	11	61.1%	1	5.6%	5	27.8%	0	0.0%	2.56	.98
Q30	9	50.0%	6	33.3%	1	5.6%	2	11.1%	0	0.0%	1.78	1.00

Table 6 shows positive attitude by agree that teachers should make the student aware of the problem with mean score of 4.39 ,4.21 for bullying or teasing is a factor to increase stuttering, and disagree that 3.22 for stuttering affect academic performance,3.83 for stutter speech draws class attention, students are anxious to participate in school activities with mean score of 3.89, 3.33 for students feeling isolated,2.56 for ignoring stuttered speech in class, 3.44 for not completing students words before they correcting,2.50 for treating student who stutter different from others,2.61 for ignoring dysfluencies of the student,

2.56 for feeling difficult to communicate with students who stutter , 1.78 for not including student who stutter in group discussion and also indicate negative attitude that teachers should often correcting when student stutter with mean score of 4.06 ,2.22 for considering students who stutter as shy and quite and also by disagree that academic consideration should be given for students who stutter with mean score of 3.17, unnecessary attention given by peer group with score of 3.56, and students should talk about the disorder to make adjustments with mean score of 3.78.

Figure 3 Shows the awareness on knowledge of stuttering among teachers of matriculation board and CBSE board for each questions

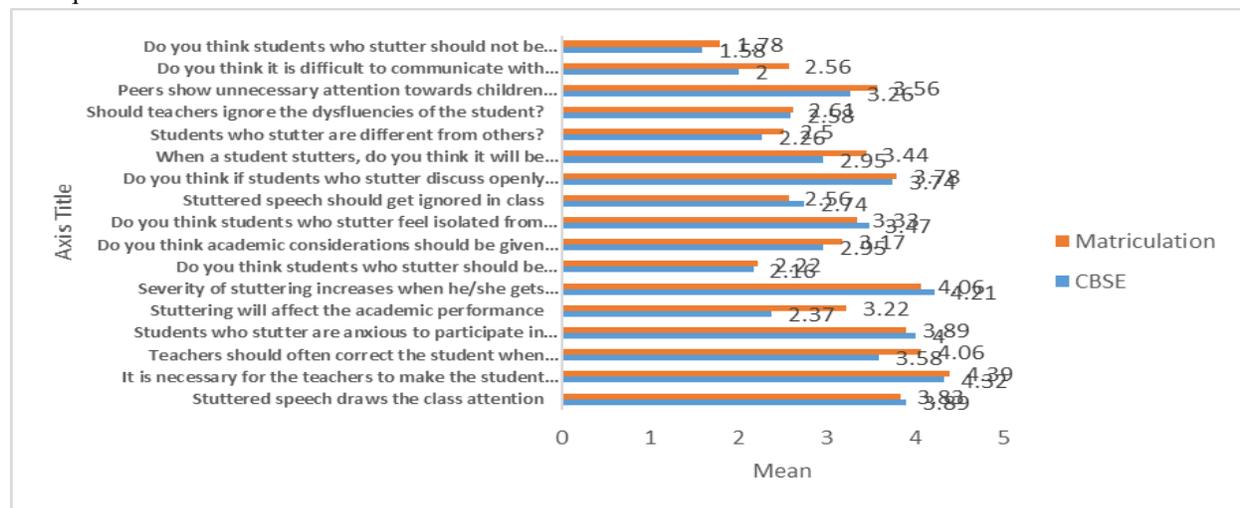


Table 7-Shows cross comparison values of CBSE and Matriculation.

	CBSE		Matriculation		p value	
	Mean	SD	Mean	SD		
Q14	3.89	0.81	3.83	1.04	0.961	NS
Q15	4.32	0.48	4.39	0.78	0.381	NS
Q16	3.58	0.77	4.06	1.00	0.068	NS
Q17	4.00	0.94	3.89	0.90	0.643	NS
Q18	2.37	0.96	3.22	1.31	0.044	NS
Q19	4.21	0.71	4.06	1.06	0.871	NS
Q20	2.16	1.07	2.22	1.17	0.949	NS
Q21	2.95	1.18	3.17	0.79	0.587	NS
Q22	3.47	1.07	3.33	1.46	0.987	NS
Q23	2.74	1.24	2.56	1.25	0.595	NS
Q24	3.74	0.99	3.78	0.88	0.961	NS
Q25	2.95	0.91	3.44	0.98	0.133	NS
Q26	2.26	1.10	2.50	0.99	0.375	NS
Q27	2.58	1.02	2.61	1.24	0.962	NS
Q28	3.26	0.87	3.56	0.92	0.294	NS
Q29	2.00	0.75	2.56	0.98	0.077	NS
Q30	1.58	0.77	1.78	1.00	0.661	NS

Table 7 indicates cross comparison values of mean, standard deviation and significance of attitude for stuttering of CBSE and Matriculation using

maanwhitney test for each questions and results suggest no significance difference with p value >0.000 for all questions.

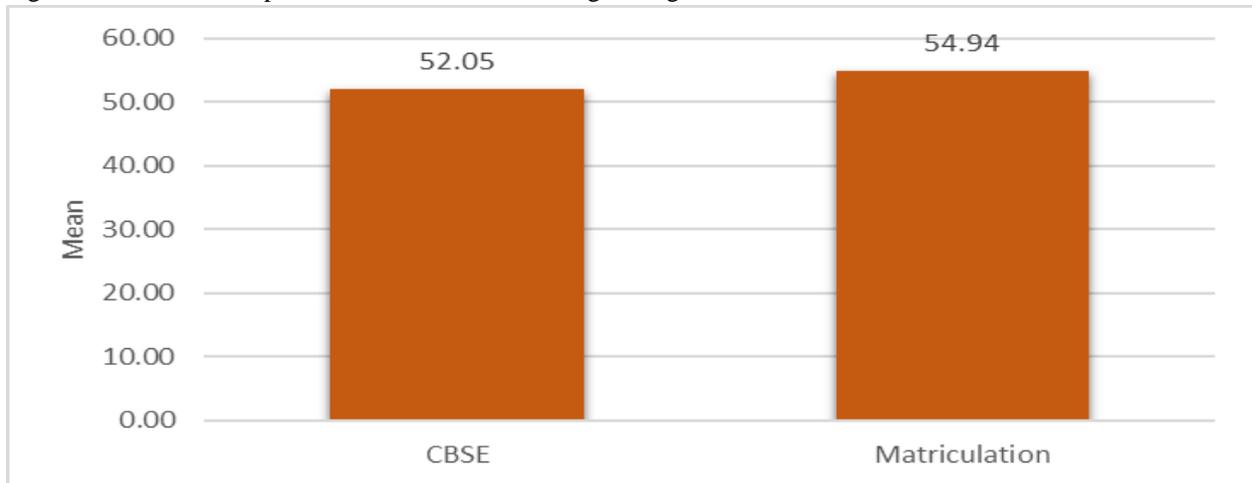
Table 8 Shows significance difference of CBSE and Matriculation on attitude of stuttering

Group	N	Mean	Std. Deviation	t test p value		
Attitude (17 - 85)	CBSE	19	52.05	3.91	0.094	NS
	Matriculation	18	54.94	6.12		

Table 8 reveals overall no significance difference with p value 0.094 between attitude of stuttering for

matriculation board with mean score 54.94 and CBSE 52.0

Figure 2 Shows the comparison of attitude for stuttering among two board levels



## DISCUSSION

This study investigated teachers' overall knowledge and perceptions of stuttering among teachers at two board levels in Tamil Nadu (matriculation and CBSE). To evaluate teachers' stuttering knowledge and attitudes, a validated questionnaire based on literature was used. This analysis revealed there is a general lack of awareness about stuttering and how to deal with students who stutter in classrooms among teachers at both the matriculation and CBSE levels. Teachers have a high awareness of the need for early identification, characteristics, and treatment for children with stuttering as well as their crucial role in dealing with student who stutter in the classroom and also characteristics of stuttering. Teachers have a moderate level of awareness regarding the etiological factors. In matriculation and CBSE, attitudes toward stuttering are generally positive. Teachers agree that bullying or teasing is one of the key factors contributing to an increase in stuttering. They also agree that stuttering should not be ignored and that it should be included into all activities and discussions. Some misconceptions, such as the assumption that teachers should correct students' stuttering frequently in order to encourage them, are also present in both the matriculation and CBSE boards. When compared a significant difference in awareness is seen, matriculation awareness score was 42.06, higher than the CBSE score of 39.32 with a p value of 0.030. and there was no significant difference in attitude between the boards at 52.05 and 54.94 with a p value of 0.094.

## CONCLUSION

According to the results of the above-mentioned table and figures, teachers at both board levels have a generally low level of knowledge about the causes and symptoms of stuttering. However, when it comes to rehabilitation and early identification, teachers have high awareness scores and acknowledge their importance. Moderately positive attitude overall is seen in both matriculation and CBSE. Because they lack knowledge, teachers frequently struggle with management. According to the study's findings, schools should implement program to raise awareness of stuttering among teachers and help them deal with stuttering student.

## APPENDIX

### Awareness

1. Stuttering is a genetic disorder
2. Stuttering requires rehabilitation
3. Stuttering is a congenital disorder
4. Stuttering should be identified at an early age
5. Teachers plays an important role in the school set-up
6. Stuttering varies with person/situation
7. Stuttering varies with students' interest in different subjects
8. Using 'not to stutter' technique is useful to control stuttering
9. There is no cure for stuttering
10. Stuttering is a myth
11. Stuttering is a physical problem
12. Stuttering is a mental problem
13. Stuttering can be cured by intervention

### Attitude

14. Stuttered speech draws the class attention
15. It is necessary for the teachers to make the student aware of the problem
16. Teachers should often correct the student when he\she stutter
17. Students who stutter are anxious to participate in school activities
18. Stuttering will affect the academic performance
19. Severity of stuttering increases when he/she gets teased or bullied by their peers
20. Do you think students who stutter should be considered shy and quiet?
21. Do you think academic considerations should be given for students who stutter?
22. Do you think students who stutter feel isolated from others?
23. Stuttered speech should get ignored in class
24. Do you think if students who stutter discuss openly about their disorder, they can make better adjustments to their difficulty?
25. When a student stutters, do you think it will be helpful if teachers complete the words?
26. Students who stutter are different from others?
27. Should teachers ignore the dysfluencies of the student?
28. Peers show unnecessary attention towards children who stutter
29. Do you think it is difficult to communicate with students who stutter in class?

30. Do you think students who stutter should not be included in group discussions?

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