Project financed from the state budget, granted by the Minister of Science and Higher Education under the 'Science for the Development of Society' Program.

Project No.: NdRS/SP/0024/2025/01
Funding amount: PLN 765,600

Ministry of Science and Higher Education
Republic of Poland

Nauka dla Rozwoju Społeczeństwa

UNIVERSITY OF SILESIA IN KATOWICE

CBJG | The Research Centre for Stuttering and Cluttering
University of Silesia in Katowice

FUNDACJA CENTRUM LOGOPEDYCZNE

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UNIVERSITY OF SILESIA IN KATOWICE

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FUNDACJA CENTRUM LOGOPEDYCZNE

Conference announcements:

- All conference events will take place in building B (see maps and conference program)
- Coffee breaks will be held in the main foyer on the ground floor (building B)
- Lunch will be served in the cafeteria and in the main foyer on the ground floor (building B)
- Poster session will be held in the main foyer on the first floor (building B)
- The conference registration desk will be open in the main foyer on the ground floor (building B):
    - on Saturday (July 25h) from 8:00 to 8:45 AM
    - on Sunday (July 26th) from 8:15 to 8:55 AM
- Important: conference materials can also be picked up later at the conference office – room B0.21 (luggage storage will also be available there)
- The Gala Dinner will be held on Saturday (July 25th) starting at 19:30 PM at the Ogrody Restaurant by Famila, Plac Wojciecha Kilara 1 (1 Wojciech Kilar Square) 40-202 Katowice Poland. The restaurant is approximately a 15-minute walk from the faculty and is located within the headquarters of the Polish National Radio Symphony Orchestra (Narodowa Orkiestra Symfoniczna Polskiego Radia, NOSPR).
- Internet access for conference guests will be available:

  - network: Konferencja2026
  - password: konf2026!

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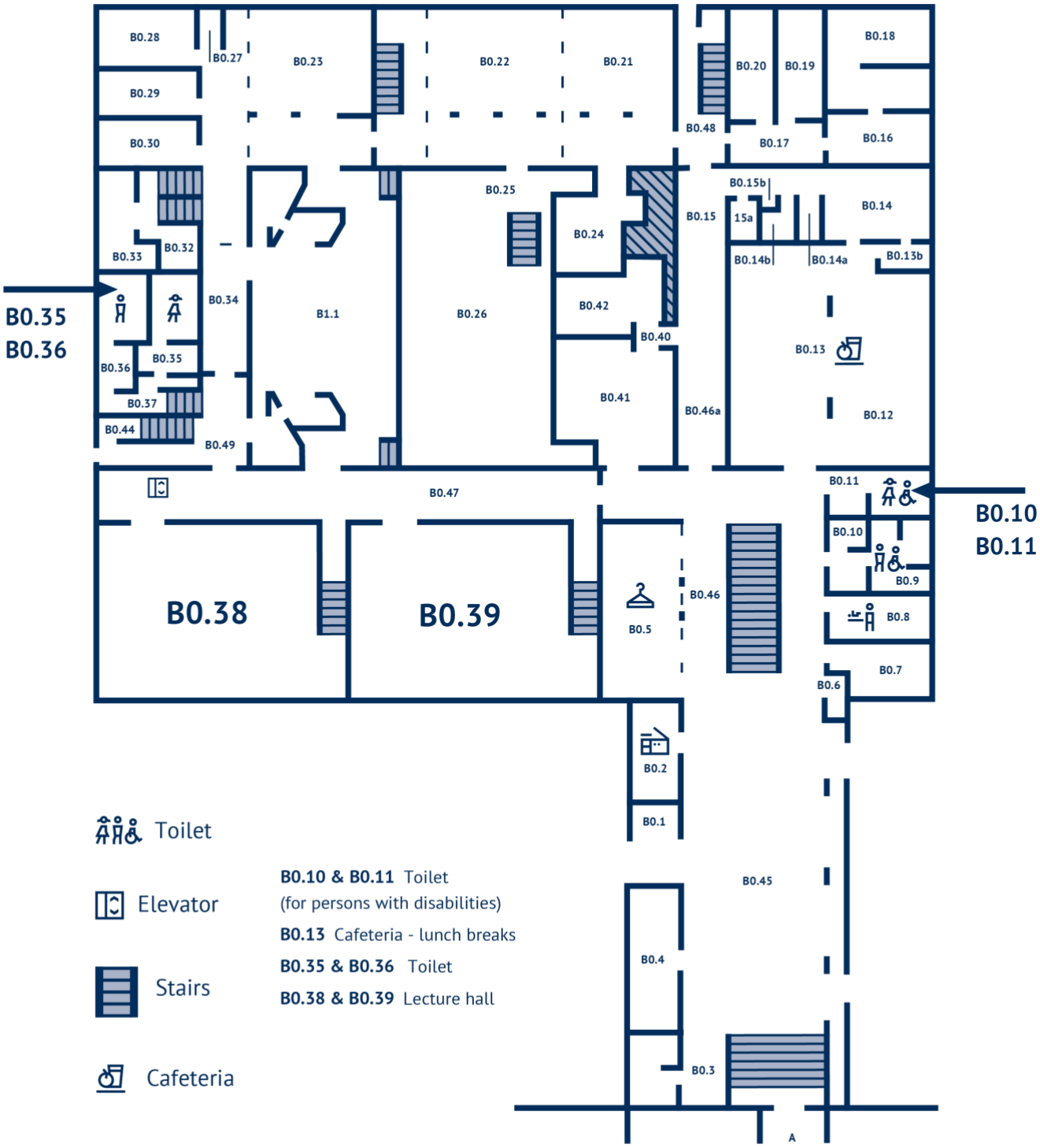

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FUNDACJA CENTRUM LOGOPEDYCZNE

MANY VOICES ON STUTTERING AND CLUTTERING
July 25-26, 2026
University of Silesia in Katowice, Poland

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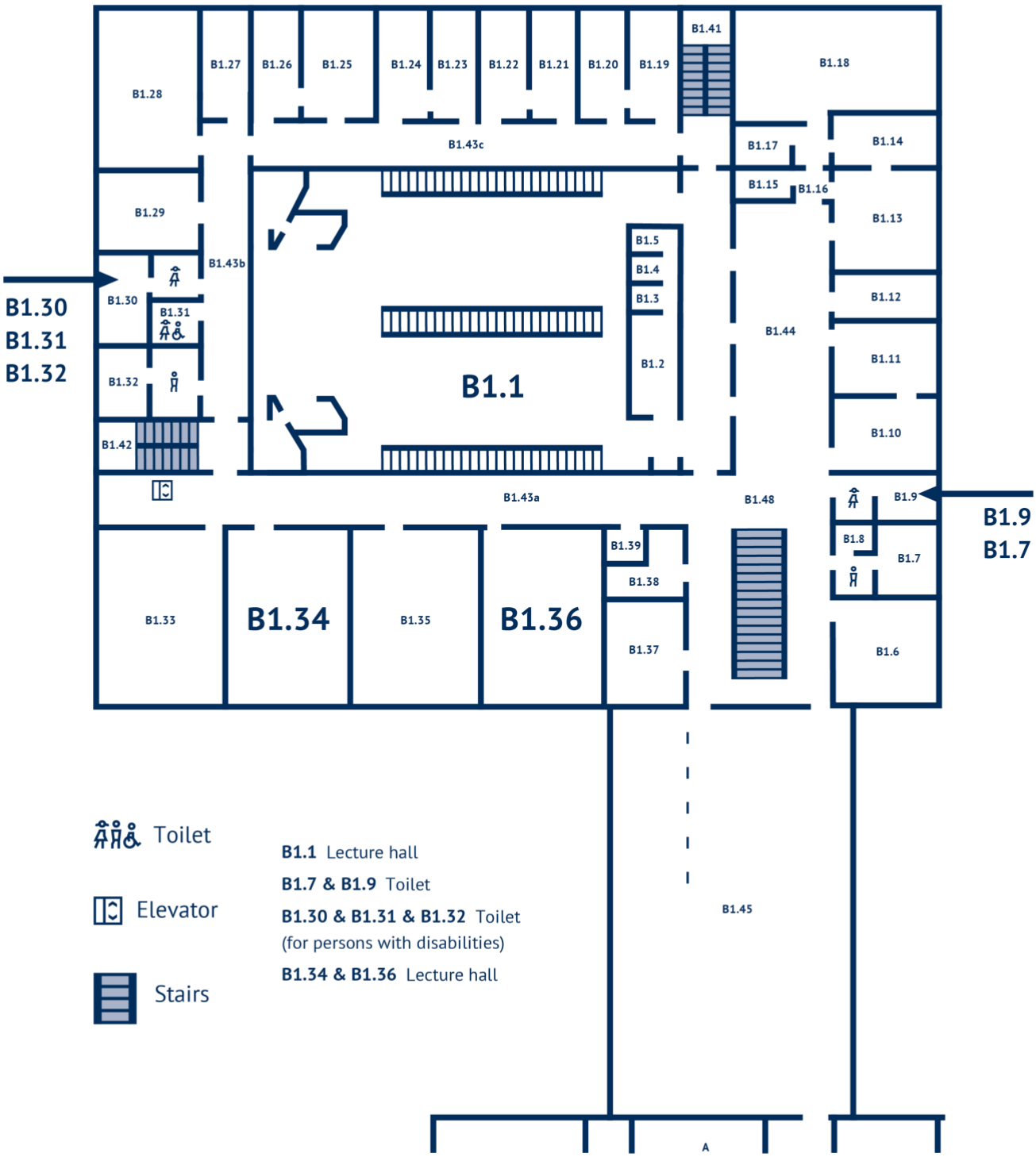

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Nauka dla Rozwoju Społeczeństwa

UNIVERSITY OF SILESIA IN KATOWICE

CBJG | The Research Centre for Stuttering and Cluttering University of Silesia in Katowice

FUNDACJA CENTRUM LOGOPEDYCZNE

Conference Program

University of Silesia in Katowice, Poland
Day 1, Saturday, July 25, 2026

8:00–8:45 AM	**Registration** (Main Foyer, building B ground floor)		
8:55– 9:00 AM	**Day 1 Conference opening** (Main Auditorium B1.1)		
Keynote Speakers (Main Auditorium B1.1) (simultaneous translation into Polish)			
9:00–9:45 AM	**Courtney Byrd:** Many voices, one world: The growing global impact of Camp Dream. Speak. Live.		
9:45–10:30 AM	**Kurt Eggers:** Supporting children who stutter: a clinician's guide to understanding and working with temperament		
10:30–10:45 AM	**Q&A**		
10:45–11:00 AM	**Refreshments** (Main Foyer, ground and first floor)		
Panel Sessions			
	Research Shorts Session in English (Main Auditorium B1.1) (simultaneous translation into Polish)	**Mini-Seminar** Session in English (Room B0.39)	**Mini-Seminar** Session in Polish (Room B0.38)
11:00–11:25 AM	**Itamar Guy, Debora Freud, Sveta Fichman** Speech disfluency characteristics of bilingual children and adolescents speaking Yiddish and Hebrew: a comparison Between Yiddish, Hebrew, and Translanguaging	11:00 AM–12:00 PM **Clara Burn, Liam Machin, Kirsten Howells, Jack Nicholas** Adventures in disclosure: The Tell, The Throw and The Catch	11:00 AM–12:00 PM **Joanna Murzyniec** Grupowa terapia jąkania dla dzieci w oparciu o Model CARE™ w publicznej poradni psychologiczno-pedagogicznej
11:25–11:50 AM	**Alhanouf Alhazimi** Using drawing-and-talking to explore the perspectives of Saudi children who stutter on talking		
11:50–12:15 PM	**Sabina Łukaszek, Monika Pakura, Joanna Szymczakowska, Katarzyna Węsierska** Experiential learning in speech therapy: SLT students' competence and readiness for stutter-affirming therapy		

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12:15–12:40 PM	**Katarzyna Węsierska, Maja Janik, Sabina Łukaszek, Monika Pakura, Justyna Szczypa, Joanna Szymczakowska, Natalia Świsłocka, Marta Wesierska** Bringing the CARE Model™ to Poland: Affirmative therapy for children who stutter	12:00–1:00 PM **Courtney T. Byrd, Geoffrey A. Coalson, Elizabeth Hampton** The science of strengths-based practices: Empirical support for the CARE Model™	12:00–1:00 PM **Karolina Milewska** „Mam prawo mówić": afirmacja jąkania jako praktyka odwagi i budowania odporności psychicznej
12:40–13:00 PM	**Q&A**		
1:00–1:45 PM	**Lunch Break** (Cafeteria and Main Foyer, building B ground floor)		
1:45–2:30 PM	**Poster Session 1** (Main Foyer, building B, first floor)		
Keynote Speakers (Main Auditorium B1.1) (simultaneous translation into Polish)			
2:30–3:00 PM	**Kirsten Howells:** Changing the System, Not the Person: Turning good intentions into real change		
3:00–3:30 PM	**Rutger Wilhelm:** Cluttering: Perspectives of a lifetime		
3:30–4:00 PM	**Mandy Rodstrom:** Reclaiming wholeness: a love letter to the profession from a SLP who stutters		
4:00-4:15 PM	**Q&A**		
4:15–4:30 PM	**Refreshments** (Main Foyer, building B, ground and first floor)		
Panel Sessions			
	Research Shorts Session in English (Main Auditorium B1.1) (simultaneous translation into Polish)	**Mini-Seminar** Session in English (Room B0.39)	**Mini-Seminar** Session in Polish (Room B0.38)
4:30–5:00 PM	**Adi Zloof Golombick, Tal Sabag, Elinor Zuarez, Ruth Ezrati, Joseph Zohar, Leah Fostick** Trauma-related symptoms among adults who stutter	4:30-5:10 PM **Shiran Israel, Nava Levit-Binnun** Heroes and sages: Two journeys through the experience of stuttering	4:30-5:00 PM **Agnieszka Płusajska-Otto, Joanna Szymczakowska, Katarzyna Węsierska** Archiwum Defaworyzowanych – Wielogłos o jąkaniu i giełkocie jako narzędzie zmiany narracji społecznej, praktyki logopedycznej i dydaktyki akademickiej
5:00-5:30 PM	**Olga Jauer-Niworowska, Nataliia Babych** The original speech-language therapy program for Ukrainian war veterans with speech disfluency: The report of the pilot study		

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5:30-6:00 PM	**Monika Kaźmierczak** Maze-like patterns in cluttered speech: a bifurcation analysis	5:15–6:25 PM **Panel dyskusyjny / Panel Discussion** Many voices, shared insights: Bridging expertise and experience in speech therapy. Professional and research perspectives	5:10–6:25 PM **Panel dyskusyjny / Panel Discussion** Wielogłos w logopedii – perspektywa osób z doświadczeniem jąkania i giełkotu oraz rodziców
6:00-6:20 PM	**Q&A**		
6:20-6:35 PM	**Day 1 Conference Closing** (Main Auditorium B1.1)		
7:30-10.00 PM	**Gala Dinner**		

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Funding amount: PLN 765,600

Conference Program

University of Silesia in Katowice, Poland
Day 2, Sunday, July 26, 2026

8:15–8:55 AM	**Registration** (Main Foyer, building B, ground floor)		
8:55–9:00 AM	**Welcome and Notices** (Main Auditorium B1.1)		
Keynote Speakers (Main Auditorium B1.1) (simultaneous translation into Polish)			
9:00–9:45 AM	**Sharon Millard:** Therapy with older school-aged children who stutter: Palin Stammering Therapy for School-aged Children who stutter (Palin STSC (8-14))		
9:45–10:30 AM	**Susanne Cook:** Many voices, different barriers: Neurodiversity-affirming therapy in stuttering and cluttering		
10:30–10:45 AM	**Q&A**		
10:45–11:00 AM	**Refreshments** (Main Foyer, ground and first floor)		
Panel Sessions			
	Research Shorts Session in English (Main Auditorium B1.1) (simultaneous translation into Polish)	**Mini-Seminar** Session in English (Room B0.39)	**Mini-Seminar** Session in Polish (Room B0.38)
11:00–11:25 AM	**Zeynep Sumeyra Bozkurt, Halil Tayyip Uysal, Nurten Tiryaki** The Anti-Stigma Program for Stuttering: a culturally adaptable framework	11:00 AM–12:00 PM **Ulrike Felsing** How the use of solution-focused questions enriches stuttering therapy	11:00 AM–12:00 PM **Aleksandra Boroń** Jak terapeuta jąkania i giełkotu może wykorzystać uważność i współczucie?
11:25–11:50 AM	**Kirsten Howells, Katie Maras, Sohee Patk, Patrick Grafton, Jasmine Peat, Navyaa Toshniwal** Eyewitness testimony by individuals who stutter: Evidence, experience, and perceived credibility		
11:50–12:15 PM	**Veysel Kizilboğa, Mahmut Kizilboğa, Nurcan Alpuran Kocabiyik** Beyond fluency: An exposure-based intervention with active parental involvement to enhance risk-taking and	12:00–1:00 PM **Ana Karina Espinoza** Positive Psychology creating communicative wellbeing for stuttering and cluttering	12:00–1:00 PM **Aleksandra Jastrzębowska-Jasińska** Połączenie podejścia logopedycznego, psychologicznego i biochemicznego w terapii jąkania

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Project No.: NdRS/SP/0024/2025/01
Funding amount: PLN 765,600

12:15–12:40 PM	**Maja Janik** „Through Parents' Eyes": a qualitative study of the first Polish edition of Camp Dream. Speak. Live.		
12:40–1:00 PM	**Q&A**		
1:00–1:45 PM	**Lunch Break** (Cafeteria and Main Foyer, building B ground floor)		
1:45–2:30 PM	**Poster Session 2** (Main Foyer, building B first floor)		
Keynote Speakers (Main Auditorium B1.1) (simultaneous translation into Polish)			
2:30–3:00 PM	**Victoria Tumanova:** Understanding preschool stuttering: Speech-motor control, cognitive and temperamental factors, and therapy implications.		
3:00–3:30 PM	**Selma Saad-Merouwe:** Two languages, one question: a closer look at stuttering in bilingual children		
3:30–4:00 PM	**Martine Vanryckeghem:** There is a crack in everything; that's how the light gets in		
4:00–4:15 PM	**Q&A**		
4:15–4:30 PM	**Refreshments** (Main Foyer, ground and first floor)		
Panel Sessions			
	Research Shorts Session in English (Main Auditorium B1.1) (simultaneous translation into Polish)	**Mini-Seminar** Session in English (Room B0.39)	**Mini-Seminar** Session in Polish (Room B0.38)
4:30–4:55 PM	**Sveta Fichman, Debora Freud** Observed disfluencies and self-perceived speaking ability among Hebrew-speaking children and adolescents	4:30–5:10 PM **Panel dyskusyjny / Panel Discussion** Many voices, shared insights: Bridging expertise and experience in speech therapy. Consumer and supporter perspectives	4:30-5:00 PM **Sebastian Bauerfeind** Jąkanie w perspektywie neuroróżnorodności: neurobiologiczne podstawy inkluzywnego podejścia
4:55–5:30 PM	**Katarzyna Wyrwas, Joanna Szymczakowska, Katarzyna Węsierska** The conceptualization of the verb „to stutter" in selected languages:		

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5:30–6:00 PM	**Şevket Özdemir, Mehdi Bakhtiar** A qualitative cross-cultural exploration of parental perception towards stuttering in Türkiye and Hong Kong	5:15–6:25 PM **Liora Shraga Emanuel** Dance your stuttering	5:10–6:25 PM **Panel dyskusyjny / Panel Discussion** Wielogłos w logopedii – Eksperci mają głos
6:00-6:20 PM	**Q&A**		
6:25–6:40 PM	**Award Ceremony and Conference Closing** (Main Auditorium B1.1)		

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POSTER SESSION

Main Foyer, First Floor, Building B
Time: 1:45-2:30 PM

POSTER SESSION Best Student Poster Award Competition		
POSTER NUMBER	AUTHOR/S	TITLE
P1	Justyna Suchacka	Communication dynamics between people who stutter and healthcare providers
P2	Justyna Suchacka, Mirosław Skorek	(Non)Fluent Identity: a Biographical Case Study of an Adult Who Stutters from an Interdisciplinary Perspective
P3	Zhixing Yang, Ria Bernard, Peter Howell	Consensus or Conflict? Comparing Attitudes and Reactions Toward Stuttering and Anxiety Across Key Communication Partners (KCP)
P4	Halide Elif Pamuk, R. Sertan Özdemir	Comparing the effectiveness of combined group and individual tele-therapy for adolescents who stutter: a quasi-experimental study
P5	Wiktoria Janus, Katarzyna Węsierska	Preparing for Early Childhood Stuttering Therapy: Perspectives of Polish Speech-Language Therapy Students and Academic Staff
P6	Deniz Kubra Yuce, Uysal, Halil Tayyip	Stutter-Affirming Therapy Experiences of Adults Who Stutter: a Reflexive Thematic Analysis
P7	Julia Leonik, Joanna Szymczakowska	Implementing The Blank Center Care Model™ in Poland: Speech-Language Therapists' Perspectives on Stuttering-Affirming Practice
P8	Nikola Konieczna, Monika Pakura	A Person Who Stutters at the Workplace – Results of a Mixed Methods Study
P9	Anna Mastaj	The role of parents in shaping attitudes toward their child's stuttering – a case study
P10	Büşra Coşaroğlu, Tuğçe Karahan Tığrak, Maviş Emel Kulak Kayıkcı	The Relationship Between Speech-Language Therapists' Awareness of Cognitive Flexibility and Their Reported Clinical Practices: a Pilot Study
P11	Erik X. Raj, Natalia Radkowska-Marczak, Justyna Szczypa	Jumping Forward Together: Using Jump Rogi as a Valid Digital Tool for Stuttering Therapy
P12	Erik X. Raj, Natalia Radkowska-Marczak, Justyna Szczypa	Wspólne skakanie naprzód: wykorzystanie Jump Rogi jako skutecznego narzędzia cyfrowego w terapii jąkania
P13	Natalia Radkowska--Marczak	Changes in Speech-Language Pathology Students' attitudes toward stuttering through contact with a Self-Help Group—a qualitative analysis

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P14	Donatella Tomaiuoli, Francesca Del Gado, Lisa Scordino, Diletta Vedovelli	"MaKING fun: a board game for children who stutter to strengthen resilience, provide functional coping strategies, and modify environmental responses."
P15	Anna Starczewska, Katarzyna Węsierska, Marta Wesierska	Exploring Therapeutic Goals and Preferences in Stuttering Therapy among Polish-Speaking Adults: a Mixed-Methods Study
P16	Aleksandra Boroń, Katarzyna Buk	Wpływ uważności i współczucia na jakość życia osób z jąkaniem i giełkotem – wstępne wyniki badań
P17	Julia Leonik, Joanna Szymczakowska	Wdrażanie Modelu Blank Center CARE™ w Polsce: perspektywy logopedów na temat afirmującego podejścia w terapii jąkania
P18	Natalia Radkowska-Marczak	Zmiana postaw studentów logopedii wobec jąkania dzięki kontaktowi z grupą samopomocową – analiza jakościowa
P19	Jan Dezort, Martine Vanryckeghem	Czech adaptation of Behavior Assessment Battery

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Day 1: Saturday, July 25, 2026

Time: 8:55-9:00 AM
Room: Main Auditorium B1.1

Day 1: Conference opening

Keynote speakers
(in English, simultaneous translation into Polish)

Time: 9:00-9:45 AM
Room: B1.1

Title	**Many Voices, One World: The Growing Global Impact of Camp Dream. Speak. Live.**
Author	Courtney Byrd
Abstract	How does a strengths based framework empower children who stutter in their lives, relationships, and communities? Through the dedication of partners in more than 50locations worldwide, Camp Dream. Speak. Live. provides a unique space for exploring this question. This keynote reflects on how a manualized, intensive program that targets communication, advocacy, resilience, and education (CARE) shapes participants' experiences across interconnected contexts: the individual (enhancing communication effectiveness and psychosocial well-being), the family (building understanding and supportive interactions), and the school (promoting classroom engagement and positive peer relationships), while also functioning as a training opportunity in culturally responsive practices for students and clinicians. Examining these layers of impact offers insight into how the CARE model™ yields meaningful clinical outcomes and advances global efforts to end the stigmatization of stuttering.

Time: 9:45-10:30 AM
Room: B1.1

Title	**Supporting Children Who Stutter: a Clinician's Guide to Understanding and Working with Temperament**
Author	Kurt Eggers
Abstract	During this lecture, we will explore the role of temperament - biologically based differences in emotional reactivity and self-regulation - in children who stutter. Temperament influences emotional expression, attention, and behavior, affecting social interactions and response to therapy. Research highlights its relevance in understanding and treating developmental stuttering, emphasizing the importance of "goodness-of-fit" between a child's temperament and their environment. The session will cover key temperament dimensions, recent findings in children who stutter, and clinical applications. Attendees will learn to assess temperament in children and caregivers and adapt interaction styles to support self - regulation and resilience. Practical strategies and clinical examples will guide participants in integrating temperament-sensitive approaches into evaluation and intervention for more personalized and effective stuttering support.

	This lecture will include (a) providing a foundational understanding of temperament theory, including key dimensions such as emotional reactivity, effortful control, and adapt ability; (b) presenting recent research findings on temperament profiles in children who stutter; and (c) discussing how these insights inform clinical decision - making in stuttering intervention. Participants will be introduced to practical tools for evaluating the temperament of both children and their caregivers. We will then explore how to adapt parent-child and teacher-child interaction patterns to support the child's regulatory capacities. Through real-world clinical examples, participants will learn strategies to enhance a child's self-regulation, modulate reactivity, and strengthen frustration tolerance and resilience. By the end, participants will be able to integrate temperament-sensitive approaches into their diagnostic evaluations and therapy planning, enabling more individualized and effective support for children who stutter.

Research shorts
(in English, simultaneous translation into Polish)

Time: 11:00-11:25 AM
Room: B1.1

Title	**Speech disfluency characteristics of bilingual children and adolescents speaking Yiddish and Hebrew: a comparison between Yiddish, Hebrew, and Translanguaging**
Authors	Itamar Guy, Debora Freud, Sveta Fichman
Keywords	Disfluency, Bilingual, Translanguaging, Cultural adaptation
Abstract	The speech of bilingual children and adolescents often exhibits a higher frequency of disfluencies compared to monolingual peers (e.g., Eggers et al., 2020). However, the influence of age, age of onset of bilingualism (AoB), and language proficiency on these patterns remain unclear. Furthermore, translanguaging—the spontaneous mixing of languages—might reduce disfluency frequency by lowering the cognitive load associated with language inhibition. The current study characterizes disfluency patterns and self-rated speaking ability among Yiddish-Hebrew bilingual children from the Ultra-Orthodox community in Israel across three language conditions: the Home Language (HL/Yiddish), the Societal Language (SL/Hebrew), and translanguaging (TL). Participants included 50 Yiddish-Hebrew children (ages 7–17). Speech samples (spontaneous speech, storytelling, and retelling) were collected in three separate sessions using culturally adapted Frog books (Mayer, 1969, 1974, 1975am 1975b). Disfluencies were analyzed by frequency and type, distinguishing between stuttering-like disfluencies (SLD) and other disfluencies (OD). Language history was assessed via the Language Experience and Proficiency Questionnaire (LEAP-Q, Marian et al., 2007), and perceived speaking ability was measured using the Overall Assessment of the Speaker's Experience of Stuttering-Speaking Ability (OASES-SA, Yaruss & Quesal, 2006). OASES-SA-S was used for children aged 7-12 and OASES-SA-T for adolescents aged 13-17. Findings revealed significant differences across conditions for disfluency rates and self-rated speaking ability. SLD rates were approximately 1.5% across all conditions—lower than previously reported for bilinguals—with no significant variation between languages. However, ODs were most frequent in Hebrew. While participants demonstrated few disfluencies during translanguaging, they rated their speaking ability in this condition as the most challenging (highest OASES scores). Conversely, they rated their ability in Hebrew most positively, despite it having the highest OD rates. As expected, disfluency rates decreased significantly as age and language exposure increased. These results provide novel evidence that objective disfluency rates do not always align with a speaker's perceived competence in typically developing bilingual children. While

	translanguaging may be linguistically efficient, speakers may perceive it as more effortful or less "correct." These findings contribute to a deeper understanding of how bilingualism shapes both the production and the internal experience of speech disfluency.

Time: 11:25-11:50 AM
Room: B1.1

Title	**Using drawing-and-talking to explore the perspectives of Saudi children who stutter on talking**
Author	Alhanouf Alhazimi
Keywords	Children who stutter, Child-centred research methods Drawing-and-talking methodology, Culturally responsive practice, Children's perspectives
Abstract	Background Few studies have directly asked children who stutter about their experiences of talking, particularly in culturally and linguistically diverse contexts where developmentally and culturally appropriate methods are limited (Alhazimi et al., 2025). This study examined whether a drawing-and-talking method could be used successfully with Saudi children who stutter (CWS). It also explored the adaptation of an existing drawing protocol (McCormack et al., 2022) for use in Arabic and across telepractice contexts. Methods Thirty Saudi CWS, aged 6;0 to 10;11 years, took part in the study. Most sessions (95%) were conducted online. Children were invited to draw themselves talking to another person, describe what was happening in the drawing, and indicate how they felt about talking using a smiley-face rating (McLeod, 2004). Drawings were first reviewed for developmental adequacy, that is, whether they were sufficiently representational to support interpretation. The drawings and children's verbal explanations were then analysed using Focal Point Analysis (McCormack et al., 2022). Results The children engaged meaningfully with the task, and all 30 produced drawings that were developmentally adequate for analysis. Most participants, 27/30 (90%), represented talking either visually or through their explanations. Relationships were a prominent feature in 28/30 drawings (93%), while 16/30 (53%) foregrounded talking and listening. Children more often expressed positive feelings about talking, 17/30 (57%), than negative feelings, 3/30 (10%), or indicated "no talking", 3/30 (10%). Only a minority referred explicitly to stuttering; most drawings instead depicted everyday social conversations. Data collection in Arabic required only minor linguistic and procedural adaptations in both online and in-person settings. Conclusions These findings suggest that drawing-and-talking is a feasible and culturally appropriate method for eliciting Saudi children's perspectives on talking. The method may enrich clinical assessment by foregrounding children's views of participation, relationships, and emotional experience, rather than relying solely on speech fluency measures.

Time: 11:50 AM-12:15 PM
Room: B1.1

Title	**Experiential Learning in Speech Therapy: SLT Students' Competence and Readiness for Stutter-Affirming Therapy**
Authors	Sabina Łukaszek, Monika Pakura, Joanna Szymczakowska, Katarzyna Węsierska
Keywords	stuttering, stuttering-affirming therapy, experiential learning, education of speech-language therapy students, CARE model™

Abstract	Research indicates that developing clinical competence in speech-language pathology requires integrating theoretical knowledge with practical experience, including experiential learning and direct interaction with people who stutter (Byrd et al., 2022; Coalson et al., 2016; Steyl et al., 2016; Yaruss et al., 2017). Building on this premise, the present study examined the role of experiential learning in preparing speech and language therapy (SLT) students to work with people who stutter, with particular emphasis on the affirmative approach to stuttering and the CARE model™. The study explored how participation in immersive programs – Camp Dream. Speak. Live. Poland and the SLT Student Summer at the University of Silesia – influences students' professional preparation and their perceptions of the feasibility of implementing stuttering-affirming therapy within the Polish speech-language pathology context. a qualitative research design was employed, based on semi-structured interviews with 12 female speech-language therapy students. The analysis focused on students' experiences prior to participation in the programs, the course of immersive learning, and their reflections on the role of the speech-language pathologist and the goals of stuttering therapy. Four themes were identified: preparation for working with people who stutter, the experience of participation in the Camp, personal development and shifts in professional perspective, and reflections on implementing the CARE model™. The findings indicate a shifts in attitudes toward stuttering, the development of interpersonal competencies, and increased readiness to work within an affirmative framework. Overall, the findings suggest that experiential learning enhances the preparation of speech-language pathology students for contemporary clinical practice and that the CARE model™ may serve as a valuable support in educating future professionals.

Time: 12:15-12:40 PM
Room: B1.1

Title	**Bringing the CARE Model™ to Poland: Affirmative Therapy for Children Who Stutter**
Authors	Katarzyna Węsierska, Maja Janik, Sabina Łukaszek, Monika Pakura, Justyna Szczypa, Joanna Szymczakowska, Natalia Świsłocka, Marta Wesierska
Keywords	stuttering therapy, affirmative therapy, paradigm shift, CARE model™
Abstract	Objective In Poland, stuttering has traditionally been conceptualized within a fluency-focused and medicalized framework (Tarkowski, 2025; Pakura et al., 2024). However, international research increasingly emphasizes the need to redefine therapeutic success beyond fluency, including communication participation, self-advocacy, resilience, and knowledge about stuttering (Constantino, 2023; Tichenor & Yaruss, 2019; Yaruss, 2010). This presentation introduces the implementation of an affirmative intervention based on the CARE Model™ in Poland and reports outcomes from two editions of Camp Dream. Speak. Live. Poland (2024, 2025). Methods A mixed-methods pre-post study design was used to evaluate an intensive five-day group intervention based on the CARE Model™ (Communication, Advocacy, Resiliency, Education; Byrd et al., 2024). The program does not prioritize fluency as a primary therapeutic goal, focusing instead on effective communication, self-advocacy, resilience, and education. The study included 24 school-aged children who stutter and 11 caregivers. Quantitative data were collected approximately one week before and after the program using the CARE Model™ Assessment (Byrd et al., 2023a; 2023b). Qualitative data from open-ended responses were analyzed to contextualize and enrich the quantitative findings. Results

	Children demonstrated significant increases in overall CARE scores and across all four domains, with the strongest effects observed in advocacy, education, and total scores. Significant improvements were also found in self-reported overall communication and resilience, while situational communication showed a positive but non-significant trend toward improvement. Caregivers reported improvements across all domains also reported, particularly in advocacy and overall communication. Qualitative findings indicated a shift from fluency and avoidance-oriented perspectives toward a communication-focused, proactive, and affirmative approach. Participants reported more frequent use of disclosure strategies, increased assertiveness, and greater openness in communication, alongside higher self-compassion, reduced stigma, and a more accurate understanding of stuttering as a trait rather than a deficit (e.g., Byrd et al., 2017; Gerlach-Houck & Constantino, 2022; Reeves et al., 2023; Young et al., 2023). Conclusions An affirmative intervention based on the CARE Model™ can be effectively implemented in the Polish context and may lead to meaningful therapeutic change without directly targeting fluency. The findings support a broader redefinition of therapeutic success in stuttering, emphasizing communication, agency, and identity, and highlight the potential for integrating neurodiversity-informed approaches into clinical practice in Poland.

Mini-Seminar
(in English)

Time: 11:00 AM-12:00 PM
Room: B0.39

Title	**Adventures in disclosure: The Tell, The Throw and The Catch**
Authors	Clara Burn, Liam Machin, Kirsten Howells, Jack Nicholas
Keywords	disclosure, informed choice
Abstract	Disclosure is when you deliberately tell someone else something about yourself — perhaps at home, at school, with friends or those you hope will become friends. Or you might need to tell people at work something, if you need support or a different set-up so you can do your job more easily. We always disclose for a reason. We may want to feel better about ourselves; someone who often hides their stutter may want to let people know what is happening under the surface. Someone whose stutter is obvious may want people to respond differently ("please stop interrupting me!"). Yet, disclosure of stuttering or cluttering has both risks and opportunities. And, as SLTs/SLPs, we do people a disservice if we emphasise the opportunity while ignoring or downplaying the danger. It should always be your choice whether to disclose. Telling someone about some part of you is deeply personal. You are opening a door and letting them in; you may well be showing a part of yourself you have kept hidden or that worries you. However, many people who stammer feel under pressure from social media and elsewhere to disclose regardless of their concerns or the situation in which they find themselves: "just disclose and it will be liberating! Life-changing!" Over recent years, a working group at STAMMA, the UK's national stammering charity, has been developing The Tell, the Throw and the Catch™ framework which aims to maximise the opportunities while also explaining and countering the risks so that people can make an informed choice about when, how, what, and indeed, if, they disclose. In this session, we'll present The Tell, The Throw and The Catch framework, and the series of interviews that informed its development. The framework is proving popular in the UK with SLTs reporting that they can use it straightaway with a range of client groups. It's easy to remember, easy to use, and provides a useful 'language' for thinking, talking about and experimenting with disclosure.

	The interviews also identified common real-life methods of disclosure used by people who stammer which are little researched. These methods would benefit from research attention to establish whether or not they are effective.

Time: 12:00-1:00 PM
Room: B0.39

Title	**The science of strengths-based practices: Empirical support for the CARE™ Model**
Authors	Courtney T. Byrd, Geoffrey A. Coalson, Elizabeth Hampton
Keywords	CARE Model™, treatment, assessment, children, adults
Abstract	This presentation will provide an updated overview of clinical data [1-11] and behavioral/experiential data [12-54] supporting the CARE Model™ - a strengths-based framework for stuttering that shifts focus away from an individual's stuttering and instead highlights their distinct strengths across four key components: Communication, Advocacy, Resilience, and Education (Byrd, Coalson, & Conture, 2024, 2026 for theory, treatment, and assessment data; see Byrd, 2022, 2023a-c for treatment manuals and assessments). Behavioral and Experiential Data Communication Communication competence and stuttering are statistically independent from speaker-perspective [12-14] and listener perspective [6-7,11,15-17]. Independence is reported by general public across varied professions and regardless of familiarity with stuttering [6-7,11,15-17]. Advocacy Non-apologetic self-disclosure [18-23,54], positively impacts speaker experiences [18-19] and listener perceptions [20-23,54]. Self-advocacy behaviors significantly improve peer relationships and social interaction [18-19]. Resiliency Willingness to initiate, persist through and not negatively ruminate over challenging communication situations is strengthened through self-compassion [12,24-26], and voluntary stuttering [27-28]. Strengthening of resilience proactively and reactively mitigates potential impacts of stuttering across severity levels and across the lifespan [12-24,26]. Education Knowledge regarding stuttering remains insufficient broadly and, notably, among children and adults who stutter, and their caregivers [29-35]. Misconceptions persist regarding etiology [50,52], incidence [53,45], variability [51], multilingualism [43-44], treatment [38-40], as well as the origin and nature of stuttering stigma [29-30,32,37,45-49]. Clinical Data Children Across four studies intensive dosage of CARE led to gains in communication [4-5], peer relationships [1,3-5], and well-being [1,3-5] (N > 140, medium-to-large ES). Findings demonstrate meaningful outcomes related to participation in Camp Dream. Speak. Live., an intensive dosage of the CARE Model treatment with a manualized protocol that provides a standardized, step-by-step framework for intensive delivery of CARE where every activity is theory-driven and highly scripted to optimize fidelity and adherence to the approach across clinicians and contexts. Preliminary, global CARE Assessment data gathered from provision of Camp Dream. Speak. Live. independently from the present authors indicate comparable post- treatment gains in Communication, Advocacy, Resiliency, and Education (N=173, medium-to-large ES; 12 cities, 5 countries). Caregivers Across four studies, caregivers reported their and their child's experience with the CARE Model™ of treatment led to significant improvements in their children's friendships2,4,9, communication [4,9-10], and quality of life [2,4,9-10] (N > 120 caregivers, 6 US cities, medium-to-large ES). Longitudinal data indicates that these caregiver-reported gains in

	communication, advocacy, resiliency, and education were sustained at 2-months and 12-months post-treatment [10]. Preliminary, global caregiver data gathered from independent providers again indicate comparable caregiver reported post-treatment gains across the four components of the model (N > 173, medium-to-large ES; 12 cities, 5 countries). Adults Across five studies, the CARE Model™ yielded significant improvements in communication [5-8,11] and psychosocial health [5-8,11] (N > 68, medium-to-large ES). Stuttering varied post-treatment (i.e., comparable or higher) and shared no relationship with communication gains [5-8,11]. Social validation of these gains was established by >1,200 untrained observers [7-8] (i.e., ~100 raters per participant in subsample). Preliminary data from pilot CARE Assessment indicate growth across each of the four components. References available at https://utexas.box.com/s/1qncg6ixcox1200cmg5hz0luqahvi34g for review.

Mini-Seminar
(in Polish)

Time: 11:00 AM-12:00 PM
Room: B0.38

Title	**Grupowa terapia jąkania dla dzieci w oparciu o Model CARE™ w publicznej poradni psychologiczno-pedagogicznej**
Author	Joanna Murzyniec
Keywords	jąkanie, terapia grupowa, wsparcie rówieśnicze, Model CARE™, poradnia psychologiczno-pedagogiczna
Abstract	Coraz częściej pojawiają się podejścia do terapii jąkania, które uwzględniają zarówno istotne informacje dotyczące natury jąkania, jak i doświadczenia osób jąkających się. Koncentrują się one na perspektywie klienta oraz biorą pod uwagę kontekst środowiskowy (Pakura, Szymczakowska i Węsierska, 2024). Do takich podejść należy Model CARE, opracowany w The Arthur M. Blank Center for Stuttering Education and Research. Jest to model oparty na koncepcji całościowego dobrostanu jednostki, przeznaczony głównie dla dzieci w wieku szkolnym. Zajęcia grupowe LOGOLAB THE CARE, Camp Dream.Speak.Live Poland stanowią przykład terapii grupowej wykorzystującej Model CARE™ w Polsce. Praktyczne zastosowanie tego modelu w terapii grupowej zainspirowało utworzenie grupy terapeutycznej dla dzieci doświadczających jąkania w specjalistycznej poradni psychologiczno-pedagogicznej w Skale (powiat krakowski). Terapia grupowa przynosi korzyści społeczne i emocjonalne niedostępne w terapii indywidualnej, wynikające z mechanizmów takich jak modelowanie, normalizacja doświadczeń, identyfikacja z grupą oraz wsparcie rówieśnicze (Janus, Pakura, Szymczakowska i Węsierska, 2025). Celem wystąpienia jest przedstawienie możliwości tworzenia grupy terapeutycznej w ogólnodostępnej poradni w oparciu o Model CARE™, z uwzględnieniem jego założeń teoretycznych oraz zastosowania w pracy grupowej. Szczególna uwaga zostanie poświęcona organizacji procesu terapeutycznego oraz potencjalnym korzyściom dla uczestników i ich rodziców wynikającym z implementacji tego podejścia w warunkach poradni.

Time: 12:00-1:00 PM
Room: B0.38

Title	**„Mam prawo mówić": afirmacja jąkania jako praktyka odwagi i budowania odporności psychicznej**
Author	Karolina Milewska
Keywords	afirmacja jąkania, neuroróżnorodność, odporność psychiczna, komunikacja
Abstract	Jako osoba jąkająca się przez wiele lat doświadczałam napięcia, wstydu oraz unikania sytuacji komunikacyjnych. z czasem zaczęłam poznawać podejścia proponowane przez specjalistów i terapie ukierunkowane na zmianę relacji z jąkaniem, zamiast skupiania się wyłącznie na płynności mowy. Spotkałam się z nimi m.in. w terapii modyfikacji jąkania (celowe jąkanie), stanowiącej podstawę Stuttering Affirming Therapy (SAT) – podejścia uwzględniającego neuroróżnorodność, wpływ stygmatyzacji oraz doświadczenie tożsamości osoby jąkającej się, wspierając autonomię, uczestnictwo społeczne i wolność komunikacyjną. Doświadczyłam ich podczas wydarzeń organizowanych przez logopedów z Fundacji Centrum Logopedyczne w Polsce – takich jak Międzynarodowy Dzień Świadomości Jąkania (ISAD), Konferencja Wielogłos o Jąkaniu i Giełkocie w Katowicach oraz Camp Dream.Speak.Live dla dzieci i młodzieży – a także podczas spotkań stowarzyszeń osób jąkających się w Niderlandach, w tym warsztatów i wydarzeń integracyjnych. w Holandii ISAD organizowane jest we współpracy stowarzyszeń i logopedów. Stowarzyszenia osób jąkających się opierają swoje działania na założeniach metod terapeutycznych, dając uczestnikom przestrzeń do eksperymentowania z nowym podejściem i praktykowania go w bezpiecznym otoczeniu, dzięki czemu mogą rozwijać umiejętności społeczne i komunikacyjne, korzystając z wiedzy specjalistów. Działania stowarzyszeń i fundacji łączą doświadczenie praktyczne z naukowym kontekstem akceptacji i odwagi w komunikacji. W tej sesji warsztatowej zapraszam zarówno osoby jąkające się, jak i osoby zainteresowane tematem jąkania (np. terapeutów, edukatorów, bliskich oraz liderów grup samopomocowych) do wspólnego, refleksyjnego doświadczenia afirmacji jąkania – praktyki świadomego przyjmowania i wyrażania własnego jąkania w sposób akceptujący i wspierający siebie. Afirmacja jąkania wspiera odwagę w komunikacji, akceptację siebie i odporność psychiczną, może być stosowana u dzieci, młodzieży i dorosłych. Choć nie eliminuje całkowicie stygmatyzacji, pomaga łagodzić jej skutki. Praktyka ta wpisuje się w ideę „prawa do jąkania", wyrażoną w międzynarodowej deklaracji ogłoszonej w 2022 roku z inicjatywy międzynarodowego środowiska osób jąkających się, we współpracy m.in. z International Stuttering Association oraz STAMMA. Deklaracja została podpisana przez 83 organizacje z 43 krajów, w tym m.in. Fundację Centrum Logopedyczne (FCL) i Fundację Wspierania Mowy i Komunikacji HALO, oraz przetłumaczonej na 18 języków. Idea ta nawiązuje także do rosnącego ruchu tożsamościowego, symbolizowanego m.in. przez flagę Stutter Pride, wyrażającą przekonanie, że głosy osób jąkających się są ważne i mają wartość oraz promującą szacunek, włączenie i celebrację kultury jąkania. Sesja łączy krótkie wprowadzenie z prostymi ćwiczeniami, w tym pracą z afirmacjami, oraz refleksją nad własnym doświadczeniem komunikacji – niezależnie od tego, czy dotyczy jąkania, giełkotu, czy innych sposobów wyrażania myśli. Spotkanie obejmuje czas na pytania i dyskusję, aby uczestnicy mogli dzielić się swoimi doświadczeniami i refleksjami. Celem nie jest „naprawa" mowy, lecz stworzenie przestrzeni do lepszego rozumienia doświadczenia jąkania i doświadczania bardziej wspierającego sposobu bycia w komunikacji – z większą uważnością, życzliwością i odwagą.

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Keynote speakers
(in English, simultaneous translation into Polish)

Time: 2:30-3:00 PM
Room: B1.1

Title	**Changing the System, Not the Person: Turning good intentions into real change**
Author	Kirsten Howells
Abstract	STAMMA is the UK's national stuttering charity. In this talk, Kirsten will outline some of STAMMA's recent collaborations with organisations like Starbucks, stadiums, customer support platforms, banks and universities. With real-life examples of the successes and the failures, the highs and the lows, Kirsten will share how sometimes, by changing the way organisations work and actually deliver their services, we're able to change the world in tangible ways for people who stutter.

Time: 3:00-3:30 PM
Room: B1.1

Title	**Cluttering: Perspectives of a lifetime**
Author	Rutger Wilhelm
Abstract	"Rarely, very rarely, one makes a discovery that shakes the foundation of their world to its very core. It's like realizing the earth is round instead of flat: a moment that suddenly dismantles assumptions and convictions you may have held for as long as you can remember. "In this talk, i will share such a discovery in relation to cluttering. i will explore how this insight emerged, how it challenges some common ways of thinking about cluttering, and what it means fo runderstanding the condition more deeply. From there, i will discuss the practical implications for therapy, focusing on several core principles that can guide more effective approaches. But this story is not only about discovery and therapy — it is also about personal growth. Understanding cluttering often involves a shift in perspective, both for professionals and for people who clutter themselves. Finally, i will present insights from a survey conducted among people who clutter, highlighting their experiences, challenges, and perspectives.

Time: 3:30-4:00 PM
Room: B1.1

Title	**Reclaiming Wholeness: a Love Letter to the Profession, From an SLP Who Stutters**
Author	Mandy Rodstrom
Abstract	This keynote is a love letter, but love letters, when written honestly, must also tell the truth. In this deeply personal and professionally whole keynote, a speech-language therapist who stutters reflects on 21 years of navigating a profession she chose out of calling, only to discover it would both wound and heal her in ways she never anticipated. Speaking from the intersection of clinician, person who stutters, trauma-informed practitioner, and advocate, she offers the field something rare: an honest account of what it costs to give your whole self to a profession not yet whole enough to receive it. Her voice, she has learned, was always worth hearing. This keynote insists that many voices, including the ones that stutter, belong at the center of our profession, not at its margins. This keynote names the shadow parts. It calls out the fluency-centered foundations of SLP training that positioned stuttering as a problem to be solved rather than a way of being to

	be honored, and the quiet violence done to clinicians and clients alike when that framework goes unexamined. It speaks to the microaggressions embedded in professional culture, the discomfort many SLPs display in the presence of stuttering, and the systemic failure of graduate programs to prepare clinicians to sit with stuttering without the impulse to fix it. It confronts the resistance within the field to anti-ableist, neurodiversity-affirming, and stutter-affirming practices, and the professional ego that clings to fluency-based frameworks when lived experience and evolving ethical standards challenge them. It also tells a story of reclamation. Of the moment a clinician stopped using a fluency-enhancing device that was causing more anguish than her natural stutter ever had. Of telling a child "I stutter too" and feeling the kind of connection, that only shared experience can create. Of finding, 18 years into her career, her people: the community of SLPs who stutter and the broader stuttering community, and the healing that arrived with being finally, fully witnessed. Of stepping into the identity of an overt person who stutters and discovering that the stutter she spent decades concealing was, all along, one of her greatest clinical gifts. This keynote honors the both/and: the gratitude and the grief, the profession's beauty and its blind spots, the love that survives the reckoning. It invites SLP professionals from across the globe to examine their own discomfort with stuttering, interrogate internalized ableism, and consider what truly person-centered, stutter-affirming care requires of us, not just as clinicians, but as human beings. Wholeness, this keynote reminds us, is not a destination. It is a practice. Reclaiming wholeness, this keynote argues, is not only the work of the people we serve. It is the work of our profession itself, in every language, across every border, and in every voice.

Research Shorts
(in English, simultaneous translation into Polish)

Time: 4:30-5:00 PM
Room: B1.1

Title	**Trauma-Related Symptoms Among Adults Who Stutter**
Authors	Adi Zloof Golombick, Tal Sabag, Elinor Zuarez, Ruth Ezrati, Joseph Zohar, Leah Fostick
Keywords	the Prevalence of Trauma-Related Symptoms in Adults Who Stutter, the Alignment of Stuttering Experiences with Complex PTSD, Correlations Between Trauma Responses and the Stuttering Experience
Abstract	Objective This study aimed to examine whether Adults who stutter (AWS) experience trauma-related symptoms and to explore the relationship between these symptoms, anxiety, and various aspects of the stuttering experience. Methods Fifty-five AWS and 41 AWNS completed the International Trauma Questionnaire (ITQ) adapted for stuttering/speaking events and two questions about dissociation frequency and intensity from the Clinician-Administered PTSD Scale for DSM-5 (CAPS-5). AWS also completed the Endler Multidimensional Anxiety Scales-Trait (EMAS-T), the Wright & Ayre Stuttering Self-Rating Profile (WASSP), and a perceived stuttering severity self-rating scale. The prevalence of trauma-related symptoms was compared between AWS and AWNS, and correlations between trauma-related symptoms and stuttering experience and perceived severity were conducted among AWS, while controlling for anxiety. Results

	Trauma-related symptoms were reported significantly more by AWS than AWNS. After controlling for anxiety, PTSD and CPTSD total score correlated with WASSP total score, but not with perceived stuttering severity. CPTSD total score correlated with thoughts and feelings about stuttering and avoidance and disadvantage due to stuttering. CPTSD was further correlated with feelings of anger and helplessness, avoidance of admitting your problem to yourself, and disadvantage at home. Conclusions This is the first quantitative study to demonstrate trauma-related symptoms among AWS as a result of their stuttering experiences. The presence of these symptoms among AWS suggests that a traumatic experience is linked to their communication difficulties. These findings underscore the importance of recognizing and addressing trauma and its manifestations in the assessment and treatment of stuttering.

Time: 5:00-5:30 PM
Room: B1.1

Title	**The original speech-language therapy program for Ukrainian war veterans with speech disfluency: The report of the pilot study**
Authors	Olga Jauer-Niworowska, Nataliia Babych
Keywords	trauma, war, stuttering, pilot study, speech-language therapy
Abstract	The conference speech refers to a pilot study concerning the original support program of Ukrainian veterans suffering from traumatic speech disfluency. The authors present the preliminary results of the study: effects of speech therapy in 3 patients with speech disfluency. Introduction: the authors assume the theory of the embodied mind. According to this theory the human is a biopsychic being. The brain is a substratum of every life activity, and at the same time it is shaped by psychological experiences and feelings. The symptoms of speech disfluency in veterans are caused by ongoing stress related to the war (Continuous Traumatic Stress Response- CTSR). Neuropsychological study conducted by Jolanta Góral-Półrola (2016) showed that disfunctions of the brain in patients with stuttering rely on the hyperactivity of the subcortical structures of limbic system (amygdala) and hypoactivity of the prefrontal cortex. This state is the cause of anxiety which often appears in people with stuttering. The hypoactivity of the prefrontal cortex results in dysregulation of motor control, including the speech. Similar dysfunctions of the brain structures are observed in people with PTSD (Frueh et. al 2012, Litz 2014, Le Doux 2017, Cooper et. al 2024). It is crucial to create a sense of safety in the course of speech therapy. The improvement of emotional state of patients is necessary for recovery and reorganization of the neuronal networks which are disrupted by stress. The authors of the program strive to achieve synchronization of the brain activity through the loops between the brain hemispheres, between basal ganglia and frontal cortex, and between the brain and the cerebellum. The fluctuations of the speech motor-skills related to the psychological state of the patients should be taken into account. Methodology of research: the study is qualitative. We describe the patients' state in case studies. The presented approach is accepted by researches in military psychology (Cooper et. al 2024). The rules and procedures of therapy: 1. positive therapeutical relationship between speech therapist and the patients (empathy, anamnesis, observation), 2. individual approach to each and every patient, 3. training of cognitive control of attention and breathing, phonation and coordination of movements, 4. gradation of difficulty of the exercises in the course of therapy, 5. creating the self-efficacy in patients in the course of therapy. The assessment of the results of therapy: an assessment of speech fluency and emotional comfort during speech made by each patient himself/herself, an expert opinion

	made by the speech therapist, a quantitative analysis of the speech disfluency, which is made before and after the therapy.

Time: 5:30-6:00 PM
Room: B1.1

Title	**Maze-like patterns in cluttered speech: a bifurcation analysis**
Author	Monika Kaźmierczak
Keywords	cluttering, maze-like speech, bifurcation, nonlinear dynamics, chaos theory
Abstract	Introduction: Cluttered speech is often described as irregular and difficult for listeners to follow. Its rapidly changing, unstable nature suggests the presence of underlying nonlinear dynamics. Yet, the internal structure and the emergence of complex, maze-like speech patterns in cluttering remain poorly understood. Aim: This study demonstrates the application of chaos theory tools to identify one of the most frequently observed features of speech in individuals who clutter: its labyrinthine organization. It further investigates how complex, maze-like patterns emerge in cluttered speech. Materials and Methods: a chaological analysis strategy was employed, with a particular focus on bifurcations in the speech of individuals with suspected or diagnosed cluttering. Sample utterances were analyzed across three age groups: preschool children, adolescents, and adults. Speech samples were examined in terms of segmentation patterns, turbulence, and transitions between relatively stable and unstable speech states. Finally, moments of bifurcation were compared with respect to their course, as well as the linguistic and paralinguistic phenomena that precede them. Results: Analysis revealed differences between mild, local fluctuations that do not result in message splitting, and turbulences that lead to bifurcations-perceived by listeners as unexpected phrasing or sudden reorganizations of utterance structure and considered chaotic. While a similar overall pattern of bifurcations was observed across age groups, significant differences emerged in the linguistic profiles of participants, reflecting variations in language competence and proficiency. Conclusions: Cluttered speech undergoes bifurcation-like transitions, producing labyrinthine speech trajectories that reflect the nonlinear dynamics of this mode of speaking. These findings indicate that the specific organization of cluttered speech follows dynamic trajectories that can, however, be identified, analyzed, and characterized — an approach made possible by chaos theory tools adapted for speech therapy research. Viewing cluttered speech through the lens of nonlinear dynamics provides a novel framework for understanding its variability and instability, offering insights that may enhance both theoretical modeling and clinical assessment of cluttering.

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Mini-Seminar
(in English)

Time: 4:30-5:10 PM
Room: B0.39

Title	**Heroes and Sages: Two Journeys Through the Experience of Stuttering**
Authors	Shiran Israel, Nava Levit-Binnun
Keywords	Archetypal frameworks: the Hero and the Sage; Hero's Journey restorying as a therapeutic tool; Wisdom science: perspective-taking and exploratory processing
Abstract	What do Harry Potter and Dumbledore have to do with stuttering? More than you might think. Harry - the unlikely hero whose journey is to overcome: to face the impossible, endure transformation, and emerge changed. Dumbledore - the sage whose journey is to serve: to take what darkness has taught him and offer it, with wisdom and humility, to those still on their journey. These are not just beloved characters; they are two of humanity's oldest archetypes, appearing across cultures and centuries in every tradition that has ever tried to make sense of adversity and growth. This workshop proposes that both archetypes live within each of us and represent two distinct, equally meaningful journeys. The hero's journey is one of overcoming; the sage's journey is one of service. People who stutter and speech-language pathologists alike may find themselves on both paths - facing their own challenges, and drawing on hard-earned wisdom to support others. Background Two frameworks from narrative psychology and wisdom science offer concrete tools for engaging both journeys. The Hero's Journey, a universally resonant narrative arc, has been shown to causally increase meaning in life when people restory their own experiences through its seven elements: protagonist, shift, quest, allies, challenge, transformation, and legacy. Wisdom science points to specific reflective practices - perspective-taking and exploratory processing - as pathways toward the kind of insight that adversity alone does not guarantee (Glück & Weststrate, 2022). Both frameworks belong to everyone in the room: the clinician who has grown through years of practice is as much a sage in the making as the person who has navigated a lifetime of stuttering. Preliminary Findings An ongoing cross-sectional study with adults who stutter examines associations between Hero's Journey narrative identity, wisdom, systems thinking, meaning in life, and the lived experience of stuttering. Preliminary findings suggest that seeing one's life story as a Hero's Journey, and higher wisdom, are each associated with a significantly less adverse experience of stuttering - with Hero's Journey emerging as a particularly strong effect. Additional variables, including systems thinking, meaning in life, and exploratory orientation, are currently being examined in the full sample. Final results will be presented at the conference. Workshop Activities and Objectives Participants will be guided through a narrative restorying process using structured Hero's Journey prompts (Rogers et al., 2023). This will be followed by wisdom-based exercises, such as perspective-taking reflection and an exploratory processing (Weststrate & Glück, 2017; Webster et al., 2018), in which participants step back from a difficult experience to ask not only what happened, but what it means and who they are becoming through it. This workshop does not seek to impose a single story, but to open space for many - hero stories and sage stories alike. We will explore how these practices can be integrated into therapy, self-help, and everyday life. Participants will leave with: (1) a deeper understanding of narrative and meaning-making in stuttering; (2) direct experience of restorying and wisdom-based reflection; and (3) practical ideas for applying these approaches in clinical and personal contexts.

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Panel Discussion

Time: 5:15-6:25 PM
Room: B0.39

Title	**Many voices, shared insights: Bridging expertise and experience in speech therapy. Professional and research perspectives**

Mini-seminars (in Polish)

Time: 4:30-5:00 PM
Room: B0.38

Title	**Archiwum Defaworyzowanych – wielogłos o jąkaniu i giełkocie jako narzędzie zmiany narracji społecznej, praktyki logopedycznej i dydaktyki akademickiej**
Authors	Agnieszka Płusajska-Otto, Joanna Szymczakowska, Katarzyna Węsierska
Keywords	Archiwum Defaworyzowanych, jąkanie, giełkot, zmiana narracji, praktyka logopedyczna, dydaktyka akademicka
Abstract	Celem mini-seminarium jest zaprezentowanie projektu „Archiwum Defaworyzowanych" jako odpowiedzi na rosnącą potrzebę zmiany społecznej w sposobie rozumienia jąkania i giełkotu. w literaturze przedmiotu coraz częściej podkreśla się ograniczenia dominującego modelu medycznego, który koncentruje się na deficycie i normalizacji mowy, pomijając doświadczenie jednostki oraz kontekst społeczny (Boyle, 2018; Boyle i in., 2023, 2024; Bridgman i in., 2025; Giuffre, 2025; St. Louis i in., 2011; Węsierska i in., 2021, 2026). Badacze wskazują również na istotny wpływ stygmatyzacji, stereotypów i presji komunikacyjnej na jakość życia osób jąkających się oraz z giełkotem (Boyle, 2015; Johnson i in., 2024; Plexico, Erath, 2023; Tichenor i in., 2022). w odpowiedzi na te zjawiska rozwijają się podejścia oparte na neuroróżnorodności i modelu społecznym niepełnosprawności, które postulują przesunięcie akcentu z „naprawy sposobu mówienia" na akceptację, dobrostan oraz zmianę postaw społecznych (Constantino, 2023; Campbell, Constantino & Simpson, 2022; Sisskin, 2023). W tym kontekście „Archiwum Defaworyzowanych" stanowi narzędzie umożliwiające włączenie głosów osób z doświadczeniem jąkania i/lub giełkotu do edukacji akademickiej, praktyki logopedycznej oraz dyskursu społecznego. Projekt wpisuje się w podejście Evidence-Based Practice, uwzględniając obok dowodów naukowych i doświadczenia klinicznego także trzeci filar – perspektywę klienta (Bernstein Ratner, Brundage, 2026). Celem mini-seminarium jest ukazanie potencjału Archiwum jako narzędzia wspierającego zmianę narracji społecznej, rozwój refleksyjnej praktyki terapeutycznej oraz kształcenie przyszłych logopedów. Istotnym aspektem projektu jest jego aplikacyjność w obszarze interwencji logopedycznej. Materiały Archiwum mogą być wykorzystywane w procesie psychoedukacji rodziców dzieci z jąkaniem i giełkotem, umożliwiając kontakt z autentycznymi narracjami osób z podobnymi doświadczeniami, co sprzyja redukcji lęku, normalizacji trudności oraz kształtowaniu bardziej wspierających postaw wobec komunikacji dziecka. Mogą one również stanowić punkt wyjścia do pracy terapeutycznej z klientami – wspierać rozwój ich tożsamości komunikacyjnej, refleksyjności oraz poczucia sprawczości. Archiwum pełni także funkcję wartościowego zasobu dydaktycznego w kształceniu studentów logopedii i kierunków pokrewnych. Włączenie narracji osób z doświadczeniem jąkania i giełkotu do procesu dydaktycznego sprzyja rozwijaniu kompetencji empatycznych,

	krytycznego myślenia oraz przygotowaniu do prowadzenia bardziej partnerskiej, zindywidualizowanej i inkluzyjnej praktyki. Może to przyczyniać się do lepszego przygotowania specjalistów zajmujących się jąkaniem i giełkotem, szczególnie w zakresie rozumienia złożoności doświadczenia klienta. Mini-seminarium będzie miało charakter wykładowo-refleksyjny. Uczestnikom zostaną zaprezentowane założenia projektu oraz wybrane materiały (fragmenty nagrań, wypowiedzi uczestników), ilustrujące zróżnicowane doświadczenia osób jąkających się i z giełkotem. Prezentacja zostanie uzupełniona komentarzem interpretacyjnym odnoszącym się do podejścia narracyjnego oraz możliwości wykorzystania Archiwum w praktyce terapeutycznej i dydaktycznej. Oczekiwanym efektem mini-seminarium jest zwiększenie świadomości uczestników na temat zróżnicowanych doświadczeń osób jąkających się i z giełkotem oraz pogłębienie rozumienia wpływu społecznych reakcji i dominujących narracji na ich funkcjonowanie. Uczestnicy będą mieli możliwość dostrzeżenia alternatywnych sposobów ujmowania niepłynności mowy – jako elementu tożsamości i różnorodności, a nie wyłącznie zaburzenia. Zakłada się również rozwój refleksyjności zawodowej oraz inspirację do wykorzystania Archiwum w działaniach terapeutycznych, edukacyjnych i profilaktycznych, ukierunkowanych na zmianę postaw społecznych wobec różnorodności komunikacyjnej.

Dyskusja panelowa/Panel Discussion
(in polish)

Time: 5:10-6:25 PM
Room: B0.38

Title	**Wielogłos w logopedii – perspektywa osób z doświadczeniem jąkania i giełkotu oraz rodziców**

Conference Closing

Time: 6:25-6:35 PM
Room: B1.1

Day 1 Conference Closing

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Day 2: Sunday, July 26, 2026

Time: 8:55-9:00 AM
Room: B1.1

Welcome and Notices

Keynote speakers
(in English, simultaneous translation into Polish)

Time: 9:00-9:45 AM
Room: B1.1

Title	**Therapy with older school-aged children who stutter: Palin Stammering Therapy for School-aged Children who stutter (Palin STSC(8-14))**
Author	Sharon Millard
Abstract	When we listen to the Many Voices of children and parents and what they want from therapy, we find that they have multiple, wide-ranging and individual hopes. They want therapy that supports increased participation and communication, reduced stuttering, and reduced impact of stuttering on both parents and children. This research supports the need for therapy which is: holistic, focuses on goals which go beyond a reduction in overt stuttering, and which includes parents as part of the process. However, therapists lack knowledge and confidence in how to support children who stutter and there is little research evidence or professional guidance to help them clinically. Given the wide range of hopes and expectations and the individual nature of stuttering, it is likely that there will be many therapies that will make a difference, in different ways for different people. Palin Stammering Therapy for School aged Children is one. was developed from therapy provided at the Michael Palin Centre for Stammering in London, to address the gaps in therapy for this age group. We sought to provide a therapy programme which therapists who are less experienced or knowledgeable about stuttering can use easily, once trained. The programme aims to help parents and children develop skills that facilitate and support effective communication, confidence to communicate, increased participation, and reduced worry about stuttering and its potential long-term impact. The therapy begins after a comprehensive assessment process and consists of 10 therapy sessions attended by both child and parent(s). The sessions are structured, each building on those that have gone before, and each with specific session goals and activities. There is flexibility to advance or reduce the complexity or depth of specific topics, depending on the child's strengths, needs and priorities. In this session, i will focus on children who stutter aged 8-14 and consider what they and their parents hope to gain from therapy and the importance of these views in therapy. i will propose one therapy approach which seeks to address the needs of families and provide them with knowledge and skills to reduce the impact of the stutter and enhance the child's ability to communicate confidently and effectively. As part of this, i will summarise the evidence that supports Palin STSC(8-14) as a therapy which reduces the impact of stuttering on the child and parents, as well as increasing parents' knowledge and confidence in supporting their children. There is also evidence that the training can increase therapists' knowledge and confidence to work with children who stutter, and that they are able to implement the therapy as intended.

Time: 9:45-10:30 AM
Room: B1.1

Title	**Many Voices, Different Barriers: Neurodiversity-Affirming Therapy in Stuttering and Cluttering**
Author	Susanne Cook
Abstract	Neurodiversity-affirming approaches are increasingly discussed in stuttering research and clinical practice, with a focus on acceptance, personal agency, and meaningful participation rather than prioritizing fluency as the primary outcome. In comparison, such approaches for cluttering are far less developed, and frameworks drawn from stuttering do not translate directly, as cluttering often involves distinct communication challenges. Reduced intelligibility and/or challenges in comprehensibility are frequently central in cluttering, leading to unique participation barriers, greater demands on listeners, and different clinical responsibilities than those typically associated with stuttering. This raises important questions about how neurodiversity-affirming principles apply across stuttering and cluttering, and where they may need to differ. This keynote provides a reflective and comparative examination of neurodiversity-affirming therapy for both stuttering and cluttering. Drawing on current research, clinical discussion, and practice-based experience, the presentation will explore which principles translate well across both, stuttering and cluttering, where challenges emerge, and how differences in communicative impact may call for different therapeutic approaches. The talk will examine the limits of acceptance-focused frameworks when communication breakdowns significantly affect shared understanding, particularly in cluttering, leaving space for critical reflection and dialogue within the field.

Research Shorts
(in English, simultaneous translation into Polish)

Time: 11:00–11:25 AM
Room: B1.1

Title	**The Anti-Stigma Program for Stuttering: a Culturally Adaptable Framework**
Authors	Zeynep Sumeyra Bozkurt, Halil Tayyip Uysal, Nurten Tiryaki
Keywords	Stuttering, Anti-stigma, diversity-equity-inclusion (DEI), contact hypothesis
Abstract	Objective: Stuttering-related stigma is a global issue that threatens individuals' quality of life, mental health, social participation, and professional development. People who stutter are exposed to microaggressions, discrimination, and internalized stigma, which lead to concealment behaviors, social anxiety, and low self-esteem (Coalson et al., 2022; Boyle & Cheyne, 2024; Gerlach-Houck & Cage, 2025). This study presents the framework of a culturally adaptable 'Anti-Stigma Program for Stuttering (ASPS)' developed based on the social model and neurodiversity paradigms, targeting three specific audiences: speech and language therapy (SLT) students and graduates, the general public, and professional/corporate organizations. The objective is to elevate mindsets beyond mere knowledge acquisition to a level of empathy and tolerance, positioning stuttering as a natural part of human diversity. Framework & Structure: The ASPS program centers on education and structured contact (aka contact hypothesis) strategies, which have proven effectiveness in the literature. It consists of three modular structures: narrative studies based on lived experiences and diversity-equity-inclusion perspectives for SLT students and graduates (Walden & Lesner, 2018; O'Dwyer et al., 2018); direct/indirect contact sessions and microaggression empathy training for the general public (Coalson et al., 2026); and intersectionality-based inclusive communication policies and an accreditation system for corporate environments (Rodriguez

	& McGill, 2021; Seitz & Choo, 2022). All components are designed with the principle of cultural adaptability, taking into account local values, linguistic dynamics, and intersectional factors including gender, ethnicity, and multilingualism. Potential Impact: Through this multi-stakeholder intervention, societal stereotypes and microaggressions will decrease, and SLT profession will focus on communicative competence and acceptance rather than other fluency priorities in their clinical practices. The self-stigma of individuals who stutter will be alleviated, thereby enhancing their social participation and quality of life. Thanks to its cultural flexibility, the ASPS can be effectively implemented in diverse geographical regions (including Turkiye) and will generate long-term mindset shifts. The scalability and sustainability of the ASPS will be tested through future clinical and non-clinical research evidence.

Time: 11:25–11:50 AM
Room: B1.1

Title	**Eyewitness Testimony by Individuals who Stutter: Evidence, Experience, and Perceived Credibility**
Authors	Kirsten Howells, Katie Maras, Sohee Patk, Patrick Grafton, Jasmine Peat, Navyaa Toshniwal
Keywords	witness, testimony, recall, credibility, jurors, perceptions
Abstract	Stuttering may impede an individual's eyewitness testimony and reduce jurors' perceptions of their credibility through a complex interplay of bio-psycho-social factors. However, no research to date has explored this. Three co-produced, mixed-methods studies are reported, investigating the evidential quality, lived experiences, and perceived credibility of people who stutter as witnesses. In Study 1, people who stutter (n = 26) recalled as much information and as accurately as non-stuttering witnesses (n = 41) overall. However, during the free – but not cued – recall interview phase, people who stutter provided fewer correct details, suggesting that selection of questioning technique is important when working with witnesses who stutter. a reflexive thematic analysis of participants' post-testimony reflections captured how witnesses who stutter experienced significant challenges when providing testimony due a cyclical relationship between communicative pressure, anxiety over listener misperceptions, and stutter severity. People who stutter reported navigating these challenges by either employing avoidance strategies at the expense of testimony or by working through moments of stutter to complete what they intended to say. In Study 2, 150 mock jurors rated witness videos from Study 1. People who stutter were rated as less confident yet more likeable and trustworthy than non-stuttering witnesses. In Study 3, mock jurors (n = 162) rated the credibility of a witness who stutters after being randomly assigned to first receive information about his stutter or not. While providing jurors with information about stuttering further improved their ratings of the witness's likeability and trustworthiness, it had no impact on his perceived confidence. Taken together, the findings provide new insight into communication disorders in legal contexts – and the unique challenges faced by people who stutter in particular – demonstrating the need for systemic accommodations and targeted training for legal professionals.

Time: 11:50 AM–12:15 PM
Room: B1.1

Title	**Beyond Fluency: An Exposure-Based Intervention with Active Parental Involvement to Enhance Risk-Taking and Tolerance in Children Who Stutter**
Authors	Veysel Kizilboğa, Mahmut Kizilboğa, Nurcan Alpuran Kocabiyik
Keywords	stuttering, exposure, risk-taking, tolerance, parent involvement
Abstract	Purpose This study examined the effects of an exposure-based intervention focusing on risk-taking and tolerance in school-age children who stutter. The program prioritized the reduction of avoidance behaviors and the promotion of active participation over speech fluency outcomes. Method Ten children aged 7–12 years (7 boys, 3 girls) participated in a pre–post intervention program consisting of 20 sessions: 5 structured clinical exposures, 3 parent-focused cognitive-behavioral sessions, 4 therapist-led community exposures, and 8 independent parent-led exposure tasks. Active involvement of both parents was mandatory throughout all phases, including "bridge tasks" (reciprocal voluntary stuttering) and structured community interactions. Parents received cognitive-behavioral support specifically targeting stuttering-related anxiety, maladaptive beliefs, and over-attention to stuttering. Outcomes were measured using the OASES-S, the Palin Parent Rating Scales (PRS), parent reports, and clinical observations of avoidance and participation. Results Although speech fluency was not a primary target, improvements in perceived fluency were reported by both parents and children. Notable gains were observed in emotional resilience, risk-taking, and tolerance across multiple measures. Changes in PRS scores indicated a positive shift in parental perceptions and responses, suggesting that modifying parent-related factors may be associated with child-level progress. Conclusion Preliminary findings suggest that hierarchical exposure-based interventions may support meaningful functional and emotional gains in children who stutter, independent of fluency changes. Notably, these results indicate that active parental involvement appears to be an important component of the therapeutic process. Incorporating parent-focused cognitive-behavioral support may enhance clinical outcomes and support the development of long-term resilience in school-age children. These findings contribute to a growing body of evidence suggesting that targeting avoidance, tolerance, and parent-related processes may represent key mechanisms of change in stuttering therapy.

Time: 12:15–12:40 PM
Room: B1.1

Title	**"Through Parents' Eyes": a Qualitative Study of the First Polish Edition of Camp Dream. Speak. Live.**
Authors	Maja Janik
Keywords	stuttering, parents, attitude change, Camp Dream. Speak. Live. (CDSL), qualitative research
Abstract	Contemporary stuttering therapy approaches are increasingly moving beyond an exclusive focus on fluency enhancement. This shift reflects the recognition of stuttering as a complex, neurodevelopmental, and multifactorial phenomenon (Smith & Weber, 2017; Tichenor & Yaruss, 2018; Tichenor et al., 2022). One approach aligned with this perspective is the CARE™ Model and the Camp Dream. Speak. Live. (CDSL) (Byrd et al., 2024). The program was first implemented in Poland in 2024. In the Polish CDSL, meetings for parents were organized alongside children's activities in the form of a Parent Club. Given the important role of parents in shaping a child's experience of stuttering, as well as their own needs

	related to knowledge, emotional support, and coping with stuttering, it was essential to explore their perspectives within the Polish context (Nonis et al., 2022; Berquez & Kelman, 2018; Carey et al., 2023).The study aimed to explore parents' experiences of CDSL Poland 2024, including their perspectives on the Parent Club, the perceived impact of the CARE Model™, and its applicability in the Polish context. A qualitative research design was employed. Semi-structured, in-depth interviews were conducted with eight parents of children participating in the Polish CDSL. The interviews were conducted online, audio-recorded with participants' consent, transcribed verbatim, and anonymized. The data were analyzed using reflexive thematic analysis in accordance with Braun and Clarke's six-phase approach (2013, 2022). Communicative validation with participants was conducted following the preliminary stage of analysis. Five main themes and nineteen subthemes were identified. Prior to participation in the program, parents often described stuttering as a serious problem and reported feelings of fear, uncertainty, limited knowledge, and dissatisfaction with previous therapeutic experiences. Participation in the program was perceived as highly meaningful for both children and parents. Parents emphasized the importance of peer contact among children who stutter, the accepting and supportive atmosphere of the camp, and the presence of adults who stutter as positive and empowering role models. The Parent Club emerged as a particularly valuable component of the program, providing emotional support, opportunities for reflection, and education on how to support their child's communication in a more accepting and responsive way. Many parents described a significant shift in their understanding of stuttering - from viewing it primarily as a disorder requiring correction to seeing it as a way of speaking or a personal characteristic. They also reported placing less pressure on their children to use fluency-enhancing techniques and feeling more confident in supporting their communication. Parents most frequently perceived positive changes in their children in the areas of communication, self-advocacy, resilience, and knowledge about stuttering In parents' accounts, participation in the CDSL Poland 2024 was a positive and transformative experience. The findings highlight the importance of actively involving parents in stuttering intervention and suggest that the CARE Model may offer a valuable and applicable therapeutic framework within the Polish context. Expanding access to similar programs may further support children who stutter and their families. *References: Berquez, A., Kelman, E. (2018). Methods in stuttering therapy for desensitizing parents of children who stutter. American journal of speech-language pathology, 27(3S), 1124–1138. https://doi.org/10.1044/2018_AJSLP-ODC11-17-0183 Braun, V., Clarke, V. (2013). Successful Qualitative Research: a Practical Guide for Beginners. SAGE Publication. Braun, V., Clarke, V. (2022). Thematic Analysis. a Practical Guide. SAGE Publications. Byrd, C. T., Coalson, G. A., Conture, E. G. (2024a). CARE Model of Treatment for stuttering: Theory, assumptions, and preliminary findings. Frontiers in Psychology, 15, 1488328. https://doi.org/10.3389/fpsyg.2024.1488328 Carey, B., Erickson, S., Block, S. (2023). a preliminary investigation of the mental health of parents of young children who stutter. Journal of Communication Disorders, 103, 106329. https://doi.org/10.1016/j.jcomdis.2023.106329. Nonis, D., Unicomb, R., Hewat, S. (2022). Parental perceptions of stuttering in children: a systematic review of the literature. Speech, Language and Hearing, 25(4), 481–491. https://doi.org/10.1080/2050571X.2021.1913299 Smith, A., Weber, C. (2017). How stuttering develops: The multifactorial dynamic pathways theory. Journal of Speech, Language, and Hearing Research, 60(9), 2483–2505. https://doi.org/10.1044/2017_JSLHR-S-16-0343

	Tichenor, S. E., Constantino, C., Yaruss, J. S. (2022). a point of view about fluency. Journal of Speech, Language, and Hearing Research, 65(2), 645–652. https://doi.org/10.1044/2021_JSLHR-21-00342 Tichenor, S., Yaruss, J. S. (2018). a phenomenological analysis of the experience of stuttering. American journal of speech-language pathology, 27(3S), 1180–1194. https://doi.org/10.1044/2018_AJSLP-ODC11-17-0192

Mini-Seminar
(in English)

Time: 11:00 AM-12:00 PM
Room: B0.39

Title	**How the use of solution-focused questions enriches stuttering therapy**
Author	Ulrike Felsing
Keywords	stuttering therapy, solution-focused questions, client goals, therapeutic process
Abstract	In the discourse on effective interventions for stuttering, the client's perspective on what they find helpful is paramount. Furthermore, what they hope to achieve in therapy – whether aiming for elimination of dysfluency or a significant reduction in severity – should be a primary determinant in selecting a therapeutic approach. By identifying the client's individual goals, the clinician can tailor interventions and methods with greater precision. However, a critical question remains: How can both the client and the clinician determine what will be truly effective for the individual? The clinicians need good questions! But what constitutes "good" questions in a clinical setting?! This workshop introduces various categories of questions, focusing on specific solution-focused questions. Participants will explore questions about worthwhile goals, exceptions, coping strategies and personal resources or competencies, as well as questions that focus on the concrete next steps for their therapy process. Through practical demonstrations and an experiential exercise, this session will illustrate how asking the right questions can fundamentally transform the therapeutic process, shifting the focus from pathology to possibility.

Time: 12:00-1:00 PM
Room: B0.39

Title	**Positive Psychology creating communicative wellbeing for stuttering and cluttering**
Author	Ana Karina Espinoza
Abstract	Contemporary evidence suggests that the experience of stuttering and cluttering transcends the motor aspects of speech and involves emotional, cognitive, and social dimensions that significantly influence people's well-being and communicative participation. In this context, Positive Psychology offers a relevant conceptual framework for broadening the therapeutic approach by incorporating the study of well-being, personal strengths, and optimal human functioning. The present work aims to explore the integration of theoretical models from Positive Psychology and Self-Determination Theory in stuttering and cluttering therapy, proposing a complementary approach oriented towards the development of psychological well-being and meaningful communicative participation. From Positive Psychology, we review the PERMA model proposed by Martin Seligman, which describes five components of well-being: positive emotions, engagement, positive relationships, meaning or purpose, and

	achievements. It also considers the contributions of the eudaimonic psychological well-being model developed by Carol Ryff, which emphasizes dimensions such as self-acceptance, personal growth, and purpose in life. In addition, the Self-Determination Theory proposed by Edward Deci and Richard Ryan is incorporated, which states that human well-being and motivation are based on the satisfaction of three basic psychological needs: autonomy, competence, and relatedness. In the context of stuttering and cluttering, this theoretical framework allows us to understand the importance of promoting therapeutic experiences that favor personal agency, the development of communication skills perceived as competent, and the establishment of secure and supportive social bonds. Based on the integration of these theoretical models, the concept of communicative well-being is proposed, understood as the state in which people can participate in meaningful communicative interactions with a sense of authenticity, belonging, and self-acceptance, regardless of their degree of speech fluency. This concept seeks to broaden the traditional goals of stuttering and cluttering therapy, shifting the focus from the mere reduction of disfluencies to the promotion of well-being, social participation, and the development of a positive communicative identity. Clinical implications for speech-language pathology practice are discussed, highlighting the need for interventions that integrate the development of personal strengths, the promotion of meaningful communicative experiences, the strengthening of support networks, and the fostering of autonomous motivation in the therapeutic process. From this perspective, therapy can contribute not only to improving aspects of speech, but also to promoting processes of personal growth and psychological well-being. This integrative approach raises the possibility of moving toward a paradigm shift in the intervention of stuttering and cluttering, orienting clinical practice toward the promotion of communicative well-being as a central therapeutic goal.

Mini-Seminar
(in Polish)

Time: 11:00 AM-12:00 PM
Room: B0.38

Title	**Jak terapeuta jąkania i giełkotu może wykorzystać uważność i współczucie?**
Keywords	jąkanie, giełkot, uważność, współczucie, terapeuta
Author	Aleksandra Boroń
Abstract	Praca logopedy, jednego z zawodów ,,pomocowych" czy też ,,służebnych", obarczona jest ryzykiem wypalenia zawodowego. Uważność (mindfulness), rozumiana jako uświadamianie sobie tego, co się dzieje, kiedy się dzieje, bez preferencji (R. Nairn), daje narzędzia do rozpoznawania sygnałów przeciążenia płynących z obszaru ciała, emocji i myśli bez oceniania. Natomiast samowspółczucie (self-compassion) – współczucie dla doświadczenia cierpienia skierowane do wewnątrz (K. Neff) – pozwala lepiej zadbać o własne potrzeby. Dbałość o własny dobrostan wchodzi w skład działań zapobiegających wypaleniu zawodowemu, ale jednocześnie stanowi dobry fundament do skutecznego wspierania innych. Uważność wobec klientów / pacjentów oraz życzliwość i współczucie dla nich pozwala na lepsze zrozumienie, nawiązanie dobrej relacji a tym samym skuteczniejsze działania wspierające daną osobę. Modelowanie uważnego i współczującego nastawienia do siebie oraz trudnych doświadczeń może znacząco wspierać terapeutę w pracy z drugim człowiekiem a także może być istotną częścią procesu terapeutycznego. Uważność oraz współczucie umożliwiają klientom / pacjentom zauważenie i rozpoznanie doświadczanych trudności, a następnie własnych reakcji z poziomu ciała, emocji i myśli. Ułatwiają przyzwolenie na życzliwość względem samego/samej siebie i zaopiekowanie się sobą

	z poziomu samowspółczucia. w wersji łagodnej będzie to np. zadbanie o potrzeby ciała, w wersji bardziej ,,walecznej" – asertywna odpowiedź czy stawianie granic. Ma to znaczenie w terapii jąkania i giełkotu, szczególnie jeśli odniesiemy te umiejętności do aspektów poznawczych, emocjonalnych czy relacji z innymi ludźmi. Podczas warsztatów uczestnicy dowiedzą się więcej o tym, jak uważność i współczucie mogą wspomóc terapeutę jako osobę wspierającą innych, jakie korzyści mogą one przynieść osobom doświadczającym jąkania i/lub giełkotu oraz jak można włączać te dwie umiejętności do procesu terapeutycznego. Praktyczny wymiar warsztatów będzie się opierał o proste praktyki uważności i współczucia, które terapeuta może zastosować wobec samego / samej siebie lub w pracy z klientem / pacjentem.

Time: 12:00-1:00 PM
Room: B0.38

Title	**Połączenie podejścia logopedycznego, psychologicznego i biochemicznego w terapii jąkania**
Author	Aleksandra Jastrzębowska-Jasińska
Keywords	jąkanie, terapia jąkania, podejście interdyscyplinarne, dopamina, histamina, PANS/PANDAS, neurobiologia mowy
Abstract	Jąkanie jest złożonym zaburzeniem neurorozwojowym o wieloczynnikowej etiologii, obejmującej komponenty logopedyczne, psychologiczne oraz neurobiologiczne. Celem referatu jest przedstawienie integracyjnego modelu terapii jąkania, uwzględniającego najnowsze doniesienia z zakresu neurochemii, immunologii oraz praktyki klinicznej. w oparciu o analizę literatury omówiono rolę dysregulacji układów neuroprzekaźnikowych, w szczególności dopaminergicznego i histaminergicznego, a także znaczenie zaburzeń metabolizmu energetycznego neuronów, w tym niedoboru tiaminy. Przedstawiono również potencjalny udział mechanizmów autoimmunologicznych (PANS/PANDAS) w patogenezie nagłych epizodów niepłynności mowy. Wyniki przeglądu wskazują, że jąkanie nie może być rozpatrywane wyłącznie w kategoriach zaburzenia funkcjonalnego, lecz wymaga podejścia interdyscyplinarnego, integrującego oddziaływania logopedyczne, psychologiczne oraz – w wybranych przypadkach – biochemiczne i dietetyczne. Podkreślono znaczenie evidence-based practice oraz ograniczenia aktualnych badań, w tym niewielką liczbę randomizowanych badań klinicznych i brak długoterminowych analiz interwencyjnych. Referat jest odpowiedzią na zwiększające się zapotrzebowanie wśród pacjentów doświadczających jąkania na informacje dotyczące biochemicznych możliwości jego leczenia i ich skuteczności. Wnioski wskazują na potrzebę dalszych badań translacyjnych oraz rozwijania spersonalizowanych modeli terapii, uwzględniających indywidualny profil neurobiologiczny pacjenta. Integracja podejść może zwiększać skuteczność terapii i poprawiać jakość życia osób jąkających się.

Keynote speakers
(in English, simultaneous translation into Polish)

Time: 2:30-3:00 PM
Room: B1.1

Title	**Understanding Preschool Stuttering: Speech-Motor Control, Cognitive and Temperamental Factors, and Therapy Implications**
Author	Victoria Tumanova

Abstract	In this presentation Victoria Tumanova will share findings from studies conducted at the Syracuse University Stuttering Research Lab, focusing on speech-motor control, speech-motor learning, temperament, and executive function in preschool-age children who stutter. The results reveal unique strengths and challenges in this population, offering insights into the multifaceted nature of stuttering. Practical implications for therapy will be explored, emphasizing the integration of speech-motor and cognitive approaches to intervention. Attendees will gain evidence-based strategies to improve the assessment and treatment of young children who stutter, fostering individualized care.

Time: 3:00-3:30 PM
Room: B1.1

Title	**Two languages, one question: a closer look at stuttering in bilingual children**
Author	Selma Saad-Merouwe
Abstract	This keynote presentation explores recent research on speech disfluency and stuttering in bilingual preschoolers, with a particular focus on differentiating typical bilingual disfluency patterns from clinically significant stuttering. Drawing on findings from a study involving 92 bilingual Lebanese participants, it highlights the complexity of assessment in multilingual contexts and the risk of misidentification, particularly the over-identification of children who do not stutter. The talk will examine how disfluency patterns may vary across a child's languages and how factors such as language dominance, proficiency, and context of use can influence speech production. Special attention will be given to identifying reliable markers of stuttering across both dominant and non-dominant languages, and to understanding how these markers can support more accurate clinical judgments. Importantly, the presentation will emphasize the added value of assessing both languages to capture a more complete and nuanced picture of a child's disfluency profile. Practical implications will be discussed throughout, including strategies for adapting assessment practices to bilingual preschoolers, selecting appropriate tools, and interpreting findings within culturally and linguistically diverse contexts. Overall, this talk aims to support clinicians and researchers in improving diagnostic accuracy and promoting more informed, evidence-based decision-making in the evaluation of bilingual preschoolers.

Time: 3:30-4:00 PM
Room: B1.1

Title	**There is a crack in everything; that's how the light gets in**
Author	Martine Vanryckeghem
Abstract	Many voices. Indeed, when an individual who stutters approaches a clinician in a quest for help, more than the voice of the clinician needs to be heard. Are we, anno 2026, not yet convinced that the voice of the person who stutterers has a place in all stages of the interaction between client and clinician? Do we still need to make a case for multi-dimensional assessment and treatment? Apparently, we do. The current literature on consideration of neurodiversity in treatment, the position of self/acceptance in one's life…, did clinicians ignore these components in past decades? Some probably did, at least in certain professional settings. What remains surprising, even in the current literature, is the continued focus on stutterING rather than on the stutterER, and the interchangeable use of these two nouns which are not equivalent. Theoretically, it is known that the stutterer encompasses more than his or her stuttering. Why then, do we continue to put so much emphasis on the stuttering? The multi-dimensionality that is present in the person who stutters has not been ignored, not even in the previous century. Neither has the voice of the person who stutters. That is why

	self-report instruments were designed. Self-report assessment tools which items are based on statements made by individuals who stutter, young and older, and have thus content validity. Emotions of fear and anxiety have been expressed, thoughts that were often negative as it relates to confidence in speaking and the ability to communicate, and the use of avoidance and escape mechanisms that can be exhausting. Self-report tests that try to look through the "cracks", let the light shine in, and get a deeper "inside view" of what goes on within the person who stutters. Why then are we ignoring that exploring the intrinsic features within the stutterer has been ongoing since the mid- 20th century? Treatment built on anamnestic information, administration of standardized (and, yes, why not norm-referenced) self-report tests, clinician observation, client, life partner, parent, teacher… input. Many voices! The Behavior Assessment Battery (BAB; Vanryckeghem & Brutten) with its initial self-reports dating back to the 1970's had as its unique goal to receive input from the individual who stutters relative to the affective, behavioral and cognitive correlates of his or her stuttering. During the succeeding 50+ years, the BAB sub-tests have been revised numerous times based on continuous psychometric research studies. Also items have been changed to reflect changes in our daily life. In the 36 years that i have been involved in applied research involving self-report, the different BAB tests for school-age children, adolescents and adults, and in the last 20 years, the KiddyCAT for preschoolers and kindergartners have gotten the attention of researchers and clinicians world-wide. When being approached relative to adoption of any of the BAB tests, my answer remained consistent: only if translation is not the end goal. After back translation, my conditions are always 1) to check for cultural appropriateness of the items and 2) to conduct population-specific research to obtain local norms rather than using US-based data. The meaningfulness of the BAB lies not only in its properties as a differential diagnostic tool, but more so in its immediate relationship to treatment. Indeed, the items that make up the different BAB tests point to information that the client has provided relative to his or her sound/word- and speech situation specific anxieties. They inform us as to the avoidance and escape behaviors that the client uses in anticipation of a stutter or to escape it. The item answers give us access to the client's world of thoughts about communication and his or her perception as to how others react to them. There is the immediate connection between the assessment information and building a treatment plan, a consorted effort between client and clinician. The road can be mapped with targets along the way. Anxieties that the individual wants to work on, letting go of certain avoidance behaviors that are exhausting and not really helpful, gradually building on a more positive outlook on communication. So much more than working on speech itself is being considered. And, yes, reducing the stuttering, becoming a more effective communicator is certainly allowed as one of the treatment components. Not "fixing" the speech but maybe trying out if e.g. putting less pressure on the lips to utter bilabial sounds might make a difference. The "bottom line"? The person who stutters as the central focus, listening to his or her voice, aspirations and wishes for help.

Research Shorts
(in English, simultaneous translation into Polish)

Time: 4:30-5:00 PM
Room: B1.1

Title	**Observed disfluencies and self-perceived speaking ability among Hebrew-speaking children and adolescents**
Authors	Sveta Fichman, Debora Freud
Kewywords	stuttering; percentage of stuttered syllables; speaking ability; children who stutter

Abstract	Children who stutter (CWS) often develop an early awareness of their speech difficulties, which can be exacerbated by the internalization of negative environmental reactions and social stigma. This awareness may negatively impact their communicative competence and overall quality of life. Despite its clinical significance, there is a research gap regarding how self-perceived speaking ability relates to observed stuttering frequency in school-aged children and adolescents. The goals of this study were to: 1) compare the self-perceived speaking ability of school-aged CWS and children who do not stutter (CWNS); and 2) examine the association between measured stuttering characteristics and self-perceived speaking ability in the two groups. Participants included 20 CWS aged 7–17 and 20 age-matched CWNS, all monolingual Hebrew speakers. Stuttering was confirmed via parental report and verified by three independent speech-language pathologists. Three speech samples (spontaneous speech, story-telling, and story-retelling) were video recorded, transcribed, and analyzed for the percentage of stuttered syllables (%SS) using SALSA software (SALSA, 2021). Self-perceived speaking ability was assessed using the Hebrew versions of the Overall Assessment of the Speaker's Experience of Stuttering, the Speaking Ability variant (OASES-SA, Yaruss & Quesal, 2006). Children aged 7-12 completed the OASES-SA-S version for school children, and adolescents aged 13-17 completed the OASES-SA-T version for teenagers. OASES consists of four sections—general knowledge, reactions to speaking ability, communication in daily situations, and quality of life—and produces the overall impact score. As expected, CWS exhibited significantly higher %SS than CWNS. Regarding self-perceived speaking ability, CWS reported significantly higher overall OASES impact scores and higher scores in the communication in daily situations section compared to CWNS. No significant differences were found between groups in the general knowledge, reactions to speaking ability, and quality of life sections. a low, non-significant correlation was observed between %SS and OASES scores, suggesting that observed disfluency does not always mirror self-perceived experience. Furthermore, correlation analyses indicated that OASES scores increase with age among CWS, signifying a more negative impact as children grew older. This trend was not observed among CWNS. These findings emphasize the necessity of combining objective disfluency coding with subjective assessments of speaking ability. The lack of difference in quality of life scores between groups suggests areas of resilience in CWS. Clinical attention to the self-perceived impact of stuttering becomes increasingly critical as children transition into adolescence.

Time: 5:00-5:30 PM
Room: B1.1

Title	**The Conceptualization of the Verb to Stutter in Selected Languages: Toward a Reconstruction of the Linguistic Image of Stuttering**
Authors	Katarzyna Wyrwas, Joanna Szymczakowska, Katarzyna Węsierska
Keywords	verbs, etymology, stuttering, linguistic image of stuttering, conceptualization
Abstract	The ways in which stuttering is named in different languages may reveal culturally entrenched ways of interpreting speech disfluencies. The present study explores the linguistic and cultural conceptualization of stuttering across languages. The research is grounded in the perspective of the linguistic worldview, according to which language functions as a repository of culture and a medium through which collective experiences and interpretations of reality are preserved. From this perspective, the history of words, their etymology, and their semantic motivation may reflect how speakers have perceived and interpreted phenomena related to communication, including fluency disorders.

	The aim of the project is to reconstruct earlier conceptualizations of stuttering through an analysis of the etymology and original meanings of verbs used to denote this phenomenon in selected languages. The study is based on the assumption that lexical items referring to stuttering preserve particular ways of interpreting its most salient features, both auditory and visual. Preliminary observations suggest that verbs meaning 'to stutter' in many languages often derive from onomatopoetic forms referring to groans, cries, animal sounds, or other forms of inarticulate speech. In other cases, they originate from verbs denoting repetition, stumbling, interruption of movement, or physiological processes such as choking, swallowing, or coughing. Such lexical motivations appear to reflect the ways in which earlier observers interpreted the audible and visible manifestations of stuttering by relating them to more familiar bodily experiences and everyday activities. The study therefore seeks to reconstruct broader conceptual and cultural models of stuttering encoded in language and to compare them across different language families through an analysis of the etymology of individual lexical items. The research draws on lexical material from selected European and non-European languages representing diverse language families. Etymological and semantic data are collected from etymological dictionaries and historical lexicographic sources. One of the working hypotheses assumes that verbs referring to stuttering may reflect a fundamental cultural opposition between homo and animal, in which articulated and fluent speech functions as a defining characteristic of human nature. Within this framework, stuttering may be conceptualized through reference to inarticulate or animal-like sounds, pointing to culturally embedded ideas about the nature of human speech and its disruption.

Time: 5:30-6:00 PM
Room: B1.1

Title	**A Qualitative Cross-Cultural Exploration of Parental Perception towards Stuttering in Türkiye and Hong Kong**
Authors	Şevket Özdemir, Mehdi Bakhtiar
Keywords	Parental perception, cross-cultural exploration, stuttering management, phenomenological approach, qualitative reflexive thematic analysis.
Abstract	Background and Aim: Parents play a central role in intervention approaches such as Lidcombe (1) and Palin PCI (2). Recent reviews (3, 4) indicate a growing trend over the last decade toward exploring parental perceptions globally. These findings highlight a pressing need for support for children who stutter (CWS) and their families, as well as the provision of culturally sensitive information for allied health and education professionals. Addressing this gap, the present study aims to provide an in-depth exploration of how parents in Türkiye and Hong Kong (HK) perceive stuttering, alongside their experiences and perspectives on coping with it. Methods: a qualitative methodological approach was employed, utilizing semi-structured one-to-one interviews (conducted either face-to-face or online via Zoom™) and an online data collection tool via Google Forms. The interview topic schedule included five questions that were derived from Nonis et al. (5). a phenomenological approach was adopted, which aimed to understand reality through the perspectives of the participants (6). Reflexive thematic analysis was employed during data analysis, fostering a systematic comparison and interpretation of diverse viewpoints of parental members living in Türkiye and HK (7). Findings: a total of 17 parental members took part in the study (11 from Türkiye, and six from HK). The data from Türkiye revealed four themes and 15 subthemes; while those from HK revealed four themes and 12 subthemes. All the themes and 12 subthemes were common between Türkiye and HK, while additional three sub-themes were explored from the data derived from participants in Türkiye. The parents from both cultures held limited knowledge about stuttering and its management, showed variable responses towards

	stuttering, revealed significant impacts of stuttering on themselves and their CWS, and shared their experiences about access to therapy, as well as their suggestions to improve the intervention process. Conclusion: This study is unique in that it includes parents from two distinct yet comparable cultures to elaborate on their experiences of understanding and coping with their child's stuttering. a sub-theme specific to the Turkish context was that parents perceived stuttering as an individual difference rather than a disorder. This perspective aligns with the components of parental adaptation, specifically "acceptance in the face of ongoing empathy" (8). Since this sub theme did not emerge among the HK participants, it may indicate cultural variations in how stuttering is understood and how its effects on CWS and families are interpreted. While these components are experienced in a cyclical manner, it is vital that Speech and Language Therapists and allied professionals in Türkiye and HK remain sensitive to parents' specific needs, addressing their concerns through evidence-based informational support. Word count: 429 (excluding references) References (1) Johnson, G., Onslow, M., Carey, B., Jones, M., & Kefalianos, E. (2024). Lidcombe Program telehealth treatment for children 6–12 years of age: a Phase II trial. Journal of Fluency Disorders, 80, 106057. (2) Millard, S. K., Murphy, S., Barton, G., Rixon, L., Shepstone, L., Sims, E., & Joffe, V. (2025). Palin Stuttering Therapy for School aged Children and usual treatment: a randomised controlled trial feasibility study. Journal of Fluency Disorders, 84, 106114. (3) Nonis, D., Unicomb, R., & Hewat, S. (2022a). Parental perceptions of stuttering in children: a systematic review of the literature. Speech, Language, and Hearing, 25(4), 481-491. (4) Haryani, H., Chu, S. Y., Yaruss, J. S., McConnell, G., & Ali, M. M. (2020). Public attitudes in Asia toward stuttering: a scoping review. The Open Public Health Journal, 13(1), 503-511. (5) Nonis, D., Unicomb, R., & Hewat, S. (2022b). Parental perceptions towards childhood stuttering in Sri Lanka. Journal of Communication Disorders, 95, 106162. (6) MacKenzie, S., McAllister, L., Hudson, K., Worrall, L., Davidson B., & Howe, T. (2019). Phenomenology and its use in communication disorders research. In R. Lyons and L. McAllister (Eds), Qualitative Research in Communication Disorders: An introduction for students and clinicians (pp. 193- 211). JR Press. (7) Braun, V., & Clarke, V. (2022). Conceptual and design thinking for thematic analysis. Qualitative Psychology, 9(1), 3–26. (8) Salehi, S., & Daniels, D. E. (2025). Parents recounting their journey with stuttering: a preliminary exploration of experiences and adaptation. Journal of Fluency Disorders, 84, 106122.

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Mini-Seminar
(in English)

Panel Discussion

Time: 4:30-5:10 PM
Room: B0.39

Title	**Many voices, shared insights: Bridging expertise and experience in speech therapy. Consumer and supporter perspectives**

Time: 5:15-6:25 PM
Room: B0.39

Title	**Dance your stuttering**
Author	Liora Shraga Emanuel
Keywords	It is a workshop for people who stutter. It deals with patterns of movement associated with individual patterns of stuttering
Abstract	Overview: This workshop invites participants to explore stuttering as a unique rhythm of communication rather than a disruption. While stuttering is commonly defined as a "disturbance in the normal fluency and time pattern of speech" (DSM-5), we will reinterpret these patterns as individual rhythms—speech patterns which are movement patterns with its own special rhythm that holds untapped potential for movement, self-expression exploration and new insight about ourselves. Workshop Objectives: 1. Foster a creative, non-judgmental space for participants to engage with their stuttering through movement. 2. Encourage self-awareness and acceptance by reimagining stuttering as an opportunity for artistic and personal exploration and listen to what it has to tell everyone of us. Execution Details: The session will integrate music and live rhythmic cues to enhance engagement. Visual aids and clear instructions will ensure all participants feel included, regardless of prior experience with movement or dance. a safe, supportive atmosphere will be maintained to foster creativity and personal expression. Expected Outcomes: Participants will leave with a fresh perspective on their stuttering, a deeper sense of connection to themselves and others, and practical techniques for embracing stuttering as a unique aspect of their communication style.

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Mini-Seminar
(in Polish)

Time: 4:30-5:00 PM
Room: B0.38

Title	**Jąkanie w perspektywie neuroróżnorodności: neurobiologiczne podstawy inkluzywnego podejścia**
Keywords	jąkanie, neuroróżnorodność, neuroatypowość, neurobiologia
Author	Sebastian Bauerfeind
Abstract	Jąkanie przez lata było traktowane jako zaburzenie płynności mowy. Coraz częściej pojawiają się jednak próby interpretowania tego zjawiska w szerszym kontekście neuroróżnorodności, czyli naturalnej zmienności w funkcjonowaniu ludzkiego mózgu. Wystąpienie podejmuje próbę spojrzenia na jąkanie jako jedną z form neuroatypowości, integrując aktualną wiedzę z zakresu neurobiologii, genetyki oraz współczesnych podejść terapeutycznych. w pierwszej części przedstawione zostaną podstawowe założenia koncepcji neuroróżnorodności oraz ich znaczenie dla rozumienia różnic w funkcjonowaniu poznawczym i komunikacyjnym. Omówione zostanie także, w jaki sposób doświadczenia osób neuroatypowych, w tym strategie maskowania, różnice w przetwarzaniu bodźców czy autentyczne doświadczanie rzeczywistości, mogą poszerzać perspektywę patrzenia na jąkanie. Kolejna część wystąpienia poświęcona będzie neurobiologicznym podstawom jąkania. Zostaną zaprezentowane wyniki badań neuroobrazowych wskazujących na odmienne funkcjonowanie i strukturę mózgu. Omówione zostaną także najnowsze odkrycia z zakresu genetyki jąkania, które wskazują na udział wielu wariantów genetycznych oraz na powiązania z procesami neurorozwojowymi. w dalszej części przedstawione zostaną dane sugerujące możliwe powiązania jąkania z innymi formami neuroatypowości, w tym ADHD czy zaburzeniami ze spektrum autyzmu. Wspólne mechanizmy biologiczne i genetyczne mogą wskazywać na częściowo nakładające się ścieżki neurorozwojowe. Celem wystąpienia jest zaprezentowanie integracyjnej perspektywy, w której wiedza neurobiologiczna i genetyczna może wspierać rozwój bardziej inkluzywnego podejścia terapeutycznego. Takie podejście nie koncentruje się wyłącznie na redukcji objawów, ale uwzględnia różnorodność sposobów komunikacji, doświadczenia osób jąkających się oraz znaczenie środowiska społecznego w kształtowaniu jakości życia.

Dyskusja panelowa/Panel Discussion
(in polish)

Time: 5:10-6:25 PM
Room: B0.38

Wielogłos w logopedii - Eksperci mają głos

Conference Closing

Time: 6:25-6:40 PM
Room: B1.1

Award Ceremony and Conference Closing

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Poster session
Day 1 and 2: 1:45-2:30 PM
main foyer - building B - first floor

P1	**Communication dynamics between people who stutter and healthcare providers**
Author	Justyna Suchacka
Keywords	stuttering, healthcare communication, patient–provider interaction, qualitative research, reflexive thematic analysis
Abstract	Introduction and Research Aim: Stuttering can significantly hinder the functioning of people who experience it within the healthcare system, not only at the organizational level (e.g., when scheduling appointments or making phone calls), but primarily in the direct communicative relationship between patients and healthcare professionals (Perez et al., 2015). Challenges with speech fluency may increase tension during medical interactions, lead to concerns about negative evaluation, and cause patients to limit their verbal participation. As a result, it may influence how symptoms are described, whether patients ask questions, and how actively they engage in treatment. . Research indicates that higher levels of self-stigma among adults who stutter are associated with greater stress, poorer self-rated physical health, and lower satisfaction with healthcare experiences (Boyle & Fearon, 2018). These factors may contribute to avoiding contact with the healthcare system or postponing medical consultations. These findings highlight the importance of considering both patient and healthcare professional perspectives in identifying factors that support effective communication, trust-building, and inclusive practices in healthcare.. To date, this topic has not been explored in Polish research. The aim of this study was to explore communication experiences between adults who stutter and healthcare professionals during healthcare interactions. Methodology: The study adopts a qualitative approach to gain an in-depth understanding of participants' experiences, interpretations of communicative situations, and the meanings they attribute to clinical encounters. Individual in-depth interviews (IDI) were used as the primary data collection method. Between November 2025 and February 2026, ten interviews were conducted: five with healthcare professionals and five with adults who stutter. The project combines both perspectives to better understand the factors that support effective communication, a sense of safety, and the development of mutual trust in clinical encounters. This dual perspective also allows identification of potential discrepancies in how the same communication situations are perceived and helps reveal barriers that may go unnoticed by one side of the interaction. Analysis and Conclusions: The collected empirical material was analyzed using reflexive thematic analysis following the approach proposed by Braun and Clarke (2006). The findings suggest that relationships between people who stutter and healthcare professionals are complex and heterogeneous. Some narratives reveal a high level of communicative sensitivity, willingness to adjust the pace and form of interaction, and openness to collaboration. Other accounts point to limited awareness of the specific nature of stuttering, time pressure within healthcare settings, and persistent stereotypes about people who stutter. These factors may reduce the quality of communication, limit patients' willingness to express their needs, and weaken their sense of agency in the therapeutic relationship. Implications for healthcare communication training will also be discussed. The findings will contribute to developing recommendations that support communication with patients who stutter and promote inclusive, patient-centered practices within the healthcare system.

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P2	**(Non)Fluent Identity: a Biographical Case Study of an Adult Who Stutters from an Interdisciplinary Perspective**
Authors	Justyna Suchacka, Mirosław Skorek
Keywords	stuttering, identity, case study, analytic autoethnography, stigma, communication agency
Abstract	Introduction and Research Aim: Stuttering in adulthood is rarely a purely motor phenomenon; it constitutes a complex identity construct that shapes an individual's relationships with the social environment. This paper presents an in-depth case study of a 43-year-old man (participant MS), whose life history provides an opportunity to explore the interaction between stuttering and high levels of agency in demanding public contexts.. The main goal of the study is to reconstruct the participant's linguistic biography and to identify adaptive mechanisms enabling him to fulfill the roles of business leader, automation engineer, volunteer firefighter, and social researcher (doctoral candidate).. The paper identifies key turning points in the individual's life at which he became aware of the determining role of his (non)fluency in shaping his educational, professional, and social trajectory. Methodology: The study combines a speech therapy perspective (analysis of compensatory strategies and phonetic avoidance mechanisms) with a sociological paradigm (drawing on Erving Goffman's concept of stigma and identity management in uniformed or highly structured professional groups). The study was conducted within a qualitative framework, combining analytic autoethnography with a biographical-narrative interview following the model of Fritz Schütze. This approach enabled a dual perspective: an external one (clinical linguistic analysis) and an internal one (introspective insight into the cognitive and emotional processes involved in speech production)). The research material was triangulated by comparing the participant's self-analysis with observations of his communicative behavior in diverse social contexts. Analysis: The analysis identified four key spheres of activity in which stuttering is subject to different sociolinguistic processes: 1. Technical-business sphere: The use of specialized jargon as a 'mask of professionalism'; and the implementation of precise synonymic substitutions to bypass speech blocks. 2. Uniformed services sphere: The phenomenon of 'suspension of stuttering' facilitated by the ritualization of language and formalized procedures, which act as external fluency stimulators during emergencies. 3. Academic sphere: a process of identity transformation, where the lived experience of stuttering is converted into an objective research tool for analyzing stigmatization. 4. Social sphere: The prioritization of a meaningful social role over self-analysis, where the commitment to community service outweighs the tendency to overanalyze one's own speech patterns. Conclusions: The study demonstrates that stuttering in adulthood is a dynamic process of negotiation between the body and social roles rather than a static deficit. High levels of social and cultural capital may enable a strategic reinterpretation of stuttering, transforming it from a communicative impairment into a positive characterological trait. This is further evidenced by the paradox of situational fluency, where formalized linguistic codes and radio procedures in high-stress environments, such as those used in volunteer fire service communication, may act as fluency stabilizers.. Ultimately, the findings suggest the value of moving beyond a strictly medical model toward an interdisciplinary approach that prioritizes communicative agency and the effective negotiation of identity within demanding professional and social contexts.

P3	**Consensus or Conflict? Comparing Attitudes and Reactions Toward Stuttering and Anxiety Across Key Communication Partners (KCP)**
Authors	Zhixing Yang, Ria Bernard, Peter Howell

Keywords	Children who stutter; Anxiety and psychosocial impact; Multidisciplinary support; Stakeholder attitudes and beliefs
Abstract	Background: Children who stutter (CWS) do not navigate their communication environment in isolation, but within a broad social network shaped by key communication partners (KCPs), particularly parents, teachers, and speech and language therapists (SLTs). These adults play important roles in shaping the communication experiences of CWS across home, school, and clinical settings, and their responses are fundamentally guided by their attitudes and understanding of stuttering. Previous research has shown that professionals supporting children with various communication needs may hold differing views about the nature of children's difficulties and the most appropriate ways to manage them (Dockrell et al., 2017). However, it remains unclear whether such differences extend to KCPs supporting CWS, and whether these discrepancies have implications for consistency among KCPs in how they interact and support CWS. Methods: An online survey was distributed to UK-based parents of CWS, primary and secondary school teachers, and qualified SLTs. Informed by Patient and Public Involvement (PPI) consultations with relevant stakeholders, the survey examined five domains: (1) awareness and knowledge of stuttering; (2) attitudes towards stuttering and speech-related anxiety; (3) perceived difficulties experienced by CWS; (4) goals expected from speech therapy; and (5) communication strategies adopted when interacting with CWS. Participants were recruited via Prolific, professional networks, support organisations, and relevant social media platforms. Results: Findings revealed notable group differences in how stuttering and speech-related anxiety were perceived and understood. Parents (n = 57), teachers (n = 54), and SLTs (n = 50) differed in their knowledge and attitudes towards stuttering and anxiety, in the difficulties they associated with the condition, and in the therapy goals they prioritised. Notably, parents and teachers tended to align with the medical model perspective, whereas SLTs were prone to embrace the social model. These differences suggest that CWS may encounter varying interpretations of their needs depending on the context in which they communicate. However, communication strategies employed by KCPs were broadly consistent across groups, indicating a shared practical commitment towards facilitating positive interactions despite divergent conceptual understandings of stuttering and its psychosocial impact. Conclusions: These findings highlight the importance of multidisciplinary approaches to supporting CWS and the need to foster greater alignment among KCPs in their understanding of stuttering and anxiety. The medical-social division that exists between parents & teachers, compared with SLTs, may serve to meet the context in which the child is being supported. However, findings should be interpreted cautiously. Firstly, the cross-sectional design precludes causal inference. Additionally, the survey methodology does not involve specific KCPs partnered with the same child, which may limit the generalisability of the findings, particularly given the substantial variability in individual stuttering experiences. Future research employing longitudinal or case-linked designs should provide deeper insights into how intergroup differences in perception translate into real-world outcomes for CWS.

P4	**Comparing the effectiveness of combined group and individual tele-therapy for adolescents who stutter: a quasi-experimental study**
Authors	Halide Elif Pamuk, R. Sertan Özdemir
Keywords	Stuttering, Adolescence, Group therapy, Tele-practice, OASES.
Abstract	This study evaluates whether adding online group therapy to individual sessions improves outcomes for adolescents who stutter (aged 13–17). Twenty participants were divided into two groups: an experimental group receiving both individual and group therapy, and a control group receiving individual therapy only. Assessments were conducted at baseline,

	post-treatment, and during a follow-up phase using the SSI-4, OASES-T-TR, and WASSP-TR. While both groups showed significant improvements, the experimental group demonstrated more comprehensive and lasting gains. Notably, the "Reactions to Stuttering" and "Quality of Life" subscales of the OASES-T-TR remained significantly improved during the follow-up period only for the group therapy participants. These results suggest that group dynamics may be essential for addressing the social and emotional challenges of stuttering in adolescence. The findings indicate that integrating group support provides more sustainable clinical outcomes than individual therapy alone in a tele-practice setting.

P5	**Preparing for Early Childhood Stuttering Therapy: Perspectives of Polish Speech-Language Therapy Students and Academic Staff**
Authors	Wiktoria Janus, Katarzyna Węsierska
Keywords	early childhood stuttering, speech therapy students, academic staff, teaching activities, professional preparation
Abstract	Research conducted in Poland indicates that only 3% of speech-language therapists undertake therapeutic intervention for individuals who stutter (Walencik-Topiłko, 2014). This finding reveals a significant discrepancy between clients' clinical needs and professionals' readiness to work in this area. The literature emphasises that speech-language therapists'(SLT) apprehension and uncertainty related to stuttering therapy may stem from insufficient knowledge and limited practical skills acquired during speech-language therapy education, as well as from restricted clinical experience. Consequently, many professionals do not feel sufficiently prepared to work with people who stutter based solely on academic coursework in fluency disorders (Lee, 2014; Erickson et al., 2023). This poster presents the results of a study conducted as part of a master's thesis. The aim of the project was to determine whether and to what extent coursework in fluency disorders, a branch of speech-language pathology concerned with the diagnosis and treatment of stuttering, cluttering, and other fluency disorders, prepares SLT students to undertake therapeutic intervention with children who stutter under the age of seven. a mixed-methods design was employed, combining a diagnostic survey with partially semistructured in-depth interviews. SLT students from various academic institutions who had completed courses in fluency disorders were invited to participate in the quantitative part of the study, while the qualitative component included both students and academic instructors teaching these courses. The quantitative part of the study involved 83 SLT therapy students. The qualitative component included 9 interviews with SLT students and 7 interviews with academic staff. The analysis focused on students' subjective assessment of their level of theoretical knowledge, practical skills, and perceived preparedness to undertake preventive, diagnostic, and therapeutic activities for children who stutter under the age of seven. Quantitative data obtained from the surveys were analysed using descriptive statistics. Responses to closed-ended, open-ended, multiple-choice, and scale-based questions were examined. Qualitative data were analysed using Reflexive Thematic Analysis, following the six-phase model proposed by Braun and Clarke (2013, 2022). The perspectives of academic staff were also included, particularly regarding their evaluation of students' competencies, their preparedness for clinical work, areas requiring further development, and challenges encountered in educating future speech-language therapists. The poster presents factors influencing future speech therapists' sense of competence, their level of preparation for working with children who stutter, as well as the emotions and attitudes accompanying initial attempts at therapeutic intervention. The findings indicate that coursework in fluency disorders prepares students to some extent for working with children who stutter. This is reflected primarily in their level of theoretical knowledge and familiarity with therapeutic methods and diagnostic tools. However, both students and academic staff emphasised that the level of practical preparation for conducting therapy

	remains insufficient. The findings may provide a basis for further reflection on the education of future speech-language therapists and for potential modifications to study programmes aimed at improving preparation for working with children who stutter. Bibliography: 1. Braun, V., & Clarke, V. (2013). Successful Qualitative Research: a Practical Guide for Beginners. SAGE Publication. 2. Braun, V., & Clarke, V. (2022). Thematic Analysis. a Practical Guide. SAGE Publications. 3. Erickson, S., Bridgman, K., & Furlong, L. (2023). Australian speech-language pathologists' experiences and perceptions of working with children who stutter: a qualitative study. Journal of Fluency Disorders, 75, 105944. 4. Lee K. (2014). Korean speech-language pathologists' attitudes toward stuttering according to clinical experiences. International Journal of Language & Communication Disorders, 49(6), pp. 771–779. 5. Walencik-Topiłko, A. (2014). Dlaczego logopedzi boją się jąkania? Forum Logopedy, 1, pp. 22-24.

P6	**Stutter-Affirming Therapy Experiences of Adults Who Stutter: a Reflexive Thematic Analysis**
Authors	Deniz Kubra Yuce, Uysal, Halil Tayyip
Keywords	stutter-affirming therapy, neurodiversity, lived experiences, reflexive thematic analysis
Abstract	Background & Aim: Stutter-affirming therapy (SAT) conceptualizes stuttering as a valid neurodiverse identity and speech difference rather than a disorder to be fixed. This study aims to explore the lived experiences of adults who have engaged in stutter-affirming therapy. Method: In line with the principles of information power and the depth of qualitative inquiry, eleven adults who stutter participated in the study. Data were analyzed using Reflexive thematic analysis, allowing for the identification of overarching themes in participants' therapeutic experiences. Interviews were transcribed verbatim and followed by a coding process. To ensure methodological integrity and trustworthiness, triangulation and an external researcher were involved throughout the analysis. Findings: Participant narratives revealed that the most salient impact of SAT was the transformation of their relationship with stuttering, rather than a primary focus on increasing speech fluency. While early experiences were often overshadowed by the fluency ideology —characterized by hyper-vigilance, avoidance, and masking— SAT provided a safe space that facilitated the reconstruction of a stuttering identity. Participants reported a shift from avoidance to visibility, a reduction in masking in various settings, and enhanced self-disclosure, leading to increased social and professional participation. However, this transformation was noted as non-linear and context-dependent; feelings of anxiety, shame, and withdrawal persisted in certain contexts. The findings suggest that SAT functions as a process that makes the experience of stuttering less judgmental, and fundamentally more resilient. Conclusion: For adults who stutter, stutter-affirming therapy appears to be a process of repositioning stuttering from a disorder to be eradicated to a livable and valid experience. The most profound shifts occurred in domains of self-worth, emotional burden, and social agency rather than fluency performance. Although the journey involves internal contradictions and the persistence of old habits, 'recovery' in this context is redefined as a softening and expansion of one's relationship with their communication. Keywords: stutter-affirming therapy, reflexive thematic analysis, adults who stutter.

P7	**Implementing The Blank Center Care Model™ in Poland: Speech-Language Therapists' Perspectives on Stuttering-Affirming Practice**

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Author	Julia Leonik, Joanna Szymczakowska
Keywords	CARE model™, stuttering therapy, stuttering-affirming practice, speech-language therapists
Abstract	Objective: The aim of this study is to explore the experiences, opinions, and reflections of speech-language therapists working with children who stutter, with emphasis on stuttering-affirming approaches. In Poland, therapeutic practice has traditionally been dominated by a fluency-oriented and deficit-based perspective (Tarkowski, 2025; Pakura et al., 2024), in which stuttering is treated as a disorder to be reduced. However, contemporary international discourse highlights the need to move beyond fluency as the main therapeutic goal, emphasizing communicative functioning, well-being, self-confidence, and participation (Constantino, 2023; Irani et al., 2025; Reeves & Yaruss, 2025; Sisskin, 2023; Tichenor & Yaruss, 2019; Yaruss, 2010). Within this perspective, approaches promoting acceptance of stuttering and a positive communicative identity are gaining importance. One example is the CARE model™ (Byrd et al., 2018; 2021; 2024; 2025; Coalson & Byrd, 2025), which focuses on creating a supportive communicative environment, building relationships, and strengthening communicative competence. This study examines how such stuttering-affirming orientations are understood and experienced by speech-language therapists in Poland. Methods: The study adopts a qualitative research design. Data are collected through semi-structured interviews with 6 speech-language therapists working with children who stutter. The participants include therapists who worked directly with children who stutter during Camp Dream. Speak. Live. Poland (editions 2024 and 2025). Particular attention is given to the participants' experiences related to their involvement in this initiative, which is aimed at children and adolescents who stutter and focuses on promoting acceptance of stuttering, developing communication skills, and building a sense of community. The collected data are analyzed using reflexive thematic analysis following the approach proposed by Braun and Clarke (2006, 2019, 2022), which enables the identification of patterns of meaning in participants' narratives and supports an in-depth exploration of their experiences and perspectives. Results: Data collection has been completed and the material is currently being analyzed. The data have been coded, and initial themes are emerging. Preliminary findings suggest that speech-language therapists conceptualize stuttering-affirming approaches as extending beyond fluency-focused goals, emphasizing the child's well-being, communicative participation, and relational aspects of therapy. Early analysis also indicates that experiences from contexts such as Camp Dream. Speak. Live. Poland shape therapists' perspectives, supporting a shift toward more holistic and affirming practices. Therapists highlight that adopting such approaches is possible, but requires access to up-to-date research and specialized training. They also report that elements of stuttering-affirming approaches are transferable to other areas of clinical work with clients experiencing diverse communication challenges.Further analysis is ongoing and will enable a more in-depth interpretation of these themes. Conclusions: The findings highlight a shift toward more holistic and affirming approaches in stuttering therapy that prioritize the child's well-being and communicative participation. They also point to the role of experiential contexts, such as Camp Dream. Speak. Live., in shaping therapists' perspectives. The findings further suggest that implementing such approaches requires access to up-to-date research and specialized training, and that their principles may extend to supporting clients with diverse communication challenges. These insights may encourage reflection on the role of affirming approaches in speech-language therapy and evolving paradigms.

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P8	**A Person Who Stutters at the Workplace – Results of a Mixed Methods Study**
Authors	Nikola Konieczna, Monika Pakura
Keywords	stuttering, work, professional functioning, quality of life
Abstract	Introduction Stuttering can significantly affect the professional functioning of adults, impacting quality of their life, interpersonal relationships, and career progression (Craig et al., 2009). People who stutter often experience difficulties in situations requiring verbal communication, both during job interviews and in everyday workplace interactions (Bricker-Katz et al., 2013). At the same time, employers' knowledge, attitudes, and beliefs about stuttering can significantly shape the experiences of this group at the workplace (Young & Byrd, 2025). Despite growing interest in the topic, this issue remains insufficiently explored in Polish literature and relatively underdeveloped in international research, indicating the need for further in-depth exploration (Stalska, 2025). Aims and Methods The aim of the poster was to present the results of a mixed-methods study on the functioning of people who stutter in the workplace. Particular attention was paid to their experiences related to recruitment processes and everyday professional functioning, including the perspective of employers. The qualitative part involved semi-structured interviews with six adults who stutter. Analysis of the empirical material enabled the identification of diverse coping strategies, areas of difficulty, and factors facilitating or hindering full participation in professional life. This interview format ensured consistency in the topics discussed while allowing for in-depth exploration of individual participant experiences. The data were subjected to Reflexive Thematic Analysis according to the six-step approach by Braun and Clarke (2006, 2018), with the interpretation process being reflective and considering the researchers' assumptions. Results The results indicate that stuttering affects many aspects of professional activity – from the course of job interviews, through workplace relationships, to job satisfaction and psychological well-being. The data highlight the importance of individual experiences and the need to create work environments more sensitive to communicative diversity. The qualitative part of the study was complemented by a quantitative component aimed at employers and recruiters, conducted using a questionnaire. Its purpose was to understand employers' perspectives and their experiences related to employing people who stutter. The study assessed the level of knowledge about stuttering, attitudes toward candidates who stutter, declared willingness to employ them, as well as the identification of perceived barriers and factors supporting inclusivity in the workplace. Discussion The conducted research and the integration of qualitative and quantitative results allowed for a more comprehensive understanding of the phenomenon and its determinants. The findings may also serve as a basis for designing interventions to support people who stutter in their professional development and for building more inclusive and accessible workplaces. References Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. Qualitative Research in Psychology, 3(2), 77-101. Braun, V., & Clarke, V. (2018). Using thematic analysis in counselling and psychotherapy research: a critical reflection. Counselling and Psychotherapy Research, 18(2), 107-110. Bricker-Katz, G., Lincoln, M., & Cumming, S. (2013). Stuttering and work life: An interpretative phenomenological analysis. Journal of Fluency Disorders, 38(4), 342-355.

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P9	**The role of parents in shaping attitudes toward their child's stuttering – a case study**
Authors	Anna Mastaj
Keywords	stuttering, parental attitudes, attitude change, acceptance, social awareness
Abstract	Stuttering is a complex form of human communication diversity, with important psychological and social dimensions, particularly within the family context (Kelman & Nicholas, 2020). Parental attitudes play a crucial role in shaping a child's experience of stuttering, influencing both self-acceptance and social functioning (Węsierska & Weidner, 2022). The aim of this study was to explore the factors contributing to the transformation of a mother's attitude towards her child's stuttering, as well as to examine how this change may lead to advocacy and educational activities addressed to other parents. The research was conducted using a qualitative case study approach. Data were collected through an in-depth semi-structured interview consisting of 30 open-ended questions. Additionally, the study included a qualitative analysis of three multimedia recordings co-created by the researcher and the participant, presenting educational content about stuttering. These materials were treated as research data and contributed to the participatory character of the study. The recordings were subsequently shared publicly via the social media profile of the Fundacja Centrum Logopedyczne (Instagram platform). Furthermore, the materials were presented to adult people who stutter, associated with the "Klub J Online" community. Their perspectives were explored through additional qualitative interviews, focusing on their interpretations and evaluations of the educational activities undertaken by the participant. The findings reveal a dynamic process of attitude change, moving from initial feelings of anxiety, guilt, and difficulty in accepting the child's stuttering towards a stage of full acceptance and active engagement. Participation in community-based initiatives, such as Camp Dream.Speak.Live, as well as access to knowledge and contact with other parents, emerged as key factors supporting this transformation. The results highlight the crucial role of parents not only as supporters of their children but also as agents of social change who actively contribute to increasing awareness and reducing stigma associated with stuttering. The study emphasizes that educational and community-based activities can significantly influence both individual and social attitudes towards stuttering. Importantly, the inclusion of perspectives from adults who stutter provides additional insight into the social reception and potential impact of parent-led advocacy. These findings support a shift from a deficit-oriented perspective to an acceptance-based approach, promoting inclusivity and empowerment for children who stutter and their families. References: Kelman, E., Nicholas, A. (2020). Palin parent-child interaction therapy for early childhood stammering. Routledge. Węsierska, K. Weidner, M. (2022). Improving young children's stuttering attitudes in Poland: Evidence for a cross-cultural stuttering inclusion program. Journal of Communication Disorders 96 (2022), 106183. https://doi.org/10.1016/j.jcomdis.2022.106183 Audience: clients, speech-language therapists, researchers

P10	**The Relationship Between Speech-Language Therapists' Awareness of Cognitive Flexibility and Their Reported Clinical Practices: a Pilot Study**
Authors	Büşra Coşaroğlu, Tuğçe Karahan Tığrak, Maviş Emel Kulak Kayıkcı
Keywords	Stuttering, Cognitive Flexibility, Speech-Language Therapist
Abstract	Stuttering is a multifaceted communication issue that extends beyond mere speech fluency disruptions; it is intricately associated with cognitive and emotional processes, with cognitive flexibility recently identified as a crucial element. Cognitive flexibility, recently examined in the context of executive functions, is defined as an individual's capacity to adjust to fluctuating environmental conditions and reorganize cognitive processes, and is increasingly discussed as a cognitive process that may be associated with stuttering and its psychosocial impact. Nonetheless, it has been noted that research investigating speech-language therapists' awareness of this idea is scarce. This cross-sectional descriptive study investigated speech-language therapists' beliefs and perceptions regarding cognitive flexibility in individuals who stutter. The study comprised 66 speech-language therapists who were contacted through social media and participated willingly. 89.4% of the participants were female, the predominant majority possessed a bachelor's degree (81.8%), and their work experience predominantly fell within the 0–4 year range. Data were collected using a researcher-developed questionnaire, and analyzed using descriptive statistics and chi-square tests to examine relationships between variables. The results demonstrate that participants perceived cognitive flexibility as a construct associated with attentional processes, stress, and executive functions. a significant association was found between perceptions of the interplay between cognitive flexibility and attentional processes and evaluations of executive function abnormalities in persons with stuttering ($p<0.001$). Likewise, it was noted that perceptions concerning the association between cognitive flexibility and stress and coping mechanisms were strongly aligned ($p<0.001$). a substantial number of individuals reported that cognitive flexibility pertains to the management of negative ideas and attitudes. a significant association was found between the belief that cognitive flexibility affects the progress rate in stuttering therapy and the implementation of targeted techniques in this domain ($p=0.003$). The inability to demonstrate relevance in some conceptual relationships indicates variability in participants' knowledge and levels of conceptualization. In conclusion, speech-language therapists demonstrate a coherent theoretical comprehension of cognitive flexibility; nevertheless, the manifestation of this understanding in clinical practice is inconsistent and diverse. The findings suggest that speech-language therapists show some theoretical awareness of cognitive flexibility; however, the translation of this awareness into clinical practice appears inconsistent.

P11	**Jumping Forward Together: Using Jump Rogi as a Valid Digital Tool for Stuttering Therapy**
Authors	Erik X. Raj, Natalia Radkowska-Marczak, Justyna Szczypa
Keywords	stuttering therapy, game-based learning, digital technology, therapeutic alliance
Abstract	Jump Rogi is a free, online video game created by Erik X. Raj, a speech-language pathologist and associate professor in the Department of Speech-Language Pathology at Monmouth University (USA). Available in both English and Polish, the game features two main characters, Rogi and Pie, who move together through 10 thoughtfully designed levels shaped by obstacles, uncertainty, encouragement, and forward motion. Throughout gameplay, Rogi expresses fear, hesitation, and concern about the challenges ahead, while

	Pie offers supportive, validating, and motivating responses. As a result, the game provides players with not only an interactive gaming experience, but also a narrative centered on courage, persistence, and support. In stuttering therapy, analogies are often used to help children (Shenker & Santayana, 2018) and caregivers (Yaruss et al., 2006) better understand stuttering. Jump Rogi was designed to serve as a meaningful, game-based analogy for the lived experience of facing speaking challenges. Rogi's apprehension about jumping over obstacles may reflect the real-life emotions and thoughts that some people who stutter experience, as it relates to verbal communication, including fear, avoidance, uncertainty, and frustration (Tichenor & Yaruss, 2018; Tichenor et al., 2022). Pie's role as a supportive companion mirrors the kind of encouragement and acknowledgment that clinicians may strive to provide within a trusting therapeutic relationship (Sønsterud et al., 2019), with an emphasis on taking a person-centered approach to therapy (Sønsterud et al., 2025). This poster highlights clinician observations from playing Jump Rogi side by side, in therapy, with children who stutter. The primary focus is on the types of conversations that came to the surface as a direct result of the gameplay experience and the in-game dialogue. In particular, the game appeared to create natural opportunities for children to discuss the affective and cognitive components of stuttering. As Rogi voiced worries and Pie responded with support, children were often able to comment on fear, nervousness, challenge, bravery, self-talk, perseverance, and what it feels like to keep going when something feels difficult. Rather than relying only on direct questioning, the analogy structure of the game may help some children approach meaningful topics in a way that feels safer, more engaging, and less pressured. The game allows players the opportunity to make, and reflect upon, certain decisions in an effort to solve a particular problem (Tran, 2018), which is strikingly similar to the reflective decision-making process that a person who stutters usually engages in while participating in therapy with a clinician (Chmela & Campbell, 2014; Plexico, Manning, & DiLollo, 2010). This poster invites attendees to consider how a video game, such as Jump Rogi, may function as a valid digital tool in stuttering therapy, particularly when used collaboratively to support discussion surrounding the affective and cognitive experience of stuttering.

P12	**Wspólne skakanie naprzód: wykorzystanie Jump Rogi jako skutecznego narzędzia cyfrowego w terapii jąkania**
Authors	Erik X. Raj, Natalia Radkowska-Marczak, Justyna Szczypa
Keywords	terapia jąkania, nauka oparta na grach, technologia cyfrowa, przymierze terapeutyczne
Abstract	„Jump Rogi" to darmowa, przeglądarkowa gra wideo stworzona przez Erika X. Raja, logopedę i profesora nadzwyczajnego na Wydziale Logopedii Uniwersytetu Monmouth (USA). Gra, dostępna zarówno w języku angielskim, jak i polskim, przedstawia dwóch głównych bohaterów, Rogiego i Pie, którzy wspólnie przemierzają 10 starannie zaprojektowanych poziomów, pełnych przeszkód, niepewności oraz zachęt do dążenia naprzód. w trakcie rozgrywki Rogi wyraża lęk, zawahanie i obawy związane z czekającymi go wyzwaniami, podczas gdy Pie odpowiada mu słowami wsparcia, uznania i motywacji. Dzięki temu gra dostarcza graczom nie tylko interaktywne doświadczenie, ale także fabułę skoncentrowaną na odwadze, wytrwałości i wsparciu. W terapii jąkania często wykorzystuje się analogie, aby pomóc dzieciom (Shenker i Santayana, 2018) oraz opiekunom (Yaruss i in., 2006) lepiej zrozumieć istotę jąkania. Projekt „Jump Rogi" został opracowany jako znacząca, oparta na grze analogia do rzeczywistych doświadczeń związanych z trudnościami w mówieniu. Obawy Rogiego związane z przeskakiwaniem przeszkód mogą odzwierciedlać rzeczywiste emocje i myśli, których doświadczają niektóre osoby z jąkaniem w kontekście komunikacji werbalnej, w tym lęk, unikanie, niepewność i frustrację (Tichenor i Yaruss, 2018; Tichenor i in., 2022).

	Rola Pie jako wspierającego towarzysza może odzwierciedlać rodzaj wsparcia i uznania, które terapeuci starają się zapewnić w ramach relacji terapeutycznej opartej na zaufaniu (Sønsterud i in., 2019), kładąc nacisk na podejście terapeutyczne skoncentrowane na osobie (Sønsterud i in., 2025). Poster ten przedstawia obserwacje klinicystów wynikające ze wspólnej gry w „Jump Rogi" z dziećmi z jąkaniem, w ramach terapii logopedycznej. Skupiono się przede wszystkim na rodzajach rozmów, które pojawiły się bezpośrednio w wyniku doświadczenia rozgrywki oraz dialogów w grze. w szczególności gra wydawała się tworzyć naturalne okazje do omawiania przez dzieci afektywnych i kognitywnych aspektów jąkania. Kiedy Rogi wyrażał swoje obawy, a Pie odpowiadała mu słowami wsparcia, dzieci często miały okazję wypowiedzieć się na temat lęku, zdenerwowania, wyzwań, odwagi, wewnętrznego dialogu, wytrwałości oraz tego, jak to jest nie poddawać się, gdy coś wydaje się dla nas trudne. Zamiast opierać się wyłącznie na bezpośrednim zadawaniu pytań, struktura analogii zastosowana w grze może pomóc niektórym dzieciom podejść do istotnych tematów w sposób bezpieczniejszy, bardziej angażujący i mniej stresujący. Gra daje graczom możliwość podejmowania pewnych decyzji i zastanawiania się nad nimi w celu rozwiązania konkretnego problemu (Tran, 2018), co jest uderzająco podobne do procesu refleksyjnego podejmowania decyzji, w który zazwyczaj angażuje się osoba z jąkaniem podczas terapii z terapeutą (Chmela i Campbell, 2014; Plexico, Manning i DiLollo, 2010). Poster ten zachęca uczestników do zastanowienia się nad tym, w jaki sposób gra wideo, taka jak „Jump Rogi", może funkcjonować jako skuteczne narzędzie cyfrowe w terapii jąkania, szczególnie gdy jest wykorzystywana do wspierania dyskusji na temat zarówno afektywnych, jak i kognitywnych doświadczeń związanych z jąkaniem.

P13	**Changes in Speech-Language Pathology Students' attitudes toward stuttering through contact with a Self-Help Group - a qualitative analysis**
Author	Natalia Radkowska-Marczak
Keywords	students, self-help group, speech-language pathology studies, attitude change, stuttering
Abstract	In the education of future speech and language therapists, it is important to develop not only theoretical knowledge and clinical skills, but also appropriate attitudes toward people who stutter. Stuttering is a complex condition with communication, emotional, and social aspects. Therefore, speech and language therapists need to understand the experiences and perspectives of people who stutter. The aim of this presentation is to describe the results of a qualitative study exploring changes in speech and language therapy students' attitudes toward stuttering after taking part in workshops that included meetings with a self-help group for adults who stutter. These meetings were an important part of the educational program. They gave students the opportunity to meet people who stutter, learn about their life experiences, previous therapy experiences, coping strategies, and expectations of speech therapy. The study used qualitative methods, including analysis of students' written reflections after the meetings and semi-structured in-depth interviews. The data were analyzed to identify the main themes related to changes in students' understanding of stuttering and of people who stutter. The findings showed a clear change in students' attitudes. Before the meetings, their understanding was based mainly on textbooks and common stereotypes. After the meetings, students described a deeper and more empathetic understanding of stuttering as a personal and individual experience. They emphasized that direct contact helped them recognize the diversity of people who stutter and the importance of psychosocial factors. Their understanding of the speech and language therapist's role also changed—from focusing mainly on reducing stuttering symptoms to supporting communication and improving quality of life.

	The findings suggest that including meetings with self-help groups in speech and language therapy education can be a valuable teaching strategy. Such experiences help students develop reflective practice, empathy, and a person-centred approach to clinical work. Further research is needed to evaluate the effectiveness of this type of educational activity and to support its wider integration into speech and language therapy training programs.

P14	**"MaKING fun: a board game for children who stutter to strengthen resilience, provide functional coping strategies, and modify environmental responses."**
Authors	Donatella Tomaiuoli, Francesca Del Gado, Lisa Scordino, Diletta Vedovelli
Keywords	Teasing; Humor and self-irony as coping strategies; Desensitization and emotional resilience; Game-based intervention in speech-language pathology
Abstract	BACKGROUND: Multiple studies indicate that children who stutter are more exposed to teasing and bullying within their social environments. This situation can exacerbate stuttering in both its overt and covert aspects, consequently impacting self-esteem and encouraging the adoption of avoidance behaviors. Addressing this aspect in therapy is essential to supporting the child's well-being and development, as well as modifying the reactions of their surrounding environment. Several studies suggest that humor and irony serve as functional coping strategies for managing stressful situations. Humor can help reduce tension, regulate psychophysiological balance, and enhance psychological well-being. Additionally, it can facilitate the breakdown of stereotypes and contribute to reducing stigmatization. The integration of humor into stuttering therapy has shown promise in reducing the severity of the disorder. Strategies that incorporate humor can work by lowering anxiety, promoting desensitization, and improving the ability to handle unexpected situations. Such approaches help children reinterpret negative experiences and develop greater resilience. Furthermore, using irony and self-irony as coping strategies influences environmental responses, fostering a more positive attitude. Description: "MaKING fun" is a board game specifically designed to help children who stutter develop effective responses to teasing through the use of self-irony and humor. The game transforms the experience of being teased into a structured activity, allowing players to practice and internalize functional coping strategies. Players advance on the game board based on their reactions to teasing scenarios, with positive, humorous responses enabling progression, while negative reactions result in stagnation or regression. The game includes various elements: Reaction Cards: Players use these cards to choose their responses to teasing, encouraging thoughtful and adaptive reactions. Spell Cards: These cards introduce specific teasing scenarios, simulating real-life situations in a controlled environment. Role Assignment: Participants take turns in different roles, including the teaser and the responder, to understand multiple perspectives and dynamics involved in teasing interactions. By engaging in this interactive format, children practice responding to teasing in a safe and supportive setting, which can translate to improved real-world interactions. Objectives: The primary objectives of the "MaKING fun" are: Skill Development: Equip children who stutter with practical strategies to manage and respond to teasing effectively. Emotional Resilience: Foster resilience by encouraging the use of humor, helping children reframe negative experiences. Social Competence: Enhance social skills and confidence in interpersonal interactions, reducing the impact of bullying and teasing. Therapeutic Engagement: Provide a novel and engaging tool for speech-language pathologists to incorporate into therapy sessions, promoting active participation and learning.

	Modifying environmental reactions: Receiving ironic and assertive responses consequently shapes the behavior of those who engage in teasing, thereby altering the reactions and overall attitude of the environment in which the child is immersed. Conclusions: "MaKING fun" offers an innovative approach to addressing the challenges faced by children who stutter in dealing with teasing and bullying. By integrating humor and structured practice into therapy, the game aims to improve emotional resilience and social skills. Further research is warranted to evaluate the efficacy of this intervention and its potential integration into comprehensive stuttering therapy programs.

P15	**Exploring Therapeutic Goals and Preferences in Stuttering Therapy among Polish-Speaking Adults: a Mixed-Methods Study**
Authors	Anna Starczewska, Katarzyna Węsierska, Marta Wesierska
Keywords	adults, intervention, therapeutic goals, stuttering, mixed-methods
Abstract	Stuttering impacts various aspects of life, including social, professional, and emotional functioning. Individuals who stutter who seek therapy often have diverse motivations, needs, and expectations, making an individualized approach to goal setting crucial (Sønsterud et al., 2020). Understanding the needs and expectations of clients regarding therapy is essential for effective planning and implementation of the therapeutic process. This mixed-method study explores the therapeutic goals and motivations of Polish-speaking adults who stutter. Through an online survey with 50 respondents and in-depth interviews with 9 participants, the study examines how personal goals evolve during therapy. Findings showed that initial goals focus on fluency, but later shift toward improving coping strategies and managing real-life communication challenges. Participants also report reducing anxiety and stress as primary goals. This research aims to enhance stuttering therapy in Poland by promoting a more individualized, client-centered approach, utilizing tools like the Client Preferences for Stuttering Therapy – Extended version (CPST-E) and Overall Assessment of the Speaker's Experience of Stuttering-Adult OASES-A).

P16	**Wpływ uważności i współczucia na jakość życia osób z jąkaniem i giełkotem - wstępne wyniki badań**
Authors	Aleksandra Boroń, Katarzyna Buk
Keywords	Jąkanie, giełkot, uważność, współczucie, jakość życia
Abstract	Jąkanie i giełkot to przejawy neuroróżnorodności, uwarunkowane genetycznie i neurofizjologicznie, dlatego też nie podlegają terapii ukierunkowanej na ,,wyleczenie" (usunięcie niepłynności mowy), a raczej na poprawę jakości życia, w tym na skuteczne i satysfakcjonujące komunikowanie się. w terapii warto uwzględniać nie tylko objawy obecne w mowie, ale także aspekty poznawcze i emocjonalne, tj. postawy, przekonania, emocje (Boyle, 2011). Uważność (mindfulness) i współczucie (compassion) mogą być przydatne w pracy nad tymi obszarami. Uważność to uświadamianie sobie tego, co się dzieje, kiedy się dzieje, bez preferencji (R. Nairn). Zauważanie doświadczanych trudności bez oceniania, zatrzymanie się i zyskanie przestrzeni do wyboru reakcji to pierwszy krok do radzenia sobie z tymi trudnościami. Samowspółczucie – współczucie dla doświadczenia cierpienia skierowane do wewnątrz (K. Neff) – pomaga w radzeniu sobie z autostygmatyzacją. Zmniejsza także negatywny wpływ jąkania na życie (Croft, Byrd, 2020). Elementy uważności i współczucia włączane były w ostatnich latach do terapii jąkania i giełkotu (np. MIST, Sønsterud, 2021), ale badano również efekty udziału w pełnym kursie uważnościowym, niezależnym od procesu terapii (Feldman, Goldstien, Rolnik i in., 2021). Celem niniejszego badania było sprawdzenie, czy i jakie zmiany w postrzeganiu jakości życia przyniesie udział w pełnym treningu uważności i współczucia (8-tygodniowy Kurs

	życia opartego na uważności MBLC; Choden, Regan-Addis, 2022) dorosłych osób z jąkaniem i/lub giełkotem. Poster przedstawia opis wyników badania w pierwszej z trzech zaplanowanych edycji kursu. Wzięły w nim udział trzy osoby z jąkaniem i dwie z giełkotem. Nie oferowano równocześnie terapii logopedycznej dla jego uczestników. Kurs prowadzony był zdalnie. Prowadziły go dwie nauczycielki mindfulness, jedna z nich to logopeda ze specjalizacją w zakresie jąkania i giełkotu. Kurs obejmował sesję wstępną (90 min.), osiem sesji głównych (120 min.), dzień z uważnością (5 godz.) oraz spotkanie przypominające (120 min., jeden miesiąc od zakończenia kursu). Uczestnicy wypełniali kwestionariusze badawcze dwukrotnie: przed kursem i po jego zakończeniu. Wstępne wyniki badań sugerują wpływ treningu uważności i współczucia na aspekty: poznawczy i emocjonalny oraz ogólnie na jakość życia respondentów. Obszary, w których zdaniem respondentów zaszły zmiany, to m.in.: życie prywatne i zawodowe, kontakty społeczne, komunikacja, postawy, emocje, koncentracja, procesy myślowe, stres. W zaplanowanych pozostałych dwóch edycjach kursu poza osobami doświadczającymi jąkania i/lub giełkotu badanie obejmie również osoby niedoświadczające tych przejawów niepłynności w mowie oraz osoby z jąkaniem/giełkotem nieuczestniczące w kursie MBLC. Przewidziana jest również edycja dla młodzieży doświadczającej jąkania i giełkotu (MBLC-YA).

P17	**Wdrażanie Modelu Blank Center CARE™ w Polsce: perspektywy logopedów na temat afirmującego podejścia w terapii jąkania**
Authors	Julia Leonik, Joanna Szymczakowska
Keywords	model CARE™; terapia jąkania; afirmacja jąkania; logopeda
Abstract	Cel badania: Celem niniejszego badania jest eksploracja doświadczeń, opinii oraz refleksji logopedów pracujących z dziećmi jąkającymi się, ze szczególnym uwzględnieniem podejść afirmujących jąkanie. w Polsce praktyka terapeutyczna była dotychczas zdominowana przez perspektywę ukierunkowaną na płynność mowy oraz podejście deficytowe (Tarkowski, 2025; Pakura i in., 2024), w ramach których jąkanie traktowane jest przede wszystkim jako zaburzenie wymagające redukcji. Jednak współcześnie podkreśla się potrzebę odejścia od płynności jako głównego celu terapii, akcentując znaczenie funkcjonowania komunikacyjnego, dobrostanu psychicznego, poczucia własnej wartości oraz uczestnictwa w życiu społecznym (Constantino, 2023; Irani i in., 2025; Reeves i Yaruss, 2025; Sisskin, 2023; Tichenor i Yaruss, 2019; Yaruss, 2010). w tym ujęciu coraz większe znaczenie zyskują podejścia promujące akceptację jąkania oraz rozwój pozytywnej tożsamości komunikacyjnej. Jednym z przykładów jest model CARE™ (Byrd i in., 2018; 2021; 2024; 2025; Coalson i Byrd, 2025), który koncentruje się na tworzeniu wspierającego środowiska komunikacyjnego, budowaniu relacji oraz wzmacnianiu kompetencji komunikacyjnych. w badaniu podjęto próbę analizy, w jaki sposób takie podejścia są rozumiane i doświadczane przez logopedów pracujących w oparciu o model CARE. Metody: Badanie ma charakter jakościowy. Dane zebrano za pomocą częściowo ustrukturyzowanych wywiadów z sześcioma logopedami pracującymi z dziećmi jąkającymi się. Uczestnikami badania byli terapeuci, którzy brali udział w Camp Dream. Speak. Live. Poland (edycje 2024 i 2025). Szczególną uwagę poświęcono ich doświadczeniom związanym z udziałem w tej inicjatywie, skierowanej do dzieci i młodzieży jąkającej się, której celem jest promowanie akceptacji jąkania, rozwijanie umiejętności komunikacyjnych oraz budowanie poczucia wspólnoty. Dane analizowano z wykorzystaniem refleksyjnej analizy tematycznej zgodnie z podejściem Braun i Clarke (2006, 2019, 2022), co umożliwiło identyfikację wzorców znaczeniowych w narracjach uczestników oraz pogłębioną eksplorację ich doświadczeń i perspektyw.

	Wyniki: Zbieranie danych zostało zakończone, a materiał jest obecnie w trakcie analizy. Dane zostały zakodowane i wyłonione zostały wstępne tematy. Wstępne wyniki sugerują, że logopedzi konceptualizują podejścia afirmujące jąkanie jako wykraczające poza cele ukierunkowane na płynność mowy, kładąc nacisk na dobrostan dziecka, jego uczestnictwo w komunikacji oraz relacyjny wymiar terapii. Wstępna analiza wskazuje również, że doświadczenia zdobyte w takich inicjatywach jak Camp Dream. Speak. Live. Poland kształtują perspektywy terapeutów, wspierając zwrot ku bardziej holistycznym i afirmującym praktykom. Logopedzi podkreślają, że wdrażanie takich podejść w Polsce jest możliwe, jednak wymaga dostępu do aktualnej wiedzy naukowej oraz specjalistycznych szkoleń. Wskazują także, że elementy podejść afirmujących jąkanie mogą być przenoszone do innych obszarów praktyki klinicznej, w pracy z osobami doświadczającymi różnorodnych trudności komunikacyjnych. Dalsza analiza materiału badawczego jest w toku i pozwoli na pogłębioną interpretację zidentyfikowanych wątków. Wnioski: Wyniki wskazują na zwrot w kierunku bardziej holistycznych i afirmujących podejść w terapii jąkania, które stawiają w centrum dobrostan dziecka oraz jego uczestnictwo w komunikacji. Podkreślają także rolę inicjatyw opartych na doświadczeniu, takich jak Camp Dream. Speak. Live., w kształtowaniu perspektyw terapeutów i wspieraniu procesu zmiany. Wyniki sugerują ponadto, że wdrażanie takich podejść wymaga dostępu do aktualnej wiedzy naukowej oraz specjalistycznych szkoleń, a ich założenia mogą znajdować zastosowanie także w pracy z osobami doświadczającymi różnorodnych trudności komunikacyjnych wykraczających poza jąkanie. Wnioski te mogą sprzyjać refleksji nad rolą podejść afirmujących w logopedii oraz nad ewolucją paradygmatów terapeutycznych.

P18	**Zmiana postaw studentów logopedii wobec jąkania dzięki kontaktowi z grupą samopomocową – analiza jakościowa**
Authors	Natalia Radkowska-Marczak
Keywords	studenci, grupa samopomocowa, studia logopedyczne, zmiana postaw, jąkanie
Abstract	W kształceniu przyszłych logopedów istotne miejsce zajmuje nie tylko wiedza teoretyczna i umiejętności diagnostyczno-terapeutyczne, ale także rozwijanie adekwatnych postaw wobec osób doświadczających jąkania. Jąkanie jako złożone zjawisko o wymiarze komunikacyjnym, emocjonalnym i społecznym, wymaga od specjalisty szczególnej wrażliwości oraz zrozumienia perspektywy osoby z jąkaniem. Celem niniejszego wystąpienia jest przedstawienie wyników badań jakościowych dotyczących zmian postaw studentów logopedii wobec jąkania, zachodzących pod wpływem uczestnictwa w ramach warsztatów w spotkaniach grupy samopomocowej dla dorosłych osób z jąkaniem. Spotkania te stanowią istotny element uzupełniający program kształcenia, umożliwiając studentom bezpośredni kontakt z osobami z jąkaniem oraz poznanie ich doświadczeń życiowych, doświadczeń terapeutycznych, strategii radzenia sobie z jąkaniem oraz oczekiwań wobec terapii. Badanie przeprowadzono z wykorzystaniem metod jakościowych, w tym analizy wypowiedzi pisemnych studentów (refleksji po spotkaniach) oraz wywiadów pogłębionych półustrukturyzowanych. Analiza materiału pozwoliła wyodrębnić kluczowe kategorie tematyczne odnoszące się do zmian w postrzeganiu jąkania oraz osób, które go doświadczają. Uzyskane wyniki wskazują na istotną przemianę od postaw opartych głównie na wiedzy podręcznikowej i stereotypowych wyobrażeniach ku bardziej zaawansowanemu, empatycznemu rozumieniu jąkania jako doświadczenia indywidualnego. Studenci podkreślali znaczenie autentycznego kontaktu, który umożliwił im dostrzeżenie różnorodności funkcjonowania osób z jąkniem oraz roli czynników psychospołecznych.

	Zmianie uległo także ich postrzeganie roli logopedy – z koncentracji na eliminacji objawów na rzecz wspierania komunikacji oraz jakości życia. Wnioski płynące z badania wskazują, że włączanie spotkań z grupami wsparcia do programu studiów logopedycznych może stanowić wartościowe narzędzie dydaktyczne, sprzyjające kształtowaniu refleksyjnej praktyki, rozwijaniu empatii oraz przygotowaniu studentów do pracy zgodnej z podejściem skoncentrowanym na osobie. Podkreśla się potrzebę dalszych badań nad efektywnością tego typu działań edukacyjnych oraz ich systematycznego wdrażania w proces kształcenia przyszłych logopedów.

P19	**Czech adaptation of Behavior Assessment Battery**
Authors	Jan Dezort, Martine Vanryckeghem
Keywords	stuttering, diagnostics, adults
Abstract	The aim of this study was to develop a Czech adaptation of the Behavior Assessment Battery (BAB), a diagnostic tool widely used in international contexts for the comprehensive assessment of psychological and behavioral aspects of stuttering. The instrument captures not only the frequency and severity of symptoms, but also the individual's subjective experience, communication attitudes, and the impact of stuttering on everyday functioning. The adaptation process consisted of several consecutive steps. First, a forward translation and back-translation procedure was carried out with an emphasis on maintaining both semantic and cultural equivalence of the items. The preliminary version was then pilot-tested on a sample of individuals who stutter, allowing for the identification of problematic formulations and the evaluation of item clarity. As part of the adaptation process, the psychometric properties of the instrument were also assessed, particularly internal consistency and reliability. The research sample consisted of individuals diagnosed with stuttering across different age groups, with an emphasis on capturing variability in both the experience and manifestation of the disorder. Data collection was conducted using a standardized administration procedure. The obtained data were analyzed using statistical methods to verify the basic psychometric characteristics of the Czech version of the instrument. The results indicate that the Czech adaptation of the BAB demonstrates internal consistency and is comprehensible for the Czech population. The instrument proved to be sensitive in capturing individual differences in negative communication attitudes, emotional experiences, and avoidance behaviors. It also provides valuable information that can complement traditional speech-language diagnostic approaches primarily focused on observable speech disfluencies. The main contribution of this study lies in making a validated diagnostic tool available for the Czech clinical and speech-language therapy context, enabling a more comprehensive understanding of stuttering in line with modern approaches that reflect the biopsychosocial model. The findings highlight the potential of the BAB not only for diagnostic purposes but also for therapy planning and outcome evaluation. A limitation of the study is the size and nature of the research sample, which does not allow for full generalization of the results. Future research should focus on standardizing the instrument on a representative sample and further validating its use across different age and clinical groups. This study represents an initial step toward the systematic use of the BAB in the Czech context and opens up opportunities for its broader application in both clinical practice and research.