

A Cautionary Tale for the New Year

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Ben, d.o.b. 26.6.77, child of speech therapist and linguist. Language development prognosis—brilliant. Off Reynell Scales in weeks. 26.6.79. Still no sign of much Stage II L.A.R.S.P. Why not? What do? Refer to literature via intuition. What would good speech therapist do under the circumstances, if early referral? Literature replies: stimulating language environment (Ben got that—one elder brother, two elder sisters, two dogs, two cats, one hamster, three grannies, one grandpa, etc); person-directed questions, all at right level (Ben got that esp. when attempts to eat hamster, etc.); structural expansion and paraphrase of his one-word sentences (cf. P. ègg/T. that's an ègg/ it's a nice egg/, etc.) (Ben got that, except when no time for expand, e.g. B. (putting hamster into food processor) gône/T. (unintell.)).

Next step then? Do more of same. Increase stimulation. Keep up expansions. Maybe bring in forced alternative questions (when remember). Result: no change. Ben happy, L.A.R.S.P. Stage I.

Linguist and speech therapist case conference. What normal parents be doing under circumstances? Answer obvious: not be giving child so much stimulus, expansion, etc. Maybe Ben stays L.A.R.S.P. I because he sees no need to move L.A.R.S.P. II. (Possible Ben not heard of L.A.R.S.P. However, no other sign of deprivation.) What point? Adults do talking for him. Wonderful world. I say "car": adults tell me all kinds of nice things 'bout car. No need to say more if they do it. Nice life.

Change strategy: be like normal parents. Ignore child lots. Misunderstand child. Talk at same time as child. Give monosyllabic replies to child. Result: Ben at L.A.R.S.P. Stage II in week; at III in month.

15.1.80, 1.32 p.m. Ben stutter first time. Within two weeks, stutter lots. Ah, normal non-fluency (hope so anyway). What good sp. th. tell anxious parent do, if early referral? Answer clear: not promote anxiety in child. Show no concern. Not rush child. Stop other children interrupt. Wait till child spit it out.

Result: stutter carry on, no change. Note Ben not stutter when talk to dog. Ponder implications. Possible Paper for B.J.D.C.? "Non-fluency in child doggerel". (cf. paper in J.C.H.Lang. 9.1.) Conclude not want put M. Edwards to bother of rejecting. Next step, then? Do more of same. Stay calm. Keep others calm. Tape stutter for first ever longitudinal study of normal (hope so) non-fluency. Ben not stutter when tape recorder on. Possible other paper for B.J.D.C.? "Socio-psycho-linguistic determinants of non-fluency in quadropares; a multivariate and electronic analysis." Conclude not want second rejection in month from M. Edwards.

Next step then? More of same. Ben now stutter for tape recorder. Use data quick for new book. Interesting grammatical hypothesis: Ben only stutter on specific grammatical structures currently being acquired. Works out nicely, for data collected. Thought strikes: if hypothesis valid, will stutter till end of critical period? Think not. Probably other factors come in. Yes.

Scan literature. Normal average duration of early normal non-fluency six months. It now 15.6.80. One month to go. No sign reducing. Ben playgroup soon. Not want stutter at playgroup. How people think we brought him up? Also, other children, playgroup leaders, etc. not know how handle stuttering like we do. Could get worse. What do?

Linguist and speech therapist case conference. Remember first cautionary tale. What normal parents be doing under circumstances? Most normal non-fluent children; normal parents (i.e. not sp. th., linguist): non-fluency clear up. Normal parents get cross, impatient. Maybe we being too kind. Maybe non-fluent children learn stop being non-fluent 'cos get fed up with others getting at them be fluent. Maybe we better be impatient when Ben not spit out. Maybe tell him stop? Not stop children interrupt? Risky. Goes against grain, and C.S.T. brochure on subject. Still-worth try out be like normal parents. For two—three days.

Strategy collapse. Visit of sp. th. friend (Chief III). Get told off. Stammering till 4 or 5 no problem. Normal. We know, but

. . . Chief III say: maybe too many ideas in Ben's head, wanting get out. Maybe high intelligence. Purr, purr. Go back to other strategy. O.K., O.K.

But wait—stutter seem already going? Wishful think? No, really. Reduces fast, and in two months gone. Coincidence? Not know. Perhaps touch by Chief III do it. If so, wonder what happen if touch by Area sp. th.—or by Chairman C.S.T.

Conclusion? Relevance parents linguistically handicapped? Think not. No

generalise from normal to abnormal just like that. Relevance other parents? Maybe those who try take up linguistic policy for child: watch out. Relevance professionally involved parents, like us: watch out, more so. Relevance for sp. th.? You say.

Wonder. What we going do right next? Nov. 80. Appears developing severe specific receptive grammatico-semantic problem for Neg V command. Expressive Neg developing very fast. Hmm.