

ILP-S (St. Louis) and OASES (Yaruss/Quesal): Turkish/Australian Stuttering Comparisons		
Poster Presented at the Annual Convention of the American Speech-Language-Hearing Association		
Philadelphia, Pennsylvania		20 November, 2010
Kenneth O. St. Louis West Virginia University Morgantown, West Virginia, USA	Seyhun Topbaş Selçuk Güven R. Sertan Özdemir Anadolu University Eskisehir, Turkey	Janet Beilby Michelle Byrnes Jessie Diamond* Curtin University of Technology Perth, Australia

* **Emily Meagher** is not listed as an author but made significant contributions

I. Background

- A. Recent re-emergence of emphasis on evaluating a stuttering person's experience of stuttering in addition to the act of stuttering
 - 1. Some influences
 - a. Clients' opinions that fluency per se does not constitute clinical success
 - b. Quality of life measures from...
 - (1) Mental Illness
 - (2) Aphasia

II. Longer Paper-and-Pencil Measures

- A. Existing measures focused almost exclusively on speaking or stuttering
 - 1. S-24 (Andrews & Cutler, 1974)
 - 2. PSI (Woolf, 1967)
- B. Most popular recent measure: *Overall Assessment of the Speaker's Experience of Stuttering (OASES)* (Yaruss & Quesal, 2008)
 - 1. Comprehensive diagnostic measure
 - 2. 1-5 scales for 100 items: 20-30 minutes required
 - 3. Sections and impact scores for...
 - a. I. General information (20 items)
 - b. II. Reactions to stuttering (30 items)
 - c. III. Communication in daily situations (25 items)
 - d. IV. Quality of life (25 items)
 - e. Total Impact Score (TIS) (100 items)

III. Short Paper-and-Pencil Measure

- A. *St. Louis Inventory of Life Perspectives and Stuttering (SL♦ILP-S)* (St. Louis, 2001)
 - 1. 1-9 scales (or ? for "I don't know") for 13 items: 4-5 minutes required
 - 2. Sections
 - a. Stuttering and its effect on the person (8 items): "Total Effect Score" (TES)
 - b. Interest in others who stutter (2 items)
 - c. Health and life satisfaction (3 items)

IV. Purposes

- A. To compare the *SL♦ILP-S* with the *OASES* in people who stutter from two different cultures and languages
- B. To compare the *SL♦ILP-S* and the *OASES* outcome measures both pre- and post-therapy for stuttering in one culture
- C. To compare the *SL♦ILP-S* with the *OASES* in people who stutter and their parents or partners in one culture

V. Method

A. Participants

1. Turkey
 - a. 61 stuttering adults (AWS): (50 M and 11 F; 14-34 yr [Mean = 20.3 yr])
 - (1) 8 after group therapy
 - (2) 53 after individual therapy
2. Australia
 - a. 10 AWS: (9 M and 1 F; 29-61 yr [Mean = 39.4 yr])
 - b. 10 Partners of AWS: (1 M and 9 F; 28-60 yr [Mean = 38.4 yr])
 - c. 14 stuttering children (CWS): 9 M and 5 F; 7-12 yr [Mean = 8.9 yr]
 - d. 14 parents of stuttering children (PCWS): 1 father and 13 mothers (Mean = 40.1 yr)
3. Severity distribution (based on self-rating of severity [item #4] of *SLwILP-S* and TIS)
 - a. AWS (Tur) most severe
 - b. CWS (Aus) intermediate
 - c. AWS (Aus) least severe

VI. Results

- A. *SL♦ILP-S* and *OASES* averages (See Table 1)
- B. Correlations (See Table 2)
- C. Pre-Post Comparisons: CWS
 1. Australian CWS improved on both measures after therapy
 - a. *SL♦ILP-S* TES: 39.5 to 23.0 [16.5 improvement]**
 - b. *SL♦ILP-S* mean items (1-9 scale): 4.9 to 2.9 [1.9 improvement]**
 - (1) Converted to 1-5 scale to compare with *OASES*: 2.9 to 1.9 [0.9 improvement]
 2. *OASES* Total Impact: 53.3 to 41.7 [11.6 improvement]**
 3. *OASES* mean items (1-5 scale): 2.7 to 2.1 [0.6 improvement]**

VII. Implications

- A. Both *SL♦ILP-S* and *OASES* measure positive changes from Rx about equally
 1. Indicates construct validity
- B. Likely that *SL♦ILP-S* Total Effect Score (TES) &/or Total score measures many similar constructs as the 5 *OASES* impact scores
 1. Demonstrated by significant correlations
 - a. But significance levels affected by sample sizes
 2. Moderate positive correlations: +.3 to +.6 (except CWS post Rx with -.2)
 3. Suggests that *SL♦ILP-S* can be used as a screening instrument for several concepts related to quality of life in stuttering
- C. But likely that 2 *SL♦ILP-S* items for Interest in Others Who Stutter and 3 *SL♦ILP-*

S items for Health/Life Satisfaction measure different constructs

1. None or negative correlations: about +.1 to -.4 (except AWS with no Rx with +.6 to +.7)
 2. *SL ♦ILP-S* may add useful information to assessments of the experience of stuttering
 3. Suggests that clients and significant others believe that those with more serious stuttering are more likely to...
 - a. Want to—or be unrelated to wanting to— associate with and/or help others who stutter
 - (1) Possible that severity or complex stuttering involvement perceived to be related to need
 - b. Believe that physical or mental health and life satisfaction are either unrelated to stuttering or more likely to be positive
 - (1) Surprising finding with no obvious explanation
 - (a) Stuttering not a factor in the items
- D. Two issues in translating *OASES* into Turkish
1. Turkish version omitted 2 items
 - a. #70 “Ordering food at a drive-thru” culture-bound
 - b. #94 “Overall outlook on life” redundant with #93 “Sense of self-worth or self-esteem”
 2. Although *OASES* has been translated widely, some difficulty in translating a few items to other languages may exist

Table 1. Selected means from the *SL ♦ILP-S* and the *OASES*.

Sample	<i>SL ♦ILP-S</i> TES	<i>SL ♦ILP-S</i> Mean	<i>OASES</i> TIS	<i>OASES</i> Mean
AWS (Tur) After Therapy	34.6	4.6	50.4	2.5
AWS (Aus) No Therapy	30.2	4.4	43.2	2.2
Partners of AWS (Aus)	21.5	3.0	40.6	2.0
CWS (Aus) Pre-Therapy	39.5	4.8	53.3	2.7
CWS (Aus) Post-Therapy	23.0	2.9	41.7	2.1
Parents of CWS (Aus) Pre-Therapy	40.4	4.8	51.8	2.6
Parents of CWS (Aus) Post-Therapy	28.5	3.4	43.1	2.2

Table 1. Selected Pearson product-moment correlations between the *SL♦ILP-S* and the *OASES* (* indicates $p \leq .05$; ** indicates $p \leq .01$).

Group <i>OASES</i> Impact	<i>SL♦ILP-S</i> Total Effect Score	<i>SL♦ILP-S</i> Help Others	<i>SL♦ILP-S</i> Health & Life Satisfaction	<i>SL♦ILP-S</i> Total score
AWS After Therapy (Tur)				
<i>OASES</i> General Information	0.323**	0.149	-0.158	0.219
<i>OASES</i> Stuttering Reactions	0.318*	0.142	-0.079	0.255*
<i>OASES</i> Communication	0.293**	0.057	-0.190	0.129
<i>OASES</i> Quality of Life	0.216	0.198	-0.088	0.211
<i>OASES</i> Total Impact Score	0.347**	0.168	-0.148	0.250*
AWS_No Therapy (Aus)				
<i>OASES</i> General Information	0.228	0.743*	0.482	0.565
<i>OASES</i> Stuttering Reactions	0.419	0.538	0.774**	0.678*
<i>OASES</i> Communication	0.546	0.592	0.767**	0.777**
<i>OASES</i> Quality of Life	0.575	0.542	0.563	0.722*
<i>OASES</i> Total Impact Score	0.498	0.643*	0.732*	0.759*
Partners of AWS No Therapy (Aus)				
<i>OASES</i> General Information	0.577	0.055	-0.355	0.577
<i>OASES</i> Stuttering Reactions	0.563	0.119	-0.086	0.734*
<i>OASES</i> Communication	0.599	-0.244	0.140	0.802**
<i>OASES</i> Quality of Life	0.285	-0.089	0.375	0.605
<i>OASES</i> Total Impact Score	0.614	-0.052	-0.008	0.800**
CWS Pre-Therapy (Aus)				
<i>OASES</i> General Information	0.201	-0.592*	-0.302	-0.143
<i>OASES</i> Stuttering Reactions	0.560*	-0.157	-0.512	0.360
<i>OASES</i> Communication	0.537	-0.484	-0.424	0.264
<i>OASES</i> Quality of Life	0.319	-0.033	-0.150	0.314
<i>OASES</i> Total Impact Score	0.505	-0.346	-0.422	0.273
CWS Post-Therapy (Aus)				
<i>OASES</i> General Information	0.081	-0.192	0.000	-0.028
<i>OASES</i> Stuttering Reactions	-0.418	-0.358	-0.318	-0.566*
<i>OASES</i> Communication	0.207	-0.200	0.315	0.180
<i>OASES</i> Quality of Life	-0.242	-0.218	-0.091	-0.296
<i>OASES</i> Total Impact Score	-0.177	-0.364	-0.057	-0.301
Parents of CWS Pre-Therapy (Aus)				
<i>OASES</i> General Information	-0.136	0.618*	-0.521	0.204
<i>OASES</i> Stuttering Reactions	0.612*	-0.315	0.097	0.179

OASES Communication	0.180	0.480	-0.514	0.352
OASES Quality of Life	0.508	-0.202	-0.018	-0.121
OASES Total Impact Score	0.445	0.106	-0.256	0.202
Parents of CWS Post-Therapy (Aus)				
OASES General Information	0.202	0.087	0.015	0.178
OASES Stuttering Reactions	0.196	0.328	0.164	0.288
OASES Communication	0.259	-0.081	0.241	0.247
OASES Quality of Life	0.205	-0.114	0.059	0.139
OASES Total Impact Score	0.308	0.036	0.170	0.293

References

- Andrews, G. & Cutler, J. (1974). Stuttering therapy: The relation between changes in symptom level and attitudes. *Journal of Speech and Hearing Disorders*, 39, 312-319.
- St. Louis, K. O. (2001). *Living with stuttering: Stories, basics, resources, and hope*. Morgantown, WV: Populore.
- Woolf, G. (1967). The assessment of stuttering as struggle, avoidance and expectancy. *British Journal of Disorders of Communication*, 2, 158-171.
- Yaruss, J. S., & Quesal, R. W. (2008). *Overall Assessment of the Speaker's Experience of Stuttering (OASES)*. Minneapolis, MN: Pearson.