



Stuttering and social change: Moving Towards a Critical Disability Studies Approach in South Africa

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Abstract

The past few decades have seen significant growth in the field of disability studies. Through the application of a disability studies framework, international and South African researchers have addressed and challenged the marginalization and discrimination of disabled individuals. However, the focus has primarily been on individuals who are physically disabled and not communication impairment such as stuttering. Stuttering has received limited attention within disability studies in South Africa. In this chapter, the authors use the key findings of the first author's doctoral study as a case study to discuss and describe the oppression and discrimination people who stutter commonly encounter at different levels of society (i.e., the family, religious communities, spaces of education and employment, and societal norms of South African masculinities). The authors proceed to discuss the implications of the study's findings for policy, legislation, and intervention in South Africa. The authors argue that the study of disability, including stuttering in South Africa, must be examined through an intersectional lens, and particularly in low-income and racialized communities. The authors specifically advocate for social change at different levels of South African society, which they argue is only possible through a critical disability studies agenda, as this approach not only removes focus and responsibility of stuttering from the person who stutters and places it onto societal systems and ideologies that oppress and discriminate against people in South Africa who stutter. It also gives attention to how disabling experiences intersect with identity markers, such as race, culture, religion, and gender.

Keywords

Critical disability studies · People who stutter · Social change · South Africa · STaM study

1 Introduction

Globally, it is estimated that approximately one billion people are disabled (Shakespeare, 2018). In South Africa, about 7.5% of the population is disabled (Statistics South Africa (StatsSA), 2011), and this cohort is considered among the most marginalized and oppressed groups in South Africa (Graham et al., 2014). While there is growing interest and investment in prioritizing the needs of disabled people, there is a paucity of studies that focus directly on the experiences and needs of people who stutter – like people with other forms of impairments, people who stutter experience discrimination, disablement (which is defined as the social, economic, and cultural barriers that prevent the full participation of individuals with impairments in society (Goodley, 2014)), and oppression at different levels of society

(Campbell et al., 2019). Yet, this cohort of the population is often overlooked within the broader narrative of disability studies which significantly compromises programmatic, intervention, and policy responses to address the needs of people who stutter. Reflecting on data collected through a purposive study on men who stutter, the current chapter discusses the importance of a critical disability studies framework to exemplify and address the needs of people in South Africa who stutter.

2 Disability Studies: A Brief History

The past few decades have seen significant growth in the field of disability studies. Disability studies is concerned with the political and social issues affecting disabled individuals (Ferguson & Nusbaum, 2012) and includes various models that have been proposed to conceptualize how the notion “disability” should be understood. For example, one of the earlier frameworks called the *Social Model of Disability* was developed and established in the UK in the 1960s and 1970s by the Union of the Physically Impaired Against Segregation (UPIAS) and academics such as Vic Finkelstein, Colin Barnes, and Mike Oliver (Shakespeare & Watson, 2001). The social model emphasized the fighting for the rights of disabled individuals (St. Pierre, 2019). This model challenged the prevailing notion of disability offered by the medical model of disability: that of a medical condition that resides in the body of the disabled individual and that it requires medical attention (Jackson, 2018; McTigue, 2015; Retief & Letšosa, 2018). Instead, a social model of disability argues that there is a clear distinction between impairment and disability (Retief & Letšosa, 2018; St. Pierre, 2019). This distinction is premised on the assertion that one’s disability is not a personal issue; rather, it is the outcome of how society is structured that creates the experience of disablement (Barnes & Mercer, 2010; Finkelstein, 2004; Swain & French, 2013). In other words, an impairment is the health condition that exist within the body, while disability entails the barriers (which include cultural, economic, and social barriers) imposed by society on the impairment of the individual (Goodley, 2014; Oliver, 1996; Shakespeare, 2018; Swain & French, 2013). These barriers are argued to result in the discrimination, marginalization, and disablement of individuals with impairments (Goodley, 2014).

The social model of disability has had a positive impact on disability studies (Constantino et al., 2022). It has encouraged the formation of various disability movements around the globe and encouraged activists, researchers, and practitioners to challenge and combat the discrimination, disablement, and stigma disabled individuals encounter in various societies (Constantino et al., 2022; St. Pierre, 2019). In South Africa, the application of this framework has also resulted in the development of advocacy and rights-based non-profit organizations, such as the Higher and Further Education Disability Services Association (HEDSA) (which represents disability services at institutions of higher learning across South Africa), the Southern African Federation of the Disabled (SAFOD; a human rights organization for disabled people in South Africa), and the South African Disability Alliance (SADA) (which is a “voluntary consultative forum of national disability organisations” in South Africa. The organization seeks to advance the rights,

freedoms, and quality of life of disabled individuals in South Africa) (African Network for Evidence-to-Action in Disability (AFRINEAD), 2022; SADA, 2023). It has also resulted in the establishment of one of the first journals of disability in Africa: *African Journal of Disability*.

3 Disability Studies and Stuttering

It is estimated that approximately 2% of the South African population has a communication impairment (StatsSA, 2011), with 1% of the population being people who stutter (Sehloho, 2019), which conservatively constitutes more than one million individuals. A speech impairment is defined as a communication disorder that is characterized by the inability to produce sounds in conversational speech, which include stuttering (Usery et al., 2018). Stuttering has generally been defined as a “communication disorder with the most obvious feature being a disruption in the smooth flow of speech: often shown via the repetition of parts of words, hesitations, prolongations or blocks where there is a complete cessation of speech for an extended period of time” (Butler, 2013, p. 57).

Recent times have seen international researchers adopt a disability studies framework to understand and address the disabling experiences and support needs of people who stutter. In this regard, researchers and speech-language therapists have employed a disability studies lens to describe and discuss the oppression, discrimination, and disablement of people who stutter (see Bailey et al., 2015; Boyle et al., 2016; Calderwood & Degenhardt 2010, Campbell et al., 2019; Connery et al., 2020; Constantino et al., 2022; Meredith et al., 2012; Meredith & Packman, 2015; St. Pierre, 2012, 2015, 2017, 2022; St. Pierre & St. Pierre, 2018). For example, St. Pierre (2012) located stuttering within a disability studies framework and argued that stuttering is dialogical in nature. In this seminal work, he maintained that the construction of stuttering as abnormal communication practice is the responsibility of the person who stutters as well as the listener (St. Pierre, 2012). He also put forth that stuttering is an embodied act, explaining how stuttering is constructed as a disability by cultural norms and practices of communication (St. Pierre, 2012). Further to this, St. Pierre (2012) highlighted the liminal nature of people who stutter, reporting that people who stutter are not clearly disabled or able-bodied in society. As a result, conflicting and unclear expectations are often placed on people who stutter, which differs from other disabled individuals (St. Pierre, 2012). They are expected to perform at the same level as people who stutter (St. Pierre, 2012). Thus, dysfluency is interpreted as moral failure, which St. Pierre (2012) defines as: “the failure of a stutterer’s individual will and self-discipline which undercuts and threatens capitalistic virtues” (p. 1).

In another paper, St. Pierre (2015) critically engaged with the political relational model of disability, to theorize about the experiences of men who stutter in the context of embodied choreography. He suggested that men who stutter experience unusual communicative rhythms and tempos that interrupts the normalized “choreography” of communication (St. Pierre, 2015). Due to these unusual communicative

rhythms and abnormal tempos, he proposed that the performance of masculinity of men who stutter is disturbed and diminished (St. Pierre, 2015). Additionally, St. Pierre (2015) contended that the delayed and irregular communication practices also threaten the recognition of men who stutter as speaking subjects in the world.

In a follow-up article, St. Pierre (2017) critiqued critical disability studies, arguing that its conceptualization of hegemony does not address material practices and temporality, which is central to understanding the disabling experience of people who stutter. St. Pierre (2017) postulated that hegemonic communication practices, which comprise fluent and efficient speech, are oppressive for people who stutter because of their dysfluent speech (St. Pierre, 2017). Likewise, other scholars, such as Campbell et al. (2019) and Constantino et al. (2022), have critically engaged with the social model of disability to provide a multidimensional account of stuttering. They described the structural, attitudinal, and physical barriers that people who stutter encounter in society (Campbell et al., 2019). They also discussed and stressed the importance of the social model to usher in social change and tackle the stigma, stereotypes, discrimination, and prejudice associated with stuttering (Campbell et al., 2019; Constantino et al., 2022).

Moreover, Campbell et al. (2019) emphasized the need for a disability studies approach in the practice of speech therapy. Although the last few decades have seen speech therapists move away from the biomedical approach of stuttering and focus on the psychosocial needs of people who stutter (Isaacs, 2021), researchers such as St. Pierre and St. Pierre (2018) and Wylie et al. (2013) have argued that the practice of speech therapy continues to have an individual focus aiming to manage or eliminate dysfluent speech. Researchers and speech therapists have recommended the employment of a disability studies framework to challenge ableism, barriers, and negative attitudes associated with stuttering (Bailey et al., 2015; Constantino et al., 2022; Gerlach-Houck & Constantino, 2022). A disability studies approach was also described as valuable to challenge oppressive societal practices of communication, and to create a holistic environment that promotes the disability rights of people who stutter and eliminate the negative attitudes and behaviors that typically characterizes the response of speech therapists toward people who stutter (Boyle et al., 2016; Connery et al., 2020; St. Pierre & St. Pierre, 2018; Wylie et al., 2013).

In addition, researchers have also drawn on a disability studies approach to illuminate the struggles people who stutter face within educational spaces. In a dual-autoethnography, Calderwood and Degenhard (2010) reflected on their position as student and instructor in a second-year social work communication course in the UK. They described how verbal demands found within communication courses, such as social work, make them an oppressive and disabling space for people who stutter (Calderwood & Degenhard, 2010). They recommended that educators labor to design and create a learning environment that is supportive and sensitive to the disabling needs of people who stutter, and that promotes equal learning opportunities (Calderwood & Degenhard, 2010). Research presented by Meredith et al. (2012) and Meredith and Packman (2015) and Butler (2013) explored the experiences of individuals who stutter in educational spaces. Butler (2013) looked at the transition from school to university among a group of individuals who stutter in the

UK. Participants in her study reported negative schooling experiences (Butler, 2013). They specifically described the insensitivity they received from teachers in response to their needs (Butler, 2013). For example, participants described how teachers expected them to perform on the same level as students without a stutter when carrying out oral activities (Butler, 2013). Butler (2013) also showed how stuttering negatively impacted on students' ability to learn and participate in extra-curricular activities. As a result of these negative schooling experiences, Butler (2013) found that students were less likely to enroll at university. Meredith et al. (2012) and Meredith and Packman (2015) investigated the experiences of university students in Australia who stutter. He found that although students who stutter reported success at university, they described how their stutter negatively impacted on their social and academic performance (Meredith & Packman, 2015). Meredith et al. (2012) and Meredith and Packman (2015) further highlighted the lack of support services that exist for students who stutter at Australian universities.

Furthermore, researchers have also adopted a disability studies model to unpack the oppression and discrimination people who stutter faces in spaces of employment. Gilman (2012) discussed the employment discrimination of people in the USA who stutter. He argued that people in the USA who stutter experience decreased employment and promotion opportunities as result of their stutter (Gilman, 2012). As way to overcome the employment discrimination of people who stutter, Gilman (2012) recommended that stuttering be recognized as a disability under the Americans with Disabilities Act (ADA) in the USA.

4 Disability Studies and Stuttering in South Africa

While significant strides have been made to position stuttering research and intervention within a disability studies framework, stuttering has been absent in disability studies in South Africa. Research has shown the negative impact stuttering has on the lives of people in South Africa who stutter (Klompas & Ross, 2004). This chapter argues that the adoption of a disability studies approach is the driver for social change for people in South Africa who stutter. However, while the social model of disability has brought about transformation and social change for disabled people around the world, this model is not suited for people who stutter living in South Africa. One of the primary limitations lodged against the social model of disability is the generalized view it presents of disability (Erevelles, 2011; Goethals et al., 2015; Samaha, 2007). Considering stuttering within the broader disability studies framework, what is of importance in a multi-faceted society like South Africa, is an intersectional perspective on how impairment, and in this context stuttering, is understood. In this regard, a critical disability studies approach is required when advocating for social change for people who stutter. This approach does not only focus on the structural, social, and economic barriers that marginalize, disable, and discriminate against disabled people (Goodley, 2017). It also draws attention to how disabling experiences intersect with identity markers, such as race,

class, culture, religion, and gender (Goodley, 2017), which remain important components of how the South African population enact their daily lives.

In the next section of the chapter, the StaM study is introduced as a case study to explicate the value of a critical disability studies approach in stuttering research. First, an overview of the study is provided, including a summary of the primary results as it relates to stuttering and critical disability studies. This is followed by a discussion on the implications of the study findings for policy, legislation, and intervention in South Africa.

5 The STaM Study

The Stuttering and Masculinities study, or StaM study, was conducted between 2017 and 2021, with an overarching aim to understand the masculinities and disabling experiences of adult men in Western Cape, South Africa, who stutter (see Isaacs, 2021 for further reference). The STaM study grew out of the first author's experiences as a person who stutters. As a young man who stutters, the author has been discriminated against and encountered many disabling situations. Therefore, the first author was interested to explore the masculinities and disabling experiences of young adult men who stutter. The first author was the principal investigator of this study, which also formed the basis of his doctoral work. The study included 15 young adult men who stutter, and participants were between the ages of 20 and 39 years. All participants resided in the Western Cape province of South Africa and were from diverse racial backgrounds (see Table 1).

Table 1 Demographic details of participants

Participants (pseudonyms)	Age	Race	Occupation	Residential area
Agmad	27	Indian	Teacher	Cape Town
Allie	23	Colored	Student	Cape Town
Ayanda	20	Black	Student	Stellenbosch
David	25	White	Student	Stellenbosch
Eusibo	29	Colored	Geologist	Cape Town
Frank	34	White	Candidate attorney	Stellenbosch
Liam	28	Colored	Model	Cape Town
Luke	21	White	Student	Stellenbosch
Luqmaan	29	Colored	Medical doctor	Cape Town
Maliek	30	Indian	Financial advisor	Cape Town
Mathew	31	White	Engineer	Cape Town
Natheer	38	Colored	Business owner	Cape Town
Nur	30	Indian	Accountant	Cape Town
Thabo	32	Black	Manager	Cape Town
Tom	22	White	Student	Stellenbosch

6 Key Findings

Two of the key questions posed in this study were: “what discourses do men who stutter draw on to construct their masculinities?” and “what understandings do young adult men who stutter hold regarding whether, and in what way, stuttering may be considered a disability?” To study this, semi-interviews were conducted with each participant on a one-on-one basis supported by a semi-structured interview guide. Each participant was also invited to participate in two focus group discussions supported by a focus group interview guide. The questions that guided the focus group discussions were based on the themes that emerged from the semi-structured interviews. The questions posed to the men during the semi-interviews and focus group discussions focused on various issues, including men’s construction of their masculine identities, the subjective experiences underlying men’s construction of their masculine identities, and their disabling experiences of stuttering. The findings of the STaM study were published in a series of articles (see Isaacs & Swartz, 2022a, b; Isaacs et al., 2021) which showed that the various spaces in which men experienced oppression, discrimination, and disablement were directly linked to their stutter.

This section of the chapter will reflect on these spaces of disablement drawing also on the literature to substantiate the importance of lived experience. Specifically, the authors reflect on the role of the family, religious communities, education system, spaces of employment, and societal norms of South African masculinities in creating disabling experiences.

6.1 Family

The family has often been identified as the source of support for disabled individuals (Shah, 2010). Authors such as Safwat and Sheikhan (2014) have argued that family relationships could act as a positive influence for people who stutter – offering guidance and support on how to cope with their stutter. However, the STaM study showed how the family context emerged as a significant space where oppression occurred for people who stutter. Some men described their family as being oblivious and insensitive to their disabling experiences of stuttering – typically perceiving stuttering not as a disability, but a minor problem that exists in the mind of people who stutter. This finding is consistent with previous studies that have explored the attitudes of family members toward people who stutter (Butler, 2013; Scharf, 2017).

Moreover, men in the STaM study described how their stutter had shaped their relationship with their parents. Some men in the STaM study described how their stutter had negatively impacted on their relationship with their fathers. Coinciding with literature on the father-son relationship in response to construction of masculinities (Strasser, 2012), men in the STaM study predominately described their fathers as promoters and performers of hegemonic or dominant practices of masculinities – emphasizing the need for the exertion of physical strength as well as detachment and emotional disconnection. Fathers were described as intolerant, hostile, and insensitive. This resulted in some men forming closer relationships

with their mothers as opposed to their fathers. Mothers were described as nurturing and understanding of their struggles as men who stutter. The role of gender norms within parent-child relationships has been cited in the literature where fathers are considered to engage differently with sons as opposed to daughters (Hughes, 2007). While women are thought to receive more positive family experiences, men who stutter have been found to experience more pressure to be fluent and that their stutter is not accepted by their fathers (Bertera, 2005; Hughes, 2007).

The imbalanced relationship men shared with their parents was also seen in their friendship circles. Men were drawn into friendships with women more so than with men, as females were considered more emotionally mature and accepting of their stutter. Men, on the other hand, were described as intolerant of their stutter. Therefore, some men in the STaM study indicated forming easier friendships with females as opposed to males. This finding surfaces the relationship between men (fathers and sons and men as friends with each other) which is perhaps indicative of the way patriarchy disciplines how men enact toward each other, thus leading fathers to othering sons for not living up to the ideal of a “perfect man.”

6.2 Religious Communities

Religion has been described as providing disabled people with the necessary support to make sense of the world and to cope with negative experiences associated with living with an impairment (Imhoff, 2017). In the same way, researchers have also described how ideologies and practices found within religious communities frequently contribute to the oppression and marginalization of disabled people (Anderson, 2013; Holt et al., 2014; Niemann, 2005; Reynolds, 2008). This was the experience of the men who participated in the STaM study. Although some men described religion as a positive influence and support structure to deal with the negative experiences of stuttering, men in the STaM study also described how the religious communities they were exposed to as being ignorant and intolerant of stuttering. This was particularly the case for the Muslim men who participated in the STaM study. The Muslim men in the STaM study formed part of the Cape Malay and Indian Muslim communities in Cape Town. Cape Malay and Indian Muslim were communities formed by the Apartheid South African government to segregate Muslim individuals of Indian or Asian descent and Muslim individuals of Indonesian and Malay descent in Cape Town (Günther, 2018). Across these two communities, men identified practices that were oppressive and disabling for them. These included the leading of verbal prayers, fulfilling the role of spokesperson within in the family, attending madrasa (which is Muslim school in Arabic), and reciting the Quran. For men, many of these practices were an important aspect of the hegemonic masculinities promoted within their communities. As a result of these practices emphasizing good and fluent speech, men commonly reported having trouble executing these practices. The inability to perform these practices resulted in Muslim men feeling emasculated, their position and credibility as Muslim men being questioned and undermined. Religion is thus a powerful social difference that intersects with disability, and contrary to the expectation that religion and religious

discourses would be accepting and non-judgmental of difference, for these men in the study, religion becomes a space where masculinity must be performed, in this case for other men. Religious discourses uphold patriarchal constructs of masculinity and femininity, and through the performance of an ideal religious masculinity, hegemonic masculinities become reproduced.

6.3 Educational Spaces

Educational spaces, such as schools and universities, have been identified as important for the personal, social, and economic development of an individual and where individuals can experience carefree days (Butler, 2013). Yet researchers have described how stuttering makes spaces of education a negative space with multiple barriers (Butler, 2013; Daniels et al., 2012). For men in the STaM study, spaces of education were identified as spaces where of the most negative, painful, disabling, and oppressive experiences of stuttering occurred. Spaces of education were described as spaces of great struggle, loneliness, and bullying. Men's narratives differed about when exactly in their education career they experienced the most negative experiences of stuttering. Some indicated primary school, while others identified high school and university as spaces of great struggle and disablement. Coinciding with previous findings presented by Klompas and Ross (2004), for men in the STaM study, the verbal demands (such as orals, and introductions at workshops and verbal interaction in lectures and tutorials) made spaces of education difficult to navigate. At the same time, men also reported being continuously subjected to mocking and bullying by classmates within spaces of education, which often led to them becoming withdrawn and experiencing feelings of loneliness. Normative or hegemonic masculinities promote "control of the self" for men, and hence experiences of not having control, whether through a degree that requires oral expression and/or participation, open spaces for men to be judged and through mocking and bullying disciplined for not performing the "man who is in control" of their destiny. Educational spaces are also the location for the performance of competitive and/or successful masculinity as a trait of hegemonic masculinities. The inability to master control, compete, or achieve in the dominant masculine practice positions these men as "unsuccessful" and undeserving of manhood. Additionally, hegemonic masculinities promote low emotional expression, except for valued masculine emotions such as anger and rage. Low emotional expression means that men have a few spaces or relationships within which to express their emotions of loneliness or disappointment or sadness, which further results in feelings of entrapment for men.

6.4 Spaces of Employment

The sample in the STaM study consisted of university students and young professionals. Young professional men in the STaM study reported significant career success. As illustrated in Table 1, the sample of the STaM study included a successful business owner, financial advisor, engineer, medical doctor, a geologist,

an events manager for a big food franchise in South Africa, a model, and a candidate attorney. Due to the success some men in the STaM study experienced within their career, they actively resisted the identity of a disabled individual. For these men, disability denoted weakness and vulnerability. St. Pierre (2012) argued that people who stutter typically resist the disabled identity because of the stigma associated with it. Nevertheless, despite this career success, some young professionals in the STaM study believed that their stutter had stifled their career success and, in some ways, limited their career prospects. This finding mirrored past research that has investigated stuttering and workplace experiences. Similarly, to the men in the STaM study, people who stutter also reported how their stutter had limited their career progress and prospects (Bricker-Katz et al., 2013; Crichton-Smith, 2002). Butler (2014) argued that within spaces of employment there is an emphasis on “sounding right,” which is equated with fluent speech. In her study, investigating the aesthetic labor of a group of men who stutter, she showed how men who stutter struggled to navigate spaces of employment because of the fluent verbal performances these spaces demanded (Butler, 2014). Despite the frustration, men in her study were determined to pass as fluent (Butler, 2014). They perceived fluent speech as necessary to successfully navigate spaces of employment (Butler, 2014). In a similar manner, men in the STaM study also described how the spaces of employment they were exposed to were not designed for dysfluent speech. Professional men were determined therefore to ‘pass as normal’ (Goffman, 1963), which involved presenting themselves as fluent and confident speakers. As a result, many professional men in the STaM study were not comfortable with assuming the identity of a disabled man in spaces of employment. They felt that such an identity would stifle their success and present them as weak and vulnerable. Similarly, professionals in the STaM study were also against the idea of reasonable accommodation for employees who stutter and indicating on job applications that they are disabled. They felt that such an action is not justified because the responsibility is on them to manage and control their stutter.

It is interesting to note that even though dealing with disability should be about the adaption of the environment to include disabled people, the men in this study had to rely on themselves to navigate these spaces. This is an isolating experience for many men and reinforces feelings of loneliness and worthlessness, and once again, the performance of hegemonic masculinities is what contributes to feelings of self-worth in employment spaces. Hegemonic masculinities places pressure on men to be successful through a focus on their careers, which further enable them to be successful breadwinners. The workspace is thus significant for the performance of hegemonic masculinities, and hence some men feel that they can “pass” through perfecting speech.

6.5 Societal Norms: South African Masculinities

In 1994, Gershick and Miller developed the three “R” framework to theorize how physically disabled men construct their masculine identities in response to hegemonic masculine identities they have been exposed to. They argued that disabled men, as result of not feeling comfortable with their “manhood,” either internalize and

Rely on hegemonic masculine ideals to ultimately gain acceptance in society, or *Reformulate hegemonic ideals* to suit their abilities and limitations, or completely *Reject* these ideals – constructing new and alternative masculinities (Gerschick & Miller, 1994). The three R framework has guided several international and South African studies on disabled masculinities. Similarly, the three R framework was also evident in the construction of the masculine identities of the men who participated in the STaM study. Men in the STaM study predominately *relied* on hegemonic ideals of masculinities to construct their masculine identities. As such many men believed that being a man included exerting physical strength (including orality and being verbal), being the provider, and occupying a position of power and control. Occupying a position of power and control was associated with exercising power and control over their speech. As a result of their stutter, men felt oppressed and disabled by these ideals and reported feeling weak, vulnerable, emasculated, and experiencing negative emotions, such as shame. Considering these vulnerable masculine experiences and to avoid “being disciplined,” several men in the STaM study were determined to “improve themselves” to gain closer access to and performance of a hegemonic masculine position. They indicated attending speech therapy and self-help groups to gain power and control over their stutter. For several men, this exercise resulted in an improved self-esteem and self-confidence as men. These findings demonstrate that men performing masculinity is often for other men, to be accepted and perceived as successful by other men and thereby reproducing patriarchy that values men as superior to women. For other men, the experience of disablement and oppression led to either the *reformulation* or the *rejection* of South African norms of masculinities and construction of affirmative or positive masculine identities in relation to their stutter and disability (Swain & French, 2000). For example, one participant described how his stutter placed him in a marginalized position, which resulted in him opposing and rejecting the dominant masculine identity he was exposed to: “Capetonian Colored Masculinity” – which he associated with driving a Hyundai Civic car and being arrogant. Instead, he described how he embraced his stutter and his marginalized position. He thus reformulated his masculine identity and centered it on educating himself and creating a safe and comfortable space for himself and choosing friends that are like-minded.

7 Implications for Policy, Legislation, and Intervention: Moving Toward Social Change

The findings of the STaM study illustrated how across different levels of South African society there exist communication practices that result in the oppression and disablement of people who stutter. The findings of the STaM study also showed how the disabling experiences of people in South Africa who stutter are not a homogenous phenomenon, but that these experiences greatly intersect with identity markers such as religion, gender, and class. Further to this, the findings of the STaM study also showed how the disabling experiences also occur with limited formal or

social support to cope effectively or transform the lives of young men (and women) who stutter.

In the next section of this chapter, the authors discuss the implications of the STaM study, also offering recommendations to support people who stutter. The authors specifically advocate for a critical disability studies lens in the design of policy, legislation, and intervention. A critical disability studies lens offers an intersectional lens of disability, which is critical for social change in a context such as South Africa, where individual experiences are greatly shaped by identity markers such as race, gender, class, and religion.

7.1 Family

Families have an important role to play in promoting individual and collective wellbeing. Yet the family emerged as a space where early experiences of discrimination and disablement occurred for the men in the STaM study. This raises important questions about family knowledge and attitudes toward individuals who stutter and the importance of family-based programs to educate families on stuttering and disabilities toward creating a healthy and supportive family environment. Speech-language therapists are perhaps an important space through which family education can be prioritized. As put forth by Douglass et al. (2019), “speech-language pathologists are the professionals who should be best suited to spread knowledge about stuttering since they are typically able to educate both people who stutter and their families” (p. 15). Supporting this, the authors maintain that family involvement should be operationalized through a disability studies lens, offering more than education and knowledge production. Rather, emphasis should also be placed on creating healthy, supporting environments that are accepting rather than discriminatory of family members who stutter—in this way, offering families safe spaces in which important conversations on stuttering, discrimination, and marginalization can be discussed together with a therapist and within the home. These engagements are also crucial to challenge filial and societal norms around manhood, “normality,” and moving toward inclusive narratives within the home and society.

Moreover, while literature exists on family-focused support strategies for family members with children who stutter (see, e.g., Pappas & McLeod, 2008), there is a paucity in research on the role of the family in offering coping support to adult family members who stutter. Further research is thus necessary to consider how family components can be incorporated into speech-language therapy for adults and to identify contextually relevant and culturally sensitive approaches toward intervention in South Africa.

7.2 Religious Communities

In South Africa, where religion is an important aspect of society (Lugo & Cooperman, 2010; Schoeman, 2017), the authors believe that religious communities

can act as agents of social change for people who stutter. Although men in the STaM study shared the disablement and marginalization they experienced within the religious communities they were exposed to, they also drew great strength from religious teachings to deal with the negative experiences they endured as men who stutter. Therefore, the authors encourage religious scholars and disability scholars to work closely with religious leaders to make religious communities comfortable, respectful, and accepting spaces for people who stutter (Hasnain et al., 2019). Therefore, the authors believe education is of utmost importance. They recommend the development of workshops to educate and guide religious communities about the disabling aspects of stuttering and how to challenge practices and ideologies that oppress and marginalize people who stutter.

Beyond the education of religious communities, the authors call for further research into the intersectionality of stuttering and religion. The StaM study illustrated that across religious communities there exist practices that are oppressive and disabling for people who stutter. Therefore, an intersectional lens is important to illuminate those practices and beliefs that oppress and discriminate against people who stutter, which is important for issues of redress, transformation, and social change (Isaacs et al., 2021).

7.3 Social Norms: South African Masculinities

To challenge, interrupt, and change hegemonic social norms that perpetuate stigma toward men who stutter, the provision of self-help groups for all men, regardless of race, class, age, and sexuality, is imperative. A focus on intersectional masculinities that can help young men unpack the intricacies of the relationship between their stutter and the practice of masculinities (hegemonic or not) is important to counter hegemonic masculinities as the only adoption and practice of masculinities. Guided by the insider position and by gender experts, these self-help groups can provide men who stutter with the needed support to bring about change in the construction of their own masculinities, thereby opening spaces for enacting and promoting liberating masculinities (Ratele, 2016).

Researchers need to engage in public discourses around changing the conventional discourses of disabled masculinities as a subordinated (lesser) masculinity and advocate for the range of masculinities in practice and move toward masculinities as liberating, rather than hegemonic and oppressive.

7.4 Educational Spaces

Since the abolishment of the Apartheid system in 1994, the South African government has been dedicated to providing equitable access to education for disabled people (Ntombela & Soobrayen, 2013). In this regard, various policies and

legislations have been developed, including the *Strategic Policy Framework on Disability for the Post-School Education and Training System*, the *South African Schools Act 84 of 1996*, and the *Education White Paper 6 on Special Needs Education*. Although these policies and legislations have been instrumental in guiding the responses of schools (primary and high schools) and universities in South Africa to the oppression and discrimination of disabled pupils and students, they fail to reflect the barriers specifically encountered by people who stutter in spaces of education. In the STaM study, the men who stutter identified specific communication practices (orals and presentations, introductions at workshops, and verbal interaction in lectures and tutorials) as barriers. Policies such as the *Strategic Policy Framework on Disability for the Post-School Education and Training System* have been conceptualized according to the social model of disability. At the center of this policy is the creation of inclusive environments free from barriers and accessible for disabled individuals (Department of Higher Education Training (DoHET), 2018). An inclusive environment will only be created if the barriers, such as the ones highlighted by the men in the STaM study, are addressed and opposed in policy. Therefore, amendments should be made to policies for disabled students to acknowledge and represent the barriers faced by people who stutter in spaces of education.

Beyond specific recommendations for policy, the findings and recommendations following the STaM study align with previous studies regarding the needs of disabled students. The findings of the STaM study indicated that the most painful experiences of oppression and disablement occurred in spaces of education. There is need for intervention strategies that respond to the needs of pupils or students who stutter. To be clear, when speaking about responding to the needs of people who stutter, this does not involve providing “special treatment” or “reasonable accommodation,” which is the typical response of disability services at South African universities. Approaches such as “special treatment” or “reasonable accommodation” have the potential to re-enact the harmful stereotypes and misconceptions of disabled people: as victims of their impairment who require the assistance of able-bodied people. Instead, intervention should be centered on transforming and diversifying education spaces to see stuttering as a normal communication practice. Transformation of these spaces need to happen in consultation with disability scholars and speech-language therapists. But more importantly, the diversification and modification of such spaces need to happen in consultation with people who stutter (Isaacs, 2021). In disability studies there is a famous saying: “nothing about them, without them” (Disability Africa, 2020). Indeed, no policy or intervention can be revised or designed without the involvement of major stakeholders, which in this regard are people who stutter. The insider position of people who stutter is pivotal to assist schoolteachers, lecturers, and course conveners to design, modify, and diversify existing policies, interventions, school curriculums, and postgraduate and undergraduate courses to increase the participation of people who stutter in spaces of education (Isaacs, 2021).

7.5 Spaces of Employment

In 1998, the Employment Equity Act 55 of 1998 was introduced to oppose the discrimination of disabled people within the employment sector of South Africa. Chapter 2 of the Act states the following:

No person may unfairly discriminate, directly or indirectly, against an employee, in any employment policy or practice, on one or more grounds, including race, gender, sex, pregnancy, marital status, family responsibility, ethnic or social origin of colour, sexual orientation, age, disability, religion, HIV status, conscience, belief, political opinion, culture, language and birth (Republic of South Africa, 1998, p. 14).

As highlighted earlier in this chapter, the men in the STaM study described how stuttering made spaces of employment a challenging space to navigate because of the emphasis on fluent speech in these spaces. At the same time, men also described how stuttering stifled their career success and limited their career prospects. Communication practices promoted in the employment sector in South Africa contribute to the discrimination and oppression of people who stutter. Therefore, it is recommended that legislations, such as the Employment Equity Act, be amended to recognize communication practices as a source of discrimination. Currently, such detail does not appear in the Act, as seen in the excerpt above. Such an amendment is important to oppose the discrimination and oppression of people who stutter in the employment sector in South Africa. Beyond amendments to legislation, men's narratives also emphasized the need for transformation in communication practices promoted in spaces of work. From men's narratives, it was clear there was a stigma attached to stuttering in the workplace. Therefore, men were determined to keep up the performance of fluent speech. Is fluent speech the only acceptable practice of communication within the employment sector in South Africa? Employers are encouraged to reevaluate and introduce communication practices that promote and recognize stuttering speech as a valuable mode of communication in the working environment. Employers are encouraged to consult disability scholars, in addition to employees who stutter, and engage in anti-stigma strategies to dismantle the stigmatized understanding of stuttering that exist in spaces of employment. These anti-stigma strategies should happen in terms of (1) education and (2) modification of policies. In terms of education, there exists great ignorance about stuttering and how to respond to people who stutter (Isaacs, 2020; Pound & Hewitt, 2004; Solarsh & Johnson, 2017). Therefore, employers are encouraged to plan workshops to educate staff about the disabling aspects of stuttering, and how to demonstrate respect towards people who stutter in spaces of work. Similarly, in terms of the modification of policy, employers are encouraged to review and modify policies in consultation with disability studies scholars. This would allow employers to identify and revise those policies and practices that promote and perpetuate the discrimination and disablement in the workplace. Furthermore, those rigid patriarchal cultures that require performance of masculinity as examples of successful masculinities must be examined, unpacked, and shifted toward workspaces that are less oppressive and more

transformative of gendered identities and that encourage liberating and empowering gender and sexually diverse identities.

8 Summary/Conclusion

This chapter describes the disabling experiences of men who stutter at different levels of society. The chapter illustrated the oppression, marginalization, and discrimination men who stutter experience within their families, the religious communities, and spaces of employment and education they are exposed to. The chapter also brought to the fore societal norms and practices of communication and masculinities that oppress and marginalize people who stutter. However, the dominant discourse of stuttering within South Africa (like elsewhere in the world) continues to be that of a speech production disorder that should be managed or controlled by people who stutter. The role South African society plays in oppressing and discriminating against these individuals remain hidden. This chapter argues that social change for people who stutter will only be realized through the application of a critical disability studies approach at different spheres of South African society. As researchers and practitioners employ a disability studies approach, those barriers that oppress people who stutter will be illuminated. Such action is important for the development of strategies and policies that aim to combat and ultimately eradicate the disablement of people who stutter, particularly in low-income and racialized communities in South Africa.

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