

WORDS FAIL US

In Defence of Disfluency

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Introduction: The King and I

In the months prior to King George VI's coronation in 1937, a great deal of time, effort and resources went into anticipating, and therefore mitigating, the worrisome issue of his speech. George's impediment wasn't the charming, if somewhat affected, stutter fashionable with the aristocracy, but a juggernaut of blocks, repetitions and slurred sounds.

As a young prince, George had been unable to avoid public speaking engagements, which often left him feeling humiliated. According to friends, his stutter had rendered him 'intensely sensitive', and amounted at times to 'mental torture'.¹ His one consolation was that as the second son of King George V, he was never going to inherit the throne and the relentless speeches and public broadcasts which that entailed. Then his elder brother, King Edward VIII, abdicated a mere eleven months into his reign.

As George's coronation approached, the Archbishop of Canterbury vetoed the suggestion of a live television broadcast, fearing that it might expose the muscular spasms in the King's cheeks and jaw as he struggled to pronounce a particular word. There was, however, the unavoidable issue of the live radio broadcast he would

have to make from Buckingham Palace after the ceremony. The Archbishop noticed that although George's speech had greatly improved since he began treatment with his Australian therapist Lionel Logue, it was still far from fluent. He wrote to Lord Dawson, the King's physician, suggesting that they replace Logue with a new therapist, but Dawson dug in, arguing that any change would be merely unsettling.

George was already in a state of immense anxiety, asking rather desperately if the coronation speech could be pre-recorded with his stutter edited out, and then presented as if live. John Reith, the Director-General of the BBC, crushed the idea, suggesting rather archly that the King should decide himself 'whether the deception mattered'. Reith did, however, instruct Robert Wood, the engineer in charge of outside broadcasts, to deploy whatever technological means were available to assist the cause of fluency. Wood practised with the King, showing him how the amplification of the microphone meant he could speak more softly, rolling into words rather than coming at them hard.

In the final days before the coronation, the King, with the help of Logue, Reith and Wood, practised repeatedly. The speech was recorded and played back, and any words that proved problematic were removed. By the day itself, George was well prepared, and the speech – judged on how he read it more than the content – was deemed a triumph, in official circles at least. The press, which at the time was more deferential to royalty than it is today, reinforced this view: the King had become a great public speaker with a warm and strong voice. This remained the

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official line throughout the following years as war broke out, Britain's towns were ravaged by the Blitz, and the King repeatedly addressed the nation on the need to stand firm. It's the narrative that survives today due, in part, to the Oscar-winning film *The King's Speech* which shows George, supported by Logue, overcoming his impediment to become the people's King. However, thanks to contemporary diarists and sociologists, we know that the general public experienced these speeches rather differently.

'The King broadcast a speech last night which was badly spoken enough, I should have thought, to finish the Royal Family in this country,' wrote the poet Stephen Spender in 1939. 'It was a great mistake. He should never be allowed to say more than twenty words. His voice sounds like a very spasmodic often interrupted tape machine. It produces an effect of colourless monotony.'² The diplomat Harold Nicolson wrote that 'it is agony to listen to him – like a typewriter that sticks at every third word'. A more kindly account claims that one speech 'wasn't so bad'³ but was still 'marred' by his stutter.

A striking example of the anxiety the King's stutter could cause, not only to himself but seemingly the entire nation, is provided by an investigator for Mass-Observation, a social research organisation whose mission was to record the everyday habits, concerns and speech of the British public. Investigations were carried out by mostly anonymous volunteers. An account by one particular woman brings to life a London pub on the evening of VE Day in 1945. While the enduring image of the victory celebrations is that of conga lines snaking round Eros in Piccadilly Circus, the atmosphere was reportedly much

more subdued the moment you stepped a street or two away from city centres. While many people had spent the day at thanksgiving services or street parties, the overall mood suggested ‘a dumb numbness of relief’⁴ rather than joy. After all, the proclamation of victory had long been anticipated, but there was no end in sight to the prosaic realities of rationing and austerity. Lives were irreparably wrecked and all were affected in some way by the abstinence and sacrifices of war.

By nightfall, people were heading home or hunkering down in pubs for the final event of VE Day: a speech from the King. The pub our investigator went to, notebook in hand, was in Chelsea. It was packed full of people, many of whom were drunk, or simply trying to forget their wartime experiences through forced smiles and laughter.⁵ The beer kegs were dry and only gin was available. At 9 p.m., the radio was turned on and the room became ‘as hushed as a church’ with several women at the back leaping to their feet and ‘assuming reverent attitudes’. ‘There is a sense that people have been waiting all this time for something symbolic,’ our investigator wrote, ‘and now they have got it.’

‘Today we give thanks to Almighty God,’ King George began, his voice echoing out through hundreds of thousands of radio sets across the land, ‘for a great ...’ And stopped. A brief moment passed, although it seemed an eternity. A young man in the Chelsea pub giggled. ‘Deliverance,’ the King said finally and moved on to the next sentence. He was but ten seconds into a thirteen minute address. The pauses and repetitions came thick and fast. The young man, probably drunk, began to impersonate

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the King's stutter, and became 'the centre of looks of intense malevolence from all corners of the room'. The worst moment came towards the end of the speech. 'Let us turn our thoughts', the King said, 'to this day of just ...' He stopped again, tripping repeatedly on a 'T' sound. The investigator noted that 'several women's foreheads pucker and they wear a lacerated look'. 'T – t – t,' went the young man, giggling loudly. The King started the phrase again and had another run at it. 'Of just ...' – and it worked – 'triumph and proud sorrow, and then take up our work again, resolved as a people to do nothing unworthy of those who died for us.' He finished his last words, the opening strains of the national anthem were played and everyone, except for a few Marxists, stood up to sing 'God Save the King'. One imagines nobody was more relieved than the King himself. It was inconceivable, as turned out to be the case, that he would ever give a speech of such import again.

George VI's stutter is one of the most widely known and oft-depicted examples of this most common of speech disorders. It highlights many of the mysteries associated with the condition; not least the enduring mystery of what causes it. Biographers have focused on his dysfunctional upbringing and how his rough, unloving father would bellow 'Get it out!' when the young prince got caught on his words. But these stories only explain how his stutter might have been exacerbated, not the root cause. There is the mystery too of how to cure or at least alleviate a stutter. George's relationship with his speech therapist was celebrated at the time, but most of Lionel Logue's techniques for fluent speech now have little currency and

– as contemporary diaries and memoirs reveal – they simply made the King’s speech sound strange and hard to follow. Today there is still no undisputed cause or cure for stuttering, although there are theories and techniques which are as popular as Logue’s once were.

But the biggest mystery is the one we rarely talk about: why it mattered so much at the time, as it still does, that the King of England should be – or at least appear to be – fluent; that his words should trip effortlessly from his mouth. On quick reflection, the answer might seem obvious. The monarch needs to be a good communicator, able to lead and inspire, particularly during wartime; and that this requires an ability to speak with power and eloquence. These are not qualities we generally associate with stuttering, but by all accounts George was able to express himself with warmth and directness in person. The fact that he stuttered did not interfere with his ability to form relationships, conduct the business of state and hold politicians to account. His problems with communication were exacerbated not so much when he stuttered as when he tried not to.

Imagine for a moment if George VI had broadcast the speeches he wanted to give in his own voice, rather than the one taught him by speech therapists and radio engineers. They would survive today full of stuttering repetitions, but also, I suspect, with the humanity that his friends found in him. They might be easier to follow because, although particular sounds might briefly be blocked or repeated, the cadences would match the meaning of the words he said. Instead, the pressure to hide his stutter meant he spoke through a veil of unnatural modulation.

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Lionel Logue taught George to speak in small phrases – what he called ‘three-word breaks’ – so that he could pause before rolling into the next one. BBC engineer Robert Wood taught George a flattening ‘tone formation and lip formation’ to help him get his words into the microphone. The text of speeches was scrutinised, with problematic words replaced by synonyms. By the time George opened his mouth, every effort was focused on verbal tricks, which is why he sounds more like a ‘tape machine’ or ‘typewriter’ than a human being. His speeches were exercises in simulating fluency rather than hearts-and-minds rhetoric. Even today, they make for uncomfortable listening. Not only because this was a task he could never truly succeed in, but because in striving for fluency his performance was stripped of vigour and meaning.

George’s speeches are a reminder that, although fluency and good communication often go together, they are not the same thing. There are those who have no trouble getting their words out, but fail to say anything convincing with them. And there are those who struggle with speech but still connect with a listener. Few would suggest that the scientist Stephen Hawking was a bad communicator, yet he spoke with a synthesised voice. I believe the reason why it was deemed so essential by the British state, the general public, and George himself, that the King should not stutter – even at the expense of his ability to deliver engaging speeches – lies not so much in the act of stuttering, but in the symbolic importance we attach to it.

Stuttering is widely considered a sign of both physiological and psychological dysfunction. According to that view, not only are people who stutter verbally

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incompetent, but the problem is exacerbated by childhood neuroses and insecurities. When we encounter a person who stutters, we seem to hear inner turmoil translated into sound. If that person is a stranger, it can feel like an unwanted exposure to somebody's deepest weaknesses. Our response, therefore, is often a combination of pity and repulsion, something which has been proven through repeated studies.⁶ Stuttering is both a speech disorder and a social stigma.

But the symbolic potency of stuttering extends way beyond the unfavourable light it casts upon an individual. When a person stutters, the usual flow of speech and conversation is ruptured. This is challenging for us because we think of speech as the oil in the machinery of human society. Words enable us to communicate ideas, to decree laws, to share the secrets of the heart. Although email and social media have further empowered the written word as communication – much as letter writing did in the past – we still prioritise the spoken word for the things that matter. Only when our governments have debated and amended proposals do they become preserved in written law; political briefings describe what a public figure will say in an hour or a day's time, but remain speculative in the eyes of the media until the words have emerged from that person's mouth. In our private lives, we consider speech the appropriate mechanism for both the most joyous and confrontational moments of our lives. 'I love you' should be spoken first, and God forbid the person who tries to end a relationship by text message. A speech impediment like stuttering is more than a verbal handicap then, but an unwelcome blockage in the flow of life.

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These negative perceptions are often unconscious, but they determine how we encounter people who stutter on the rare occasions that they are thrust upon us. In the case of George VI, this was magnified into a national concern. As King of the United Kingdom, the Dominions of the British Commonwealth and Emperor of India, George VI was the embodiment of the state. For him to be flawed in person suggested the State itself might be flawed – metaphorically at least. The fluency, or rather disfluency, of the King's speech became as symbolic of the nation's fate as the ravens in the Tower of London. No wonder the anxious, 'lacerated looks' across the country that accompanied every pause in his speeches, and the surges of relief when he pushed through to the next word.

George VI is one, admittedly exceptional, example of a person who stutters, just as stuttering itself is just one of many conditions that affect the human voice. Today, there are many who have what are called speech 'disorders' and spend their lives in fear of their own voices because of the accompanying stigma. We know such disorders exist, but what is rarely appreciated is just how widespread they are.

Statistically, well over a million people in the UK are deemed pathologically non-fluent in verbal speech. The Royal College of Speech and Language Therapists puts the number of children who have some form of speech and language impairment as high as 9 per cent and claims that 20 per cent of the population has some form of communication difficulty at some point in their lives.⁷ They may have a stutter; the linguistic impairment of aphasia following a stroke; the coprolalia (swearing) of Tourette's syndrome; the dysarthria of speech associated with cerebral palsy

and Parkinson's disease or the distorted voices of dysphonia. All conditions that would have sent the Archbishop of Canterbury in George VI's day into a spin.

The sheer number means that all of us in some way live with a diagnosable disorder, either because we have a condition ourselves or because someone in our family and wider social network does. How we engage with those who have a disorder – whether as a parent, friend or colleague – can dramatically affect their quality of life. Yet these are conditions we often have little understanding of, even when they disturb our own speech. One reason for this is that fluency is considered not just normal, but a necessity. Speech disorders are to be hidden rather than understood. Unfortunately, this all too often leads to exclusion and discrimination because they are, for the most part, not conditions which go away.

This is something I have a personal stake in, both as a person who stutters but also as part of an extended family that does so. That there are several of us is not unusual, for there is strong evidence that stuttering is a hereditary condition. My mother passed it on to me, just as my wife inherited it from her father. In fact, my struggles with speech and language go beyond stuttering. I had developmental delay in my speech as a child, and in my teens was diagnosed with both cluttering and dyslexia. But stuttering is the condition that defined me most. I am unable to separate it from my identity because it was always there, submerged but palpable in the murky half-memories of my childhood, and still present in the hidden blocks and word substitutions of my apparently fluent speech today.

When I enquire of my mother when it started, she

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tells me she knew something was awry not long after my second birthday. While most infants chatter adoringly at this stage, stringing together short sentences, I was stubbornly mute. Eventually, she took me to see the famous paediatrician Hugh Jolly, who bounced me around a little, looked inside my mouth, and concluded that I was merely lazy. When I did finally deign to speak, coming on for three years old, a whole sentence fell out and they kept coming. But the words began to get stuck too. I have early memories of being stunned as relatively simple words like ‘where’ or ‘when’ disintegrated into a string of bizarre wah-wah sounds; the looks of mild concern on the faces of adults; and, inevitably, the look of indulgent malevolence on my sister’s face at the discovery that her imposter younger brother was so wonderfully malfunctioning.

My awareness of having a problem was at first far greater than any trouble it actually caused me. It was something I experienced through the reactions of other people more than the mild inconvenience of sometimes not being able to get words out. I spent fifteen years in and out of speech therapy: from one-on-one sessions with a speech-language pathologist to a two-week bootcamp for chronic sufferers at the Michael Palin Centre for Stammering Children. My mother was a features writer and so my progress was tracked through a string of articles for *Good Housekeeping* and the *Guardian*, generally accompanied by a picture of me with bowl haircut, toothy grin and NHS specs. ‘How My Son Lost the Edge of My Wretched Tongue’, ran one headline in February 1991 with the byline: ‘Anne Woodham on her family’s battle against a stuttering blight’.

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My anxiety about stuttering grew until it became a defining feature of my life. I put a great deal of energy into avoiding words or situations which might expose me. I was so scared of being bullied I would sometimes pretend to forget my own name when called upon to say it aloud in class. On my first day at university, I slipped a letter under my professor's door begging to be excused any group reading or recital exercises that might be required while completing a degree in English Literature. I so desperately wanted university to be an end rather than an extension of the humiliations of school.

At the same time, only those I was closest to knew my secret for I had developed a rapid-fire way of speaking, pivoting around difficult words or phrases and substituting or paraphrasing with others in a manner which passed for quick-wittedness. After leaving university, I was drawn to broadcast, film and theatre, but carefully built a career for myself behind the scenes. The people I work with are often hyper-fluent: breathtakingly articulate, brilliant performers, able to speak off-the-cuff on myriad subjects. I wonder if, without even knowing it, I became a linguistic groupie, hovering around people who speak in a way I never dared believe I might be able to imitate.

Over the years, my stutter and I reached an uneasy truce: as long as I didn't cross agreed parameters, it would leave me more or less alone. But in my early thirties it inexplicably worsened again. A speech therapy course lasting several months at London's City Lit Adult Education College resulted in a level of fluency I had never known before. Having some emotional distance was a relief, but I also found myself floundering. After so much

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time digging at the roots of my speech, I didn't know what to focus on and so I tried to make sense of everything I had gone through.

Ever since the age of five or six, I had been locked in a cycle of mitigating tactics to try and conceal my stutter, while discreetly and with a few trusted elders exploring what might be causing it and how it might be cured. Most books on the subject are what I consider cause-and-cure self-help manuals that look at a condition not only in isolation from others, but from fluent speech in general. I saw stuttering, incorrectly, as my unique stigma and could count on one hand the number of times I had encountered it outside of speech therapy. But increasingly I was aware of how prevalent it is. Many people who stutter are closeted or 'interiorised', going to great lengths to hide their condition because they believe it will prove detrimental to their careers as well as their social and romantic lives. And I became aware of other people who in their own way, whether with diagnosable conditions or in an uncategorised void, were struggling with speech. Looking back, it astonishes me how my most worrisome preoccupation was also the one I was most ignorant about. In my desperation to cure or hide it, I never had the courage to bring it into the light and decide for myself what it means to stutter. Ten years ago, I set out to do just this.

This is a book about what happens when speech breaks down, and why we are so afraid of it. It is about the disfluencies that impact all of our lives and their relationship with the prized but elusive state of fluency we hold so dear. It is both a scientific and cultural study. It has to be. While it is now widely accepted that most speech disorders are

neurological in origin, they are highly attuned to social and cultural context. In some cases, as with stuttering and the vocal tics of Tourette's syndrome, they intensify or alleviate depending on where the individual is and who else is in the room. Other conditions like aphasia and dysarthria are diagnosed not only according to the symptoms of the subject, but by how intelligible that person is deemed by society. For this reason, I have not attempted a definitive survey but focused instead on the psychological and cultural significance of speech disorders as a whole, focusing on those I am most familiar with, rather than anatomising them all.

The sheer prevalence of speech disorders makes them a concern for everyone, but so do the wider truths they reveal about how we all experience language. While many of us have a diagnosable condition at some point in our lives, there are plenty of others who feel some degree of inadequacy about their speech. Not only do we often struggle to find the right words, but – amid the umming and ahhing – sometimes struggle to get them out too. The fear of public speaking is in part a fear of falling on the wrong side of some invisible divide separating ourselves from a charismatic and fluent elite; no wonder it is one of the most widespread of recurring nightmares. Those with diagnosable speech conditions sit on the front line of these anxieties. The intensity of their experiences can provide invaluable insights not only into how the rest of us feel, but into language itself: the hold it has over us, the way it perplexes and torments as much as it clarifies and connects.

I believe that rather than merely tolerating speech

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disorders, we need to celebrate them because of the diversity and innovation they bring to human thought and language. Despite first appearances, those who struggle with speech tend, out of necessity, to be linguistic virtuosos. People who stutter develop vast vocabularies of synonyms to replace troublesome words. Those with articulation difficulties choose their words more carefully, for each one is a precious commodity requiring more deliberation than the rest of us put into entire sentences. In finding themselves lost for certain words, people with aphasia learn to contort new meanings and combinations out of those they can recall. For the individual with vocal tics, this linguistic virtuosity is often beyond control, but no less remarkable for it.

Living with these disorders requires summoning a level of linguistic creativity each day that most of us experience only occasionally, if ever. In the right hands, such creativity becomes art. A strikingly disproportionate number of our greatest artists were and are people who have pathologically struggled with speech. Writers like Lewis Carroll, Henry James, Elizabeth Bowen and Christy Brown; philosophers Ludwig Wittgenstein and Stephen Hawking; actors Samuel L. Jackson, Nicole Kidman and Marilyn Monroe; songwriters Edwyn Collins, Kendrick Lamar, Carly Simon and Bill Withers; and political orators and visionaries Aneurin Bevan and Greta Thunberg. All of them are people who have a remarkable ability with language which I believe must, on some level, be connected to their struggles with it.

Through charting the stories of such individuals, we learn not only to appreciate speech disorders but also to

look differently at the unquestioning reverence we have for fluency in our culture. Although many effective speakers are blessed with a ‘smooth tongue’ or ‘the gift of the gab’, this is not essential for good communication and can even be antithetical to it. Fluency deconstructed is often little more than a string of interconnecting clichés and figures of speech with relatively little content, that may even conceal untruths and manipulative lies – much like the ‘fake news’ we hear so much about today. Sociological studies continually show that much, or even most, communication between humans is non-verbal: gestures, tone of voice and body language.⁸ Our speech is often little more than a cover or pretext for the far more primal yet elaborate exchanges going on beneath. This doesn’t mean that language isn’t important to us – it is, particularly when trying to articulate abstract emotions or ideas – but the way we use it has far more to do with conforming to social expectations than translating our deepest and most complicated thoughts into words.

In the first half of this book, I provide an overview of some of the most common speech disorders: not only their physical symptoms, but also the psychological impact they have on an individual, and the stigma they carry. (This is not as simple as it sounds as definitions and diagnoses continue to vary.) The point is to show how much those with such conditions have in common, and the benefits that come from thinking about speech disorders as a group.

The following chapters describe the role of culture in determining our attitudes to both disfluency and fluency. I introduce the notion of ‘hyper-fluency’ to describe the