• Making shifts that matter

Stuttering as Verbal Diversity

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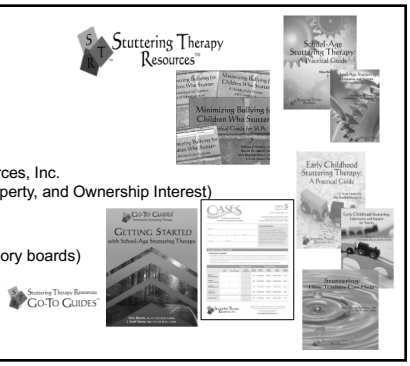

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A Note about School- Age
vs. Early Childhood Therapy

And some general housekeeping

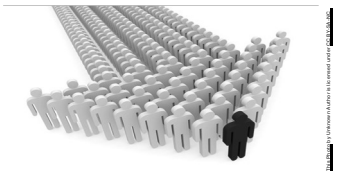
4

Inquiry #1:

What are your expectations for today?

5

Aligning
Expectations



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Today

What we can do

*Create a safe space to explore this topic differently

**Self-Reflect

*Tolerate uncomfortable

*Shift perspectives (swivel our chairs)

*Step forward with resources that are available

What we cannot do…

*Learn everything we need to know about stuttering therapy in 2 hours

*Shame ourselves for past therapy

*Let overwhelm freeze us from movement

*"Throw out the baby with the bathwater"

*"You can't have a better past."
-Wayne Dyer

7

And here's the news!

Bad News First…

There are o hacks, no quick fixes, no programs or scripting

Good News to Get us Started…

Full on inside-out shifts make therapy outcomes more efficient and effective

8

IT's ALL about INTENT

-Lee Reeves

- It is NOT about changing everything you are doing in therapy…
- NOR is it about changing eligibility or dismissal criteria…

9

Inquiry #2:

What are you most afraid of when working with students who stutter and their families?

10

DEFINING AND DECIDING

11

Some Definitions to light our way

Microaggressions

- "Brief, everyday exchanges that send denigrating messages to certain individuals because of their group membership."
- Dr. Derald Wing Sue in Paludi, M.A., Managing Diversity in Today's Workplace. Praeger Publishing, 2012

Stigma

- "A mark of shame or discredit" (Merriam Webster)
- --Externalized/Internalized--

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Taking this a bit further…

- "Microaggressions are insidious, and their effects are toxic. …The person, group, organization or the entire culture sending these messages does so unconsciously and is [can be] unaware of their effect."
- -Dr. Valerie Rein, (2019). Patriarchy Stress Disorder, Lioncrest Publishing, Austin, TX.

13

More Definitions to light our way

Ableism

- "Valuing certain types of abilities and bodies over others. It often includes discrimination and sterotyping." (Kattari, 2020)

Neurodiversity

- Differences are not deficits *(coined by Singer, 1999).*

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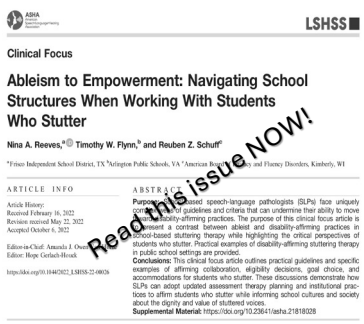
An entire LSHSS Forum on Ableism/Public Schools… Stuttering and Autism LSHSS Jan 2023



LSHSS

Clinical Focus

Ableism to Empowerment: Navigating School Structures When Working With Students Who Stutter

Nina A. Reeves, Timothy W. Flynn, and Reuben Z. Schuff

ARTICLE INFO

ABSTRACT

Read this issue NOW!

15

Finding the ”Middle Road”

16

Let’s talk about:

REPAIR

Grace

Patience

Persistence

17

SHIFTS THAT MATTER

18

It's about changing…

Mindset

When we know WHY we are taking steps away from *fixing* toward *aligning*, the WHATS, WHENS and HOWS of therapy are much easier

Model

Our model, by what we say and what we do in therapy is that stuttering is Okay…ALL of it. Not just 10% or "little ones" **but all** the stutters.

Messages

No matter what we say or do, we must consistently check-in with our students regarding their external and internal dialogues surrounding stuttering.

Meaningfulness

THEN we can align our therapy with enhancing the student's ease of communication and decrease the stigma (internal and external) impact on their quality of life.

19

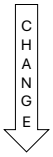
One Change Impacts Another = Synergy!

MINDSET

MESSAGE

MODEL

MEANINGFUL



20

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Changing Mindsets

1 What do you think (believe)…

- -about stuttering?
- -about children who stutter?
- -about your roles in assessment and therapy?

21

What would it be like if everyone's mindset could include the concept that

"Stuttering is ***Verbal Diversity***™

-Nina Reeves, 11/6/2020

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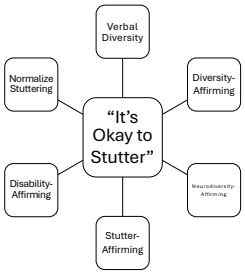
Consider the History with the Emerging Terminology & Implications



This is NOT really "new" – It's a clarification in terminology

23

Changing Models

2 How do you TALK about - and interact with - stuttering?

25

What can we do/How can we shift?

*No more Fluency Focus!

*Enhance our own knowledge (updated)

*Help everyone understand the "big picture"

*Be Aware of Messages

-Ours

-Children

-Caregivers

-Educators

-Others

(we just did a whole section on this!)

Just a FEW ideas...

*Meet students where they are

*Be an ally and create allies - - not FIXERS

*Discuss societal stigmas-as applicable-and work to handle them

26

No More Fluency Focus

Do you write "% of fluency" in your goals?

- WHY?
- Is this promoting masking?

What is the % chosen?

- WHY?
- Who says?

How is the child "achieving" that %tage?

- Manage? Spontaneous? Avoidance?

27

Demystifying Stuttering (Scott Yaruss) through SCIENCE and FACT

Enhancing & Updating Our Own Knowledge

To that end...

28

A FRAMEWORK THAT WORKS

(MORE ON THIS TOMORROW -AND IN OUR BLOGS -AND YOU TUBE CHANNEL – AND IN THE LSHSS ARTICLE)

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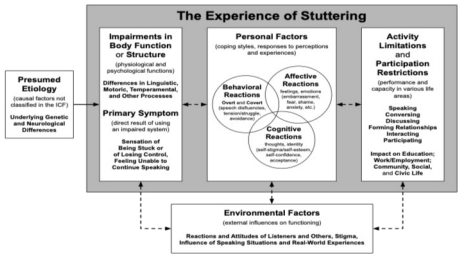
Helping Ourselves and Everyone Understand the Big Picture



Update of Yaruss and Quesal's (2004) representation of how the World Health Organization's International Classification of Functioning, Disability and Health (ICF) can be applied to stuttering. Copyright 2019 Seth E. Tichenor and J. Scott Yaruss.

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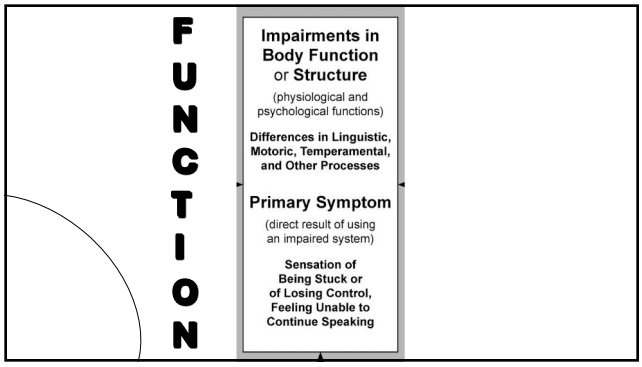

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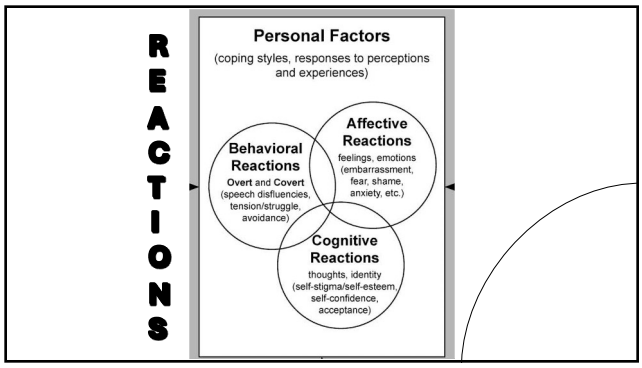
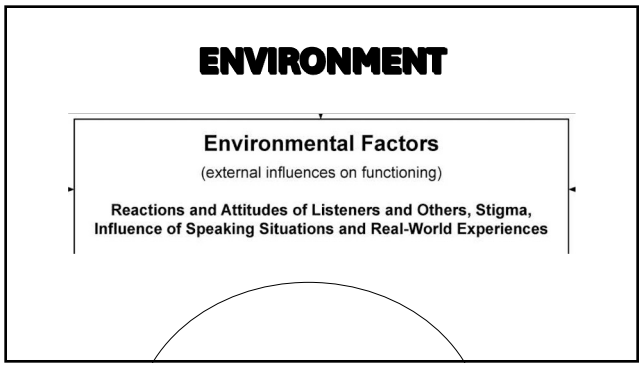
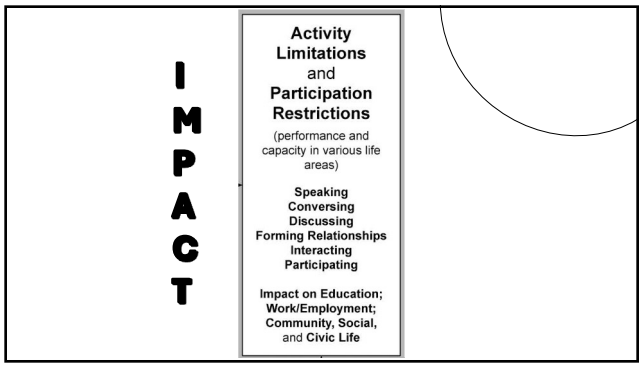

REACTIONS
Personal Factors
(coping styles, responses to perceptions and experiences)
Behavioral Reactions
Overt and Covert
(speech disfluencies, tension/struggle, avoidance)
Affective Reactions
feelings, emotions
(embarrassment, fear, shame, anxiety, etc.)
Cognitive Reactions
thoughts, identity
(self-stigma/self-esteem, self-confidence, acceptance)

32


ENVIRONMENT
Environmental Factors
(external influences on functioning)
Reactions and Attitudes of Listeners and Others, Stigma, Influence of Speaking Situations and Real-World Experiences

33


IMPACT
Activity Limitations and Participation Restrictions
(performance and capacity in various life areas)
Speaking
Conversing
Discussing
Forming Relationships
Interacting
Participating
Impact on Education; Work/Employment; Community, Social, and Civic Life

34

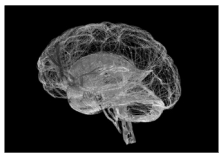
-CONTINUING TO ENHANCE OUR KNOWLEDGE-

4 FACTS THAT NEVER FAIL

35

1. Neurology

- Complex interaction of a variety of factors related to child's development
- **The origin of stuttering is genetic for some, and NEUROLOGICAL for ALL**



36

2. Variability

- **Finish this sentence -**
- **"The only consistent thing about stuttering is that it is…"**

37

3. **System**

- **Every part of our system impacts every other part…**

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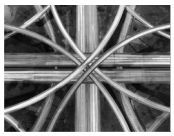
4. **Complexity**



As you can imagine given the understanding of neurology, variability, and system factors

–

Stuttering is Complex
so therapy is complex!

It CAN be successful, but there are no quick-fixes

39

Changing Messages

3 What do your students see and hear about stuttering during therapy (and beyond)?

40

Stigma-inducing messages masking as "help"

- You did so well! You didn't stutter once!
- Try again and use your "tools"
- I hardly notice you stutter; it's no big deal.
- No need to be nervous, just relax
- If you *just*…
- *It's OK*…take your time and try again
- Don't worry, everybody stutters
- You can be great in the chorus instead of taking that speaking part
- You just need a little confidence
- Don't be scared, we worked on this in therapy
- Not calling on student in class
- Not having students involved in their own IEPs
- Leaving "doesn't present in class" on IEP for WAY too long
- OTHERS YOU CAN THINK OF?

41

Top 8 things NOT to say to a person who stutters… That everyone says to people who stutter

"Stop	Slow Down,	Start Over,	Take a Deep Breath,
Think about what you want to say,	Just…Relax,	Everybody Stutters,	Use your tools!"

42

Checking in with students

We can THINK we are sending neurodiversity-affirming messages,

and doing stutter-affirming therapy…

BUT, we must consistently check-in with our students to discover what they are hearing from us and others, AND what they are telling themselves.

43

⊹ Experiential Understanding

- ✓ What #stuttervoices are you following on SM?
- ✓ What podcasts of those who stutter are you listening to?
- ✓ When have you been to an NSA, SAY, FRIENDS, (or other) support organization event? [in person or virtual]
- ✓ What YouTubes (vetted) Ted Talks, or documentaries about the lived experiences of those who stutter have you watched?

"If you have met ONE person who stutters, then you have met ONE person who stutters!"
-NSA Zeitgeist

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Integrating the culture of disability into our own understanding

- Listen to podcasts such as stuttertalk.com, stutteringiscool. com, or istuttersowhat.com
- Access the International Stuttering Awareness Day online conference, read presentations
- Listen to several audio presentations by people who stutter on the Stuttering Homepage and compare perspectives about stuttering.
- Read the writings of PWS, including books, newsletters, and blogs, to gain a wider perspective of what it means for people who stutter
- Attend conference sessions by stutterers discussing their personal perspective and experiences with stuttering.

- From: Boyle et al. Considering Disability Culture for Culturally Competent Interactions with Individuals who Stutter
- https://pubs.asha.org/doi/pdf/10.1044/cicsd_43_S_11

45

Changing Meaningfulness

4 What do we DO in therapy?

46

HELPING CAREGIVERS & STUDENTS DEAL WITH STIGMA

48

Giving time for…

Information to be absorbed	Acknowledging painful feelings	Wondering about future implications
Denial as a crisis of confidence • Our support is crucial here	Caregivers as the ROUTE of successful outcomes • No matter how they "seem" right now • SLP trust in the process	"Time, compassion, encouragement"

49

SLPs and Others

Be	Take	Respond
As professionals, we operate on the fringe of our incompetency; be sufficient/not perfect	Take care of the parents and you take care of the child.	Respond to the FEELING of a statement rather than the content

Making small changes can make the biggest change

Keep things positive/Let them be smart

People stay in denial when they don't feel they can handle the reality

Our basic goal is to EMPOWER

"My sense is…" (Or, "I am sensing…")

- "What does practice look like at home?"
  - Show me in a session (or by other means)

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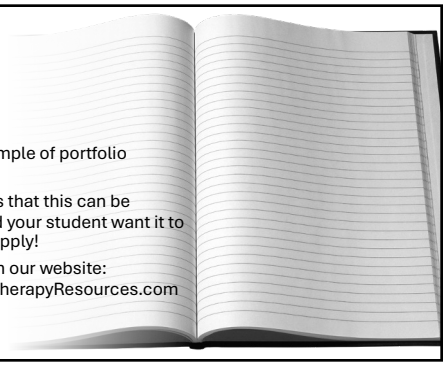
The Stutter Notebook



- A wonderful example of portfolio documentation!
- The good news is that this can be anything you and your student want it to be! NO RULES apply!
- FREE handout on our website: www.StutteringTherapyResources.com

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Counseling in Stuttering Therapy – Coming to Terms with Stuttering

- When in doubt, *refer out*!
  - SOME things are beyond our scope of practice
  - But feelings and experience related to communication differences are NOT beyond…they are OUR responsibility!
- Beware of "projection" by self or others
- What does "acceptance" mean?
- How can SLP help?
  - Desensitization
  - Cognitive restructuring (CBT)
  - Acceptance & Commitment Therapy (ACT)
  - Openness
  - Disclosure
  - Self-regulation/emotions

52

Help everyone gain perspective….
Society doesn't understand stuttering
That doesn't give people a "pass"

Society's stigma does not need to become internalized for those who stutter
Reactions can be:
Curious –
Trying to "help" –
Ignorance –
Bullying

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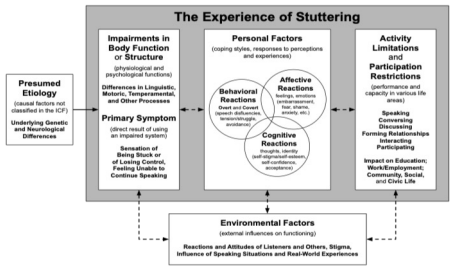
YES! Discuss THIS with everyone!



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"If you have met ONE caregiver of a child who stutters, then you have met ONE caregiver of child who stutters!"

Help Caregivers Identify their…

- Perceptions
- Knowledge levels
- Belief systems
- Expectations
- Messages

55

How to involve caregivers and others

Explore Stuttering

- Build knowledge
- Watch videos
- Discuss Iceberg
- Have them create an iceberg of their own
- Discuss child's iceberg

Discuss: thoughts and feelings drive behavior

- No right or wrong, just "tune-in"

Explore interaction of caregivers and child

56

For Caregivers AND Students: Language to get you started…

- "How are you feeling about that?"
- "How is that for you?"
- "How did that impact you?
- Let's get curious about…"
- "That must have been rough…"
- "Do you have some notions about that for yourself?"
- "It seems as though you have been thinking about it…"
- "I've been hearing…"

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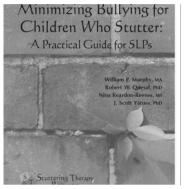
More for Caregivers AND Students

- "What's that going to look like for you?"
- "What's your measure of success?"
- "What is the criteria for 'doing well?'"
- "Do you think your measures will change over time?"

58

Don't forget: Peers and Siblings

- Increase knowledge & understanding
- 1-1 Child as own advocate
- Include in therapy
- Classroom presentations
- Resources: Stuttering support organizations
- Bullying & Teasing
  - It IS our role!
  - How to help



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Specific to Teachers

- They oversee MUCH of the child's day-to-day communication environment
- Find out what they know - Don't assume they know more about stuttering than the average person on the street
- Find out what they are doing Have child be the "expert"
- Small communication environment changes make a big difference
- Check in about:
  - Timed tests and presentations
- Making plans for classroom participation that don't diminish the child's abilities

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HTTPS://WESTUTTER.ORG/WP-CONTENT/UPLOADS/ALLY-2019.PDF

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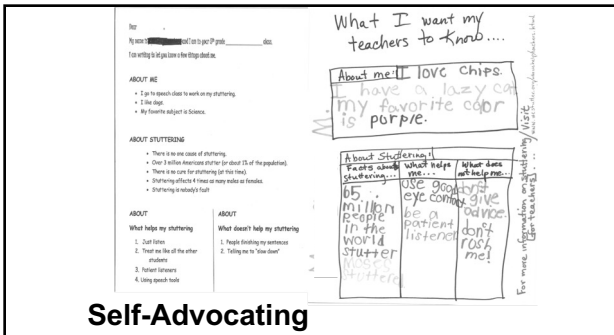

Self-Advocating

For further information, See Chmela & Reardon: The School Age Child who Stutters: Working Effectively with Attitudes and Emotions, Stuttering Foundation, 2001

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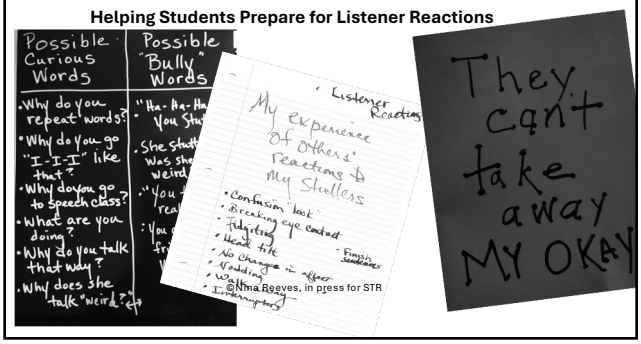
Helping Students Prepare for Listener Reactions



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WHERE DO THE
SKILLS (TECHNIQUES) FIT IN?

Use the ICF to remind us:
Speaking skills are only ONE aspect of stuttering therapy

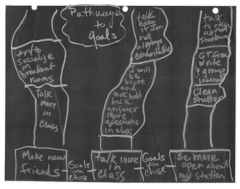
64

Ask Your Students What their "best hopes" are!

***[Ali Berquez, Palin Center for Stammering]**

Therapeutic Alliance:
Therapy not **AT** the child, but **WITH** the child

Meet your students where THEY ARE!



65

As we "get started" sometimes we can jump too quickly into speech handling techniques

- Before we ever touch a "speech strategy," we must help our students to build foundational knowledge and skills related to speaking AND stuttering!

66

BEFORE we move into handling speech and stuttering with skills…let's review

- Foundational knowledge and skills at the appropriate level for the child's:
  - Age
  - Awareness
  - Cognitive ability
  - Readiness
  - Level of Impact
- Learning about speech (and tight/loose muscles
- Learning about stuttering
- Teaching others about stuttering
- Remember: we are not here to MAKE children aware of their stuttering so we can FIX them!
- Skills: MAP IT OUT!
  - Seeing the "bigger picture"
- Understand: There CAN, should, and WILL be homework! 😊

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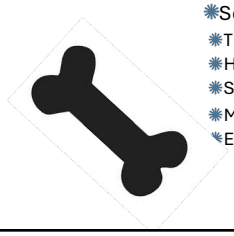
The Bones: What we can't live without in therapy!



- Setting up for success!
- The stutter notebook!
- Hierarchies
- Systematic Desensitization
- Manipulating Variables
- Effect Circles

68

The BIGGIES of "Handling" Stuttering

Student wants to know: Why am I learning/doing this?

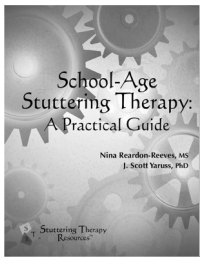
All aspects impact any combination of the following communication factors:

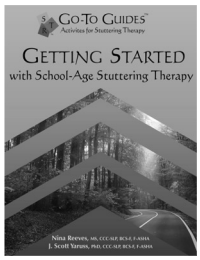
- Physical Tension
- HANDLE Time Pressure
- Effective Communication
- *Comfort Level*
- Decrease struggle
- Increase ease of communication

- Feeling of Choice-AGENCY
- Tolerance of Communicative Pressures
- Confidence
- Decrease Anxiety or Fear of Stuttering
- Hiding/Avoiding/Masking Stuttering
- Acceptance of Stuttering

72

We wrote it all down…





78

Focus on Communication-Not Fluency

Skills are to help people who stutter communicate in easier ways with less tension, avoidance, and struggle

79

Skills - -
Stutter-Affirming **changes** in therapy practices

1. Intent
2. Focus (time spent in therapy)
3. Expectation

80

"Any skill introduced with the intent to help children "not stutter" will likely become an avoidance and contribute to concealment and masking…leading to increased negative impact on communication and quality of life."

Nina Reeves

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Communication Skills for School-Age Stuttering Therapy

Communication Skills

Including…
- Handling Time Pressure
- Turn-Taking
- [Pausing/Phrasing]

Stuttering More Comfortably:

Honest/Clean Stuttering
Voluntary Stuttering

Stuttering More Easily:
Stuttering Modification

Pullout
Cancellation
Preparatory Set

Handling Speech

Easy Onset
Pausing/ Phrasing

82

Let's Take a Moment

How do you feel about NOT focusing on skills (as much) in therapy?

83

PRO TIP: YOU WILL NEED TO Explore Some Stuttering!

- Repetitions
  - Word
  - Syllable
  - Sound
- Prolongations
- Blocks
- Play with stuttering:
  - Clusters (of stuttering beh)
  - Secondary behaviors

Without a doubt, the MOST important thing you can do to improve your therapeutic alliance with a person who stutters, is to **GET INTO STUTTERING**!

84

Let's do a brief overview of skills

- It sometimes helps to categorize them into 4 areas that ALL overlap with each other in a synergistic way
  - General communication skills
  - Lean into stuttering
  - Handing stuttering
  - Handling speech

Check out our Video Series for SLPs on YouTube by visiting www.StutteringTherapyResources.com and clicking on the FREE Resources tab

85

Leaning into Stuttering

Stuttering openly, introduced by Joseph Sheehan (1970) has been explored and expanded by Vivian Sisskin in her work on Avoidance Reduction Therapy (ARTS™).

www.SisskinStutteringCenter.org

Voluntary Stuttering has been around a LONG time (see work of Charles Van Riper, 1973) and allows for discovering and exploring stuttering and reducing anticipatory avoidances [i.e. masking]

These skills will involve desensitization and disclosure of stuttering, while enhancing acceptance of being a person who stutters.

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Stuttering Openly: Skills to stutter more comfortably

- "Clean Stuttering"
- Voluntary Stuttering

Decreases Fear and Avoidance AND Struggle

88

Handling Stuttering

For children who "stutter enough" that they could (eventually) identify a moment of stuttering as [or after] it is occurring.

For children who are sensitive to and/or avoid stuttering

These techniques are practiced with "fake stuttering" at first, and then practiced in real instances of stuttering, as the child increases the ability to identify their own moments of stuttering

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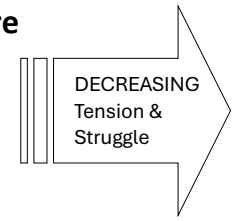
Stuttering Modification:
Skills to stutter more easily

- Cancellation
- Pull-Out
- Preparatory Set



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Communication Skills

- Not every child will need help in this area. However, it is important to understand that enhancing communication skills such as turn taking and handling time pressure can be helpful to children who stutter

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A note about Communication Skills

- Communication skills are an integral part of the therapy process for many children who stutter. Though we do not have time to go over this in an exhaustive manner, I would like to highlight the following concepts here:
- Turn Taking
- Handling Time Pressure
  - For more information, these concepts are presented multiple times in the literature, including Chapter 9 of our School-Age Guide (Reardon-Reeves & Yaruss, 2013).

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Handling Speech

Just FYI…I have considerably decreased the time spent on these skills over the years, as they have often been used as "fluency focus"

NOW I will highlight two skills that are essentially focused on enhancing the TIMING and TENSION of speech for students who stutter

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Handling Speech:
Skills to speak more easily

- NOT YOUR GRANDPARENT'S Easy Onsets
- Pausing/Phrasing

Timing and Tension

95

Realizing a Pathway to Success with ANY skills in therapy

Confirm the Intent → Prerequisites are essential → Know they are NOT easy! → Carryover requires systematic hierarchies

Why are you doing what you are doing?
Do the child & caregivers understand?

96

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Documenting Progress

- If we are not judging progress by counting stutters…then WHAT?
  - We need to be creative!
  - Portfolio documentation combined with data collection and some standardized measures is best practice
    - Discussion point: What types of portfolio documentation are you already using for your workload?
  - Use your excellent goals and objectives as guides.
- Be prepared to explain your process to others

99

Notes on:
Carryover/
Maintenance

- Begin with the end in mind!
- Everything we do is a carryover activity
- Work along a hierarchy of difficulty
- Help children and others know WHY they are doing WHAT they are doing!
- Provide resources for further learning AND for looking back
- Connect those who stutter and their families to others in a variety of ways
- BTW: Motivation comes from many factors; some of which we can help with/others which we cannot

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From Fixers to Allies

From **Leader** to **Listener**

From "Speech-Focused" to "Communication Focused"

From "Pathologist" to "Clinician"

From "Therapist-Led Interactions" to "Collaborative Care"

SLP Roles in Stutter-Affirming Therapy

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Summing up: Overarching change

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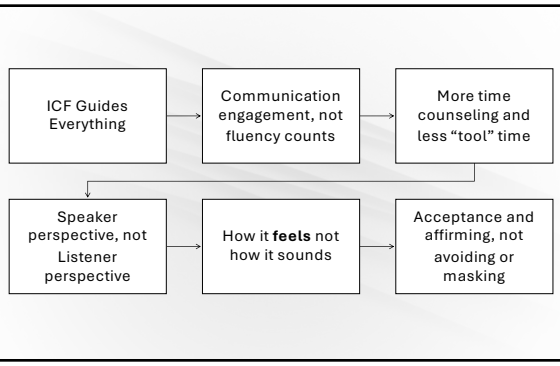

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Wrapping it up

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Organizations/Resources

American Speech-Language-Hearing Association Specialty Board
www.stutteringspecialists.org

National Stuttering Association (NSA)
www.westutter.org

SAY
www.SAY.org

Stuttering Foundation (SFA)
www.stutteringhelp.org

FRIENDS
www.friendswhostutter.org

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Here are links for the resources discussed today and a link to CEs for stuttering therapy

https://www.stutteringtherapyservices.com/ninas-ongoing-updated-references-and-resources-page

https://stutteringtherapyresources.com/pages/free-resource-continuing-education-opportunities?

- If you have any questions, please email me at
- ninareevesSLP@gmail.com

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Added Value
Exclusive Discount
for today's participants

Ends 11:59 PM ET
Friday,
October 17, 2025

CODE: PATTI

109

Tanti Grazie!

- Any questions?
  You can find me at:
- nina@ninareeves.com
- @StutteringTherapyResources

Hendrickson Listenometer On Hiding

110

RESOURCES TO KEEP THE LEARNING GOING

111

BONUS MATERIAL

112

WHAT ABOUT GOAL CHOICE?
AKA: GIVE US A GOAL BANK!

118

Thoughts on Goals

- Not every child needs every goal!
- Not all goals presented at the same time
- No “SET” order to goals
- Each “subset” of goals works together
- NO “levels of fluency” are to be included… (pop quiz: “why?”)

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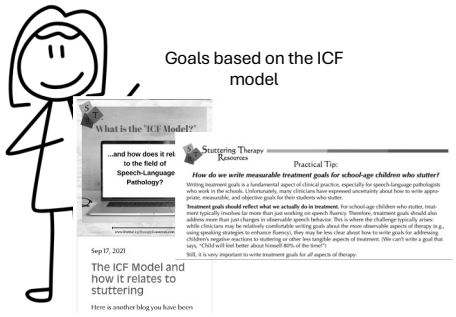

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No More Fluency Focus

Do you write "% of fluency" in your goals?	What is the % chosen?	How is the child "achieving" that %tage?
• WHY? • Is this promoting masking?	• WHY? • Who says?	• Manage? Spontaneous? Avoidance?

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Goals for percentage of fluent speech are worthless because:

- Observable stuttering is not indicative of the person's "feelings of stuckness"
- Stuttering is – at its core- ALWAYS VARIABLE
- How did the person obtain apparent fluency?

Not an exhaustive list

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Personal Factors/Reactions

Is there a presence of beliefs and/or of coping reactions (thoughts, feelings, behaviors) that are less helpful in the long term?

125

Example concepts: Personal Factors/Reaction

NOT an exhaustive list!

Reducing anxiety, shame, avoidance and/or struggle via age appropriate:

- **Knowledge of speech anatomy/physiology**
- **Knowledge of speech and stuttering**
- **Identification of and exploring stuttering**
- **Desensitization activities (to decrease fear of stuttering and listener reactions as well as to increase communicative confidence)**
- **Cognitive/Affective exploration, and management through self-disclosure, openness, and increased acceptance**
- **Self-awareness of avoidance and avoidance reduction over time**

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SAMPLE Goal: Personal Factors/Reactions

Within __ instructional weeks, the student will demonstrate age-appropriate knowledge of the speaking process and stuttering by using his speech journal to document at least _____ key facts about each of these areas: speech anatomy/physiology, disorder of stuttering, and successful people who stutter.

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Sample Goals: Personal Factors/Reactions

Timeframe: Over a period of 36 instructional weeks,

Condition: when provided sentence production activities in the speech therapy setting **Behavior:** the student will navigate reactions to stuttering by allowing moments of stuttering to occur naturally (without avoidances or strategies)

Criteria: in 3 out of 5 activities as measured across 3 consecutive therapy sessions.

Timeframe: Within 36 instructional weeks

Condition: when provided prompts for reflective discussions of social-emotional aspects of stuttering in the speech therapy setting

Behavior: the student will identify and express at least 2 feelings related to their current experience of stuttering (e.g., frustration, confidence)

Criteria: in 4 out of 5 consecutive speech therapy sessions.

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Environment

Student's ability to navigate stuttering in various settings...

...and within the context of the *knowledge level, perceptions,* and *reactions* of <u>others</u>

129

Example concepts: Environment

Reducing anxiety, shame, avoidance and/or struggle via age appropriate:

- Educating others about speech and stuttering, and communication
- Increasing self-advocacy
- Developing and maintaining appropriate support systems
- Handling listener reactions
- Handling bullying and inquiries
- Reducing negative response potential through education, awareness and acceptance

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SAMPLE Goals: Environment

Within 36 instructional weeks, the student will demonstrate age-appropriate knowledge of the speaking process and stuttering by teaching clinician- and self-selected key facts to at least ___ significant others in his environment as documented in journal entries, clinician data, and parent/teacher reports.

Within 36 instructional weeks, the student will demonstrate ability to respond appropriately to inquiries about speech/stuttering as well as to bullying behaviors and negative listener reactions by creating at least __ problem solving scenarios as documented by journal entries, self-reports and observations/reports of significant others.

Within 36 instructional weeks, the student will inform his caregivers about the process of stuttering therapy by reviewing at least __% of speech therapy sessions, using journal entries as a guide. Documentation will include signed journal entries, clinician data, and/or caregiver reports.

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Sample Goals: Environment

Timeframe: Over a period of 36 instructional weeks,

Condition: when provided with a list of ways to educate others about stuttering (e.g. information chart, letter or email, PowerPoint slides, recounting therapy sessions using stutter notebook, Q&A surveys, direct discussions)

Behavior: the student will educate two different adults and/or peers of their choosing about stuttering

Criteria: at least two times.

Timeframe: By the end of the semester,

Condition: when provided the opportunity to respond during classroom discussions or small group classroom activities,

Behavior: the student will actively participate by initiating or responding to peers' comments

Criteria: at least twice per week across three consecutive weeks.

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Function

- Forward flow of speech
- Feeling of "stuckness"

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Example concepts: Function

- **Addressing student's perceived significance of stuttering**
- **Navigating physical tension/struggle during communication**
- **Enhancing ease of communication, as appropriate**
- **Decreasing avoidance/escape behaviors**

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SAMPLE Goals: Function

Over a period of ___ consecutive instructional days, the student will demonstrate the ability to use a communication skill of their choosing in ___ classroom situations as reported by the student and/or teacher and documented by checklists and targeted observations.

Within __ instructional weeks, and within ___ clinician data probes, the student will demonstrate the ability to modify physical tension during a moment of stuttering by exhibiting independent use of self-chosen skills in ___ of ____ attempts along a hierarchy of linguistic complexity during structured therapy activities. Documentation shall include clinician data and/or self reports.

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Sample Goals: Function

Timeframe: Over a period of 36 instructional weeks,

Condition: when provided with a list of previously taught easing-out skills (e.g. pullout, preparatory set, cancellation, voluntary stuttering)

Behavior: the student will navigate moments of stuttering by using these skills to reduce physical tension

Criterion: in 2 self-chosen classroom opportunities per week across 4 consecutive weeks.

Timeframe: Over a period of 36 instructional weeks,

Condition: when provided with a list of previously taught easing-out skills (e.g. pullout, preparatory set, cancellation, voluntary stuttering)

Behavior: the student will navigate moments of stuttering by using these skills to reduce physical tension

Criterion: in 2 self-chosen classroom opportunities per week across 4 consecutive weeks.

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Impact

Activity Limitation/

Participation Restriction

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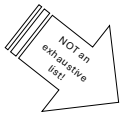
Example concepts: Impact



- **Increase student's ability to communicate effectively *in a variety of settings***
- **Increase participation in activities that involve verbal interactions across settings**
- **Decrease overall impact of stuttering on student's perceived quality of life**
- **Increase student's functional communication skills**
- **Increase student's comfort, spontaneity, naturalness, and satisfaction in real-life (functional) communication**

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SAMPLE Goals: Impact

Over ___ consecutive days in a classroom setting and over __ clinician data probes, the student will demonstrate the ability to participate in classroom discussions by volunteering to answer questions in class at least ___ times per day as measured by teacher observations/charting and student journal entries.

Over ___ consecutive days in a classroom setting and over ___ clinician data probes, the student will independently handle self-identified verbal time pressure situations by effectively communicating his message in ___ of ___ speaking opportunities. This will be documented by student self-reports and teacher reports.

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MORE Sample Goals: Impact

Timeframe: Over a period of 36 instructional weeks,

Condition: when provided the opportunity to verbally participate in classroom activities

Behavior: the student will volunteer to verbally answer questions in a self-chosen class

Criterion: at least one time per day, for three out of five days per week.

Timeframe: Within 36 instructional weeks,

Condition: when interacting with supportive communication partners (e.g., peers, teachers, or family members),

Behavior: the student will self-advocate (e.g., requesting more time to respond or ask not to be interrupted)

Criteria: at least three times per grading period.

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Cultural Responsiveness

Differential Diagnosis

Semantics, vocabulary, pronunciation, inflection, and dialectical differences

Not all disfluencies are stuttered

Multi-lingual acquisition can impact "fluency" of communication and can be confusing

- Code switching
- Naturalized (dominant) languages vs. newer languages

Considerations

- Check our own cultural views and mores and how they may impact our assessment and treatment
- Ask caregivers about cultural influences as they relate to perceptions of stuttering
- Steer away from stereotypes and/or biases and move toward family beliefs and values
- Carefully consider communication norms (such as eye contact, child turn-taking, etc.)

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Coexisting Differences

- Students who are experiencing more than one experiential or neurodiverse challenge need our ability to:
  - Differentially diagnose
  - Understand each difference and how it may impact our assessment and treatment of stuttering
  - Utilize our knowledge to educate teachers, caregivers, and others on the potential for strength and challenges to impact progress and need for review of concepts presented in therapy

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