

## **STUTTERING GOAL BANK:**

- **Preschool (Fluency Shaping, working up to conversational level)**
  - Given direct instruction and modeling of easy onset, slowed rate, and continuous voicing, the patient will use fluency shaping for producing:
    - single words with ###% accuracy
    - two-word utterances with ###% accuracy
    - carrier phrases with ###% accuracy
    - rote utterances with ###% accuracy
    - self-created sentences with ###% accuracy
    - conversational exchanges with ###% accuracy
    - narratives with ###% accuracy
  
- **Preschool (Fluency Shaping, conditioning after mastering conversational and narrative level in therapy)**
  - Given direct modeling of fluency shaping and Lidcombe Method principles of verbal praise for all utterances using fluency-shaping, clinician and/or caregiver recasting of fast of 75% of dysfluent utterances, and clinician and/or caregiver verbal prompts for the patient to restate fast or dysfluent utterances with fluency shaping, the patient will produce conversational speech with fluency-shaping in ###% of utterances.
  
- **School Age (Early Fluency Shaping Teaching Activities)**
  - Given direct instruction and modeling of easy onset, slowed rate, and continuous voicing, the patient will use fluency shaping for producing:
    - single words with ###% accuracy
    - two-word utterances with ###% accuracy
    - carrier phrases with ###% accuracy
    - rote utterances with ###% accuracy
    - self-created sentences with ###% accuracy
    - conversational exchanges with ###% accuracy
    - narratives with ###% accuracy
  
- **School-Age, Teens, & Adults (Fluency Shaping Functional Activities)**
  - Given direct instruction and modeling of easy onset, slowed rate, and continuous voicing, the patient will use fluency shaping for:
    - conversational exchanges with the clinician with ###% accuracy
    - reading aloud in front of the clinician with ###% accuracy
    - phone call with the clinician with ###% accuracy
    - answering job (or scholarship) interview questions with the clinician with ###% accuracy
    - ordering food (cafeteria or restaurant) with ###% accuracy
    - reading aloud in front of a small peer group with ###% accuracy
    - giving a 1-2 minute presentation in front of a small peer group with ###% accuracy
    - talking on the phone with an unfamiliar listener for a semi-scripted conversational exchange with ###% accuracy
    - reading aloud in front of a large group of peers with ###% accuracy
    - giving a full class (or work) presentation in front of a small peer group with ###% accuracy
    - answering job (or scholarship) interview questions with an unfamiliar listener with ###% accuracy

- **School-Age, Teens, & Adults (Stuttering Modification, Teaching Activities)**
  - Given instruction and modeling of a tension and release activity, the patient will demonstrate release of tension on pseudo-stuttering events of pre-selected words in a reading passage with ##% accuracy.
  - Given instruction and modeling of cancellations, the patient will demonstrate cancellations with pseudo-stuttering events of pre-selected words in a reading passage with ##% accuracy.
  - Given instruction and modeling of slides (pull-outs), the patient will demonstrate slides with pseudo-stuttering events of pre-selected words in a reading passage with ##% accuracy.
  - Given instruction and modeling of preparatory set, the patient will demonstrate fluent speech with easy onset, slowed rate, and continuous voicing through pre-selected words in a reading passage with ##% accuracy.
  
- **School-Age, Teens, & Adults (Stuttering Modification, Functional Activities)**
  - Given instruction and modeling of stuttering modification techniques, the patient will modify all pseudo-stuttering events and real stuttering events with cancellations, slides, or preparatory during:
    - conversational exchanges with the clinician with ##% accuracy
    - reading aloud in front of the clinician with ##% accuracy
    - phone call with the clinician with ##% accuracy
    - answering job (or scholarship) interview questions with the clinician with ##% accuracy
    - ordering food (cafeteria or restaurant) with ##% accuracy
    - reading aloud in front of a small peer group with ##% accuracy
    - giving a 1-2 minute presentation in front of a small peer group with ##% accuracy
    - talking on the phone with an unfamiliar listener for a semi-scripted conversational exchange with ##% accuracy
    - reading aloud in front of a large group of peers with ##% accuracy
    - giving a full class (or work) presentation in front of a small peer group with ##% accuracy
    - answering job (or scholarship) interview questions with an unfamiliar listener with ##% accuracy
  
- **School-Age, Teens, & Adults (Knowledge & Affective Component)**
  - Long-term goal:
    - Given lessons about stuttering, opportunities for self-assessment of his performance, and discussions about handling obstacles encountered with stuttering, the patient will demonstrate a decrease in his affective score by a severity level after two semesters.
      - Note therapy discussions of “good moments,” “bad moments,” current cycle, obstacles, patient-centered goal planning, self-assessments, self-ratings of anxiety with activities across time, mental rehearsal, and exploring worst-case scenarios and extreme solutions
  - Given repeated lessons regarding stuttering, the patient will demonstrate recall the following information with 100% accuracy:
    - the three fluency enhancing techniques
    - the three stuttering modification techniques
    - modern direction of stuttering etiology research (brain differences & inheritance)
    - stuttering is made worse by our body’s reaction to fear

- prevalence of 1%
- three fluency inducing conditions
- three famous people who stutter
- the Adaptation Effect
- the Consistency Effect