PERSON-CENTERED FOCUS ON FUNCTION:

School-Age Stuttering





· Goals identified by the child, in partnership with the clinician and family, that allow participation in meaningful activities and roles

Why target person-centered functional goals?

- To maximize outcomes that lead to functional improvements that are important to the child and/or family
- To optimize the child's potential to participate in meaningful activities
- To facilitate a partnership that ensures the child and family have a voice in their care and outcomes.
- To demonstrate the value of skilled services to payers

What is the ICF, and how does it help?

The International Classification of Functioning. Disability and Health (ICF) was developed by the World Health Organization (WHO). It provides a framework to address a child's functioning and disability related to a health condition within the context of that person's activities and participation in everyday life.

ICF: International Classification of Functioning, Disability and Health

Health Condition

disorder or disease that informs predicted comorbidities and prognosis

Body Functions and Structures

anatomical parts and their physiological functions

Activities and Participation

execution of tasks or involvement in life situations

Environmental and

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physical, social, attitudinal, and environmental factors and factors within the individual's life

Person-Centered Focus on Function: School-Age Stuttering

Case Study: Taylor

Health Condition: Stuttering

Assessment Data

Body Functions and Structures

SSI-4ª

- Mild stuttering, according to SSI-4
 - o Overall Score = 19
 - Frequency = 10 (speaking = 5% syllables stuttered, reading = 3% syllables stuttered)
 - o Duration = 10 (1 second)
 - Physical concomitants 3 (head movements, movement of extremities)

Parent/Child/Teacher Interviews;^b Speech-Language Samples

- Stuttering-like disfluencies include single-syllable repetitions (e.g., ba ba baby), sound prolongation (e.g., mmmmy), and blocks (i.e., no sound)
- Physical tension/secondary behaviors (e.g., head nod, tapping foot)
- Avoidance behaviors (e.g., reduced verbal interaction)

Activities and Participation

Parent/Child/Teacher Interviews; OASES-Sc

- Taylor reports not raising her hand in school.
- Taylor reports being teased when she uses techniques learned in speech therapy.
- Taylor isolates herself during recess.
- Parents report that Taylor is in a reading group below her level due to stuttering.
- OASES Impact Rating = 3.00 (Moderate-Severe)

Environmental and Personal Factors

Environmental Factors (Parent/ Child/Teacher Interviews^b)

- Taylor receives speech services within the school system.
- Her parents feel that Taylor is not trying hard enough with her techniques.

Personal Factors (OASES-S;c Parent/Child/Teacher Interviews;b Speech-Language Samples)

- Age: 12
- Monolingual English speaker
- Onset of stuttering at 4 years
- · No family history of stuttering
- No co-existing speech-language disorders
- Reports feelings of embarrassment, frustration, and isolation

Clinical Reasoning

What impairments most affect function in this setting, based on clinician assessment and individual/family report?

What activities are most important to the individual in the current setting?

What environmental/personal characteristics help or hinder participation in activities or situations in the current setting?

Taylor's Functional Goals

Goal Setting

Long-Term Goal

Taylor will identify feared speaking situations, develop an action plan, and implement a strategy to reduce avoidance.

Short-Term Goals

- Taylor will voluntarily stutter in five different environments and will identify personal and listener reactions.
- Taylor will reduce target avoidance behavior to a self-rating of 2 on a 5-point scale (1 = never, 2 = rarely, 3 = sometimes, 4 = a lot, 5 = always) across three consecutive sessions.
- Taylor will provide facts and answer questions about stuttering to three key people over the course of the year.
- Taylor will enter into one feared speaking situation each week for 4 consecutive weeks.

Long-Term Goal

Taylor will reduce physical tension related to stuttering moments in a variety of speaking situations and environments.

Short-Term Goals

- Taylor will identify physical tension/secondary behavior in 80% of stuttering moments across three sessions.
- Taylor will reduce physical tension (e.g., cancellation) in 80% of stuttering moments across three sessions.
- Taylor will reduce physical tension during a stuttering moment in five different speaking environments.

^aSSI-4 = Stuttering Severity Instrument for Adults and Children, Fourth Edition (Riley, 2009). ^bEthnographic interviewing: Asking the right questions to the right people in the right ways (Westby, 1990). ^cOASES-S = Overall Assessment of the Speaker's Experience of Stuttering-School-Age (Yaruss, & Quesal, 2010).