

GOALS OF A FLUENCY EVALUATION

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The following are questions that should be addressed and answered in a fluency evaluation for clients of all ages. These questions reflect both the overall and specific goals of the evaluation and should be used as a guideline for developing an evaluation protocol and making assessment-diagnostic decisions. The clinician is also referred to Report Format and Evaluation Protocol: Fluency for additional information.

Broad Goals: The Evaluation Should Answer the Following Questions

1. Does the client's communication pattern interfere with the ability or desire to communicate with others?
2. Does the client's communication pattern interfere with the ability to be understood by others?
3. Does the client's communication pattern interfere with social, educational, or vocational development?
4. Does the client's communication pattern call attention to itself so as to interfere with effective communication?
5. Does the client exhibit behaviors, attitudes, or emotions consistent with the onset, development, or maintenance of a stuttering response?

Specific Goals: The Evaluation Should Address the Following Characteristics of Communication

Identify and Access Characteristics of Speech Fluency and Disfluency

1. Segmental speech behaviors that interfere with the natural continuity, rhythm and/or pace of speech?
2. Speech movement behaviors preceding or during fluent and/or nonfluent utterances that interfere with the natural continuity, rhythm, pace, and force of speech?
3. Atypical behaviors in the non-speech structures that precede or accompany disfluent episodes?

Identify and Access Attitudes and Perception About Talking

4. Covert or overt attitudes, beliefs, or perceptions that reflect concern about talking or the occurrence of disruptions in speech fluency?
5. Covert or overt attitudes, beliefs, or perceptions about themselves or talking that interfere with social, educational, or vocational development or activities?

Identify and Access Awareness, Anticipation, and Expectancy Reactions About Stuttering

6. Degree of awareness of talking difficulty and/or the occurrence of specific talking mistakes (e.g. disfluencies, etc.)
7. Covert or overt features of anticipation/expectancy about speech or disfluency?

Identify and Access Characteristics of Emotional Arousal and/or Fear About Talking or Experiencing Disfluencies/Stuttering

8. Emotional arousal to talking that interferes with normal communication?
9. Emotional arousal to the anticipation of speech disfluencies?
10. Emotional arousal to the occurrence of speech disfluencies?

Identify and Access Development and Characteristics of Adjustment/Coping Behaviors Associated with Speech Disruptions or Anticipation of Stuttering

11. Speech behaviors that reflect voluntary or involuntary attempts to postpone, avoid, hide, or escape from speech disfluencies?
12. Non-speech behaviors that reflect voluntary or involuntary attempts to postpone, avoid, hide, or escape from speech disfluencies?

Identify Possible Contributing Factors

The goal here is to identify any factors that might contribute to the predisposition, precipitation, or perpetuation of a stuttering response. The clinician should be aware that many of the features overlap. The following are general guidelines of factors known to influence in some individuals the onset, development, and maintenance of a stuttering problem. These should not be associated with causation, since stuttering is a complex, multidimensional problem.

Predisposing Factors

- Diminished or delayed cognitive and/or learning development
- Diminished or delayed language and/or phonological development or usage
- Problems associated with medical development and/or present status (including but not limited to the following)
 - pregnancy and birth
 - neurological function
 - sensory and fine/gross motor abilities
 - familial history of speech, language, cognitive, emotional, or neurological disorders (especially stuttering or other fluency related problems)
 - Attention Deficit and/or Hyperactivity Disorders

Precipitating Factors (including but not limited to the following)

- Delayed onset and development of speech and language
- Accelerated onset and usage of speech and language
- Speech-linguistic expectations and model from parents or others
- Performance expectations and models from self and others
- Emotional/psychological stress or uncertainty
- Physical stress, illness, or fatigue
- Environmental pressures (in general or associated with communication and/or performance)
- Rapid communication pace/speech rate

Perpetuating Factors (including but not limited to the following)

- Negative attitudes about self, talking, mistakes, or disfluency
- Negative attitudes/reactions to talking and disfluency from parents, peers, or others
- Voluntary or involuntary behaviors to help talk or get words out
- Fear of talking or making talking mistakes
- Attempts to postpone, avoid, hide or escape disfluency
- Rapid communication pace/speaking rate