**Treatment Effectiveness of a Multi-faceted Stuttering Therapy Program**

1. Participants (maximum 5) will be recruited for the study by advertising the intensive clinic via flyers emailed to local and national support groups such as the National Stuttering Association (NSA), advertising the clinic on the departmental website, and placing an advertisement for the clinic on the Stuttering Foundation of America (SFA) website. Participants will be adults, above the age of 18 years. Considering the current prevalence data, with a male : female ratio of 3:1, it is expected that a majority of the participants will be male. The website and flyers for the clinic are in the process of being finalized. This information will be posted and copies can be made available by March, 2011 when the clinic will be advertised and recruiting of potential participants will begin.
2. Participants who respond to, and express a desire to receive therapy services at the Intensive Clinic, which will be a specialty clinic offered by the Department Of Communication Disorders Speech and Hearing Clinic will be recruited for the study. All participants will be asked to sign the clinic consent form allowing the data to be used for educational purposes by the Department Clinic. Additionally, participants will be asked to sign a separate consent form to allow the data gathered during the clinic to be used for research purposes to determine treatment effectiveness. The data gathered for this research study will be no different from data gathered during the clinic for clinical documentation.
3. The treatment program will utilize an eclectic approach to stuttering therapy. The treatment program will include a residential intensive component wherein the clients will receive a total of 60 hours of therapy over a two-week period and a non-intensive follow-up program for one year delivered via telepractice using Adobe Connect.

*Outcome measures*. Outcome measures collected to evaluate treatment effectiveness will include: (1) O*utcomes related to overt stuttering behaviors measured by*: (a) Stuttering frequency which includes % Syllables Stuttered (SS) during phone calls, reading, monologue, and conversation; (b) Stuttering Severity measured by the Stuttering Severity Instrument-4 (SSI- 4); (c) Client perceptions of stuttering severity in a variety of speaking situations to establish clinical significance and client values; and (2) *Outcomes related to the overall impact of stuttering on the individual’s life, measured by* (a) the Erickson Scale of Communication Attitudes (S-24) which measures communication attitudes, and (b) Overall Assessment of the Speakers Experience of Stuttering (OASES) which is a comprehensive measure that considers the impact of stuttering within the ICF framework to be used in treatment outcomes research. The data collection instruments mentioned here are all part of a standard assessment protocol widely used in stuttering therapy and are administered irrespective.

*Data Collection.* All data to measure overt stuttering behaviors will be gathered and audio/video-recorded by trained student clinicians under the direct supervision of the principal investigator and a clinical supervisor. Data analysis will be completed in 4 phases: (1) Baseline data gathered on three occasions prior to the beginning of the intensive clinic; (2) at the end of the intensive clinic to measure outcomes directly related to the intensive component; (3) at the completion of the one-year follow-up; and (4) at the end of two-years to measure long-term outcomes. Additionally, data related to attitude changes as a result of therapy and the overall impact stuttering has on the person’s life will be measured using the S-24 and OASES.

*Data Analysis.* The data will be coded to omit information about the time of data collection. A trained research assistant, blind to the study protocol, will complete the data analysis. Twenty percent of the data will be randomly selected for re-analysis by a different research assistant to ensure reliability. Data gathered for outcome 1 (a & b) will be transcribed verbatim and analyzed for total number of syllables, percentage of syllables stuttered (%SS), and speech rate (total number of syllables/total time in minutes; syllables/minute). The analyzed data will be uploaded to an SPSS file to allow for descriptive statistical analyses and perform a Wilcoxon Signed-Ranks test to determine statistically significant changes as a result of therapy. Data gathered for outcome 1 c. and outcome 2 will be scored by a research assistant and uploaded to the same SPSS file for statistical analyses.

1. The research protocol does not pose any additional risks to the participants. The protocol utilized and the data gathered as part of this research study is no different from standard clinical protocol. The only difference is in the process of post-hoc data analysis, which will help determine initial treatment effectiveness. The treatment protocol has been used in previous studies that were retrospective in nature (see, Irani & Gabel, in press; Gabel et. al., 2010; Gabel et. al., 2008; *available upon request)*.
2. All data gathered as part of this study will be stored in the Department Of Communication Disorders Speech and Hearing Clinic and will be utilized only for educational and research purposes as consented to by the participants. The data will remain confidential and HIPPA compliance will be maintained.
3. Participants will receive treatment at for free, or for a low fee as part of this research initiative.
4. Participants will not be offered any direct compensation for participating in this study. As part of this research initiative, therapy will be provided at a very low cost to the participants.
5. As mentioned in (4), there are no additional risks to the participants than they would encounter as a result of receiving therapy services.
6. N/A
7. N/A
8. N/A
9. This research project is funded by a Research Enhancement Program grant awarded to the Principal Investigator, Farzan Irani, by Texas State University – San Marcos. Results of this study will be presented at the conclusion of the study to the grant committee. Additionally, the results will possibly be presented at state and national conventions and possibly published in a national or international journal. Participant confidentiality will be maintained throughout the presentation and publication of the results of this study.