

### **Supplemental Material S3.** The Clinical Use of Self-Report and SFBT for an 18-year-old female participant.

Participant weekly self-rating scores over a 5-week period to the question: How much choice do you feel you have to take part in a conversation, with 1 reflecting a great deal and 9 very little?					
	Week 1	Week 2	Week 3	Week 4	Week 5
Close Friend	1	1	1	1	1
Parent	1	1	1	1	1
Stranger	2	2	1	1	1
Authority Figure	5	5	3	2	2
Telephone	1	1	1	1	1

The narrative below provides some background information of the participant and some examples of the clinical conversations and implementation of the SFBT Approach and CUSR self-reports.

#### **Pertinent Clinical Background of 18-Year-Old Female Participant**

The participant received speech therapy services since 4<sup>th</sup> grade to treat a paternally transmitted stuttering disorder of a developmental nature. Her school records showed an exceptional student who gets top grades across academic subjects. In 9<sup>th</sup> grade, the participant struggled to communicate in class and was described by her teachers as “shy” and “reticent to speak.” Her teachers noted that she was failing in class participation and oral discussion. The participant received a diagnosis of “covert stuttering” by the presenting SLP.

Data collected over the 5 sessions demonstrated that the participant increasingly felt more empowered in taking part of a conversation with the authority figure audience, including her schoolteachers. Once the SFBT was implemented to initiate conversation about her communication attitudes and speaking avoidances, huge progress was noted over five sessions. During the re-evaluation, in the second semester of 12<sup>th</sup> grade, the SLP recommended termination of speech services based on the student’s sustained progress on achieving her IEP goals. All stakeholders, including the participant, her family, and schoolteachers, reported that they agreed to end speech-therapy as the participant had shown mastery of communication skills and could manage on her own any residual fluency concerns.

Prior to the SFBT approach, the participant felt embarrassed about the stuttering and hid it from teachers and others who presented as authority figures. For example, on the CUSR questions: How much choice do you feel you have to take part in a conversation, A great deal (1) – Very little (9). In a period of 5 sessions, the participant reduced the self-rating score from 5 to 2, indicating huge improvement in the choice of taking part in a conversational experience. Over the trial period, the participant showed significant changes in her ability to become proactive in her own treatment of stuttering. For example, she took initiative to research and become familiarized with the various national and international stuttering organization, searched for YouTube of famous people who speak publicly about their stuttering, and obtained techniques/suggestions from online articles on how to talk to authority figures.

Comparing the CAT-R scores from 2018 (16 points) to the time the participant was discharged in 2021 (10 points) there was a 6-point difference in her communication attitudes, indicating significant growth in how she felt about her speech, nearing the Means for Nonstutterers (8.71).

### **SFBT Sample Clinical Dialogue**

The SLP decided to present the Miracle Question Technique at the time when the stuttering impacted the participant's classroom participation, when her fear of stuttering in front of the class was at its greatest peak, as reflected on the clinical self-report scale. The dialogue was presented as follows:

*Clinician:* Now, I want to ask you a strange question. Suppose that while you are sleeping tonight and the entire house is quiet, a miracle happens. The miracle is that when talking to authority figures or teachers in class, your stuttering problem is solved. However, because you are sleeping, you don't know that the miracle has happened. So, when you wake up tomorrow morning, what will be different that will tell you that a miracle has happened and the problem with your speech is solved?

*Participant:* I would know a miracle happened because when I talk, I would feel different, I wouldn't get stuck on any words.

*Clinician:* Tell me more.

*Participant:* Yes, a lot of times, for example, when I go to speech, I am comfortable around you, I feel that you are not going to judge me. It could be performance anxiety.

*Clinician:* Tell me how you cope with the stuttering when talking with easy audiences such as close friends and family members.

*Participant:* I cope by laughing and not taking my problems seriously.