

The Fearless

Pre/Post Test for Communication Abilities in Children who Stutter

Client's Name: _____	Age: _____	DOB: _____	Sex: M F
Clinician: _____	Date: _____		

Activity/Location/Time of Clinician Rating: _____

How difficult is it for the client to...?	Not at all difficult	Not very difficult	Somewhat difficult	Very difficult	Extremely difficult
1. explain what stuttering is	1	2	3	4	5
2. speak in higher pressure situations	1	2	3	4	5
3. stutter on purpose	1	2	3	4	5
4. disclose or advertise his/her stuttering	1	2	3	4	5

Client Interview

When talking to others, how often do you...?	Never	Rarely	Sometimes	Frequently	Always
1. explain or answer questions about what stuttering is ?	1	2	3	4	5
2. feel nervous or pressured?	1	2	3	4	5
3. stutter on purpose?	1	2	3	4	5
4. tell them you are a person who stutters?	1	2	3	4	5