



## A Family Guide to Common Terminology Associated With Speech Therapy

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**ACALCULIA:** Loss of ability in using mathematical symbols due to brain injury.

**ACOUSTIC:** Pertaining to the perception of sound.

**ACTIVE LISTENING:** Refers to the responsibility on the part of the listener to interact appropriately with the speaker and the speaker's message in order to maximize comprehension. Characteristics of the active listener include attending to the speaker, focusing on the message, questioning self and speaker if appropriate, and analyzing and evaluating content to relate new information to prior knowledge and aid concept development.

**ADENOIDS:** Growths of lymphoid tissue on the back wall of the throat (nasopharynx).

**AFFRICATE:** A consonantal sound beginning as a stop (plosive) but expelled as a fricative. The ch and the j sounds in the words chain and jump are affricates.

**AGNOSIA:** Loss of ability to interpret the meanings of sensory stimulation; due to brain injury; may be visual, auditory or tactual.

**AIR WASTAGE:** The use of silent exhalation before or after phonation on a single breath.

**ALLERGY:** Extreme sensitivity to certain proteins.

**ALVEOLAR:** The ridges on the jawbones beneath the gums. An alveolar sound is one in which the tongue makes contact with the upper-gum ridge.

**ANOXIA:** Oxygen deficiency.

**ANTIEXPECTANCY:** A group of devices used by the stutterer to distract himself from the expectation of stuttering.

**APHASIA:** The inability to acquire meaningful spoken language as a result of brain dysfunction.

**APHONIA:** Loss of voice.

**APPROACH-AVOIDANCE:** Refers to conflicts produced when the person is beset by two opposing drives to do or not to do something.

**APPROXIMATION:** Behavior which comes closer to a standard or goal.

**APRAXIA:** Loss of ability to make voluntary movements or to use tools meaningfully; due to brain injury.

**ARTICULATION:** Refers to the production of sounds through the precise positioning and rapid movement of the various components of the oral cavity (*e.g.*, tongue, lips, teeth, hard and soft palate) in relation to one another.

**ASPIRATE:** Breathly; the use of excessive initial airflow preceding phonation as in the aspirate attack.

**ASSIMILATION:** A change in the characteristic of a speech sound due to the influence of adjacent sounds. In assimilation nasality, voiced sounds followed or preceded by a nasal consonant tend to be excessively nasalized.

**ASYMMETRY:** Unequal proportionate size of the right and left halves of a structure.

**ATROPHY:** A withering; a shrinking in size and decline in function of some bodily structure or organ.

**ATAXIA:** Loss of ability to perform gross motor coordination.

**ATRESIA:** The blockage of an opening or canal.

**ATTACK:** The initiation of voicing.

**AUDIBLE:** Refers to a sound which is capable of being heard.

**AUDITORY MEMORY SPAN:** The ability to recall a series of test sounds, syllables, or words.

**AUDITORY SYSTEM:** Refers to the outer, middle, and inner ear, as well as the neural pathway which conducts sound to the brain for perception and interpretation.

**AURAL:** Pertaining to hearing.

**AURICLE:** The visible outer ear.

**AVOIDANCE:** a device such as the use of a synonym or circumlocution to escape from having to speak a word upon which stuttering is anticipated; also a trick to escape from having to speak in a feared situation.

**BABBLING:** A continuous, free experimenting with speech sounds.

**BASAL FLUENCY LEVEL:** The period of communication in which no stuttering appears. See Desensitization therapy.

**BASE-RATE:** The presumably stable rate of responding to a stimulus or stimuli.

**BICUSPID:** The fourth and fifth teeth, each of which has two cusps or points.

**BIFID:** Divided into two parts, as in a cleft or bifid uvula.

**BINAURAL:** Pertaining to both ears.

**BONE CONDUCTION:** The transmission of sound waves (speech) directly to the cochlea by means of the bones of the skull.

**BRADYLALIA:** Abnormally slow utterance.

**CATASTROPHIC RESPONSE:** A sudden change in behavior by the aphasic characterized by extreme irritability, flushing or fainting, withdrawal or random movements.

**CLAVICULAR BREATHING:** A form of shallow, gasping speech breathing in which the shoulder blades move with the short inhalations.

**CLUTTERING:** A disorder of time or rhythm characterized by unorganized, hasty spurts of speech often accompanied by slurred articulation.

**COCHLEA:** The spiral-shaped structure of the inner ear containing the end organs of the auditory nerve.

**COGNATE:** Referring to pairs of sounds which are produced motorically in much the same way, one being voiced (sonant) and the other unvoiced (surd). Some cognants are t and d , s and z.

**COMMENTARY:** The verbalization of what is being perceived as in self-talk or parallel talk.

**COMMUNICATION CYCLE:** Refers to the relationship that exists between the four elements inherent in every act of communication (*i.e.*, the sender, the receiver, the message and the vehicle used to convey the message).

**COMMUNICATIVE INTENT:** Refers to the purpose or function of a message (*i.g.*, what the speaker means to indicate or accomplish through the message).

**COMPREHENSION:** Refers to one's ability to understand speech and language in any form (*e.g.*, oral, sign, written).

**CONDUCTIVE HEARING LOSS:** Hearing loss due to failure of the bone levers in the middle ear to transmit sound vibrations to the cochlea.

**CONFIGURATIONS:** (in articulation therapy) Patterning of sounds in proper sequence.

**CONTACT ULCERS:** A breakdown in the tissues of the vocal cords, usually near their posterior attachments to the arytenoid cartilages.

**CONTENT WORDS:** (Contentives) Words such as nouns and verbs that carry the major burden of meaningfulness.

**CONTINGENT:** Following as a consequence of some preceding behavior.

**CONTINUANT:** A speech sound which can be prolonged without distortion; e.g., s or f or u.

**COVERT:** Hidden behavior; inner feelings, thoughts, reactions.

**CREATIVE DRAMATICS:** An improvised, unrehearsed play acted spontaneously by a group of children with the unobtrusive aid of an adult leader.

**CV:** A syllable containing the consonant-vowel sequence as in "he" or "so" or "ha."

**CVC:** A syllable containing the consonant-vowel-consonant sequence, as in the first syllable of the word "containing" (con).

**DECIBEL:** A unit of sound intensity.

**DELAYED AUDITORY FEEDBACK:** The return of one's own voice as an echo.

**DENTAL:** Pertaining to teeth. A dentalized l sound is made with the tongue tip on the upper teeth.

**DEEP TESTING:** The exploration of an articulation case's ability to articulate a large number of words, all of which include one specific sound, to discover those in which that sound is spoken correctly.

**DESENSITIZATION:** The toughening of a person to stress; increasing the person's ability to confront his problem with less anxiety, guilt, or hostility; a type of adaptation to stress therapy used for beginning stutterers.

**DIADOCHOKINESIS:** The maximum speed of a rhythmically repeated movement.

**DIFFERENTIAL DIAGNOSIS:** The process of distinguishing one disorder from another.

**DIFFERENTIATION:** The functional separation of a finer movement from a larger one with which it formerly coexisted.

**DIPHTHONG:** Two adjacent vowels within the same syllable which blend together.

**DISTORTION:** The misarticulation of a standard sound in which the latter is replaced by a sound not normally used in a language. A lateral lisp is a distortion.

**DYSARTHRIA:** Articulation disorders produced by peripheral or central nerve damage.

**DYFLUENCIES/DYSFLUENT SPEECH:** Refers to a breakdown of the complex integration and timing of the patterns of respiration, phonation, and articulation, or a breakdown in the ability to automatically retrieve and sequence the words desired to convey a message.

**DYSLALIA:** Functional (nonorganic) disorders of articulation.

**DYSPHASIA:** The general term for aphasic problems.

**DYSPHEMIA:** A poorly timed control mechanism for coordinating sequential utterance. It is variously conceived as being due to a constitutional and hereditary difference or to psychopathology. It reflects itself in stuttering and cluttering.

**DYSPHONIAS:** Disorders of voice.

**EAR TRAINING:** Therapy devoted to self-hearing of speech deviations and standard utterance.

**ECHOLALIA:** The automatic involuntary repetition of heard phrases and sentences.

**ECHO SPEECH:** A technique in which the case is trained to repeat instantly what he is hearing, following almost simultaneously the utterance of another person. Also called "shadowing".

**EGO STRENGTH:** Morale or self-confidence.

**ELECTROENCEPHALOGRAM (E.E.G.):** The record of brain waves of electrical potential. Used in diagnosing epilepsy, tumors, or other pathologies.

**EMBOLISM:** A clogging of a blood vessel as by a clot.

**EPIGLOTTIS:** The shield-like cartilage that hovers over the front part of the larynx.

**ESOPHAGEAL SPEECH:** Speech of laryngectomized persons produced by air pulses ejected from the esophagus.

**ESOPHAGUS:** The tube leading from the throat to the stomach.

**ETIOLOGY:** Causation.

**EUNUCHOID VOICE:** A very high pitched voice similar to that of a castrated male adult.

**EUSTACHIAN TUBE:** The air canal connecting the throat cavity with the middle ear.

**EXPRESSIVE APHASIA:** The difficulty in sending meaningful messages, as in the speaking, writing, or gesturing difficulties of the aphasic. Executive aphasia.

**FALSETTO:** Usually the upper and unnatural range of a male voice produced by a different type of laryngeal functioning.

**FAUCES:** The rear side margins of the mouth cavity which separate the mouth from the pharynx.

**FEEDBACK:** The backflow of information concerning the output of a motor system. Auditory feedback refers to self-hearing; kinesthetic feedback to the self-perception of one's movements.

**FIGURATIVE LANGUAGE:** Refers to the use of words to express a concept in terms usually used to denote another. Figurative language is not meant to be taken literally; it departs from the ordinary meaning of words to emphasize ideas and feelings or help others see things in new and unusual ways. Metaphors and similes are examples of figurative language.

**FIXATION:** In stuttering, the prolongation of a speech posture.

**FLACCID:** Passively uncontracted, limp.

**FRENUM:** The white membrane below the tongue tip.

**FLUENCY:** Unhesitant speech.

**FRICATIVE:** A speech sound produced by forcing the airstream through a constricted opening. The f and v sounds are fricatives. Sibilants are also fricatives.

**FUNCTION WORDS (functors):** Words which indicate action, arrangement, and relationship. Examples: prepositions, articles, adverbs, and conjunctions.

**GLIDE:** A class of speech sounds in which the characteristic feature is produced by shifting from one articulatory posture to another. Examples are the y [j] in you, and the w in we.

**GLOTTAL CATCH (or stop):** A tiny cough-like sound produced by the sudden release of a pulse of voiced or unvoiced air from the vocal folds.

**GLOTTAL FRY:** A ticker-like continuous clicking sound produced by the vocal cords.

**GLOTTIS:** The space between the vocal cords when they are not brought together.

**GUTTURAL VOICE:** A low-pitched falsetto.

**HARD CONTACTS:** Hypertensed fixed articulatory postures assumed by stutterers in attempting feared words.

**HARELIP:** A cleft of the upper lip.

**HEMIPLEGIA:** Paralysis or neurological involvement of one side of the body.

**HYPERACTIVITY:** Excessive and often-random movements as often shown by a brain-injured child.

**HYPERNASALITY (Rhinolalia aperta):** Excessively nasal voice quality.

**HYPONASALITY:** Lack of sufficient nasality, as in the denasal or adenoidal voice.

**IDENTIFICATION:** In articulation therapy, the techniques used to recognize the essential features of the correct sound or its error.

**IDIOGLOSSIA:** Self-language with a vocabulary invented by the child.

**INCIDENCE:** Frequency of occurrence.

**INCISOR:** Any one of the four front teeth in the upper or lower jaws.

**INFANTILE SWALLOW:** A form of swallowing in which the tongue is usually protruded between the teeth.

**INFLECTION:** A shift in pitch during the utterance of a syllable.

**INTERDENTAL:** Between the teeth.

**INTERIORIZED STUTTERING:** A form of stuttering behavior in which no visible contortions or audible abnormalities are shown, but a hidden struggle usually in the larynx or breathing musculature is present. Also characterized by clever disguise reactions.

**ISOLATION TECHNIQUES:** Activities used to locate the defective sound in utterance.

**JARGON:** Continuous but unintelligible speech.

**KERNAL SENTENCES:** The early primitive sentences forms from which other transformations later develop.

**KINESTHESIA:** The perception of muscular contraction or movement.

**KINETIC ANALYSIS:** The analysis of error sounds in terms of the movement patterns.

**LALLING:** An articulatory disorder characterized by errors on sounds produced by lifting the tip of the tongue such as l and r.

**LAMBDAICISM:** Defective l sound.

**LANGUAGE PROCESSING RATE:** Refers to how quickly one can hear and interpret language.

**LARYNGEAL:** Refers to that which is associated with the larynx.

**LARYNX:** Refers to the upper portion of the trachea which contains the vocal chords.

**LATERAL:** A sound such as l in which the airflow courses around the side of the uplifted tongue. One variety of lateral lisp is so produced.

**LARYNGEAL :** Pertaining to the larynx.

**LARYNGOLOGIST:** A physician specializing in diseases and pathology of the larynx.

**LINGUAL:** Pertaining to the tongue. A lingual lisp is identical with an interdental lisp.

**LISP:** An articulatory disorder characterized by defective sibilant sounds such as the s and z.

**MALLEUS:** The bone of the middle ear which rests against the eardrum.

**MALOCCLUSION:** An abnormal bite.

**MANDIBLE:** Lower jaw.

**MAXILLA:** Upper jaw.

**MEAN LENGTH OF UTTERANCE (MLU):** Refers to the average number of morphemes in an utterance.

**MEDIAL:** The occurrence of a sound within a word but not initiating or ending it.

**MEDIAN:** Midline, in the middle.

**MODELED SOUNDS:** Refers to sounds which are produced correctly as a demonstration, prior to the student being asked to imitate the production of that sound as it was demonstrated.

**MONAURAL:** Hear with one ear.

**MONITORING:** Checking and controlling the output of speech.

**MONOPITCH:** Speaking in a very narrow pitch range, usually of one to four semitones.

**MORPHEME:** Refers to the smallest, meaningful unit of speech. Morphemes can have meaning or a grammatical function. A morpheme can be as small as the /s/ in the words *cats*, or it can be an entire word such as the word "language" which has meaning and cannot be broken into any smaller meaningful units. Another example would be the -ed ending on words such as "followed" or "talked".

**MOTOKINESTHETIC METHOD:** A method for teaching sounds and words in which the therapist directs the movements of the tongue, jaw, and lips by touch and manipulation.

**MUCOSA:** The mouth and throat linings which secrete mucus.

**MUTISM:** Without speech. Voluntary mutism: refusal to speak.

**MYASTHENIA:** Muscular weakness.

**NARES:** Nostrils.

**NARRATIVE:** Refers to the type of discourse which involves an introduction of characters, the description of a scene, an event which involves a problem, the solving of the problem, and a conclusion. A sequence of events is "narrated" or told.

**NASAL LIP:** The substituting of a snorted unvoiced n for the sibilant sounds.

**NASOPHARYNX:** That part of the throat, pharynx, above the level of the base of the uvula.

**NEGATIVE PRACTICE:** Deliberate practice of the error or abnormal behavior.

**NERVE DEAFNESS:** Loss of hearing due to inadequate functioning of the cochlea, auditory nerve, or hearing centers in the brain.

**NONFLUENCY:** Pause, hesitation, repetition, or other behavior which interrupts the normal flow of utterance.

**NONVERBAL:** Refers to communication which takes place without spoken words. Nonverbal communication could include drawings, sign language, pointing to pictures/symbols, gestures, facial expressions, etc.

**NUCLEUS:** A central core. Nucleus situations are those in which the case tries especially hard to monitor his speech so as to improve it.

**OBTURATOR:** An appliance used to close a cleft or gap.

**OCCLUDED LISP:** The substitution of a t or a ts for the s or the d and dz for the z.

**OMISSION:** One of the four types of articulatory errors. The standard sound is replaced usually by a slight pause equal in duration to the sound omitted.

**OPERANT CONDITIONING:** The differential reinforcement of desired responses.



**OPPOSITION BREATHING:** Breathing in which the thorax [chest] and diaphragm work oppositely against each other in providing breath support for voice.

**OPTIMAL PITCH LEVEL:** The pitch range at which a given individual may phonate most efficiently.

**ORAL:** Refers to the language uttered by the mouth as in spoken words.

**ORTHODONTIST:** A dentist who specializes in repositioning of the teeth.

**OSCILLATIONS:** Rhythmic repetitive movements, repetitions of a sound, syllable, or posture.

**OTOLOGIST:** A physician who specializes in hearing disorders and diseases.

**OVERT:** Clearly visible or audible behavior.

**PALPATION:** Examining by tapping or touching.

**PARALLEL TALK:** A technique in which the therapist provides a running commentary on what the case is doing, perceiving, or probably feeling.

**PARAPHASIA:** Aphasic behavior characterized by jumbled, inaccurate words.

**PERSEVERATION:** The automatic and often involuntary continuation of behavior.

**PHARYNGEAL FLAP:** A tissue bridge between the soft palate and the back wall of the throat.

**PHARYNX:** The throat.

**PHONATION:** Voice.

**PHONEMIC:** Refers to a group of very similar sounds represented by the same phonetic symbol.

**PHONETIC PLACEMENT:** A method for teaching a new sound by the use of diagrams, mirrors, or manipulation whereby the essential motor features of the sound are made clear.

**PHONOLOGY IMPAIRMENT:** Refers to an inability to understand use the rules of phonology, which result in the reduced intelligibility of speech. The disorder may have a concomitant effect on the morphological system.

**PHONOLOGY:** Refers to the subsystem of language that governs the structure, distribution, and sequencing of speech sounds or phonemes.

**PITCH BREAKS:** Sudden abnormal shifts of pitch during speech.

**PLOSIVE:** A speech sound characterized by the sudden release of a puff of air. Examples are p, t, g.

**PRESBYCUSIS:** The hearing loss due to old age.

**PROBOSCIS:** Nose.

**PROGNOSIS:** Prediction of progress.

**PROPOSITIONALITY:** The meaningfulness of a message or utterance; its information content.

**PROPRIOCEPTION:** Sense information from muscles, joints, or tendons.

**PROSODY OF SPEECH:** Refers to the rhythm of an utterance which is affected by changes in pitch, stress, or pause.

**PROSTHODONTIST:** A dentist specialist who makes prostheses.

**PYKNOLEPSY:** A mild form of epilepsy characterized by stoppages in speech, among other things.

**RECEPTIVE APHASIA:** Aphasia in which the major deficits are in comprehending.

**RESONANCE:** The quality of voiced sounds. The quality depends on the vibration in the oral, nasal, and laryngeal cavities.

**RHINOLALIA:** Excessive nasality.

**RHOTACISM:** Articulatory errors involving the production of the r sounds.

**SECONDARY STUTTERING:** Refers to the advanced forms of stuttering in which awareness, fear, avoidance, and struggle are shown.

**SELF-TALK:** An audible commentary by the person describing what he is doing, perceiving, or feeling.

**SEMITONE:** A half-note, a half-step on a musical scale.

**SEPTUM:** The partition between the right and left nasal cavities formed of bone and cartilage.

**SIGMATISM:** Lispering.

**SONANT:** A voiced sound.

**SPASTIC:** [noun] An individual who shows one of the varieties of cerebral palsy.  
[adjective] Characterized by highly tensed contractions of muscle groups.

**SPASTIC DYSPHONIA:** A voice disorder in which phonation is produced only with great effort and strain.

**SPONTANEOUS LANGUAGE SAMPLE:** Obtaining a collection of utterances from an individual for the purpose of analysis. The term spontaneous refers to the fact that these utterances should occur in natural conversation and not as a result of questioning, reading, modeling, or imitation formats.

**STABILIZATION:** The process of making a response permanent and unfluctuating.

**STAPES:** The innermost bone of the middle ear.

**STAPEDECTOMY:** Surgical removal of the stapes.

**STOP CONSONANT:** A sound characterized by piercing, whistling sounds.

**STRIDENT VOICE:** Harsh voice quality.

**SUBSTITUTIONS:** The replacement of one sound by another sound.

**SUBSYSTEM:** One component of the entire system of language. The system of language contains the subsystems of phonology, morphology, and syntax.

**SUPRASEGMENTAL FEATURES:** Refers to the pitch, intonation, stress, or pauses of spoken language, used to change the function or content of the communication. For example, by changing the intonation contour of a sentence from a falling contour to a rising contour it is possible to change the statement, "He is going downtown" to a question, "He is going downtown?"

**SURD:** Unvoiced sound such as the s as opposed to its cognate z which is voiced or sonorant.

**SYNTAX:** The grammatical structure of a language.

**SYNTAX/MORPHOLOGICAL SHIFT:** How words can differ in their use depending upon the view of the speaker and listener, the context of the speech event, and the content of the message.

**TACHYLALIA:** Extremely rapid speech.

**TACTILE FEEDBACK:** The monitoring of the incorrect or correct production of sounds. This can be done in two ways. One way is to feel the placement of the tongue in the mouth. Each sound corresponds to a correct physical relationship between the tongue, teeth, lips, hard and soft palate, etc. The second way is to feel for vibration in the vocal cords when producing voiced and unvoiced sounds. When learning to monitor through tactile feedback, the student learns to feel the position of the tongue in the mouth in relation to the teeth, lips, palate, etc. and to monitor the presence or absence of vibration in the vocal cords.

**TEMPO:** Rate of utterance.

**TINNITUS:** Ringing noises in the ear.

**TOOTH PROP:** A small wooden or plastic peg to be held between the teeth.

**TREMOR:** The swift, tremulous vibration of a muscle group.

**TYMPHONIC MEMBRANE:** The eardrum.

**UVULA:** The hanging portion of the soft palate. The velar tail.

**VELUM:** Soft palate.

**VELOPHARYNGEAL CLOSURE:** The more or less complete shutting off the nasopharynx.

**VENTRICULAR PHONATION:** Voice produced by the vibration of the false vocal folds.

**VERBAL:** A form of communication that uses words as the primary medium Verbal language can refer to spoken or written words.

**VOCAL FOLDS:** The portion of the larynx which, when caused to vibrate as air is expelled from the lungs, produces sounds.

**VOCAL PLAY:** In the development of speech, the stage during which the child experiments with sounds and syllables.

**VOICING:** The addition of laryngeal vibration to the production of sound. For example, when laryngeal vibration is added to the phoneme /s/, it becomes /z/, as in "this" versus "these".