

HEARING CONSULTANT **GLOSSARY OF TERMS**

Absence of Sound: When there is silence or no sound present.

Acoustic Highlighting: Specific strategies or techniques used to make speech more audible for a child. Some examples of acoustic highlighting include making a sound longer, using a slightly higher pitch for the word or phoneme your child did not hear, whispering certain sounds, pausing before and after the target phoneme or word, etc.

Adjective: A word that describes something.

Articulation: The way your child pronounces the sounds in your language.

Assistive Listening Device: Any type of electronic hearing aid, including FM systems.

Audible: Capable of being heard by you or your child.

Audiogram: A chart that shows your child's ability to different pitches. Loudness (i.e. intensity) is depicted from top to bottom and pitch (i.e. frequency) is depicted from left to right.

Audiologist: A professional with a degree in the science of hearing who conducts hearing tests, evaluates hearing loss, and fits amplification devices.

Auditory Bombardment: Providing numerous opportunities for your child to hear the target phoneme, sound or language. Bombardment is all about your child's listening experience; imitation is not a part of bombardment.

Auditory Brainstem Response (ABR): A hearing test in which sensors are placed on your child's head to measure the brain's response to sounds directly. This test can be performed under natural sleep conditions or under sedation. It is painless.

Auditory Closure: When you say a line of a song or rhyme, leaving off the last word, and your child fills in by saying the word himself.

Auditory Comprehension: Your child's ability to listen to what you say and understand the message, without any gesture or visual aids.

Auditory Feedback: The system your child needs to develop in order to hear your model, imitate it, and listen to his own production to ensure it matched your model.

Auditory Memory: The mechanism your child uses to remember what has been said.

Auditory Signal: The stimulus to which your child is listening. (e.g. live voice, taped, distant, in noise, etc)

Awareness of Sound: When your child notices a sound in the environment. You can tell he has heard a sound or your voice by his actions: head turn, becoming quiet, participating in a conditioned response, etc.

Babble: The repetition of consonant + vowel (CV) syllables and combinations. (e.g. “dadada”)

Behavioral Observation Audiometry: With this type of testing, the audiologist watches your baby’s face and changes in behavior in response to sound to determine what your baby hears. A pediatric audiologist is trained to look for your baby to do things such as change his sucking pattern, widen his eyes, or turn his head. It can be used with infants, but never without other supporting tests.

Coarticulation: The ability to produce speech sounds in words correctly regardless of the phonemes preceding and following them.

Cochlear Implant: A surgically implanted electronic device that stimulates nerve endings in the inner ear to help provide a sense of hearing. Cochlear implants are generally used when hearing loss is so severe that hearing aids provide minimal benefit.

Cognition: The process your child uses to think.

Communication: Interaction, either verbal or non-verbal, between you and your child to make needs and wants understood.

Comprehend: The ability to show understanding of a word, phrase or sentence by acting on the information or adding to the information. The ability to use the information for a new purpose.

Conditioned Play Audiometry: A game you play with your child where he is listening and does something to indicate he has heard the sound. He may turn, put an object in a jar, etc. May also be referred to as “Play Audiometry” or “Listen and Drop” tasks.

Consonants: Speech sounds in language produced by constricting or closing the vocal track.

Context: The situation or circumstances around your house and environment that help your child understand language.

Critical Unit/Element: When establishing your child's auditory memory, you build his ability by introducing one piece of information at a time. A critical unit is a piece of information which needs to be remembered.

Decibel (dB): A measure of loudness.

Delayed Imitation: When you provide a model for your child and he/she doesn't imitate it immediately but does imitate after a few minutes. A delay of several minutes does not constitute a spontaneous production; it is considered a delayed imitation.

Detect: The ability to hear something. The lowest level of auditory hierarchy.

Developmental Level: The stage at which many skills are mastered. Developmental levels are correlated with ages.

Diphthongs: Speech sounds in language made by producing two vowel sounds together.

Discriminate: The ability to hear the difference between sounds. Your child shows he can discriminate differences in sounds by producing a difference.

Duration: The length of a sound, syllable, word or phrase.

Early Learning to Listen Sound (ELTL): A sound associated with an object, animal or daily phrase which is easier for your child to hear and imitate than the actual word in the early stages of listening. (e.g. cow is associated with “moo”)

Environmental Sounds: Sounds your child hears that are not made by voice. Typical environmental sounds are doorbells, dogs barking, water running, etc.

Expansion: Listening to your child's language, repeating all or part of it, and adding more information or raising it to the next level.

Expressive Language: All the sounds, words and phrases that your child says himself.

Expressive Vocabulary: The words your child uses spontaneously and without assistance.

Fine Motor: Movements made by your child using his hands, fingers and smaller muscles.

FM System: A wireless device used to improve listening conditions for your child. Your child wears a receiver on his device and you wear a transmitting microphone. It is used to help poor listening conditions caused by noise or distance.

Frequency: Also referred to as pitch, frequency is measured in Hertz.

Generalizing: Moving a goal from a well-known, familiar context into wider, lesser known contexts. Broadening your child's understanding of a word or concept.

Gesture: A hand or body movement used to communicate either without using your voice or in conjunction with your voice.

Gross Motor: Movements made by your child using his arms, legs, body and larger muscle movements.

Hertz: The measurement of frequency or pitch.

Identify: The ability to choose the correct object based on the performative or word.

Imitated Production: When your child listens to you say a sound, word or phrase and he repeats part or all of what you said.

Imitation on Demand: When you say something to your child, a sound, word or phrase, and then require your child to repeat.

Intelligibility: How easily your child's speech is understood by you and others.

Intelligible: The words and phrases spoken by your child can be understood by you and others.

International Phonetic Alphabet (ITPA): A system of symbols representing all the sounds in a language.

Jargon: When your child puts words and sounds together into speech-like (inflected) patterns.

Known Context: A setting or situation with which your child is familiar and comfortable.

Language Sample: Writing down everything your child says (all consecutive utterances) for a set period of time.

Ling Sounds: The six phonemes Dr. Daniel Ling assigned to assess if a child had access to the entire speech spectrum in English. (/m/ /u/ /a/ /i/ /š/ and /s/.

Literacy: The ability to read and write.

Live Voice: When you or someone else speaks to your child using real voice and not tape recorders, television, DVDs or CDs.

Modeling: Showing your child what to do either verbally or non-verbally.

Modifier: A word that describes something or adds more information.

Nasals: Phonemes made by sending air through the nasal passage: “m, n, ng.”

Non-Verbal: Gestures, signs, body language.

Noun: A word that names something: person, place or thing.

Otoacoustic Emissions (OAE): This test involves placing a probe in the ear canal to measure the inner ear’s responses to sound. Absent OAEs may indicate a hearing loss. Like the ABR, OAEs are painless.

Otolaryngologist: Also referred to as an Ear, Nose, and Throat doctor, an otolaryngologist is a physician who has advanced training in disorders of the ear, nose, throat, head, and neck.

Otologist: A physician who specializes in diagnosis and treatment of hearing loss and other disorders of the ear.

Parentese: Also known as “motherese,” the way adults speak to babies and young children. They tend to speak in shorter phrases, use more repetition and use a sing-song voice which is more interesting to listen to and easier to hear.

Performative: Another term for an ELTL Sound: The sound associated with an object, animal or early phrase which is easier for your child to hear and imitate than the actual word(s).

Phoneme: The smallest unit of sound in a language; the individual sounds that make up a word.

Plosives: Phonemes made by sending air through the nasal passage: /m/, Phonemes produced by building up air pressure in the vocal tract and forcefully expelling the air to form the sound. /p/ /b/ /t/ /d/ /k/ /g/.

Pragmatic Categories: The different reasons you and your child communicate: request, protest, comment, greet, etc.

Pragmatic Reason: Creating a natural need for your child to do something.

Pragmatics: The reason behind the way we use language.

Preposition: A word that indicates a location where something is found.

Presence of Sound: When there is an audible sound in the environment to which we expect your child to respond.

Preverbal: Communication used by your child before he learns language or actual words and phrases.

Prompt: A technique used to get your child to imitate or speak spontaneously.

Prosody: The melody or inflection found in phrases and sentences.

Receptive Language: All of the sounds, words and phrases that your child understands.

Receptive Vocabulary: The words your child understands and identifies.

Residual Hearing: The amount of usable hearing that a person who is deaf or hard of hearing has.

Reversing Roles: Change the person leading the activity.

Round Robin Method: Modeling the target behavior for your child and then everyone in the group takes a turn doing exactly what you modeled. Your child will take a turn after watching a few people.

Sandwich Technique: Providing an auditory model for your child to listen to first, then if necessary, adding vision or a tactile cue, and ending with the auditory model again.

Self-Talk: Talking about what you are doing so your child hears the language of the activity you and he are doing together. Self-talk typically begins with "I." (e.g. "I am stacking the blocks up higher and higher.")

Semantic Categories: The organization of language via the grouping of words by the meaning attached to them.

Semantics: The meaning of the language we use.

Sound Book: A book you make with your child by adding pages every week consisting of the goals you are targeting with your child.

Speech: The way the sounds of language are produced.

Speech Spectrum: The area on the audiogram covering the frequencies used in spoken language.

Spontaneous Imitation: When your child hears you say something and he automatically repeats it without your prompting him to do so.

Spontaneous: When your child does or says something without a model or help from you.

Spontaneous Production: When your child says something himself, without hearing you or someone else say it first.

Stimulus Response Activity: See **Conditioned Play Audiometry**.

Suprasegmentals: The rate, rhythm and melody of your language which you use to convey meaning and enhance your communication.

Syllable: The building block of words, usually consisting of a vowel and consonant. The number of 'beats' in a word or phrase.

Technique: The way you do something.

True Word: When your child uses the same vocalization to mean the same thing over time,

and this is recognized by you. His articulation does not need to be accurate in order for the production to be a true word.

Tympanometry: Sometimes referred to as impedance testing, this test measures the movement of the eardrum and the ability of the middle ear to conduct sound to the inner ear.

Unintelligible: The words and phrases spoken by your child cannot be understood.

Unknown Context: A new setting or less familiar setting for your child to experience.

Utterance: Anything your child says.

Verb: An action word.

Verbal: Spoken words, phrases, sentences.

Visual Reinforcement Audiometry: With this test, the audiologist directs your child toward a toy that lights up or moves when the child looks at it in response to sound. This test is usually given to children between six months and two years of age.

Vocabulary: The words used in your child's language.

Vocal: Any sound produced by your child.

Vocal Tract: The mechanism in your body which you use to produce sound. Air is forced from the lungs through your vocal tract in order for you to produce sounds.

Vocalization: Any sound made while using your voice or vocal tract.

Vocalize on Demand: When you say something to your child, a sound, word or phrase, and then require your child to repeat.

Voiced: Turning the voice on, making a sound using the voice box.

Voiceless: Turning the voice off, making a sound using only air.

Vowels: Speech sounds in spoken language produced with an open vocal track. (a,e,i,o,u)

Wait Time: The pause you use after you speak to give your child time to think, imitate or speak. Counting slowly to ten is good technique to ensure your child has enough time.

The above words and definitions were adapted from the following sources:

<http://www.cochlear.com/files/assets/documents/Glossary.pdf>

Dreams Made Real--A handbook for parents of children who are deaf or hard of hearing.