

## Understanding Speech-Language Terms

Here are some terms you might see in a speech and language report written by a speech-language pathologist (S-LP):

**Speech-Language Pathologist:** A person trained to evaluate and treat delays or disorders of speech and language. An S-LP usually has 5 or 6 years of university training.

**Speech:** The sounds we make with our voice and mouthparts that make up words and sentences. The speech sounds are what we work on in speech therapy.

**Language:** How we create meaning from speech and written language. The parts of language include words, grammar, and word order in sentences. In written language, we use punctuation and paragraph rules to help make things meaningful. In spoken language, we use tone of voice, facial expressions and body language to change or add to meaning.

**Comprehension:** A person's ability to understand, make sense of and remember spoken or written information. This is often referred to as *receptive language*.

**Expression:** A person's ability to use his language skills to communicate with others and make his wants, needs or ideas known to others. This is often referred to as *expressive language*.

**Articulation:** The way in which we make speech sounds. Articulation requires accurate muscle movements and coordination of the tongue, lips, palate and larynx (vocal cords or voice box).

**Phonology:** The sound system of a language and how we use the sounds in syllables and words. Some students are physically able to articulate speech sounds but have difficulty knowing which sounds belong where due to a phonological disorder.

**Phonemes:** The sounds of a language (not the letters), although in written language letters do represent sounds (phonemes).

**Speech Delay:** When a child learns to say specific speech sounds later than expected. (e.g. "tat" for "cat" at age 5, or "wabbit" for "rabbit" at age 8).

**Speech Disorder:** When a child makes speech sound errors that are different from the usual pattern of development (e.g. saying “un” for sun or “koon” for spoon). Speech disorders can arise from phonological disorders or oral motor difficulties.

**Apraxia of Speech:** A motor speech disorder that involves difficulty planning and making the sequence of movements of the lips, tongue, and vocal chords to form sounds and words.

**Target:** The target is what we are hoping to teach, so if a child says “yawn” for “lawn”, the target will be the beginning “L” sound. In speech and language therapy, the SLP may have several targets and will plan the steps in which to work on each target.

**Stimulable:** If a student can say a sound (or other target) when we show him how to say it, we say he is stimulable for that sound (or target).

**Intelligibility:** How much of a person’s speech is understandable to the listener. Poor intelligibility means his or her speech is very difficult for most people to understand.

**Carryover:** When the student uses his speech skills correctly in everyday conversation. This is sometimes termed generalization.

**Dysfluency:** Most commonly referred to as “stuttering”, dysfluency can involve repeating sounds in words (e.g. b-b-b-bat), holding on to sounds too long (e.g. ssssssun) or getting silently stuck while trying to say a word.

**Voice and Resonance Disorders:** A range of disorders that can involve hoarseness, loss of voice, or a voice with too much or too little nasality. Students with voice disorders are usually evaluated by an Ear Nose and Throat Specialist (ENT) to decide whether there are physical reasons for their voice or resonance differences.

**Audiologist:** A specialist who is trained to evaluate hearing and if needed, recommend hearing aids and help people learn to use them. Like S-LPs, Audiologists usually have 5 or 6 years of university training.

