

## CHAPTER 2

### TYPICAL AND DISORDERED COMMUNICATION

1. Which of the following is the most accurate definition of the term 'communication'?
  - a. It is an exchange between senders and receivers.
  - b. It is another word for speech.
  - c. It is the process of self-expression.
  - d. It is the exclusively human quality to talk to other humans.
  
2. \_\_\_\_\_ is how cultural identity, setting, and participants influence communication.
  - a. Communication
  - b. Sociolinguistics
  - c. Psycholinguistics
  - d. Multiculturalism
  
3. Our cultural identity refers to
  - a. Our language
  - b. Our cultural communities
  - c. Both of the above
  - d. None of the above
  
4. Grammar refers to
  - a. The rules of a language
  - b. The recognition by a native speaker of whether something is said "right" or "wrong"
  - c. Only the sound system of a language
  - d. The process of producing the acoustic representation of language
  
5. What does it mean that languages are generative and dynamic?
  
6. What are the three primary components of language?
  - a. Phonology, morphology, syntax
  - b. Form, content, use
  - c. Semantics, syntax, pragmatics
  - d. Phonology, phonotactic rules, morphology
  
7. Form consists of
  - a. Phonology, morphology, syntax
  - b. Semantics, syntax, pragmatics
  - c. Phonology, phonotactic rules, morphology
  - d. None of the above
  
8. Briefly explain how phonology and phontactic rules differ.
  
9. Briefly explain morphology, morphemes, free morphemes, and bound morphemes.
  
10. \_\_\_\_\_ is how words are arranged in a sentence and the ways in which one word may affect another.
  - a. Syntax
  - b. Semantics
  - c. Morphology
  - d. Pragmatics

11. Content consists of
  - a. Syntax and semantics
  - b. Pragmatics
  - c. Semantics
  - d. Morphology and phonology
  
12. \_\_\_\_\_ refers to the content or meaning of language, whereas \_\_\_\_\_ refers to the pieces of meaning that define a particular word
  - a. Morphemes, morphology
  - b. Morphology, morphemes
  - c. Semantic features, semantics
  - d. Semantics, semantic features
  
13. Use consists of
  - a. Syntax and semantics
  - b. Pragmatics
  - c. Semantics
  - d. Morphology and phonology
  
14. \_\_\_\_\_ is how and why we use language; it varies with culture.
  - a. Syntax
  - b. Communication
  - c. Speech
  - d. Pragmatics
  
15. Speech consists of articulation and fluency. Briefly describe both.
  
16. Voice can reveal things about the speaker and the message. \_\_\_\_\_ is a listener's perception of how high or low a sound is, \_\_\_\_\_ is the basic tone that an individual uses most of the time, and \_\_\_\_\_ is the pitch movement within an utterance.
  - a. Habitual pitch, pitch, intonation
  - b. Intonation, pitch, habitual pitch
  - c. Pitch, intonation, habitual pitch
  - d. None of the above
  
17. About 2/3 of human meaning exchange is
  - a. Verbal
  - b. Vocal
  - c. Nonverbal
  - d. Nonvocal
  
18. \_\_\_\_\_ refer to how you look, your clothes, your possessions, music you listen to, etc.
  - a. Kinesics
  - b. Proxemics
  - c. Artifacts
  - d. Tactiles
  
19. \_\_\_\_\_ refer to the way we move our body, or body language.
  - a. Kinesics
  - b. Proxemics
  - c. Artifacts
  - d. Tactiles
  
20. Briefly (in 6-10 sentences) explain communication through the lifespan. Be sure to touch on how infants learn language, potential complicating factors, and how we end up being competent communicators.

21. \_\_\_\_\_ refer to the physical distance between people as it affects communication.
- Kinesics
  - Proxemics
  - Tactiles
  - Chronemics
22. \_\_\_\_\_ refer to touching behaviors.
- Kinesics
  - Proxemics
  - Tactiles
  - Chronemics
23. \_\_\_\_\_ refer to the effect of time on communication.
- Kinesics
  - Proxemics
  - Tactiles
  - Chronemics
24. \_\_\_\_\_ is the cause or origin of a problem, and may be used to classify a communication problem.
- Dialect
  - Etiology
  - Congenital disorder
  - None of the above
25. \_\_\_\_\_ disorders are present at birth, whereas \_\_\_\_\_ disorders are the result of illness, accident, or environmental circumstances later in life.
- Etiological, dialectal
  - Genetic, accidental
  - Congenital, acquired
  - Primary, secondary
26. Briefly describe disorders of form and potential etiologies.
27. Briefly describe disorders of content and potential etiologies.
28. Briefly describe disorders of use and potential etiologies.
29. \_\_\_\_\_ is a speech disorder caused by paralysis, weakness, or poor coordination of the speech musculature.
- Dysarthria
  - Apraxia
  - Dysphagia
  - Stuttering
30. \_\_\_\_\_ is a speech disorder that is due to neuromotor programming difficulties.
- Dysarthria
  - Dysphagia
  - Aphasia
  - Apraxia

31. In disorders of \_\_\_\_\_, the smooth, uninterrupted flow of speech is affected.
  - a. Articulation
  - b. Voice
  - c. Language
  - d. Fluency
32. Provide examples of the following: Fillers, hesitations, repetitions, and prolongations.
33. What is stuttering?
34. What are some habits that can affect normal voice production? What are other causes of voice disorders?
35. \_\_\_\_\_ is the term for excessive yelling, screaming, or loud singing. It can result in hoarseness or another voice disorder.
  - a. Vocal hygiene
  - b. Vocal abuse
  - c. Vocal strain
  - d. Vocal exertion
36. What is deafness?
37. Name three interventions for deafness.
38. What are the ways in which hearing loss can be categorized?
39. A hearing loss that is caused by damage to the outer or middle ear.
  - a. Conductive
  - b. Sensorineural
  - c. Mixed
  - d. None of the above
40. A hearing loss that is due to problems with the inner ear and/or auditory nerve.
  - a. Conductive
  - b. Sensorineural
  - c. Mixed
  - d. None of the above
41. Describe auditory processing disorders. Include symptoms, etiology, and population affected.
42. Explain the following phrase: "Communication disorders are often secondary to other disabilities." Give examples.
43. \_\_\_\_\_ is the number/percentage of people within a specified population who have a particular disorder or condition at a given point in time.
  - a. Incidence
  - b. Prevalence
  - c. Impaired population
  - d. None of the above

44. What percentage of the U.S. population has a communication disorder?
- 1%
  - 4%
  - 9%
  - 17%
45. Impairments of speech-sounds and fluency are more common in \_\_\_\_\_ than \_\_\_\_\_ and more common in \_\_\_\_\_ than \_\_\_\_\_.
- Children, adults, males, females
  - Adults, children, males, females
  - Children, adults, females, males
  - Adults, children, females, males
46. Describe the process of communication disorders assessment.
47. \_\_\_\_\_ distinguish(es) an individual's difficulties from the broad range of possible problems.
- Etiological factors
  - Genetic markers
  - Predisposing causes
  - Diagnosis
48. \_\_\_\_\_ refers to working with a client for a time to obtain a clearer picture of strengths and weaknesses.
- Response to intervention
  - Constraint-induced therapy
  - Diagnostic therapy
  - The cycles approach
49. A prognosis is
- An informed prediction of an outcome
  - A trigger for a disorder
  - A factor that continues or adds to a problem
  - None of the above
50. \_\_\_\_\_ tests yield scores that are used to compare a client with a sample of similar individuals.
- Dynamic assessment
  - Criterion referenced
  - Norm-referenced
  - All of the above
51. \_\_\_\_\_ tests evaluate a client's strengths and weaknesses with regard to particular skills.
- Dynamic assessment
  - Criterion referenced
  - Norm-referenced
  - None of the above
52. Name factors that influence intervention.
53. What are five objectives of intervention?

54. Baseline data is
- A measurement of the client's accuracy before beginning intervention
  - The data from a normative sample
  - Test scores from norm-referenced tests
  - None of the above
55. What is the A, B, C, and D of behavioral objectives?
56. Behavior modification includes
- Behavior and rewards
  - Stimulus and reinforcement
  - Extinguishing and punishing
  - None of the above
57. In incidental teaching,
- The SLP provides a stimulus and reinforces the response if it is correct
  - The parent is responsible for providing therapeutic intervention after instruction
  - The SLP follows the client's lead and teaches along the way
  - The child is encouraged to learn language skills from other children in the environment
58. What are the functions of support groups for communication disorders?
59. If therapy has been effective, the client is successful in
- Generalizing the learned skills
  - Self-correcting
  - Experiencing automaticity
  - All of the above
60. Briefly describe the follow-up and maintenance process.

**CHAPTER 2 – Answer key**  
**TYPICAL AND DISORDERED COMMUNICATION**

1. A
2. B
3. C
4. A
  
5. What does it mean that languages are generative and dynamic?  
Generative means that each utterance is freshly created  
Dynamic means that languages change over time
  
6. B
7. A
  
8. Briefly explain how phonology and phontactic rules differ.  
Phonology is the sound system of a language, whereas phonotactic rules specify how sounds may be arranged in words.
  
9. Briefly explain morphology, morphemes, free morphemes, and bound morphemes.  
Morphology involves the structure of words  
Morphemes are the smallest grammatical units of a language  
Free morphemes may stand alone as words  
Bound morphemes change the meaning of the original words and can only be attached to free morphemes
  
10. A
11. C
12. D
13. B
14. D
  
15. Speech consists of articulation and fluency. Briefly describe both.  
Articulation is the way speech sounds are formed. Fluency is the smooth, forward flow of communication, influenced by rhythm and rate. Rate is the speed at which we talk. Rate and rhythm are both components of prosody.
  
16. D
17. C
18. C
19. A
  
20. Briefly (in 6-10 sentences) explain communication through the lifespan. Be sure to touch on how infants learn language, potential complicating factors, and how we end up being competent communicators.  
Infants must first learn the rudiments of communication and begin to master speech. The early establishment of communication between children and caregivers fosters the development of speech and language, which influence the quality of communication. This is fostered by physical, cognitive, and social development. The key to becoming a communicator is being treated as one. The process of learning speech and language is a social one that occurs through interactions of children and the people in their environment. In different cultures, the type of child-caregiver interaction, the model of language presented to the child, and the expectations for the child differ, but each is sufficient for the learning of the language of the culture. Every person's speech and language continues to change until the end of life. A competent communicator continues to adapt to changes in the language and in the communication process.
  
21. B
22. C
23. D
24. B
25. C

26. Briefly describe disorders of form and potential etiologies.  
 Errors in sound use constitute a disorder of phonology.  
 Incorrect use of past tense or plural markers is an example of a disorder of morphology  
 Syntactical errors include incorrect word order and run-on sentences  
 May be due to sensory limitations, perceptual difficulties, limited exposure to correct models, etc.
27. Briefly describe disorders of content and potential etiologies.  
 Limited vocabulary, misuse of words, or word-finding problems  
 Difficulty understanding and using abstract language  
 May be due to limited experience, concrete learning style, strokes, head trauma, or certain illnesses.
28. Briefly describe disorders of use and potential etiologies.  
 Pragmatic impairments may stem from limited or unacceptable conversational, social, and narrative skills; deficits in spoken vocabulary; and/or immature or disordered phonology, morphology, and syntax  
 Might include difficulty staying on topic, providing inappropriate or incongruent responses to questions, or continually interrupting the conversational partner.
29. A  
 30. D  
 31. D
32. Provide examples of the following: Fillers, hesitations, repetitions, and prolongations.  
 Fillers: “er,” “um,” “ya know”  
 Hesitations: unexpected pauses  
 Repetitions: “g-g-g-go”  
 Prolongations: “wwwwwell”
33. What is stuttering?  
 When these speech behaviors (fillers, hesitations, repetitions, prolongations) exceed or are qualitatively different from the norm or are accompanied by excessive tension, struggle, and fear.
34. What are some habits that can affect normal voice production? What are other causes?  
 Physical tension, coughing, throat clearing, smoking, and drinking alcohol  
 Disease, trauma, allergies, neuromuscular disorders, endocrine disorders
35. B
36. What is deafness?  
 When a person’s ability to perceive sound is limited to such an extent that the auditory channel is not the primary sensory input for communication. It may be congenital or acquired.
37. Name three interventions for deafness.  
 Three of the following: Total communication, assistive listening devices, cochlear implants, auditory training
38. What are the ways in which hearing loss can be categorized?  
 Temporary or permanent  
 In terms of severity, laterality, and type  
 Severity may range from mild to severe (or profound)  
 The loss can be bilateral or unilateral  
 The type of loss can be conductive, sensorineural, or mixed
39. A  
 40. B



41. Describe auditory processing disorders. Include symptoms, etiology, and population affected.  
Individuals with APD may have normal hearing but difficulty understanding speech.  
Difficulty keeping up with conversation, understanding speech in noise, discriminating and identifying speech sounds, and integrating speech with nonverbals.  
Etiology is often unknown, but can be due to tumor, disease, or brain injury.  
Can occur in children or adults.  
May coexist with other disorders.
42. Explain the following phrase: "Communication disorders are often secondary to other disabilities." Give examples.  
Children or adults may have a disorder that causes a communication disorder. For example, children with cleft palate (primary) often have communication impairments associated with the cleft. Individuals with cerebral palsy (primary) often have difficulty in various areas of speech.
43. B
44. D
45. A
46. Describe the process of communication disorders assessment.  
Systematic process of obtaining information from many sources, through various means, and in different settings to verify and specify communication strengths and weaknesses, identify possible causes of problems, and make plans to address them. If a problem is identified, an SLP may make a diagnosis. A screening is not a diagnostic evaluation.
47. D
48. C
49. A
50. C
51. B
52. Name factors that influence intervention.  
Nature and severity of the disorder, the age and status of the client, environmental considerations, and personal/cultural characteristics of the client and clinician.
53. What are five objectives of intervention?  
The client should show improvement and this should generalize  
What has been learned should be largely automatic  
The client must be able to self-monitor  
The client should make optimum progress in the minimum amount of time  
Intervention should be sensitive to the personal and cultural characteristics of the client
54. A
55. What is the A, B, C, and D of behavioral objectives?  
Actor: Who is expected to do the behavior?  
Behavior: What is the observable and measurable behavior?  
Condition: What is the context or condition of the behavior?  
Degree: What is the targeted degree of success?
56. B
57. C
58. What are the functions of support groups for communication disorders?  
They can provide an avenue to practice what has been learned in therapy, share feelings about the disability, and maintain communication skills once formal treatment has been terminated.
59. D

60. Briefly describe the follow-up and maintenance process.  
Upon dismissal, the client or family should be encouraged to return if there is a need. A regular follow-up schedule can be established. Booster treatment may be provided if needed.

