The “State” of Phonetic Transcription in the Field of Communication Sciences and Disorders

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Editorial

Phonetic transcriptions, broad and narrow, are a valuable tool that can be used to inform speech-language pathologists (SLPs) about the status of speech and language skills of clients. “Phonetic transcription requires students to listen to spoken language and categorize individual speech sounds into phonemic categories despite the fact that the articulation and acoustic nature of the individual speech sounds may vary across linguistic contexts” [1]. Students desiring to become speech language pathologists are often required to study phonetics as it is pertinent to informing the diagnosis and treatment of individuals who may have speech/language disorders or differences (e.g., accents, dialects). Enrollment in a single phonetics course during an undergraduate communication sciences and disorders (CSD) program typically satisfies this requirement. However, this single requirement may not be sufficient. Accordingly, the current state of phonetic transcription in the field of CSD necessitates further analyses and increased awareness in order to ensure students are duly prepared to effectively implement and interpret phonetic transcriptions. There are several matters related to phonetic transcriptions that must be discussed including students’ individuality in and ease of learning phonetics; the content of current phonetic courses; and the application and frequency of use of phonetic transcription skills in clinical practice.

Examining students’ ease in learning phonetics has been a recent targeted research topic. Researchers have established that little information is known about why some students find it easier to learn phonetics than other students. Phonological awareness abilities have been identified as one skill that may predict how well students may do in phonetics courses [1, 2]. It has been suggested that phonetic course instructors administer phonological awareness tests to students in order to identify those that have difficulty with phonological awareness and implement interventions to assist these students in understanding phonetics better. Of course, other factors such as level of interest and motivation among others affect the level of ease for students. Additionally, the amount of practice, which helps to fine tune the ear to hear distinctive differences among similar and dissimilar sounding phonemes, may impact students’ success in phonetic courses. Sufficient practice facilitates students’ abilities to identify intricate changes in segmental values as error sounds approach target sounds, an important skill in measuring client progress. Guided and extensive practice may be limited for undergraduate students in the CSD program due to high enrollment. Lastly, students who do not perform well in a phonetic course may not be able to progress to the next stages of the undergraduate CSD curriculum as phonetics is often a prerequisite for other courses.

The content of phonetic courses is not governed by a common curriculum; therefore, the content of phonetic courses may vary from university to university. A typical phonetics course may include learning English International Phonetic Alphabet (IPA) symbols, broad transcription, transcription of disordered speech, and identification of phonological processes. A phonetics course may or may not include the teaching of diacritics. Although the aforementioned is a considerable amount of information to learn, it may not be sufficient for completing phonetic transcriptions effectively with a wide diversity of clients. The IPA chart contains over 100 symbols including consonants, vowels, diacritics, accents, and suprasegmentals. This is a substantial number of symbols to become familiar with and learn to identify and use in a single course. Nonetheless, it is pertinent that students learn non-English symbols because they may be representative of clients’ speech behaviors which consists of non-English sounds [3]. Teaching and using textbooks that only English IPA symbols is a disadvantage given the increasing number of English language learners (ELLs) in the United States. Because phonetics is studied earlier in the CSD curriculum, students may forget some of nuances of phonetic transcription when they begin to work in a clinical practicum. Furthermore, students may not feel as comfortable with completing phonetic transcriptions later during their matriculation or when they begin graduate school. This discomfort may become increasingly daunting for students who are unable to attend graduate school immediately after receiving their undergraduate degree in CSD. When students begin their graduate program in CSD, they no longer receive direct training in phonetics unless they have an undergraduate degree outside the study of CSD.

Finally, there is the application of phonetic transcription skills learned in clinical practice. Because phonetics is studied early on, seldom do students get ample practice with “real-life” cases. Although students learn phonetic transcription, they are not able to get hands on practice until they begin clinical practicum in graduate school. Other factors that may influence students’ application of phonetic transcriptions in clinical practicum are the number of and diagnosis/es of clients; some clients may not require phonetic transcription as a part of their assessment protocol. Additionally, students may use other procedures in lieu of phonetic transcriptions such as using data tracking to monitor client progress. As a result, the less experience students have in conducting phonetic transcriptions, the less apt they are at becoming proficient in this skill. This lack of proficiency may be reflected in students’ later careers as SLPs. Bauman-Waengler [4] warns that many SLPs forgo phonetic transcriptions due to lack of time and experience. It is true that phonetic transcriptions are time consuming; yet, they yield valuable information that ensures a more accurate diagnosis and informs treatment and progress of treatment.

After examining the current state of the use of phonetic transcriptions, it is clear that a few issues need to be addressed to make certain there are more efficient phonetic transcribers in the CSD field. A few solutions can be offered to counteract the issues discussed above.
First, expanding current phonetic texts and phonetic study to include non-English phonemes should be explored. Because of the increased number of phonemes to be covered, a two-part phonetics course should be required, one at undergraduate level and one at the graduate level. An additional course could possibly allow more in-depth study of phonetics and conduction of phonetic transcriptions. The second course at the graduate level would also be a refresher for information learned at the undergraduate level. Furthermore, students would be able to apply phonetic transcription skills in their clinical practicum as they learn them. The graduate level phonetics course could take the form of a phonetic transcriptions lab, offering students more opportunity to practice skills learned. As mentioned earlier, CSD students' phonological awareness skills should also be screened prior to taking a phonetic course, and they should be provided with intervention sessions to improve their success in completing their studies in phonetics. Finally, students should be provided with more opportunities to complete phonetic transcriptions even if it is outside the context of evaluations. For instance, students should be required to utilize phonetic transcriptions to track client progress, when applicable, instead of using data tracking.

In sum, a look at the current state of phonetic transcriptions has revealed that improvements can be made in the teaching, learning, and implementing of phonetic transcriptions. Making these improvements will likely result in better quality phonetic transcriptions. Consequently, providing diagnoses and interventions and tracking the progress of clients may improve as well. Who should initiate and implement the changes to ensure better phonetic transcriptions? Perhaps instructors of phonetic courses could initiate and implement the changes as they are the first individuals to introduce students to phonetic transcription. The aforementioned suggestion is not meant to purposely exclude CSD students, SLPs, or speech-language and hearing scientists as they could provide invaluable contributions as well. In examining and solving the issues related to phonetic transcriptions, assistance from all mentioned above is needed to provide valuable phonetic transcription outputs.

References