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Special Education Vocabulary in Use

Podręcznik do nauki angielskiego słownictwa z zakresu pedagogiki specjalnej







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Wstęp

Autorzy mają nadzieję, że publikacja Special Education Vocabulary in Use. Podręcznik do nauki angielskiego słownictwa z zakresu pedagogiki specjalnej będzie użyteczną pomocą w pracy nad rozbudowaniem sprawności językowych polegających na znajomości słownictwa, biegłości stylistycznej oraz swobodnym i dokładnym rozumieniu dłuższych wypowiedzi z zakresu pedagogiki specjalnej zarówno w mowie (przykładowo: wykład, opinia, konwersacja), jak i w piśmie (podręcznik, artykuł, informacja internetowa) formułowanych w języku angielskim.

Niniejsza książka w zamyśle autorów ma służyć nie tylko studentom pedagogiki specjalnej, lecz także innych kierunków nauk o wychowaniu oraz dalszych powiązanych dyscyplin badawczych i praktycznych, takich jak praca socjalna, psychologia, socjologia, fizjoterapia, pielęgniarstwo...

Może być również przydatna dla tych rodziców, rodzeństwa, krewnych, wolontariuszy bezinteresownie i dzielnie wspomagających osoby z niepełnosprawnością, którzy by lepiej spełniać rolę wsparcia, zamierzają systematycznie aktualizować swą wiedzę o postępach pedagogiki specjalnej nie tylko w Polsce, ale i w czołowych ośrodkach zagranicznych. To również ze względu na nich podręcznik został opracowany tak, aby mógł być pożyteczną pomocą zarówno do nauki w grupie pod opieką lektora, jak i dla osób przedkładających samokształcenie. Autodydaktom test sprawdzający, a także dokładny i szczegółowy klucz znajdujące się na końcu książki będą pozwalały na kontrolę postępów w opanowaniu materiału.

"Nie ma kaleki, jest człowiek" – podkreślała niezmiennie i stanowczo Maria Grzegorzewska (1888–1967), uczona, która jak mało kto przyczyniła się do ukształtowania pedagogiki specjalnej w naszym kraju. Jedną z rzeczy najcenniejszych w dziedzictwie pozostawionym przez Grzegorzewską jest bez wątpienia koncepcja humanistycznych fundamentów aksjologicznych pedagogiki specjalnej. W codziennej działalności zarówno naukowej, jak i wychowawczej przekłada się to m.in. na staranne unikanie mowy wykluczającej. Do problemu eliminowania języka naznaczającego przykłada się dziś dużą wagę w pedagogice anglosaskiej. Znalazło to odzwierciedlenie w niniejszym podręczniku – tak w uwagach o dziejach edukacji specjalnej i przemianach terminologii, jak i w odpowiednich ćwiczeniach.

Struktura książki i ćwiczeń jest podobna do kompozycji wcześniej opublikowanej w wydawnictwie Poltext pozycji *Psychology Vocabulary in Use. Podręcznik do nauki angielskiej terminologii psychologicznej* (II wydanie, Warszawa 2018). Niniejsza publikacja liczy dziesięć rozdziałów poświęconych wybranym ważnym działom pedagogiki specjalnej. O kluczu i teście była już wzmianka powyżej. Całość zamykają dodatkowe ćwiczenia i słownik z podstawową terminologią. Każdy z rozdziałów po tekście wprowadzającym zawiera zestaw ćwiczeń i zadań umożliwiających poznanie angielskiej terminologii pedagogiki specjalnej i utrwalenie biegłości językowej w tym zakresie. Ćwiczenia są urozmaicone. Jedne z nich sprawdzają rozumienie tekstu czytanego (pytania typu prawda/fałsz, quizy), inne to zadania wielokrotnego wyboru, uzupełniania luk własnymi odpowiedziami, ćwiczenia ze słowotwórstwa, dopasowywanie słów do definicji/opisów i zastępowanie wyrażeń z języka potocznego terminami naukowymi. W każdym z tekstów wprowadzających i w niektórych ćwiczeniach wytłuszczone zostały terminy mające kluczowe znaczenie dla danej problematyki pedagogicznej.

Książka odwołuje się do zasad ortografii brytyjskiej. Jest przeznaczona w zasadzie dla osób, które opanowały kurs General English przynajmniej na poziomie średnio zaawansowanym.

Nagrania mp3 wybranych tekstów z książki można pobrać bezpłatnie ze strony internetowej wydawnictwa po wpisaniu w okienko kodu, który znajduje się na przednim skrzydełku okładki.

Autorzy dziękują za rzeczowe rady, wsparcie redakcyjne i słowa zachęty, które były nieocenioną pomocą przy pisaniu tej książki.

Przede wszystkim dziękujemy Pani Profesor Joannie Głodkowskiej, dyrektor Instytutu Pedagogiki Specjalnej APS – bez Jej aprobaty nie przystąpilibyśmy do prac nad podręcznikiem. Rzecz jasna wyrazy wdzięczności odnoszą się również do wszystkich pozostałych uczestniczek zespołu redakcji naukowej wymienionych na stronach tytułowych publikacji. Dziękujemy także za życzliwą pomoc Profesorowi Grzegorzowi Szumskiemu, Doktor Justynie Gasik, Susan Carton z St. Angela's College, Sligo oraz Terence'owi Clark-Wardowi.

Doskonale układała się nam współpraca z wydawnictwem Poltext dzięki niekwestionowanemu profesjonalizmowi Państwa Redaktorów Marka Rostockiego i Anny Żółcińskiej.

Nie musimy dodawać, że za wszystkie niedociągnięcia i ewentualne błędy wyłączną odpowiedzialność ponoszą autorzy podręcznika.

Warszawa, Tri Studničky 2018

UNIT 5.

SPEECH AND LANGUAGE IMPAIRMENTS

Exercise 1



Read the text and decide if the statements below are true (T) or false (F).

SPEECH AND LANGUAGE IMPAIRMENTS

Although considered one special education category, **speech** and **language impairments** are actually types of **communication disorders** affecting an individual's ability to engage in verbal discourse effectively with others. Like other impairments, they range in severity, may be genetic or acquired, primary or secondary to other disorders, and further broken down into more specific problems.

Speech impairments are divided into three subtypes, i.e. problems with articulation, voice and fluency. In **articulation disorders**, speech sounds are **substituted**, **omitted**, **distorted** or **added**. The most common example of an articulation error is a **lisp**, which affects **sibilant sounds** (such as /s/, /z/, /[j/, /[3/], $/[t]^3/$). **Voice disorders** occur when the vocal cords don't vibrate in a normal manner. They involve difficulties with **pitch** (high or low quality of a sound), **loudness** (intensity or magnitude of a sound) and **quality of voice** (distinctive attributes of a sound). In **fluency disorders** (**stuttering**/ **stammering** or **cluttering**), the flow of speech is disrupted by involuntary

repetitions, **prolongations**, **blocks** (in the case of stuttering/stammering) and **omissions** or **distortions** of sounds/syllables (in the case of cluttering).

Speech impairments may occur from various conditions. In the case of articulation disorders, the causes include biological factors, such as damage to specific parts of the brain or nerves that control speech muscles (e.g. from cerebral palsy), damage to specific parts of the brain involved in speaking, and impairments in the muscles and bones that make **speech sounds** (e.g. a **cleft palate** or a **cleft lip**). Voice disorders may be due to laryngeal webs or clefts, noncancerous growths (e.g. polyps, nodules or cysts) or overuse of the vocal cords (or folds) by screaming or shouting. Fluency disorders, on the other hand, may be genetic and run in families.

Speech impairments may also be associated with other disorders, such as hearing loss, learning disabilities or intellectual disability. Often, the causes of speech impairments remain unclear.

When a person has trouble understanding other people (**receptive language**) or expressing himself or herself (**expressive language**), then he or she has a language impairment. Language impairments encompass difficulties in the following areas: the **form**, **content** and **function** of language. The form of language consists of three components: **phonology** (the sound system of language including the rules that govern the combination of sounds into syllables and words), **morphology** (the set of rules governing the forms of words, specifically inflected forms) and **syntax** (the set of rules governing the structure of sentences, in particular word order and punctuation). The content of language essentially consists of **semantics** that governs the meaning of words and sentences. And finally, function refers to the social convention of language. It includes **pragmatics**, which is the study of language with regard to the context and social aspects of communication.

Language impairments have different causes, such as heredity and poor language development caused by environmental deprivation (e.g. lack of simulation and/or an appropriate role model during key developmental periods). Like speech impairments, they can exist in conjunction with other disorders, such as intellectual disability, ADHD or ASD.

- 1. Speech impairments refer to difficulties in either understanding or using words.
- 2. Some communication disorders may have no clear cause.
- 3. A lisp is an example of a language impairment.
- 4. Speech and language impairments may be related to other disorders.
- 5. Vocal fatigue may result in a voice disorder.
- 6. Difficulty understanding what other people are saying is referred to as expressive language.
- 7. Poor parenting may increase the likelihood of language impairments in children.
- 8. Language impairments tend to run in families.
- 9. Phonological disorder represents problems with the production of individual sounds.

Exercise 2

Choose the correct answer.

	she is difficult to understand even for her parents. Based on this descrip-
	tion, Stacy may meet the criteria for
	a) stammering
	b) cluttering
	c) stuttering
	d) lisping
2.	Susan tells her mother that she needs to get some 'nanas' (bananas) to
	try a new cocktail recipe. Susan's speech error is known as an articulation
	disorder of
	a) addition
	b) substitution

1. Stacy talks too fast, mispronouncing and slurring some words. As a result

c) distortiond) omission

	notices that he is not really eating, but playing with his food, so she asks, 'What is the matter, dear?' Martin replies, 'It's too ssssspicy.' Martin's difficulty moving from the 's' in 'spicy' to the remaining sounds is known as
	a) block b) distortion c) repetition d) prolongation
	Although Scott is 9 years old, he keeps making mistakes, such as 'I runned home' or 'They buyed a new car.' Mistakes of this type demonstrate Scott's difficulty applying irregular verb forms due to his limited awareness of a) semantics b) pragmatics c) morphology d) syntax
	After Becky returns home from school, she tells her mother that Angela, her classmate, has broken the leg. Her mother feels sorry for Angela and says, 'Poor girl', to which Becky responds, 'But she isn't poor. She lives in a beautiful house.' The fact that Becky misunderstands her mother indicates that she has problems with a) semantics b) syntax c) morphology d) pragmatics
	Bob, a 12-year-old student, complains of an inappropriately elevated pitch and a hoarse, rough voice quality, which have been present for many years. In all probability, Bob has a(n) disorder.
72	

3. 11-year-old Martin is having dinner with his family. At some point his mother

	c) voice d) phonological
7.	Mark has word-retrieval problems and he is commonly unable to get the specific ideas out. He was trying, for instance, to describe his stay in the mountains with his parents, but he didn't remember many words, such as 'funicular' or 'trekking poles' so he called them 'that fast thing on tracks' and 'those long things.' Mark's problems indicate that he has deficits in the domain. a) semantics b) morphology c) pragmatics d) syntax
8.	Dustin has little awareness of rules regarding production and combination of sounds. He can pronounce a sound accurately in one word and not in others, e.g. he may omit the 's' sound in 'bus' but can say it clearly in 'soup.' He can also say a sound correctly, but may use it the wrong position in a word, or in the wrong word and say 'doe' for 'go'. It seems that Dustin's problems are related to a) articulation b) phonology c) syntax d) morphology
9.	Although Will has a good grasp of grammar and vocabulary, he has trouble using language in a socially appropriate way. He doesn't know, for instance, that he should address his teachers with terms of respect and politeness, not by using slang words. Will's problems with adjusting language to suit the situation represent deficits in a) phonology b) pragmatics c) semantics d) syntax

a) articulation

10.	Matthew is in his first year of primary school, but he still hasn't advanced from utterances such as 'I can't will go with you.' His incorrectly structured sentences show that he has difficulties with a) syntax b) pragmatics c) semantics d) morphology
11.	
12.	On the first day of his psychology class, Boris together with other students was asked to introduce himself. When his turn came, he opened his mouth but all he could utter was 'Mah mah mah' These involuntary pauses in which Boris was unable to say his own name are called a) repetitions b) distortions c) prolongations d) blocks
No	te!
-	is used both as a noun (e.g. 'He has a lisp', 'She speaks with a (slight/nounced) lisp') or a verb (e.g. 'He lisps on the 's' and 'z' sounds'). It also

Stutter, **stammer**, **clutter** behave much in the same way, e.g. 'She stutters a little', 'The boy developed a stutter', 'There is no cure for stuttering', 'I have

occurs in a gerundive form (e.g. 'Lisping is an articulation disorder').

(a bit of) a stammer', 'He stammered (out) his name', 'She was diagnosed with a clutter.'

Language impairment is not the same as language delay.

Children with language impairments acquire language in an abnormal sequence, unlike typically developing children.

Children with language delays acquire language in the same sequence as other children their age, but at a slower rate. Many of them don't have an impairment and eventually catch up with their peers.

Exercise 3

a) Complete the table with the correct forms of the missing parts of speech, for example: repetition – repeat.

Noun	Verb
articulation	
distortion	
	add
lisp	
	omit
prolongation	
substitution	

b)	Complete the sentences below with the words from the
	table. More than one answer may be possible. Change
	the form if needed.

1.	Holly	the sounds	she fin	ds difficul	t to pron	ounce. S	She
	may, for example, say	'uk' to refer	either to	'book' oı	ʻlook.'		
2.	It's natural for children	n to		as they l	earn to s	peak. M	any
	of them eventually gro	ow out of it,	but som	ne don't, e	even with	the help	o of
	a speech therapist.						

3.	in turn causes him to become frustr		
4.	At age 9, Colin still as 'wamp' for 'lamp' or 'tat' for 'cat.		easier ones, such
5.	When Dennis sings, you would never ment. His singing is smooth with no or repetition of sounds, which always	O (6	e.g. m-m-m-other)
6.	When you insert an extra sound with or 'balue' for 'blue'), you make it har even though they know the context errors.	d for other people t	o understand you,
7.	Although I'm not a child anymore, I as I might, I will always say 'w' for 'r		-

Exercise 4

Replace the <u>underlined</u> parts of the sentences with the words in the box.

dysfluent, slurred, restricted, blocked, flawed, hoarse

- 1. Dough has a <u>limited</u> range of vocabulary compared to children the same age.
- Children with language impairments tend to use <u>incorrect</u> grammatical structures, e.g. ones without past-tense 'ed' and third-person-singular 's' endings.
- 3. The boy's voice is noticeably different from that of others his age. It tires easily and sounds <u>rough</u>.
- 4. Because Harry's speech sounded <u>unclear</u>, as if he were drunk, the bus driver refused to allow him on the bus.
- 5. It's not easy to communicate with Anne as her speech is <u>not smooth</u>, full of repetitions and prolongation of sounds.

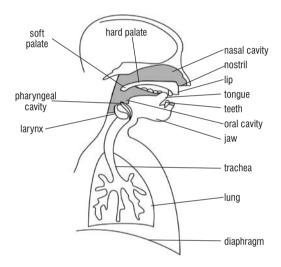
6. Usually when Heather wants to say a word, her speech is <u>stopped</u> with no sound coming out, even for several seconds.

Exercise 5



Complete the text with the correct form of the verbs in the box.

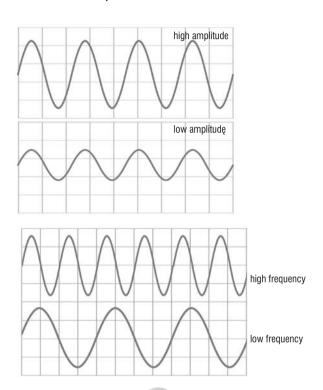
resonate, shape, expel, modify, vibrate



Production of speech sounds is arguably the most complex motor behaviour performed by humans, which requires a precise coordination of various muscles, nerves and body parts. The whole process starts in the lungs and ends in the oral cavity, and this – in a nutshell – is what it looks like.

As air is	(1) from the lu	ngs, it moves	up through the trach	ea
(or the windpipe) into	the larynx, who	ere the vocal	cords are located (t	he
larynx and the vocal co	ords are referred	l to as the vib ı	rating system). The a	air-
flow causes the vocal of	cords to	(2) ar	nd produce raw sound	ds.
The frequency (speed)) of vibrations of	the vocal cord	ds affect the pitch of t	he
sound, whereas the an	nplitude (size) of	the vibrations	affect its loudness. T	he
sounds are then	(3) as	s they	(4) through t	he
pharynx (throat), oral	l cavity (mouth)	and nasal c	avity - the resonati	ng

system. Finally, they are _____ (5) into specific speech sounds by the articulation mechanisms (or speech mechanisms), which include the tongue, soft and hard palate, teeth, lips and jaws. From there, air is expelled into the atmosphere.



Exercise 6 0



Complete the text with the phrases in the box.

speech therapy, speech clinic, speech-related tension, speech sound errors, speech impairments, speech apparatus, speech correction, speech imperfection, speech-language pathology, speech centres

A BRIEF HISTORY OF THE FIELD

The profession of ______(1) started during the late 1800s. At first it was an avocation of certain professionals, in particular doctors and

educators, whose main interes	t was to improve people's speech. Treatmen
	ne were mainly addressed to individuals with
dysfluency and	(2), and were not based at schools
	(3) was first available in public schools in
the early 1900s. For example, i	in 1910 the Chicago public schools began to
provide special services for stu	dents with fluency problems, and in 1913 the
	ed services for students with mild and moder
ate (4). Unfortunately, students with more serious
	om public school intervention services and
were either educated in private	e schools or institutionalised, if they received
any services at all.	
As interest and scholarly activ	rities in this newly emerging field continued
a number of organisations, insti	tutes and societies dedicated to the advocacy
of students with speech impair	rments were initiated and scientists began to
focus their work on speech, he	earing and language disorders.
In 1914 the University of Wiscon	sin opened the first(5
	onnett Greene founded the New York Institute
for Speech Disorders, which de	eveloped into the National Hospital for Speech
Disorders. In 1921 Dr Frederic	c Martin established The Martin Institute fo
Speech Correction in Ithaca, w	hich, after being relocated to Bristol in 1936
became the National Institute	for Voice Disorders. In 1925 the American
Academy of Speech Correction	n – AASC (it went through four name changes
before finally settling on the Ame	erican Speech-Language-Hearing Organisation
– ASHA – in 1978) was establis	shed by a small group of professionals led by
Robert West, a professor at the	e University of Wisconsin who is regarded as
the father of speech-language	pathology. AASC's main aim was to promote
'scientific, organized work in th	ne field of speech correction.' In 1935 the Flo
Brown Memorial Laboratory, th	ne first formal laboratory for research, clinica
practice and professional training	ng in speech correction, was organised at the
University of Wichita.	
Lee Edward Travis and Wendel	I Johnson are two other leading figures in the
field who were involved in exten	sive research on stuttering at the University o
lowa. Travis claimed that people	with a stutter have(6
in both cerebral hemispheres o	f the brain, instead of just the left hemisphere

As a result, the two hemispheres were competing for control of speech, w	hich
led to discoordination of (7) and in turn to stutte	ring.
Johnson, who was influenced by Sigmund Freud's psychoanalytic theo	
stuttering, believed that the development of this	_ (8)
was caused by parents' misinterpretation of their child's speech. They mis	took
the child's normal dysfluency for stuttering and expected from the child a	level
of speaking performance that was beyond the child's ability at the time.	The
child's subsequent reaction was (9) and anxiety, w	hich
eventually led to stuttering.	
A crucial step in the growth and expansion of speech-pathology services	was
the development of screening procedures by the US military to identify rec	ruits
with speech and hearing impairments during World War II. This led to clinical	and
research studies, and subsequently to effective	(10).
After the war the findings from these studies were included in speech-langu	
pathology programmes at universities throughout the country. Subseque	ntly,
public schools started to hire more and more speech-language pathologis	ts to
provide services to students with speech impairments. Although these serv	/ices
increased, prior to the 1950s many students with more severe impairm	ents
were unidentified or inadequately educated. Being considered intellecti	ually
inferior and unfit for formal schooling, their education involved mainly le	arn-
ing basic everyday life and survival skills. Through the joint efforts of m	nany
organisations and parents of children with speech and language im	pair-
ments, however, these students were gradually admitted to public school	ıls in
the 1950s and 1960s. Over time came understanding that many articula	
problems were developmental and they would go away by themselves	
age. Therefore, in 1970s speech-language pathologists began to work	
with children with mild articulation disorders and focused on working	
children with profound speech and language impairments.	

REVISE AND CHECK

Exercise 1

Match the words in column A to the words in column B to make correct collocations.

Α	В
1. throat	a) pitch
2. vocal	b) system
3. oral/nasal	c) muscles
4. soft/hard	d) palate
5. speech	e) sounds
6. high/low	f) cords
7. resonating/vibrating	g) cavity

Exercise 2

Decide whether each statement is characteristic of a speech or a language impairment. Put a tick mark ($\sqrt{}$) in the appropriate column.

Characteristic	Speech	Language
Articulation (incorrect production of speech sounds)		
Content (impaired comprehension of the meaning of words)		
Fluency (interruption to the smooth flow of speech)		
Form (inappropriate application of grammatical patterns)		

Use (inability to use language in socially accepted ways)	
Voice (deviation in pitch, loudness or quality of voice)	

Exercise 3

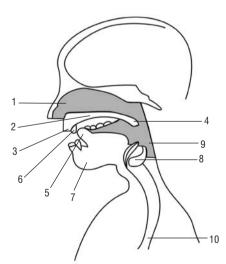
Choose the correct option.

- June stutters/lisps/stammers when she attempts to say the 's' or 'z' sounds but because she is only 4 years old her parents hope that she will outgrow it over time.
- Communicating with others can be hard for children with speech impairments. Sometimes they omit/distort/substitute sounds in words. These are usually sounds at the end of words that are left out, e.g. 'g' in 'dog', which becomes 'do.'
- 3. Ever since puberty, Miles, now 16, has had problems controlling the *loud-ness/pitch/magnitude* of his voice. It's too high for a boy his age and on the phone he is often mistaken for a girl.
- 4. Due to his deficits in *phonology/semantics/morphology*, Brett may hand you a ball when you have asked clearly for a bell.
- 5. Chad's voice is *blocked/dysfluent/hoarse* as if he has caught a cold, which prevents him from making *smooth/rough/slurred* sounds.
- 6. Penelope was born with a *hard/cleft/soft* palate and its effects can still be heard years after surgical correction and speech therapy.
- 7. As a child Connie developed a *clutter/lisp/stutter* so debilitating that even though she tried to push the words out of her mouth, she couldn't often produce any sound at all.
- 8. Because Pearl has trouble remembering new words, her vocabulary is flawed/incorrect/restricted compared to her peers. When she can't recall or doesn't know appropriate words, she uses non-specific ones, such as 'stuff' or 'thing.'

- 9. Samuel L. Jackson is one of the celebrity stutterers who openly talks about his *language/speech/speaking* imperfection and how he learnt to manage it.
- 10. Like most preschoolers, Tanya is going through a period of normal developmental *dysfluency/delay/disorder*, but her parents are convinced that she needs professional intervention.
- 11. Adam's *receptive/communicative/expressive* language is age-appropriate, but what he says is barely intelligible.
- 12. My brother often gets speech *dysfluency/stutter/blocks* when he speaks face to face with people he doesn't know. He feels so stressed that he can't get any word out.

Exercise 4

Write the names of the organs used in the production of speech.



Język angielski Poziom B2–C1

Doskonalenie sprawności językowej to znajomość słownictwa, biegłość stylistyczna oraz swobodne i dokładne rozumienie wypowiedzi z zakresu pedagogiki specjalnej. Książka jest dedykowana nie tylko studentom pedagogiki specjalnej, ale także studentom powiązanych dyscyplin badawczych i praktycznych, takich jak praca socjalna, psychologia, socjologia, fizjoterapia oraz pielęgniarstwo. Podręcznik został opracowany tak, aby mógł służyć zarówno do nauki w grupie pod opieką lektora, jak i do samokształcenia.

Testy sprawdzające oraz klucz z prawidłowymi odpowiedziami pozwalają na kontrolę postępów w opanowaniu materiału.

Każdy z rozdziałów zawiera zestaw ćwiczeń i zadań umożliwiających utrwalenie biegłości językowej w zakresie angielskiej terminologii pedagogiki specjalnej.

Ćwiczenia są urozmaicone:

- sprawdzają rozumienie tekstu czytanego (pytania typu prawda/fałsz, guizy),
- zawierają zadania wielokrotnego wyboru,
- ćwiczenia ze słowotwórstwa,
- dopasowywanie słów do definicji i opisów,
- zastępowanie wyrażeń z języka potocznego terminami naukowymi.

W każdym z tekstów wprowadzających i w niektórych ćwiczeniach wyodrębniono terminy mające kluczowe znaczenie dla danej problematyki pedagogicznej.

W książce stosowane są zasady ortografii brytyjskiej (British English). Korzystanie z niej wymaga opanowania kursu General English przynajmniej na poziomie średnio zaawansowanym.



Nagrania mp3 wybranych tekstów z książki są dostępne **GRATIS** na stronie internetowej wydawnictwa.

