

CSC2518 – Spoken Language Processing – Fall 2014

Lecture 1 Frank Rudzicz

University of Toronto

# Speech in healthcare

# Dysarthria

Neuro-motor articulatory disorders resulting in unintelligible speech.



Hey everybody! My name's James and I'm here to do a video for you. I'm briefly gonna talk about my speech impediment. What it is, is a part of my brain doesn't work that controls my mouth and I um can't talk as perfectly

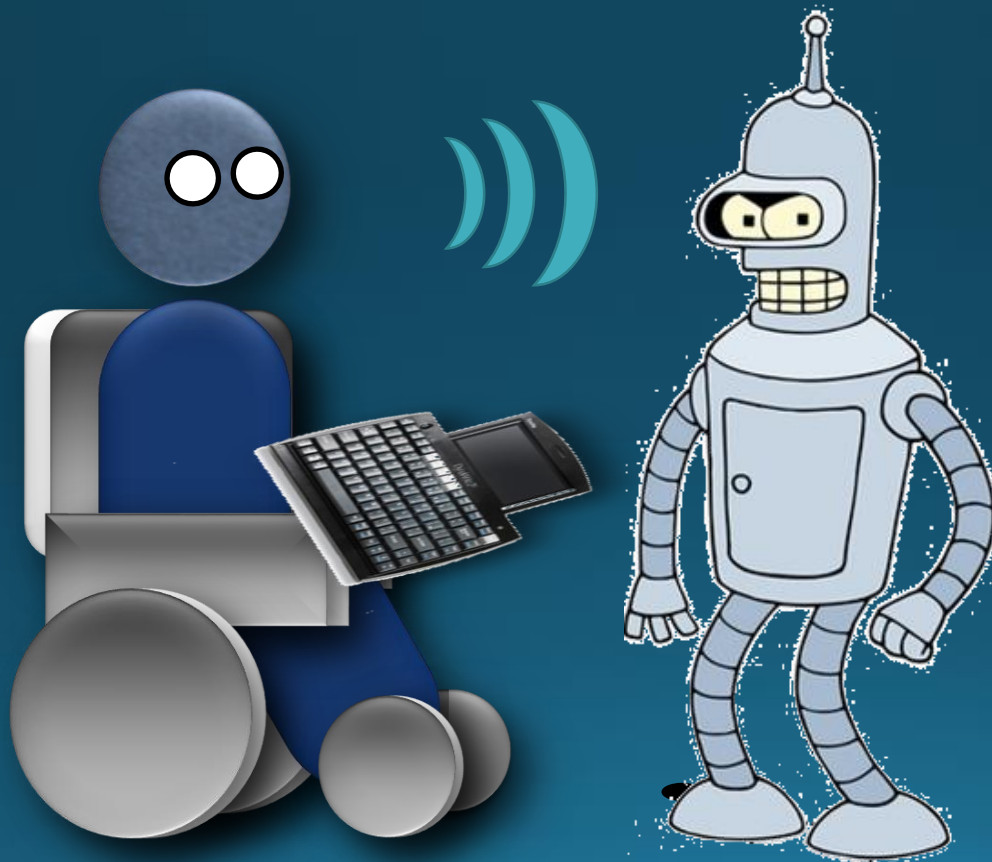
7.5 million Americans have **dysarthria**

- Cerebral palsy,
- Parkinson's,
- Amyotrophic lateral sclerosis)

(National Institute of Health)

# Dysarthria

The **broader** neuro-motor deficits associated with dysarthria can make **traditional** human-computer interaction difficult.



Can we use  
ASR for  
dysarthria?

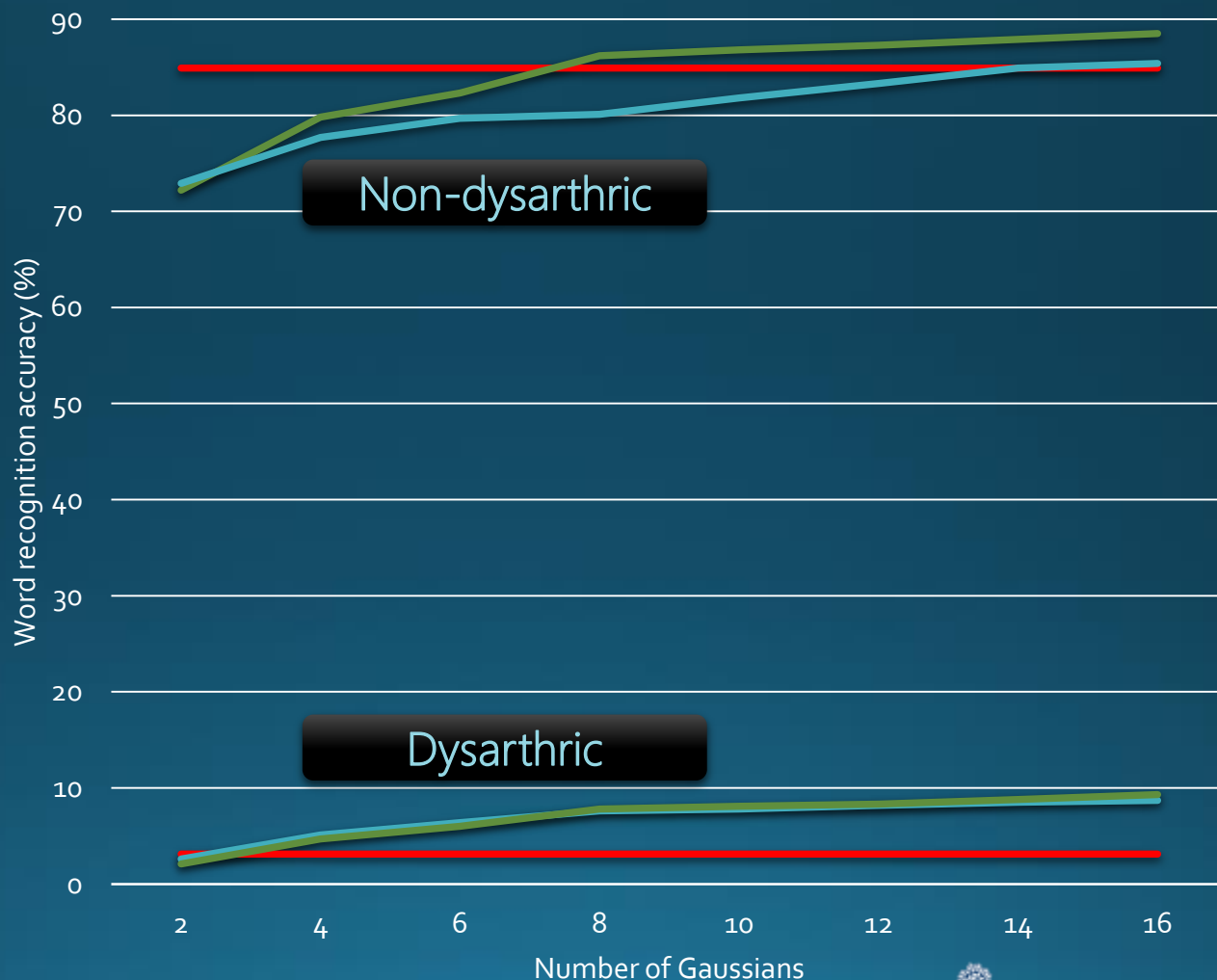
# Adjusting to the individual

84.9%



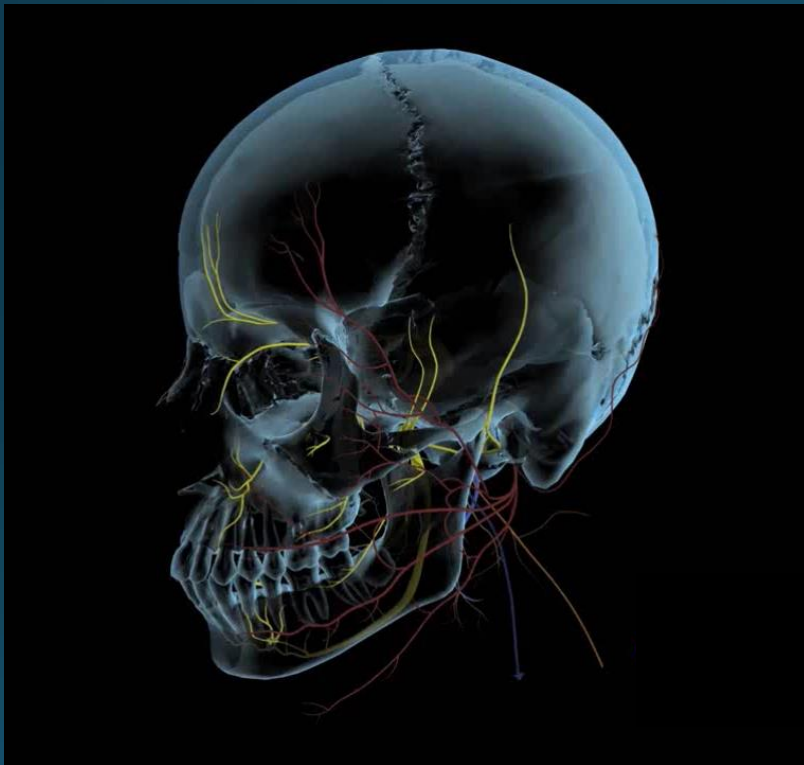
Traditional ASR  
Speaker-  
dependent  
Speaker-  
retrained

3.1%



# Neural origins

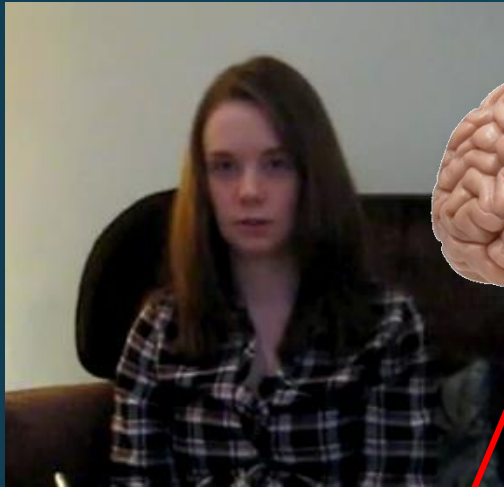
- **Types** of dysarthria are related to **specific sites** in the subcortical nervous system.



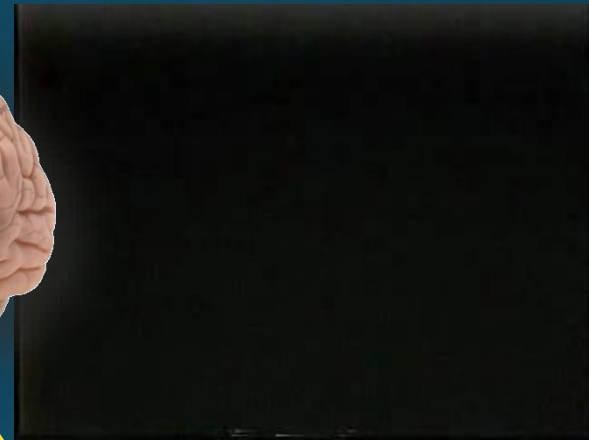
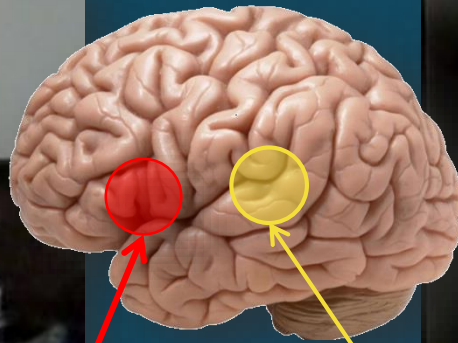
Type	Primary lesion site
Ataxic	Cerebellum or its outflow pathways
Flaccid	Lower motor neuron ( $\geq 1$ cranial nerves)
Hypo-kinetic	Basal ganglia (esp. substantia nigra)
Hyper-kinetic	Basal ganglia (esp. putamen or caudate)
Spastic	Upper motor neuron
Spastic-flaccid	Both upper and lower motor neurons

(After Darley *et al.*, 1969)

# Deeper into the brain – Aphasia



Broca's aphasia



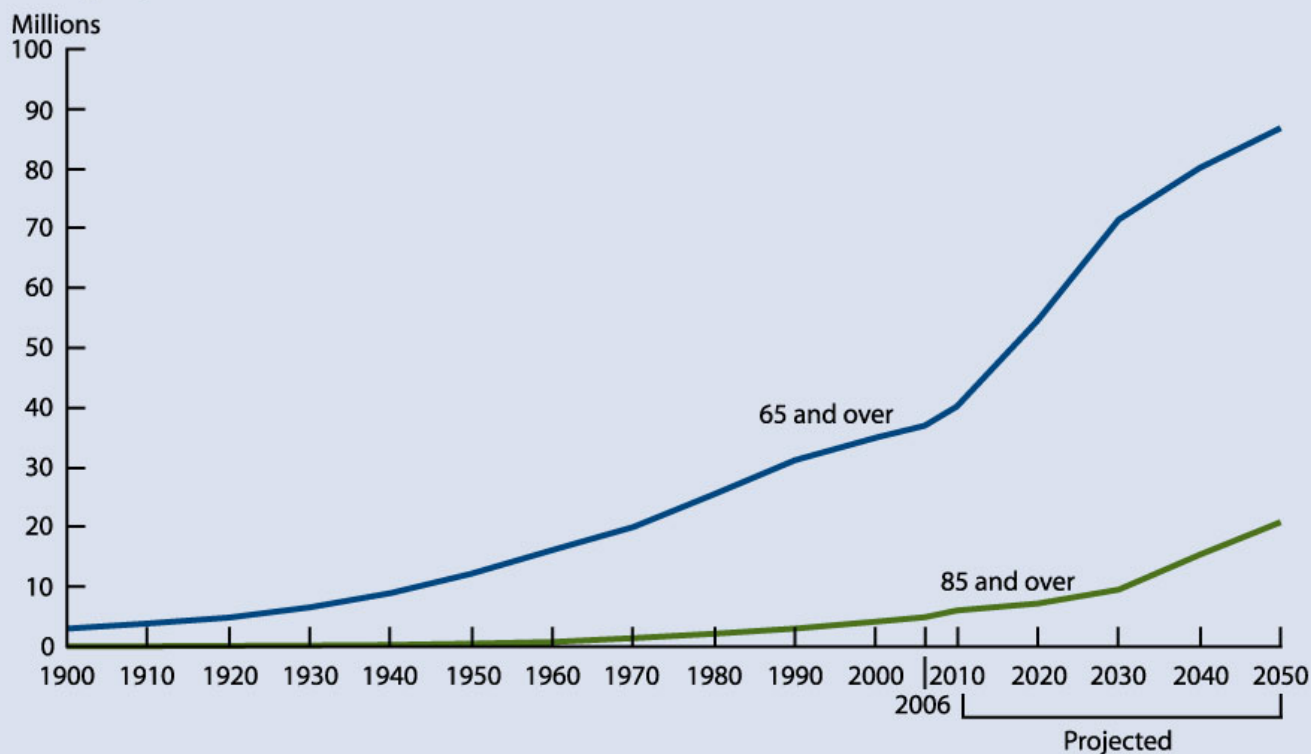
Wernicke's aphasia

- **Reduced** hierarchical syntax.
- Anomia.
- **Reduced** "mirroring" between observation and **execution** of **gestures** (Rizzolatti & Arbib, 1998).

- **Normal** intonation/rhythm.
- **Meaningless** words.
- 'Jumbled' syntax.
- **Reduced** comprehension.

# Demographics

Number of people age 65 and over, by age group, selected years 1900–2006 and projected 2010–2050



Note: Data for 2010–2050 are projections of the population.

Reference population: These data refer to the resident population.

Source: U.S. Census Bureau, Decennial Census, Population Estimates and Projections.

# A future for speech diagnostics

- **Speech-language pathologists:** ~150,000 in USA.
  - This labour market is **growing faster** than the average and has recurrent software needs (Bureau of Labor Statistics, 2011).
- Between **8% and 10%** of the US population has some form of speech/language/hearing disorder (National Institute of Health).
  - This is increasing with the age of the population and the incidence of **stroke** and **dementia**.
- Caregivers often assist individuals with Alzheimer's disease (AD), either at home or in long-term care facilities.
  - >\$100B are spent annually in the U.S. on caregiving for AD.
  - As the population **ages**, the incidence of **AD** may double or triple in the next decade (Bharucha *et al.*, 2009).
  - **Demographic crisis!**



# Broad syllabus

- **Theme:** speech-based technology in healthcare.
- Automatic speech recognition in healthcare
  - E.g., dictation of medical records.
- Speech-based communication aids
  - E.g., synthetic speech, brain-computer interfaces.
- Speech-based diagnosis and monitoring
  - E.g., Parkinson's, post-stroke aphasia, cerebral palsy
- Clinically-relevant features, brains, et c.

# Lecture 1

## 1. The nature of the course

- (20%) **Participation**: 60 minutes of conference-style presentations.
- (80%) A final course **project**.

## 2. Crash course in speech signal processing

## 3. Crash course in automatic speech recognition

Please subscribe to [csc2518\\_2014 Google Group!](#)

- Next week: Clinical/biomedical aspects of speech

# 1. Conference-style presentations

- Every student will deliver **conference-style presentations** for 60 minutes, either:
  - **Two papers, 30 minutes each** (25 min talk + 5 minute questions).  
Typically papers in conference proceedings, or
  - **One paper, 60 minutes** (50 min talk + 10 minute questions).  
Typically journal articles.
- Presentations can follow the structure of the paper, but should include a broad **overview, scientific context** (i.e., literature review), **methodology**, empirical **results**, and a **summary** of contributions.
- Though informal, students should be prepared to answer questions (15% of participation grade).

# 1. Conference-style presentations

- Students should select papers from the course website.

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### Suggested readings

You are strongly encouraged to select readings from the list below to present. Papers are preceded by **the length of their talks** in hours.

#### Speech recognition in healthcare

- **(1 hour)** S. Petrik, C. Drexel, L. Fessler, J. Jancsary, A. Klein, G. Kubin, J. Matisek, F. Pernkopf, H. Trost (2011) **Semantic and phonetic automatic reconstruction of medical dictations**. *Computer Speech & Language*, 25(2):363-385.
- **(1/2 hour)** H.P. Kang, S.J. Sintrapun, R.J. Nestler, A.V. Parwani (2010) **Experience With Voice Recognition in Surgical Pathology at a Large Academic Multi-Institutional Center**. *American Journal of Clinical Pathology*, 133:156-159.
- **(1/2 hour)** L. Galeacu, J. Allen, G. Ferguson, J. Quinn, M. Swift (2009) **Speech Recognition in a Dialog System for Patient Health Monitoring**. *Proceedings of IEEE International Conference on Bioinformatics and Biomedicine (BIBM09) Workshop on NLP Approaches for Unmet Information Needs in Health Care*, pages 1-4.

#### Speech-based communication aids

- **(1 hour)** E.W. Healy, S.E. Yoho, Y. Wang, D. Wang (2013) **An algorithm to improve speech recognition in noise for hearing-impaired listeners**. *Journal of the Acoustical Society of America*, 134(4):3029-38.
- **(1 hour)** T. Nose and T. Kobayashi (2011) **Speaker-independent HMM-based voice conversion using adaptive quantization of the fundamental frequency**. *Speech Communication*, 53(7):973-985.
- **(1/2 hour)** A.R. Toth, A.W. Black. (2007) **Using articulatory position data in voice transformation**. In *Proceedings of SSW*, pages 1-6.
- **(1 hour)** A.B. Kain, J.-P. Hosom, X. Niu, J.P.H. van Santen, M. Fried-Oken, J. Staehely (2007) **Improving the intelligibility of dysarthric speech**. *Speech Communication*, 49(9):743-759.

#### Speech-based diagnosis

- **(1/2 hour)** A. Tsanas, M.A. Little, P.E. McSharry, J. Spielman, L.O. Ramig (2012) **Novel speech signal processing algorithms for high-accuracy classification of Parkinson's disease**. *IEEE Transactions on Biomedical Engineering*, 59(5):1264-1271.
- **(1/2 hour)** D. Hakkani-Tur, D. Vergyri, G. Tur (2010) **Speech-based automated cognitive status assessment**. *Proceedings of Interspeech 2010*, pages 1-4.
- **(1/2 hour)** D. Bone, T. Chaspari, K. Audhkhasi, J. Gibson, A. Tsiartas, M. Van Segbroeck, M. Li, S. Lee, S. Narayanan. (2013) **Classifying language-related developmental disorders from speech cues: the promise and the potential confounds**. In *Proceedings of INTERSPEECH 2013*, pages 182-186.
- **(1/2 hour)** K.L. Lansford, J.M. Liss (2014) **Vowel acoustics in dysarthria: Speech disorder diagnosis and classification**. *Journal of Speech, Language, and Hearing Research*, 57, pages 5786-67

#### Clinically-relevant features of speech & other

- **(1/2 hour)** K. Brigham, B.V.K.V. Kumar (2010) **Imagined Speech Classification with EEG Signals for Silent Communication: A Preliminary Investigation into Synthetic Telepathy**. *Proceedings of IEEE International Conference on Bioinformatics and Biomedical Engineering (ICBBE)*, pages 1-4.
- **(1/2 hour)** C.S. DasSalla, H. Kambara, M. Sato, Y. Koike (2009) **Single-trial classification of vowel speech imagery using common spatial patterns**. *Neural Networks*, 22(9):1324-1339.
- **(1 hour)** B.N. Pasley, S.V. David, N. Mesgarani, A. Flinker, S.A. Shamma, N.E. Crone, R.T. Knight, E.F. Chang (2012) **Reconstructing Speech from Human Auditory Cortex**. *PLoS ONE Biology*, 10(1):1-13.
- **(1/2 hour)** K.-h. Chang, D. Fisher, J. Canny. (2011) **Ammon: A speech analysis library for analyzing affect, stress, and mental health on mobile phones**. *Proceedings of PhoneSense 2011*
- **(1 hour)** L. Feenaughty, K. Tjaden, J. Sussman (2014) **Relationship between acoustic measures and judgments of intelligibility in Parkinson's disease: A within-speaker approach**. *Clinical Linguistics & Phonetics*, pages 1-22.

### Optional readings - general introduction

<http://www.sciencedirect.com/science/article/pii/S0885230810000586>

- Errata
- Free online

- **First come, first served.** Email me to volunteer for next available slot, then choose any of the remaining papers.
- Your lecture (+ any supplemental) materials will be posted.
- You should meet with me  $\geq 1$  week before your talk to go over your slides.

## 2. Project

- Get two birds stoned at once: get an A+ and a publication.
- Final report takes the form of a paper conforming to:
  - Transactions of the Association for Computational Linguistics
  - Interspeech
  - Neural Information Processing Systems
- Your report will be marked on 1) originality, 2) sufficient survey of existing work, 3) technical correctness, 4) empirical methods, 5) overall presentation.

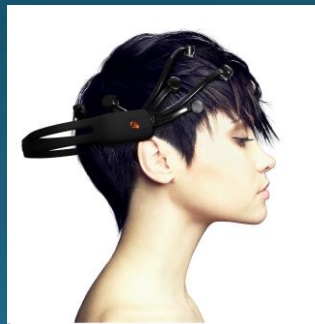
# 2. Project

- Four components:
  - **Project proposal** (22 September). 5% of project grade. 1-2 pages.
    - Describe your goals.
    - Briefly describe 2-5 relevant papers.
    - Outline your plan to reach your goals (including schedule).
    - Outline a method to evaluate success.
  - **Midterm checkpoint** (mid-to-late October). Not marked.
    - You will meet with me to discuss progress.
  - **Project report** (15 December). 80% of final grade.  $\geq 4$  *tight, double-column* pages or equivalent.
    - You will be encouraged to submit this to a conference or journal.
  - **N-minute madness**. (15 December). 5% of project grade.
    - You will present your project for a brief  $2 \leq N \leq 5$  minutes.

## 2. Project – data (e.g.)

- General speech:
  - **Switchboard**: telephone conversations, 8 kHz, 14 GB
  - **TIMIT**: phonemically-balanced, 16 kHz, 711 MB
  - **WSJ**: news broadcasts, 15 GB
- Pathological speech:
  - **DementiaBank**: dementia (and control), picture description, 13 GB
  - **TORGO**: cerebral palsy, articulation, phonemically balanced, 18 GB
  - **TBD**: Parkinson's disease, articulation, emotional speech, TBD

- EEG/MEG, robot
- ...



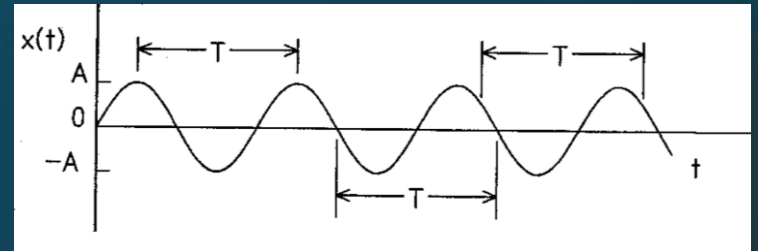
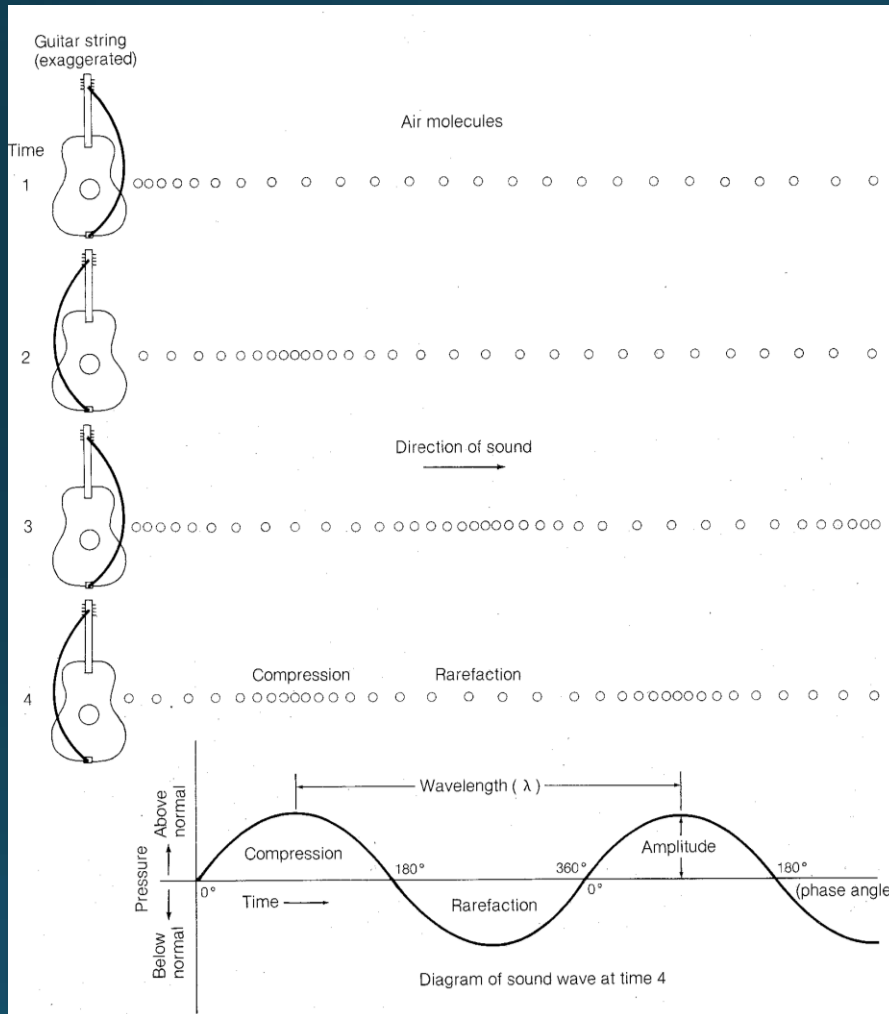
# Flexibility

- You can choose to **present a paper** other than those on the course page.
- You can choose to write in the **style** of another journal or conference.
- You can choose to use **another set of data**, or **collect your own**.

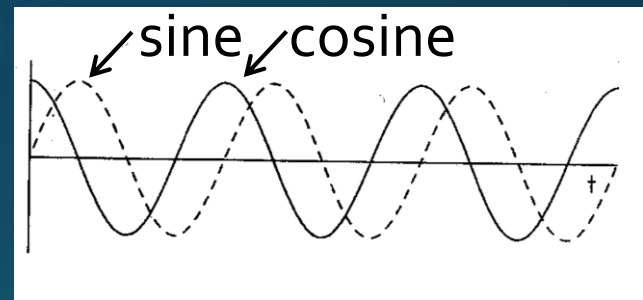
*In all cases, consult with me ASAP*



# Sound signals



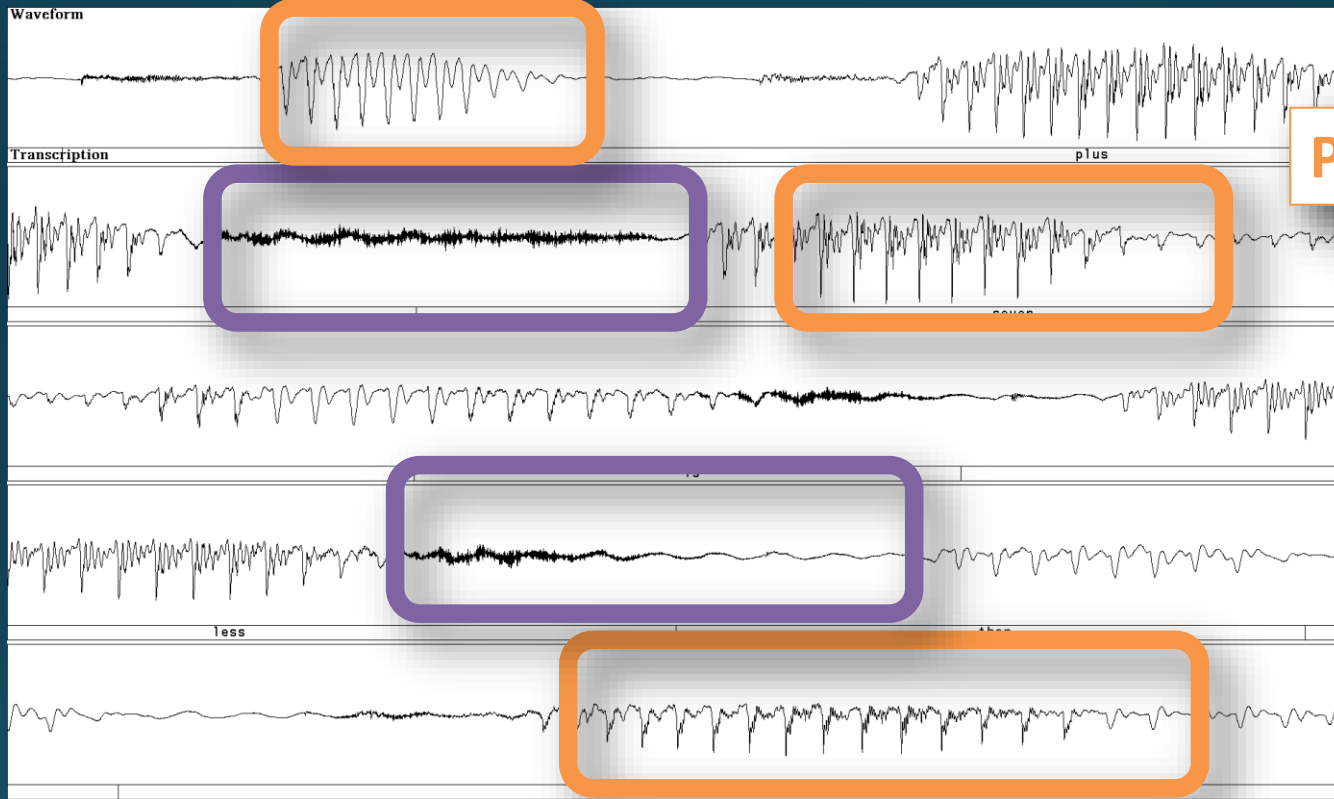
• Frequency  $F = 1/T$



Given  $\omega = 2\pi/T$ , and phase  $\phi = \pi/2$ ,

$$f(t) = A \sin(\omega t + \phi) = A \cos(\omega t)$$

# Speech signals



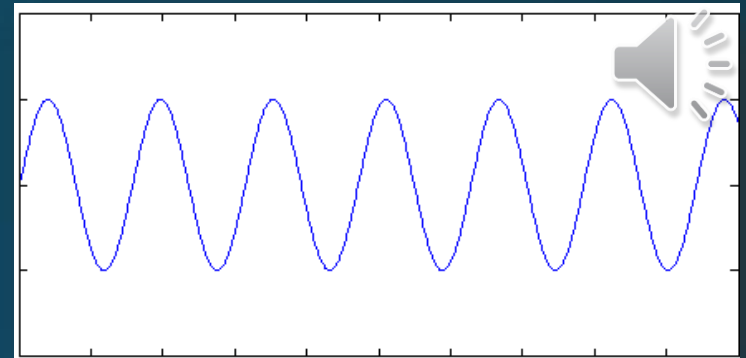
Periodic

Noisy

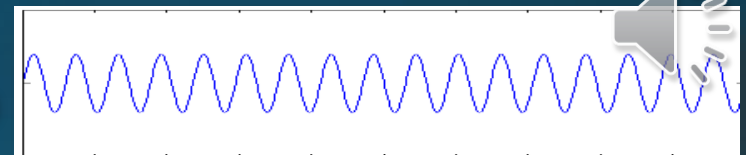
*"Two plus seven is less than ten"*

# Signals as summed sinusoids

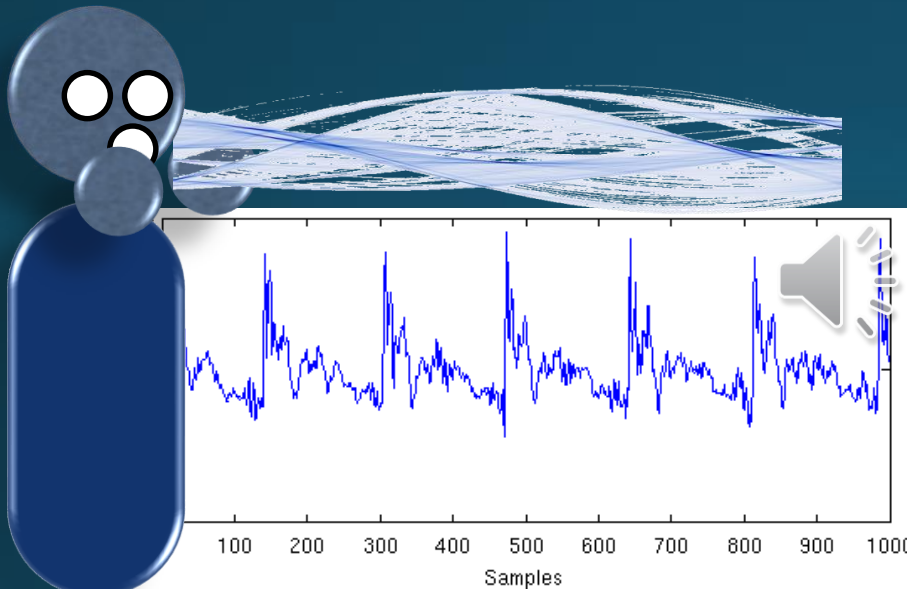
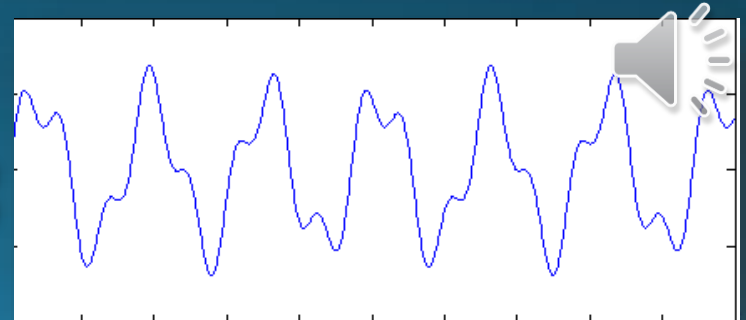
- Consider just the **periodic** segments.
- Fourier:  $f(t) = \sum_{i=0}^{\infty} w_i f_i(t)$ 
  - Especially nice:  
 $f_i(t) = \sin(\omega_i t + \phi_i)$



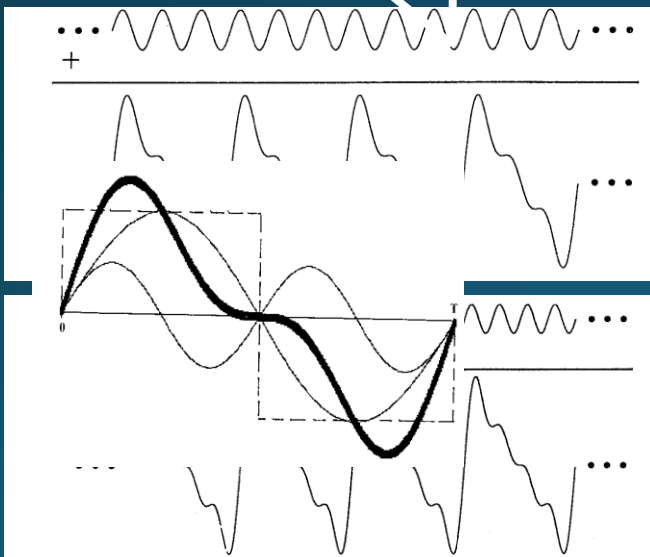
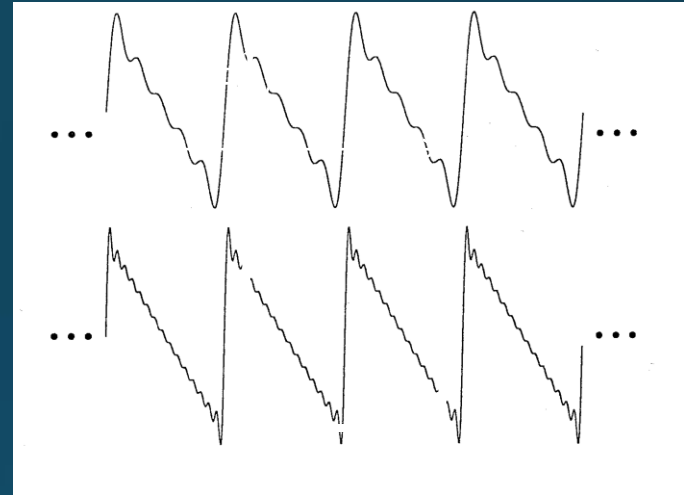
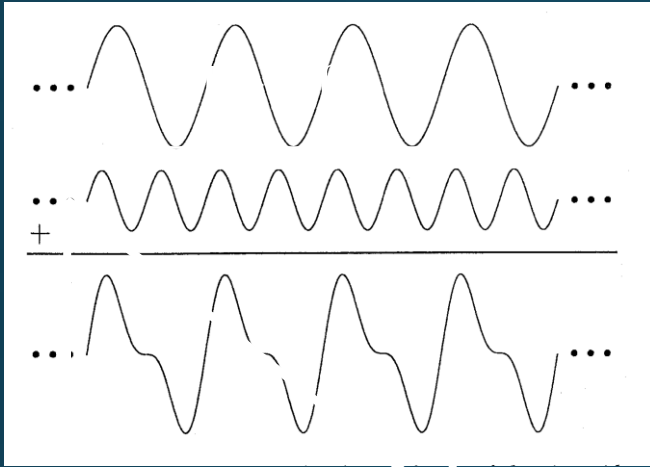
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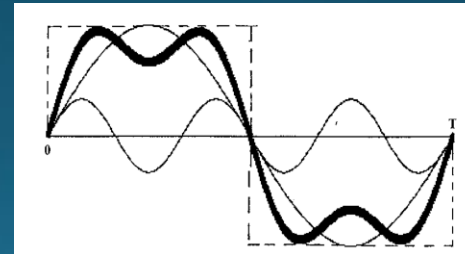
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# Signals as summed sinusoids



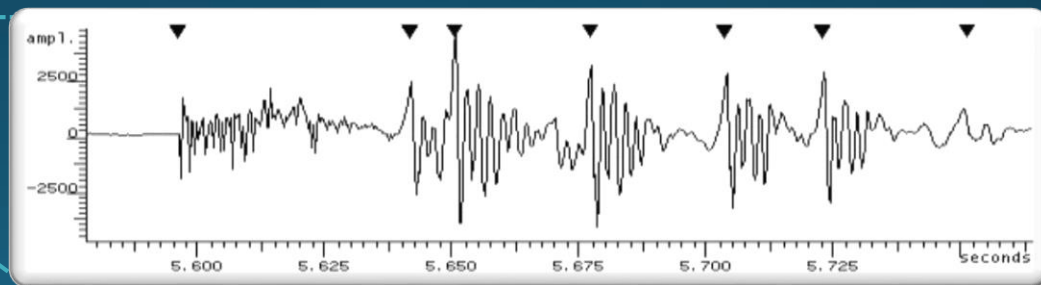
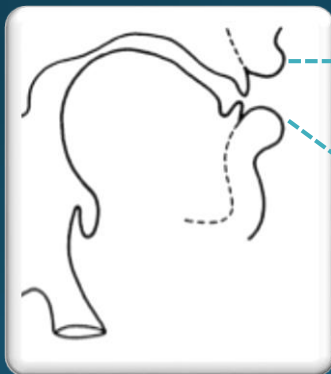
*Et c. ad infinitum*



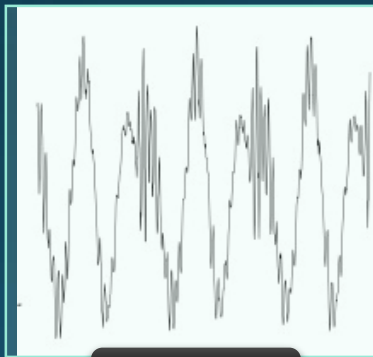
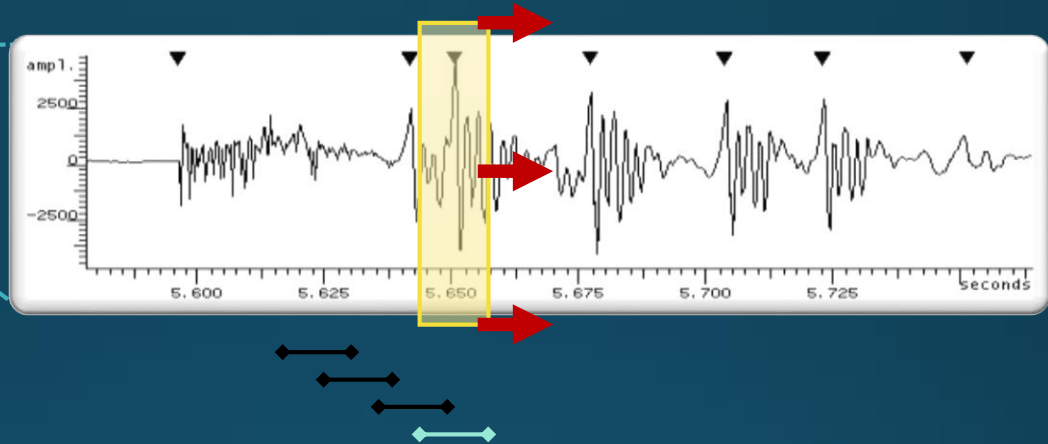
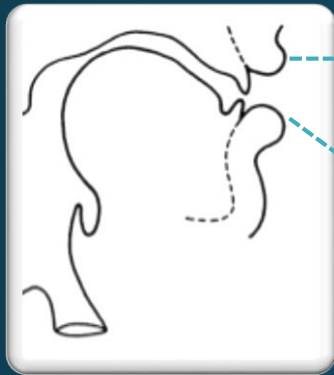
*Et c. ...*

# Extracting sinusoids from waves

- As we will soon see, the relative **amplitudes** and **frequencies** of the sinusoids that combine in speech are often **extremely indicative** of the **phoneme** being uttered.
  - $\therefore$  If we could **separate** the waveform into its component sinusoids, it would help us **classify** phonemes being uttered.



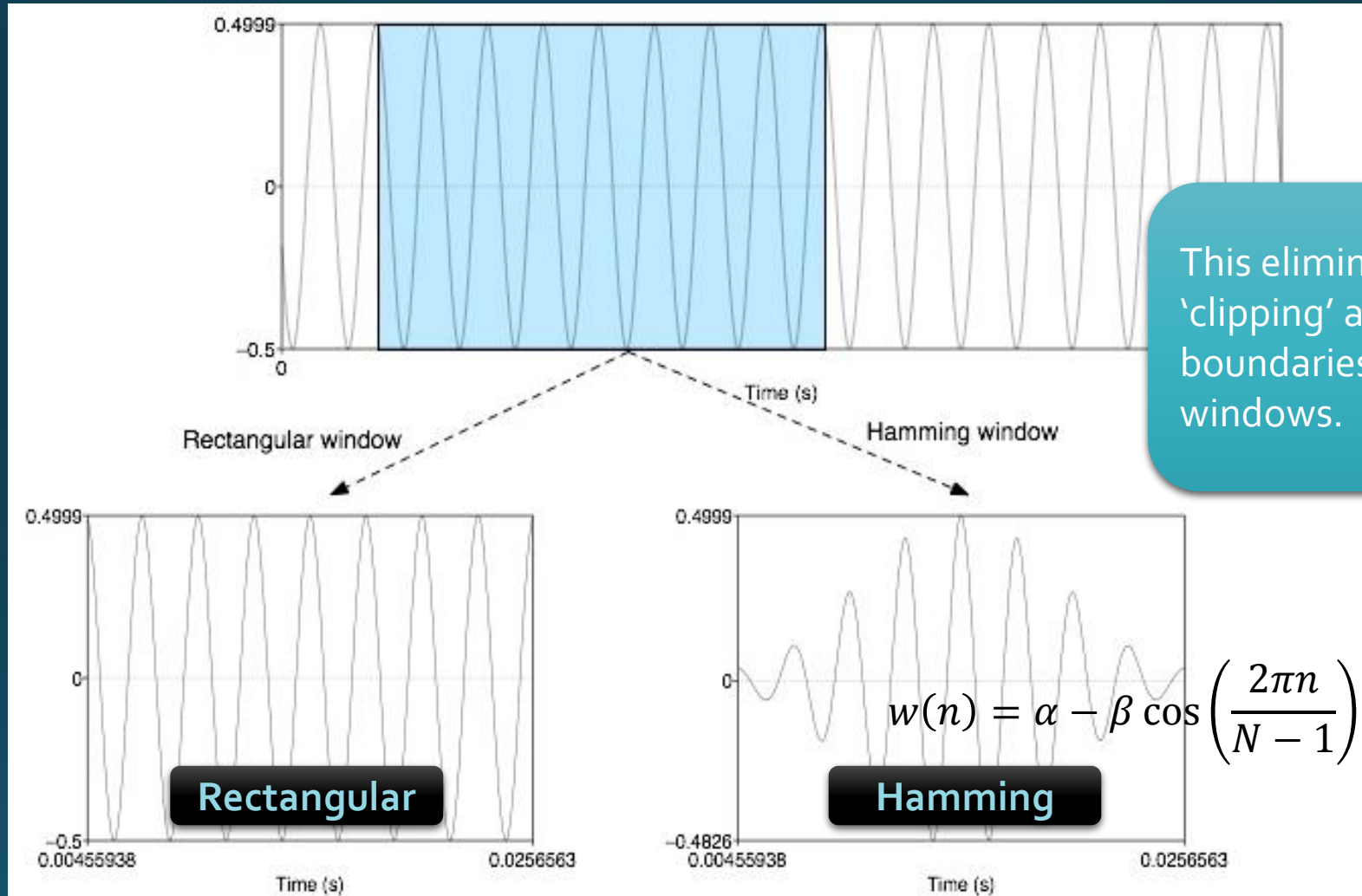
# Short-time windowing



Frame

- Speech waveforms **change** drastically in time.
- We **move** a short analysis **window** (*assumed to be time-invariant*) across the waveform in time.
  - E.g. frame shift: 5—10 ms
  - E.g. frame length: 10—25 ms

# Window types



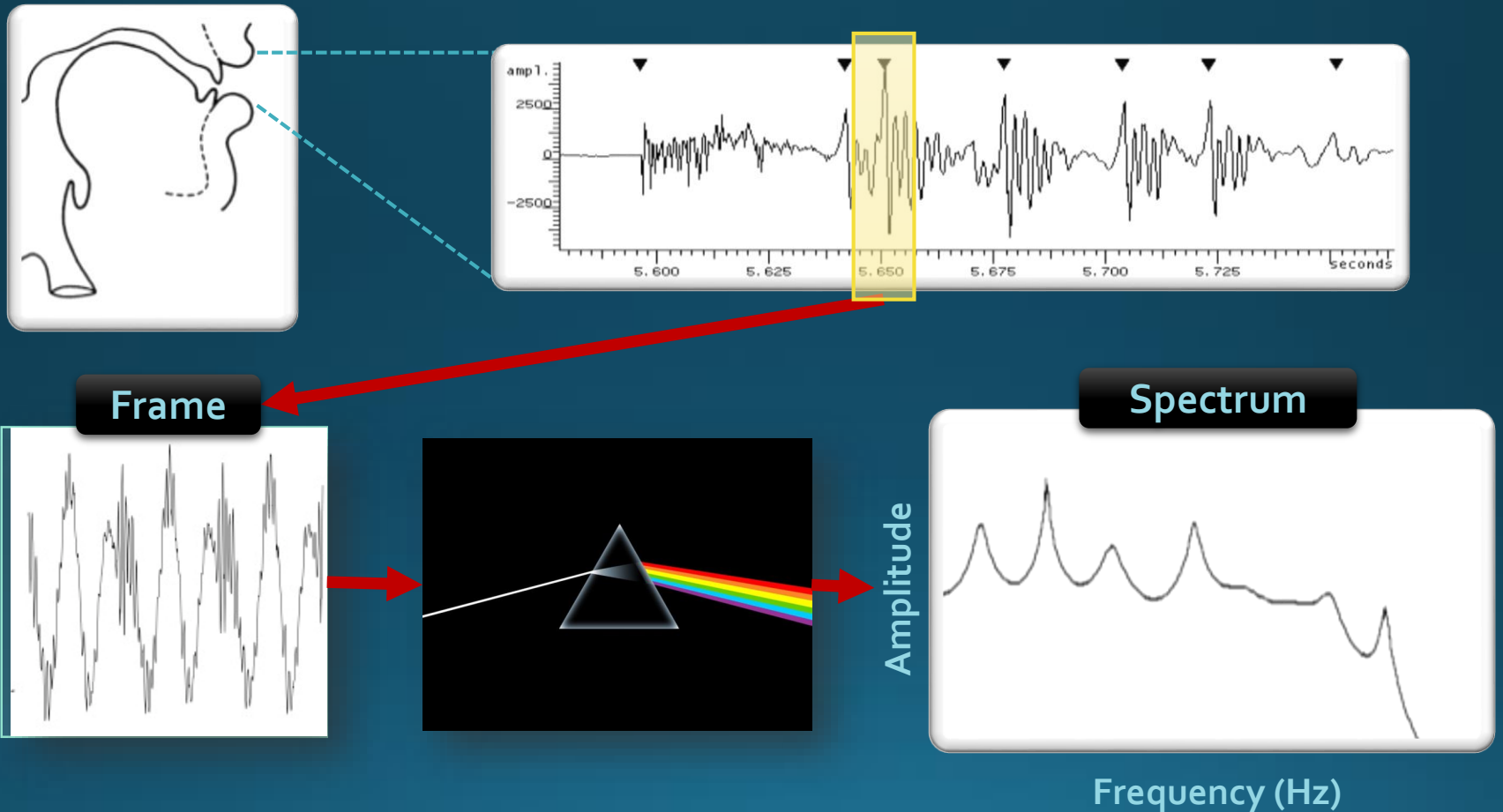
# Spectrum



Any colour  
you like  
(track 8)

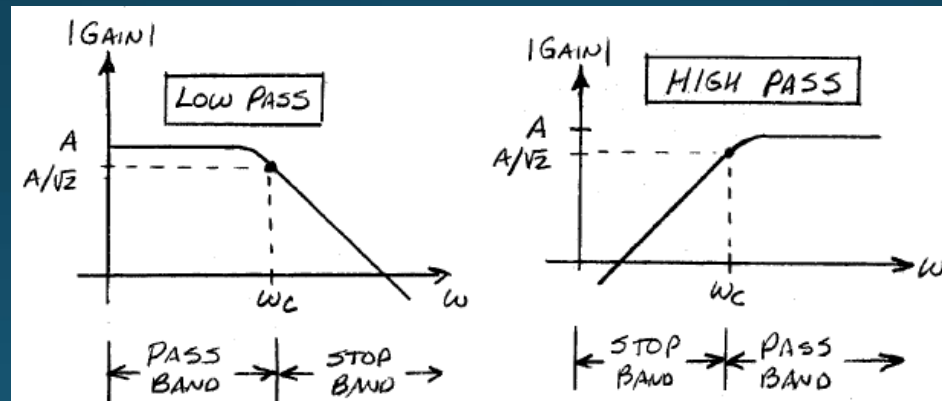


# Extracting a spectrum



# Filtering

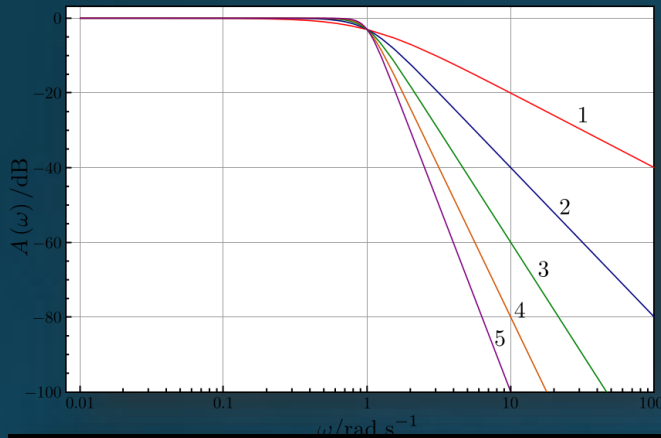
- Sometimes you only want part of a signal.
  - E.g., you have measurements of lip aperture over time – you know that they can't move  $> 5$ - $10$  Hz.
  - E.g., you know there's some low-frequency Gaussian noise in either the environment or transmission medium.



- Low- and high-pass filters can be combined in series, yielding a **band-pass filter**.

# Filtering

- The **Butterworth filter** is a **transfer function** designed to be maximally flat in the pass band.



$n$	Factors of Polynomial $B_n(s)$
1	$(s + 1)$
2	$s^2 + 1.4142s + 1$
3	$(s + 1)(s^2 + s + 1)$
4	$(s^2 + 0.7654s + 1)(s^2 + 1.8478s + 1)$

- The **transfer function** is 
$$H(s) = G_0 / B_n(s / \omega_c)$$
 where  $G_0$  is the gain at zero frequency, and  $\omega_c$  is the cutoff frequency.

- The **gain** of the  $n^{th}$ -order Butterworth filter is

$$G^2(\omega) = \frac{G_0^2}{1 + \left(\frac{\omega}{\omega_c}\right)^{2n}}$$

# The continuous Fourier transform



- So we can **attenuate** frequencies above or below certain cut-offs.
- But, can we **measure** the actual **amount** of frequency  $F$  in a time signal  $x(t)$ ?

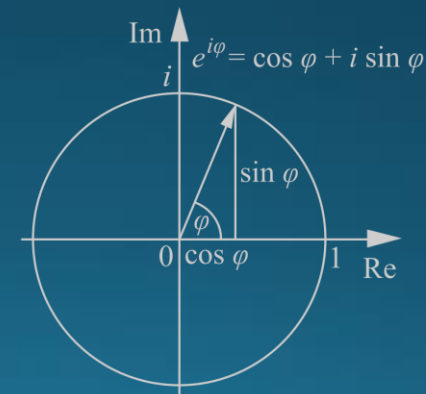
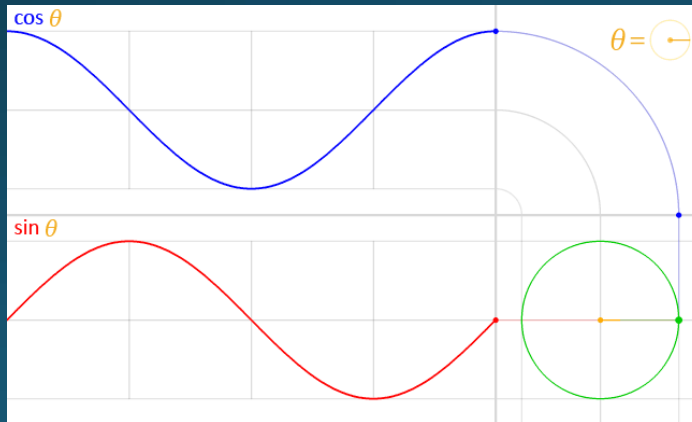
# Euler's formula

- Extracting spectra is made easier using **Euler's formula**:

$$e^{ix} = \cos(x) + i \sin(x) \quad i^2 = -1$$

$$e^{i\pi} = -1$$

**Euler's  
identity**



# The Fourier transform: intuition



1. If we ignore phase, we only care about the real part, so  
 $\cos(\omega t) = e^{i\omega t}$  is **one** component.

2. How much '7' is in '42'?  
There is  $42/7 = 6$  7s in 42. Similarly,  
How much [18 Hz] is there in  $x(t)$ ?  
There is  $x(t)/[18\text{Hz}]$ .

3. How much freq.  $\omega$  is in  $x(t)$ ?

$$x(t)/\cos(\omega t) = x(t)/e^{i\omega t} = x(t)e^{-i\omega t}$$

4. And over the entire signal?

$$X(\omega) = \int_{-\infty}^{\infty} x(t)e^{-i\omega t} dt$$

# The continuous Fourier transform



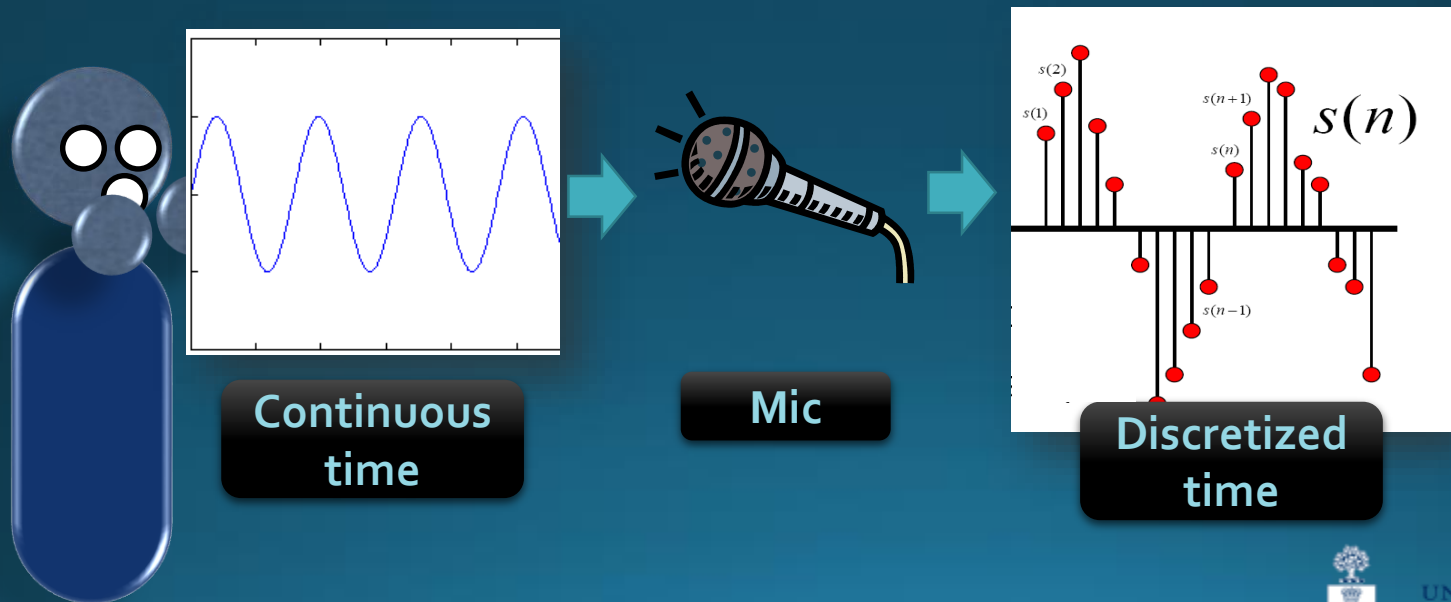
- **Input:** Continuous signal  $x(t)$ .
- **Output:** Spectrum  $X(F)$  ( $\omega = 2\pi F$ )

$$X(F) = \int_{-\infty}^{\infty} x(t) e^{-i2\pi Ft} dt$$

- It's **invertible**, i.e.,  $x(t) = \int_{-\infty}^{\infty} X(F) e^{i2\pi Ft} dF$ .
- It's **linear**, i.e., for  $a, b \in \mathbb{C}$ ,  
if  $h(t) = ax(t) + by(t)$ ,  
then  $H(F) = aX(F) + bY(F)$
- ...
- It needs a **continuous** input  $x(t)$ ....*uh oh?*

# Discrete signals

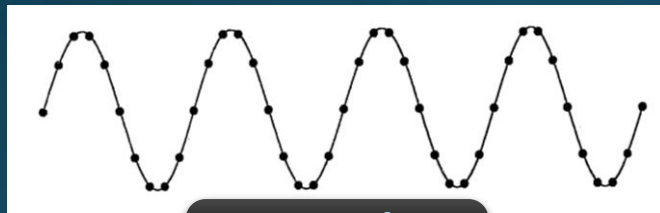
- **Sampling:** *vbg.* measuring the amplitude of a signal at regular intervals.
  - e.g., 44.1 kHz (*CD*), 8 kHz (*telephone*).
  - These amplitudes are initially measured as **continuous** values at **discrete** time steps.



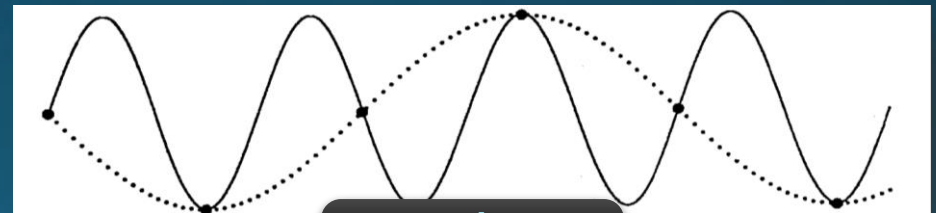


# Discrete signals

- **Nyquist rate:**  $n$ . the **minimum** sampling rate necessary to preserve the **maximum** frequency.
  - i.e., **twice** the maximum frequency, since we need  $>2$  samples/cycle.
  - Human speech is quite informative  $\leq 4$  kHz,  $\therefore$  8 kHz sampling.



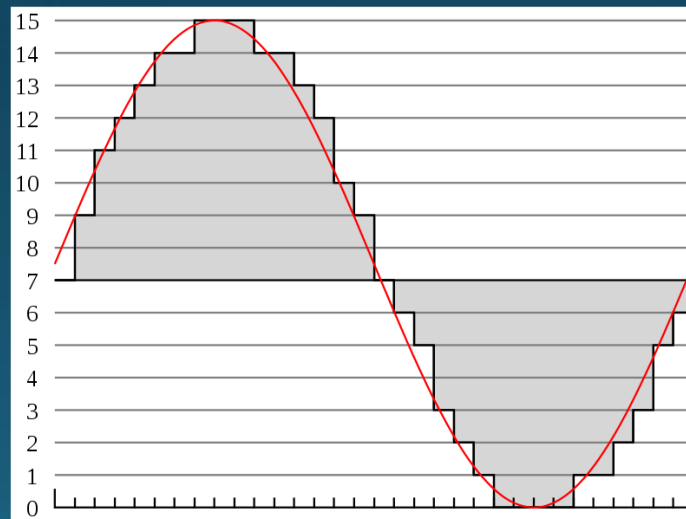
Good  
sampling



Under-  
sampling

# Discrete signals

- **Quantization:** *n.* the conversion of **floating point** amplitude sample values to **integers**.
- **PCM:** *n.* (pulse code modulation) a method of quantization in which the analog amplitude is quantized at **uniform intervals**.  
(e.g., 8 bit ( $-128..127$ ), 16 bit ( $-32768..32767$ )).



# Discrete Fourier transform (DFT)



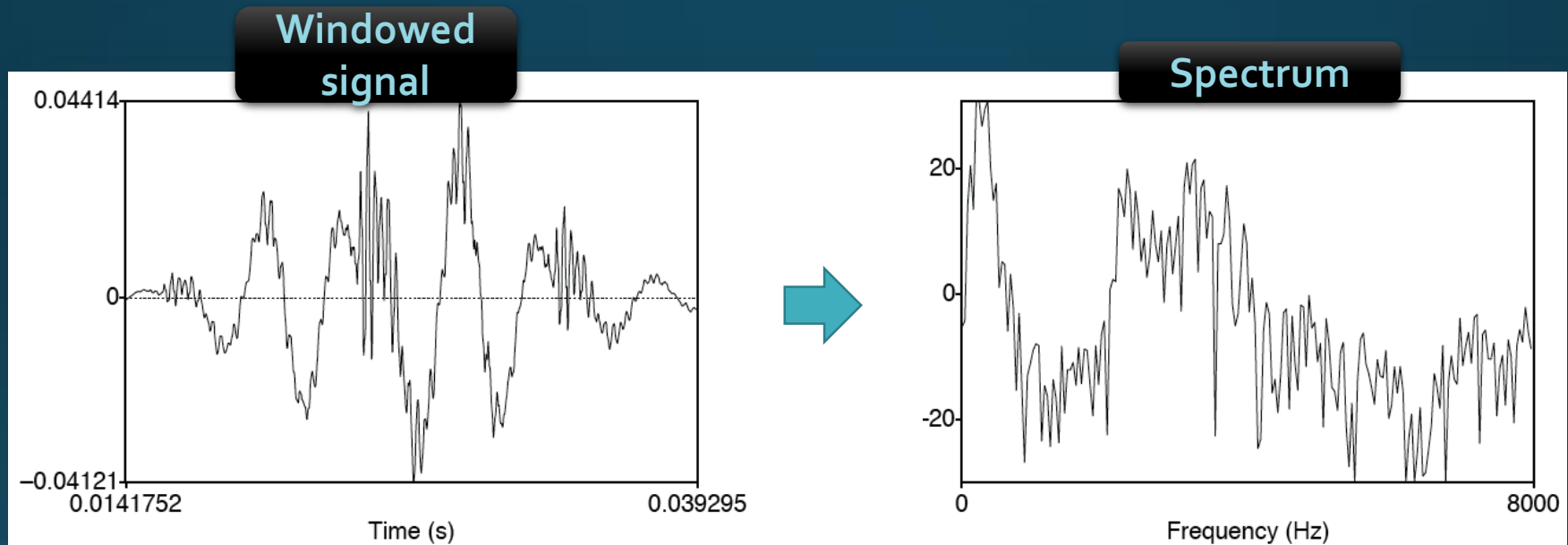
- **Input:** Windowed signal  $x[0] \dots x[N - 1]$ .
- **Output:**  $N$  complex numbers  $X[k]$  ( $k \in \mathbb{Z}$ )

$$X[k] = \sum_{n=0}^{N-1} x[n] e^{-i2\pi k \frac{n}{N}}$$

- **Algorithm(s):** the **Fast Fourier Transform** (FFT) with complexity  $O(N \log N)$ .
  - The **Cooley-Tukey algorithm** *divides-and-conquers* by breaking the DFT into smaller ones  $N = N_1 N_2$ .

# Discrete Fourier transform (DFT)

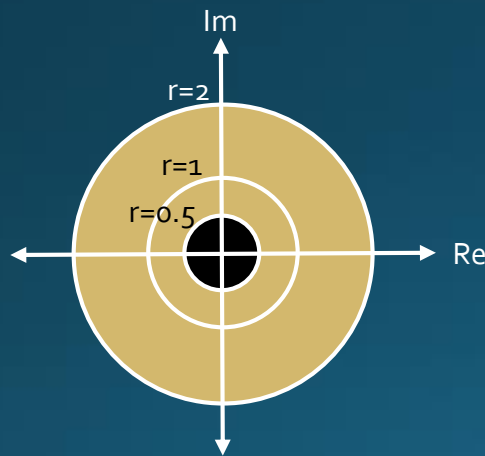
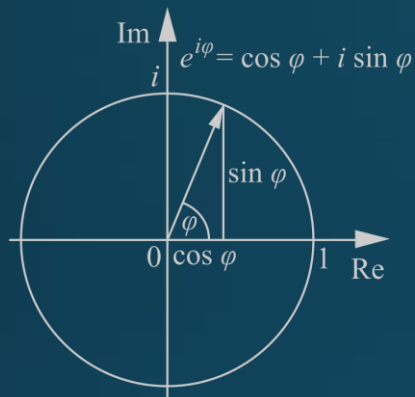
- Below is a 25 ms Hamming-windowed signal from /iy/, and its spectrum as computed by the DFT.



← Recall: the Fourier transform is invertible

This really only covers a particular set of sinusoidal functions...

# The z-transform



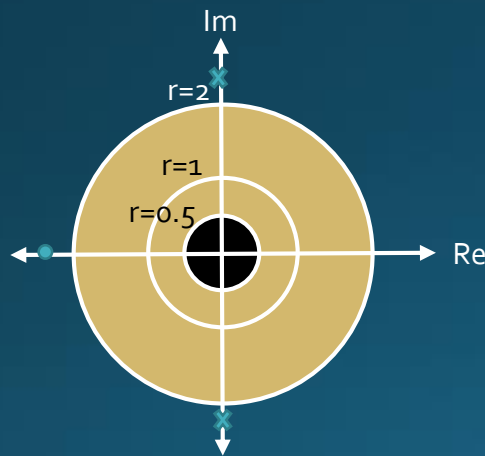
- What if we don't *need* the unit circle,  $r = 1$ ?
- $X(z) = \sum_{n=-\infty}^{\infty} x[n]z^{-n}$ ,
  - where  $z \in \mathbb{C}$  so  $z = re^{i\omega}$
- Requires a **region of convergence** in the complex plane where the summation converges.
  - $RoC = \{z: |\sum_{n=-\infty}^{\infty} x[n]z^{-n}| < \infty\}$
- If **yellow region** on left is RoC, then discrete-time Fourier transform exists, since  $r = 1$  is in the RoC.

# Poles and zeros

- **Transfer functions** of linear time-invariant (LTI) systems have this form:

$$H(s) = \frac{P(s)}{Q(s)} = \frac{G \cdot \sum_{m=0}^M b_m s^m}{s^N + \sum_{n=0}^{N-1} a_n s^n}$$

where  $G$  is the **gain**,  $M$  and  $N$  are **orders** of polynomials, and  $b_m$  &  $a_n$  are **coefficients** of those polynomials.



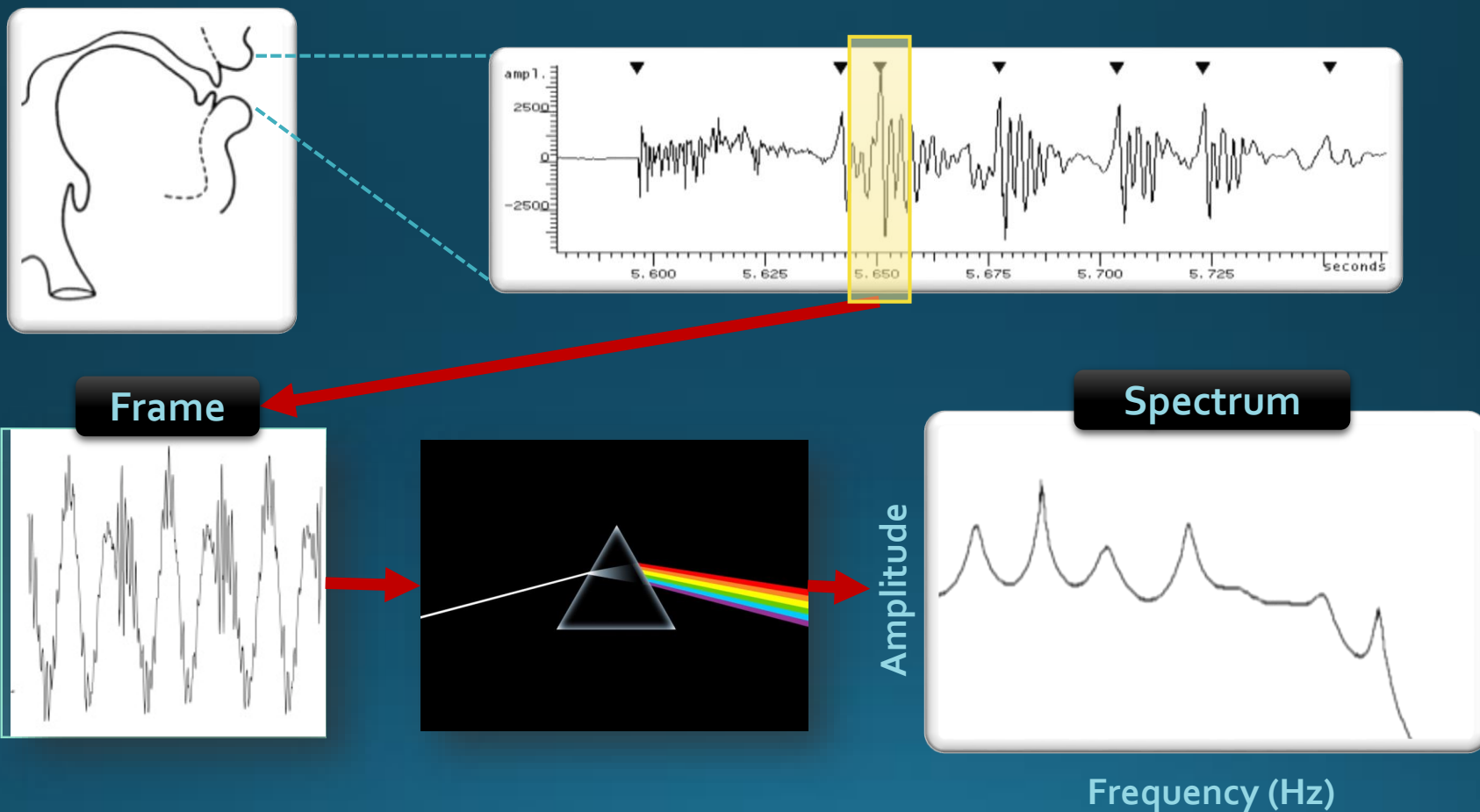
- Zeros occur when  $P(s)|_{s=\beta_m} = 0$ .
- Poles occur when  $Q(s)|_{s=\alpha_n} = 0$ .
- The RoC cannot contain any poles.

Q: Why do Polish airlines only fill half of their seats?

A: Because Poles on the right half of the plane are unstable.

([http://en.wikipedia.org/wiki/Nyquist\\_stability\\_criterion](http://en.wikipedia.org/wiki/Nyquist_stability_criterion))

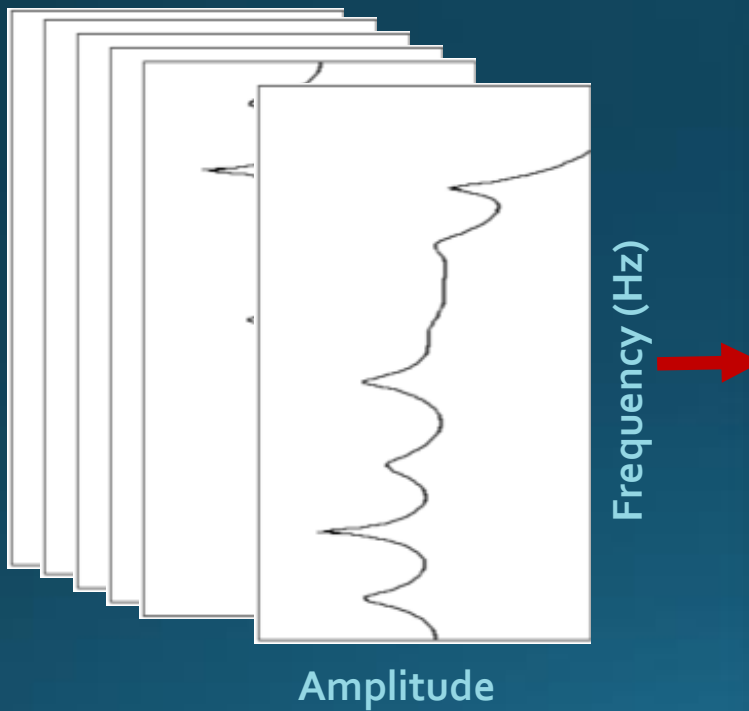
# Extracting a spectrum



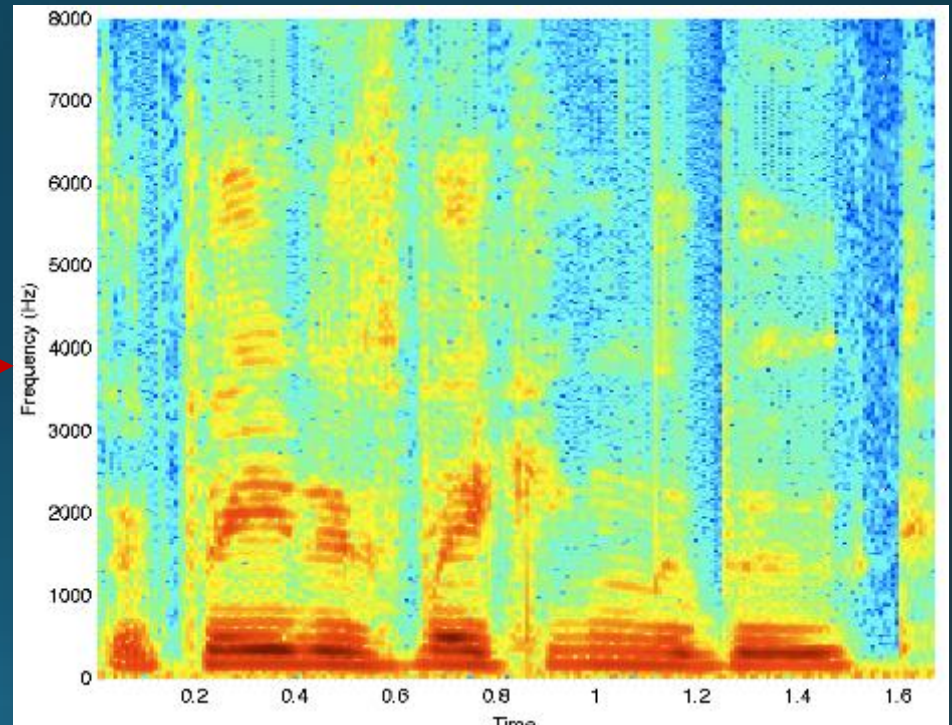
But in speech we need many successive windows...

# Spectrograms

- **Spectrogram**: *n.* a 3D plot of **amplitude** and **frequency** over **time** (higher 'redness' → higher amplitude).



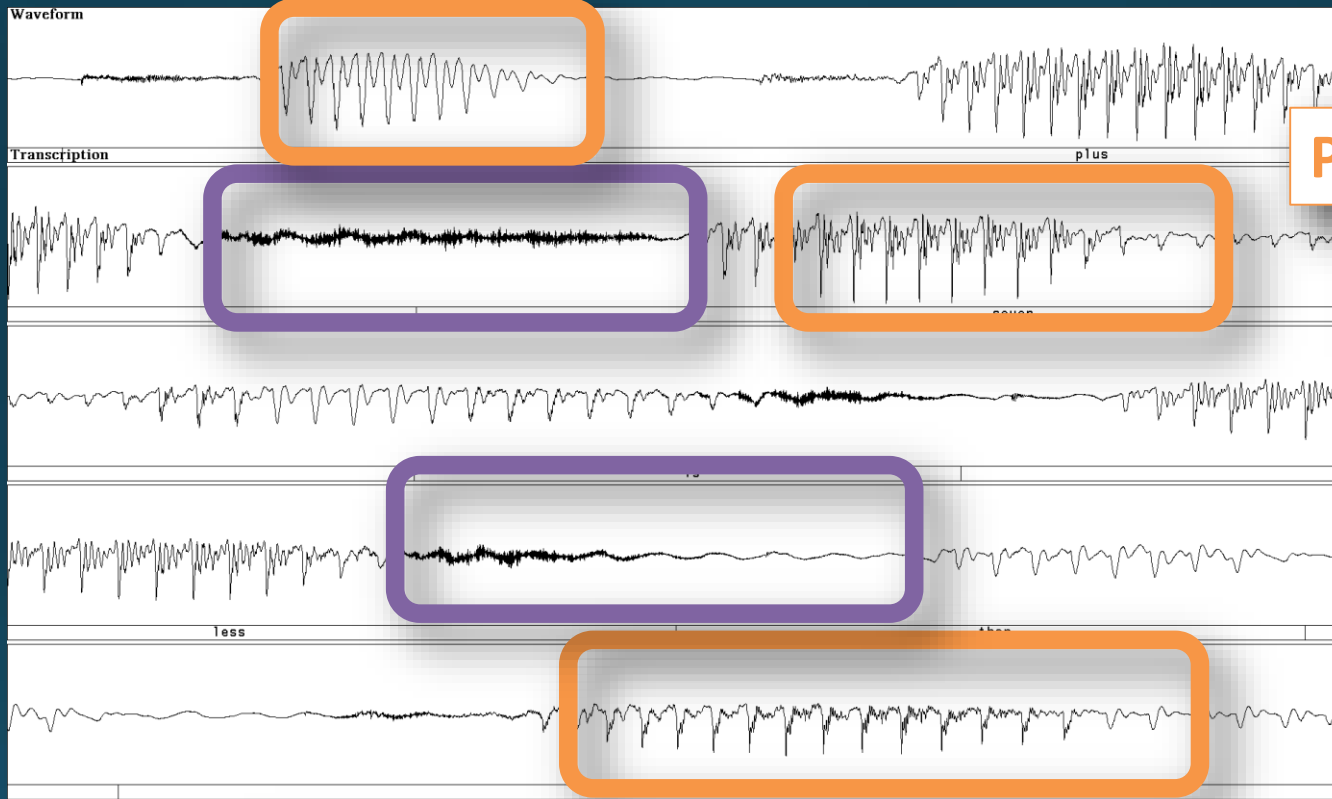
Frames



Spectrogram



# Speech signals

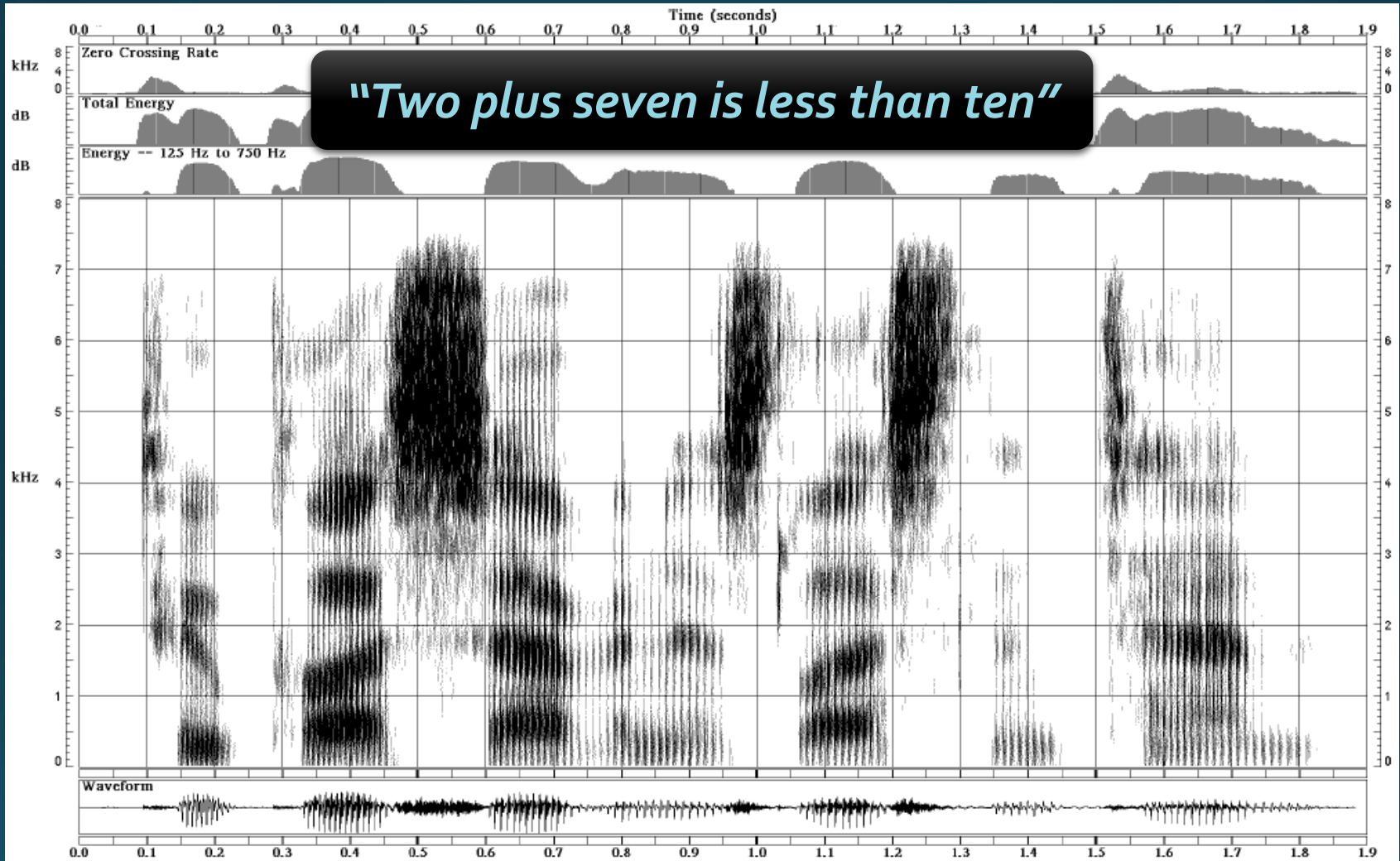


Periodic

Noisy

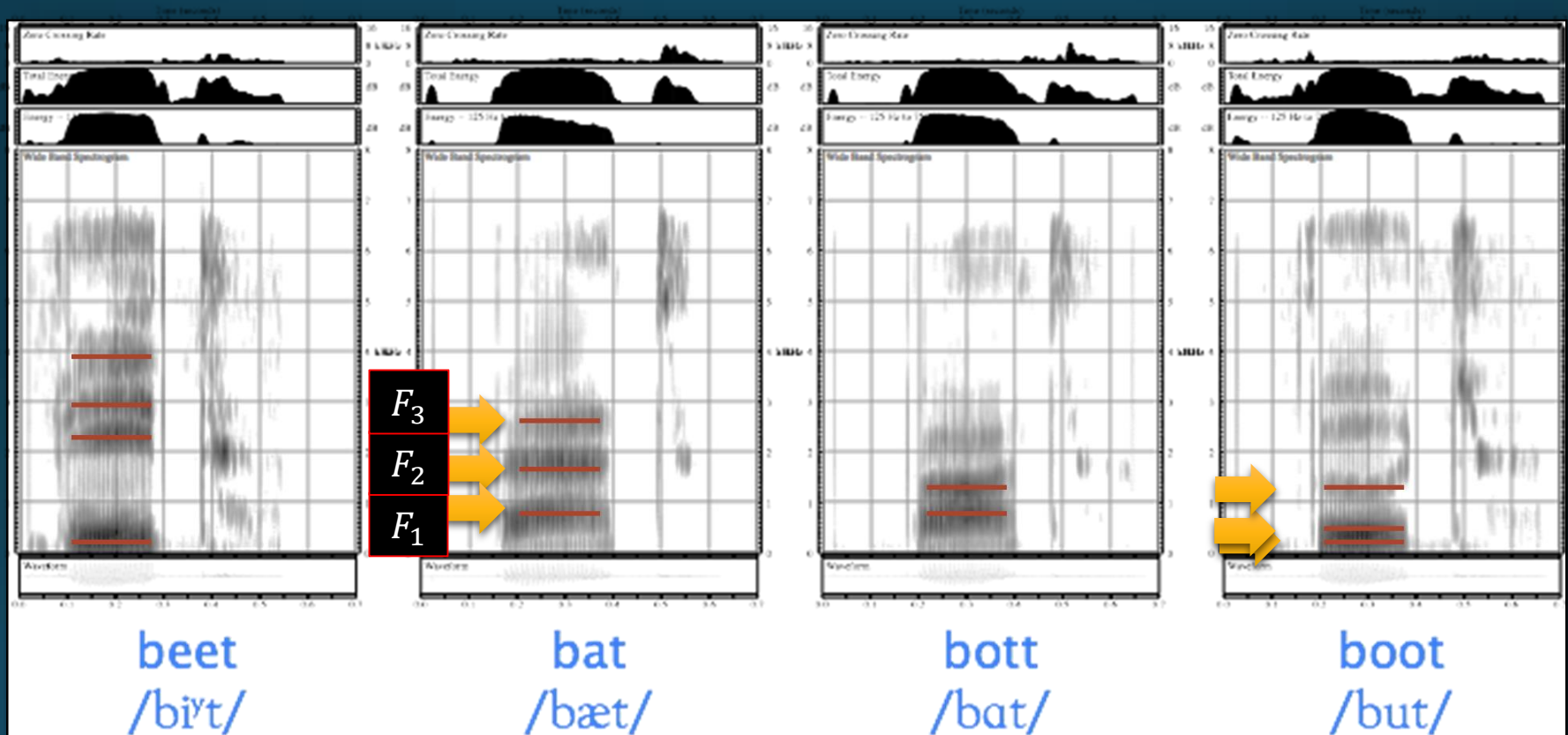
*"Two plus seven is less than ten"*

# Spectrograms



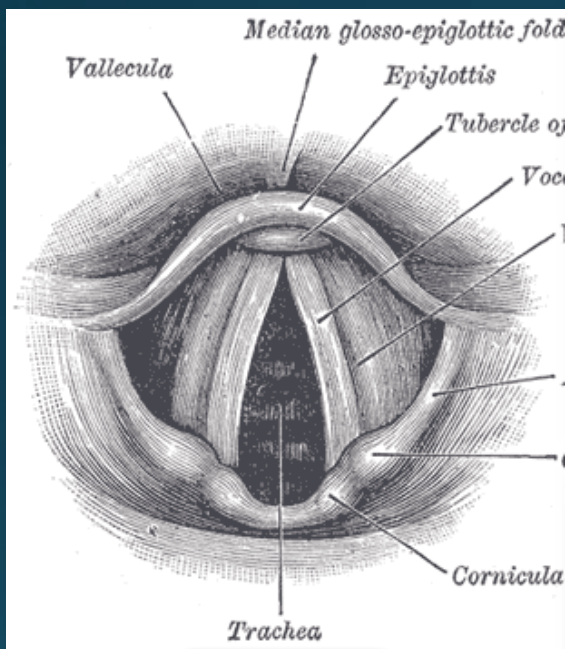
# Formants and phonemes

- **Formant:** *n*. A concentration of energy within a frequency band. Ordered from low to high bands.

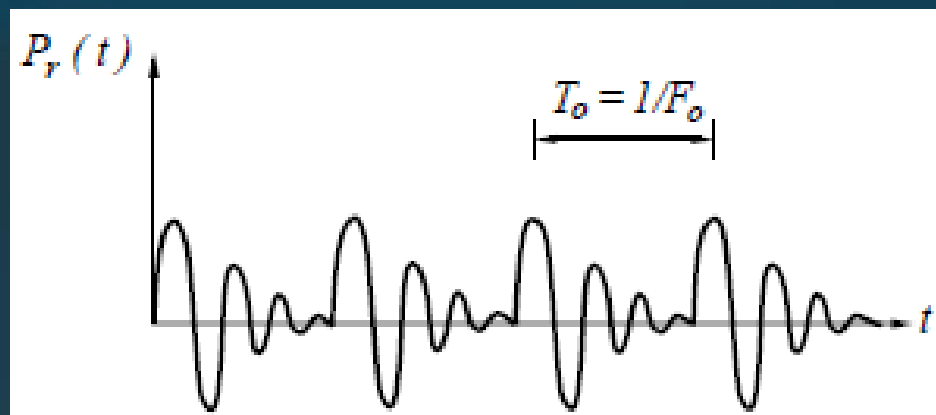


# Fundamental frequency

- $F_0$ : *n.* (fundamental frequency), the rate of vibration of the **glottis** – often very indicative of the speaker.



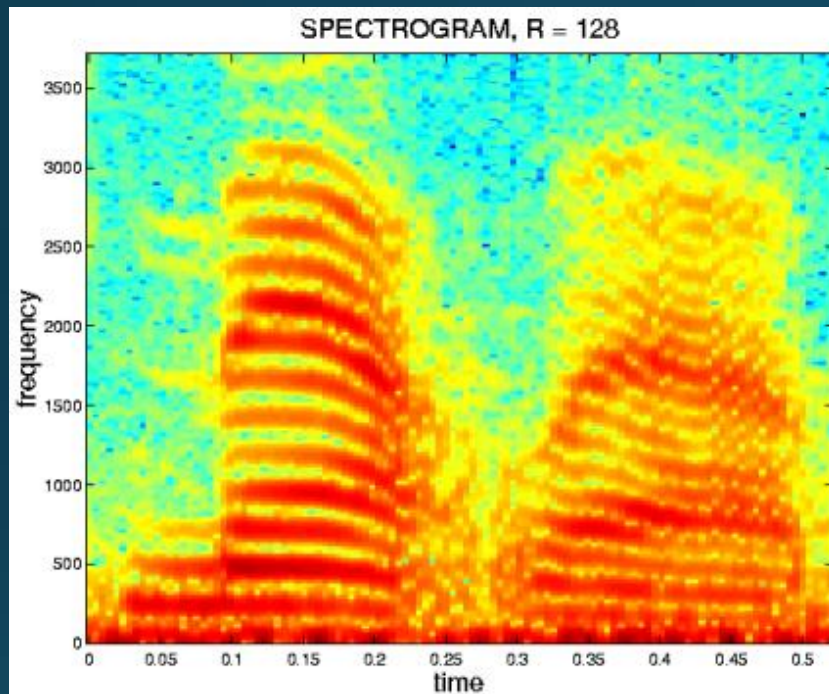
**Glottis**



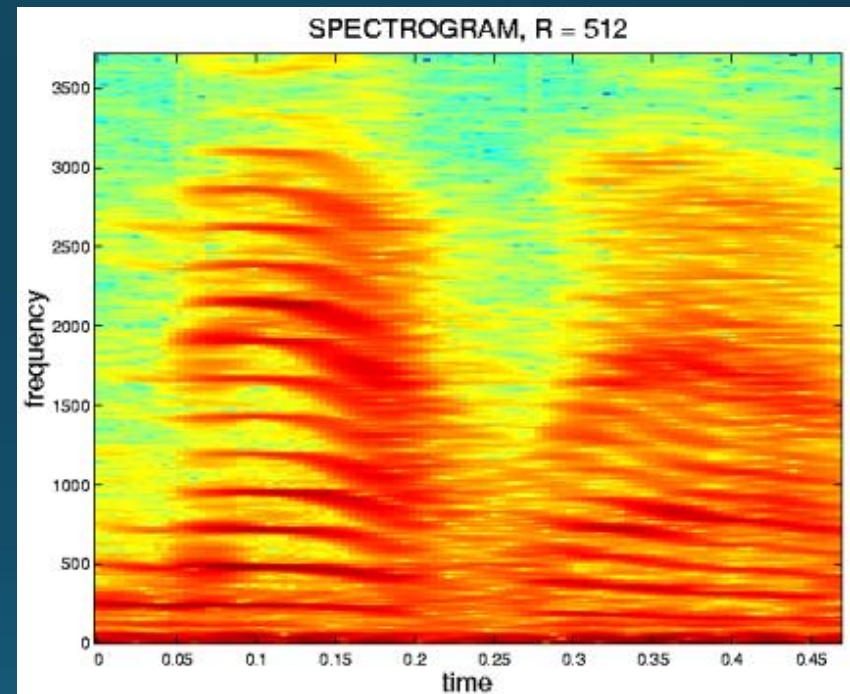
	Avg $F_0$ (Hz)	Min $F_0$ (Hz)	Max $F_0$ (Hz)
Men	125	80	200
Women	225	150	350
Children	300	200	500

Formants (should) occur at multiples of  $F_0$

# Effect of window length



Wide-band  
(better time  
resolution)



Narrow-band  
(better frequency  
resolution)

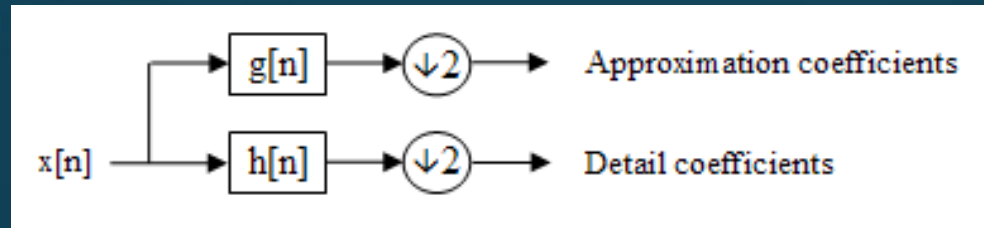
# Wavelet transforms

- **Avoid** problem of resolution, and can **adapt** to changes in the signal over time (i.e., non-stationary signals).
- Wavelet transforms consist of **scaled** and **translated** versions ('daughter wavelets') of basis functions.





# Wavelet transforms



where, given low- and high-pass filters ( $g$  and  $h$ , respectively),

- **Approx:**  $y_{low} = (x * g) \downarrow 2, y_{low}[n] = \sum_{k=-\infty}^{\infty} x[k]g[2n - k]$
- **Detail:**  $y_{high} = (x * h) \downarrow 2, y_{high}[n] = \sum_{k=-\infty}^{\infty} x[k]h[2n - k]$

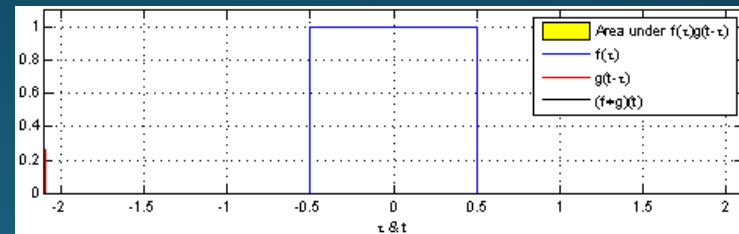
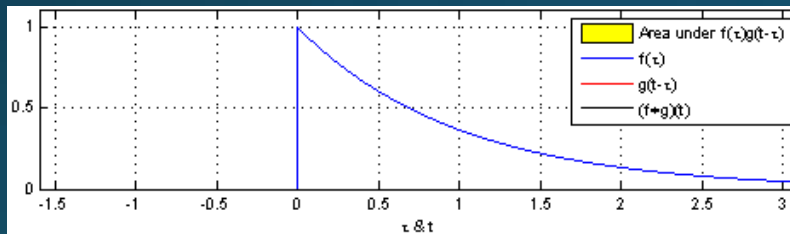
Convolution

Downsampled

# Convolution?

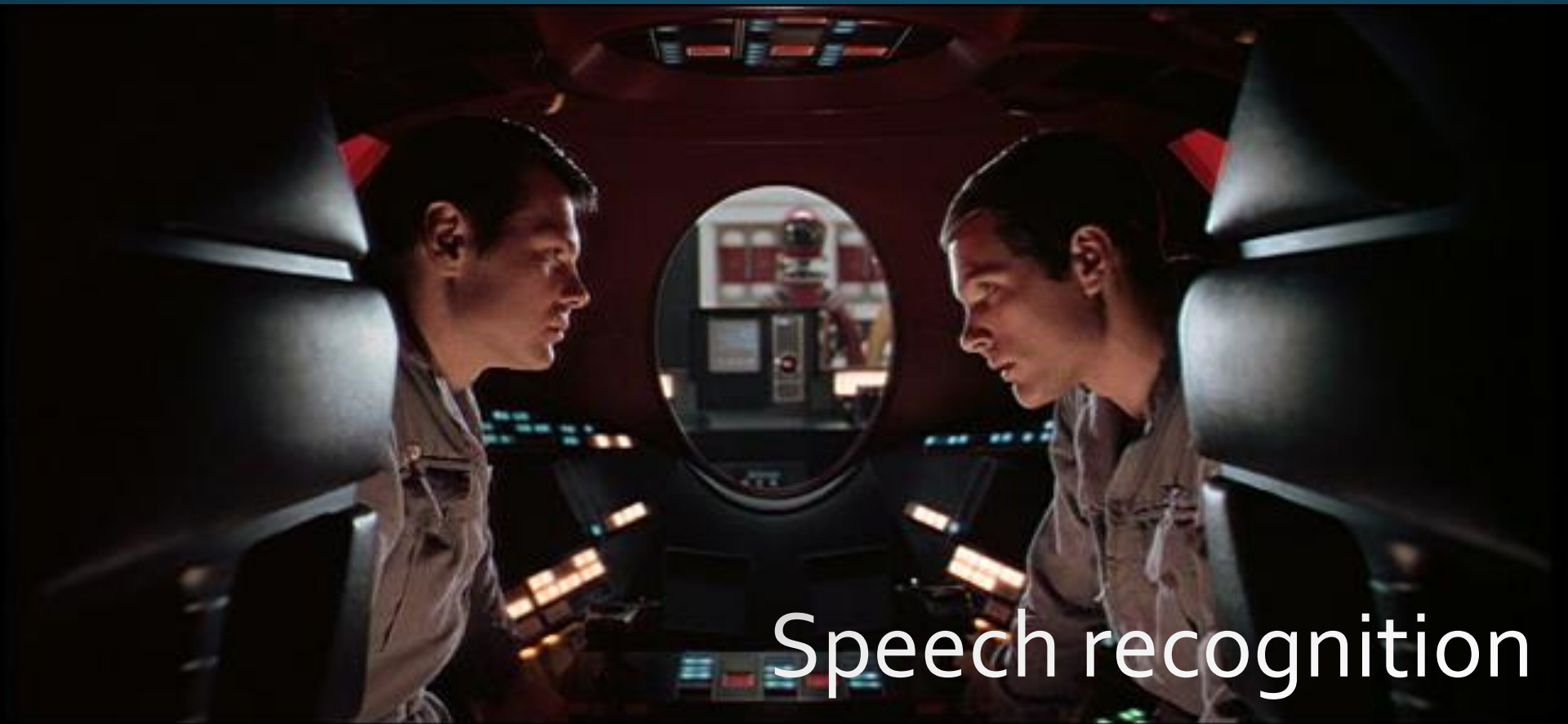
- The **convolution** of two functions,  $f * g$ , is the amount of **overlap** between two functions as one is **translated**.
- Discrete version:

$$(f * g)[n] = \sum_{m=-\infty}^{\infty} f[m]g[n - m]$$



- It is related to cross-correlation, which is a measure of similarity.

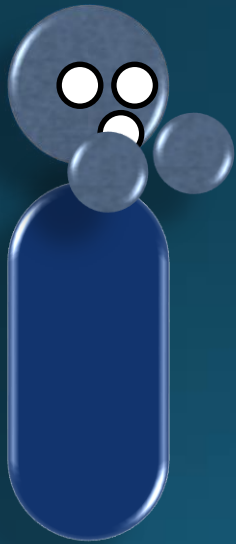




# Speech recognition

# Speech as a sequence of phonemes

/ow p ah n dh ah p aa db ey d ao r z/



"open the pod bay doors"

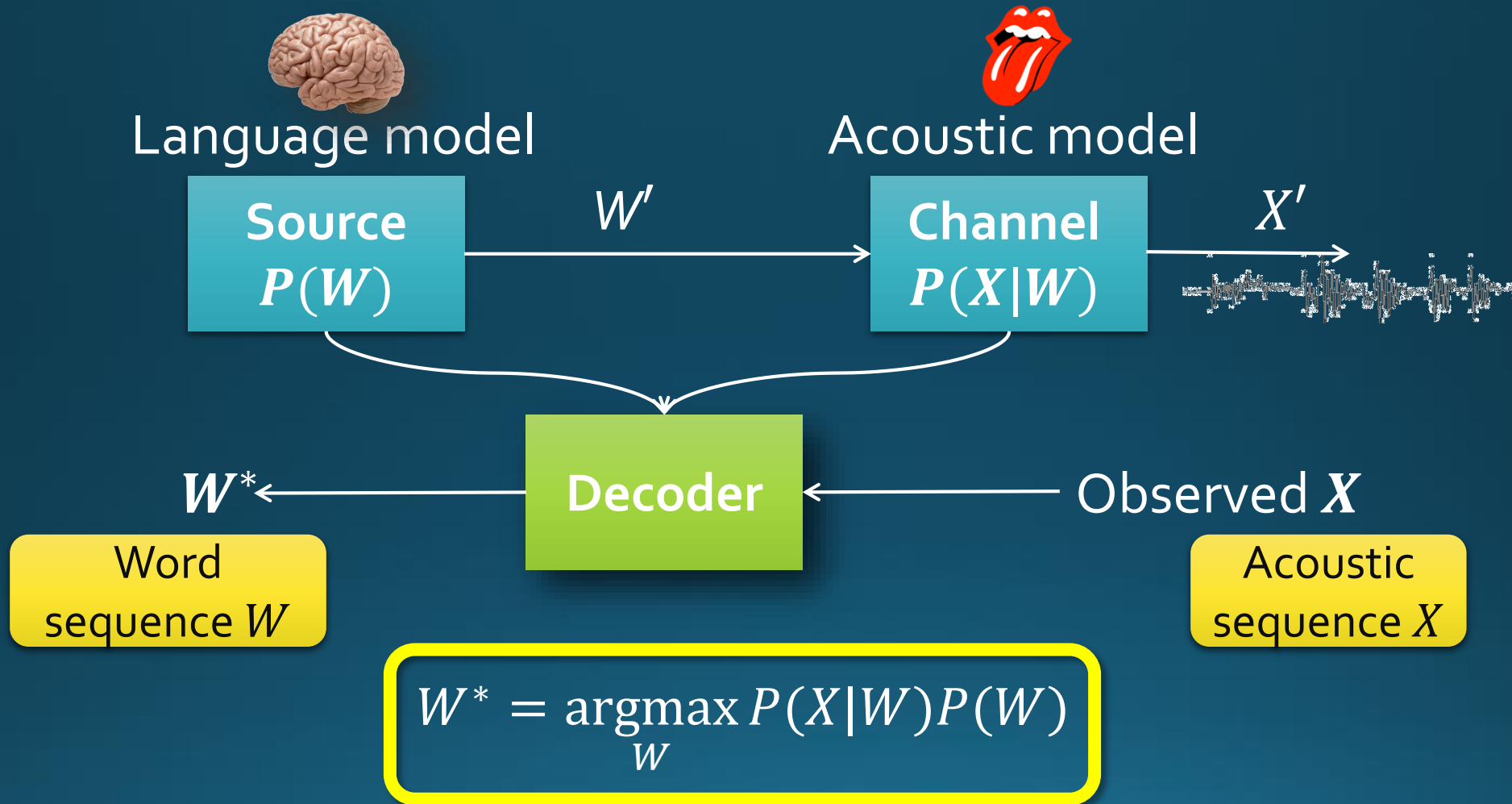


```
open (podBay.doors);
```



We want to convert  
a series of acoustic observation vectors into  
a sequence of phonemes or words.

# The noisy channel model in ASR



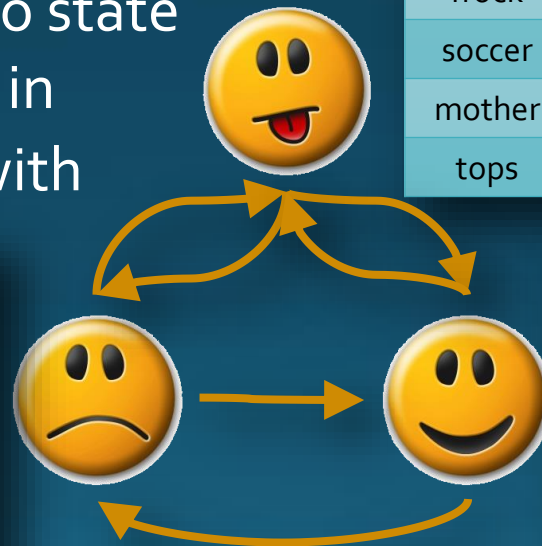
How to encode  $P(X|W)$ ?

# Reminder – discrete HMMs

- In **discrete Hidden Markov Models**, at each state we observe a discrete symbol.
- We **transition** from state  $s_i$  to state  $s_j$  with probability  $a_{ij}$ . While in state  $s$  we **observe** word  $w$  with probability  $b_s(w)$ .

word	P(word)
ship	0.1
pass	0.05
camp	0.05
frock	0.6
soccer	0.05
mother	0.1
tops	0.05

word	P(word)
ship	0.25
pass	0.25
camp	0.05
frock	0.3
soccer	0.05
mother	0.09
tops	0.01

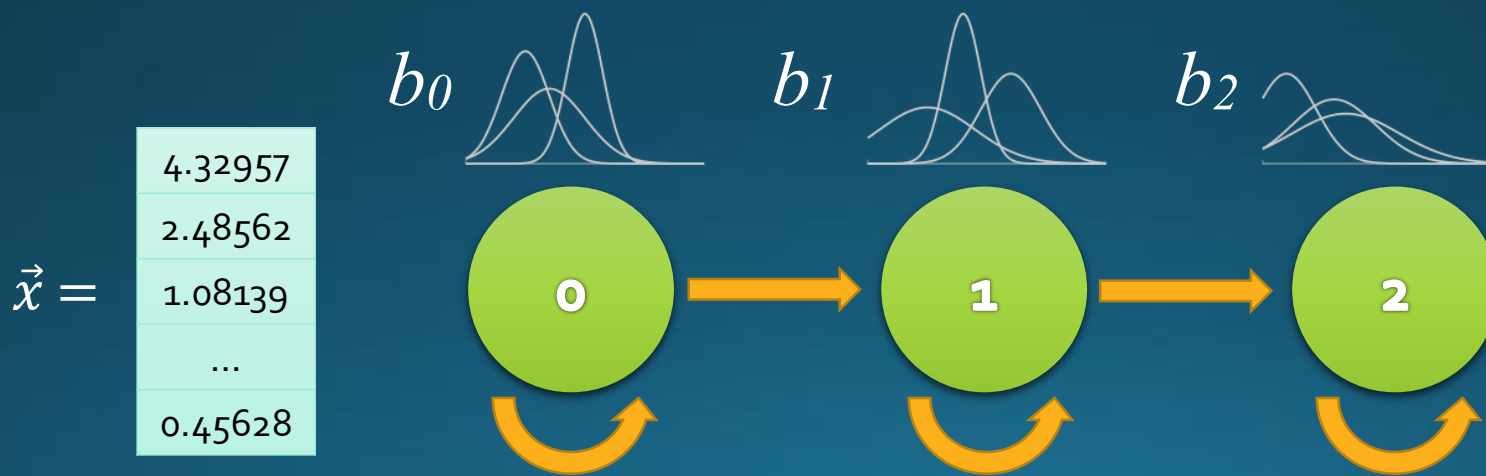


word	P(word)
ship	0.3
pass	0
camp	0
frock	0.2
soccer	0.05
mother	0.05
tops	0.4

But acoustics aren't discrete...

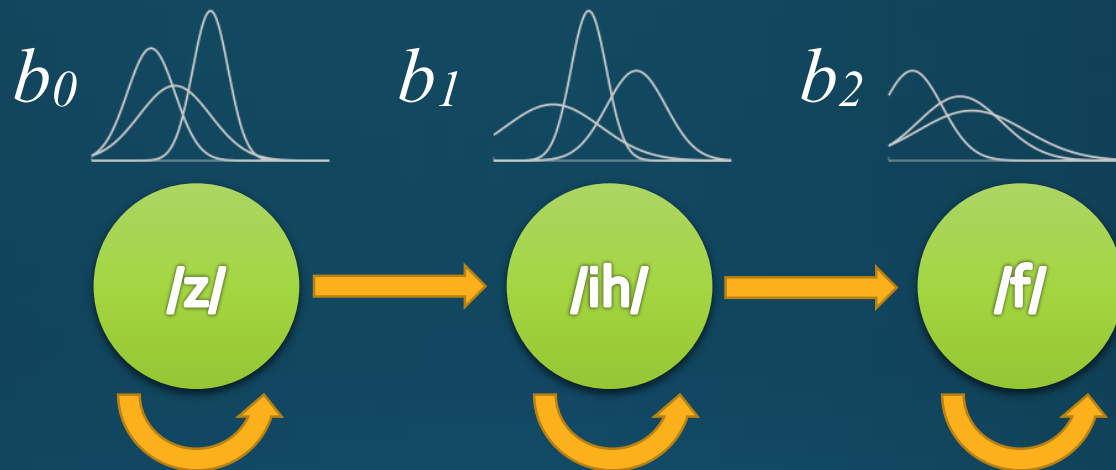
# Continuous HMMs

- A **continuous HMM** has **continuous** output observations.
  - Observation probabilities,  $b_i$ , are also continuous.
  - E.g., here  $b_0(\vec{x})$  tells us the probability of seeing the (multivariate) continuous observation  $\vec{x}$  while in state 0.



# One HMM per word?

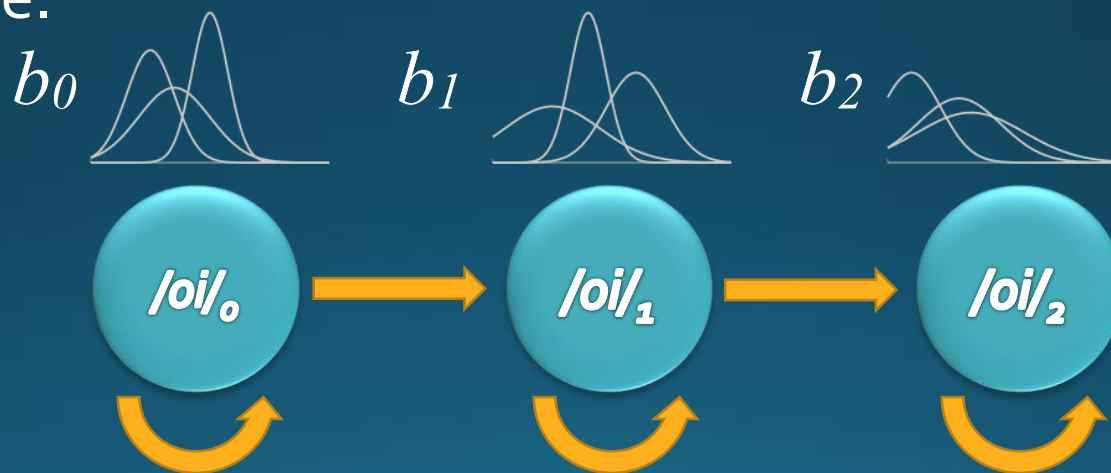
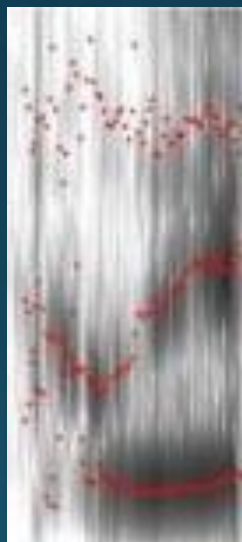
- In a word-level HMM, each state might be a phoneme.



- Imagine that we want to learn an HMM for each word in our lexicon (e.g., **160K words**  $\rightarrow$  **160K HMMs**).
- **No, thank you!** According to **Zipf's law**, we expect *many* words to occur *very* infrequently.
  - 1 (or a few) training examples of a word is *not* enough to train a model as highly parameterized as a CHMM.

# One HMM per phoneme?

- Phonemes change over time – we model these dynamics by building one HMM for each phoneme.
  - **Tristate** phoneme models are popular.
    - The centre state is often the 'steady' part of the phoneme.



tristate phoneme model (e.g., /oi/)

How do we learn these probabilities?

# Training phoneme HMMs

- Training data for a phoneme HMM come from *all* sequences of that phoneme.
  - *Even from different words.*

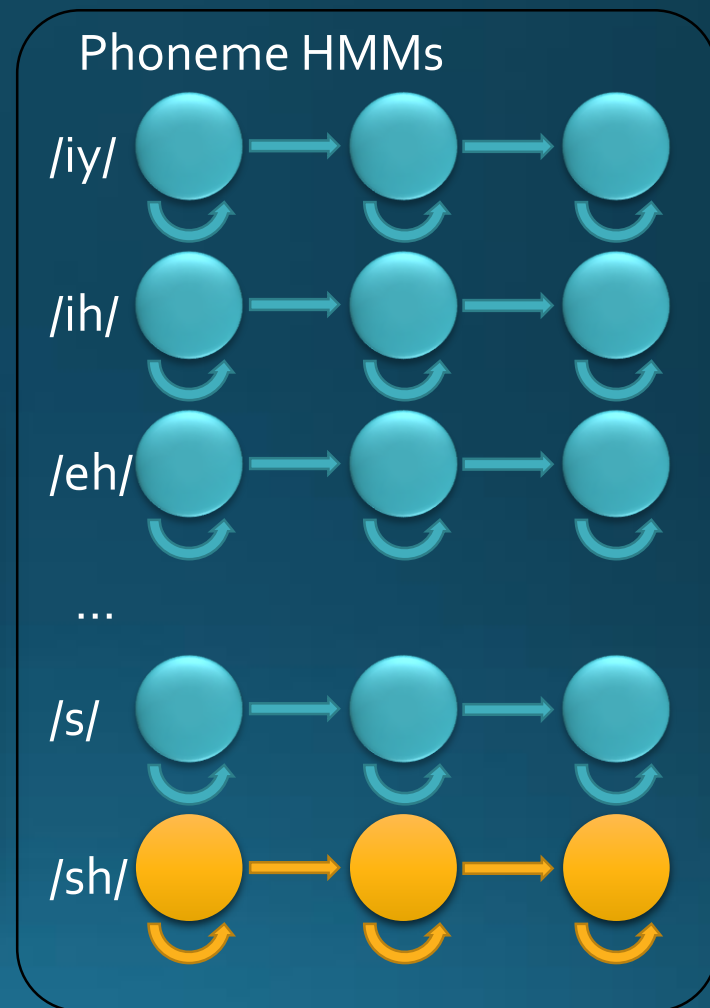
```

...
64 85 ae
85 96 sh
96 102 epi
102 106 m
...
    
```

annotation

		Time, $t$				
		...	85	...	96	...
Feature	1	...		...		...
	2	...		...		...
	3	...		...		...
	...	...		...		...
	42	...		...		...

observations





# Combining HMMs

- We can learn an  $N$ -gram language model from word-level and phoneme-level annotations of speech data.
  - These models are discrete and are trained using MLE.
- Our phoneme HMMs together constitute an acoustic model.
  - Each phoneme HMM tells us how a phoneme 'sounds'.
- We can **combine** these models by **concatenating** together phoneme HMMs according to a known lexicon or phonemic dictionary.

```
...  
EVOLUTION          EH2 V AH0 L UW1 SH AH0 N  
EVOLUTION (2)     IY2 V AH0 L UW1 SH AH0 N  
...  
EVOLUTIONARY      EH2 V AH0 L UW1 SH AH0 N EH2 R IY0
```

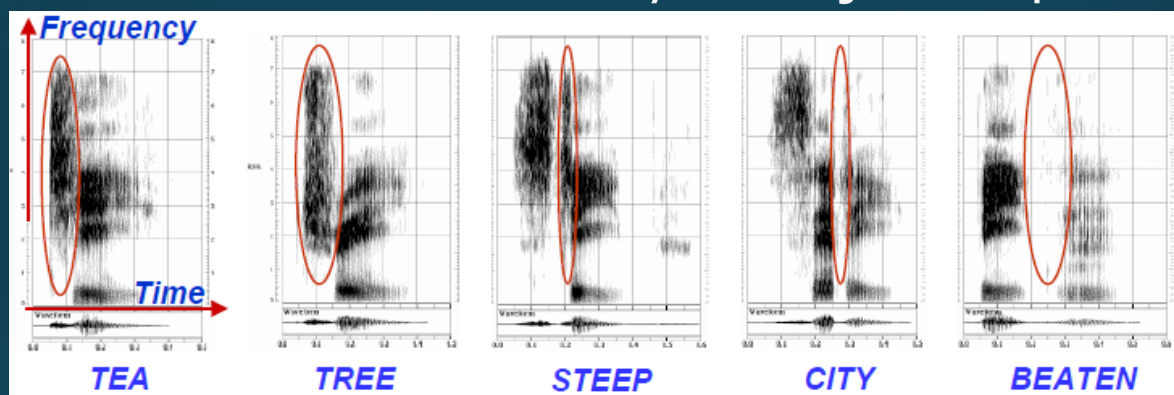
# Combining HMMs

- If we know how phonemes combine to make words, we can simply **concatenate** together our phoneme models by inserting and **adjusting** transition weights.
  - e.g., *Zipf* is pronounced /z ih f/, so...



# Coarticulation and triphones

- **Co-articulation:** *n.* the situation when a phoneme is influenced by an adjacent phoneme.



- A **triphone HMM** captures co-articulation but represents one phoneme.

Triphone HMMs

/s-t+iy/

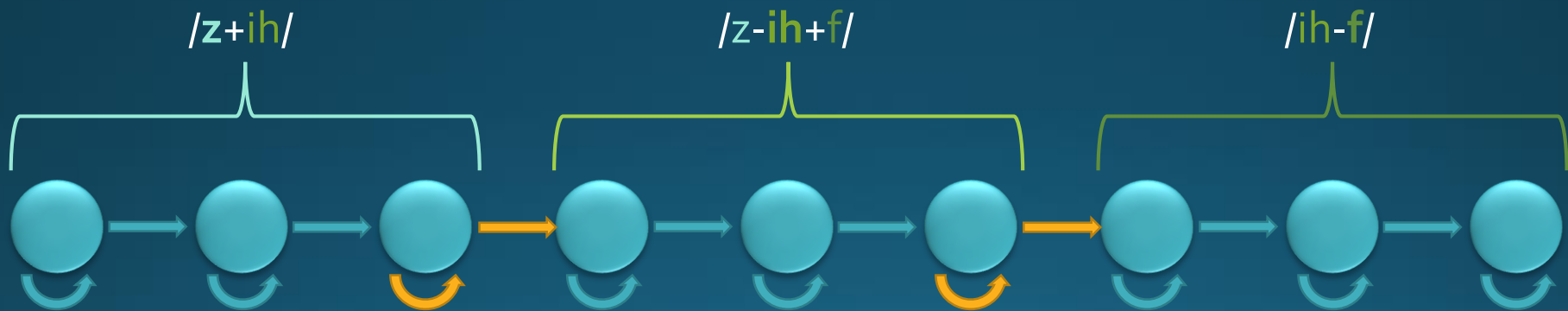


/iy-t+eh/



# Combining triphone HMMs

- Triphone models can only connect to other triphone models that match the context.
  - Triphone model  $/a-b+c/$  is the phoneme **b** that is preceded by **a** and followed by **c**.

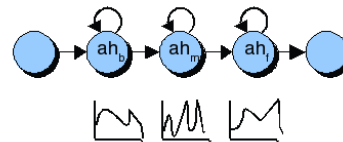


# Concatenating phoneme models

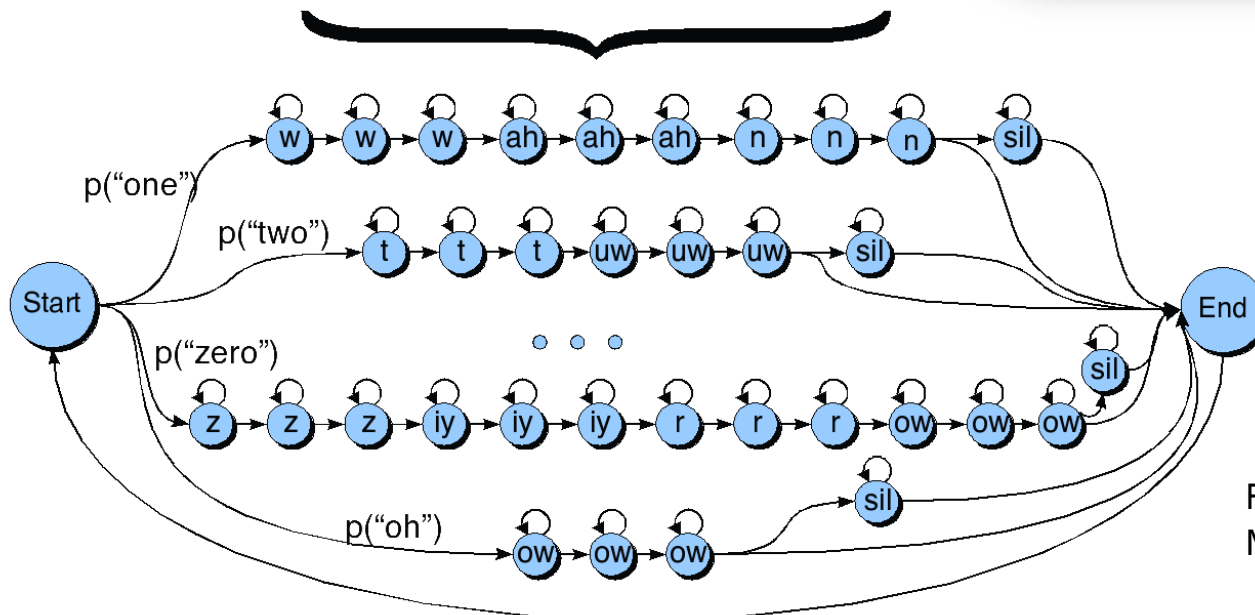
Lexicon

one	w ah n
two	t uw
three	th r iy
four	f ao r
five	f ay v
six	s ih k s
seven	s eh v ax n
eight	ey t
nine	n ay n
zero	z iy r ow
oh	ow

Phone HMM

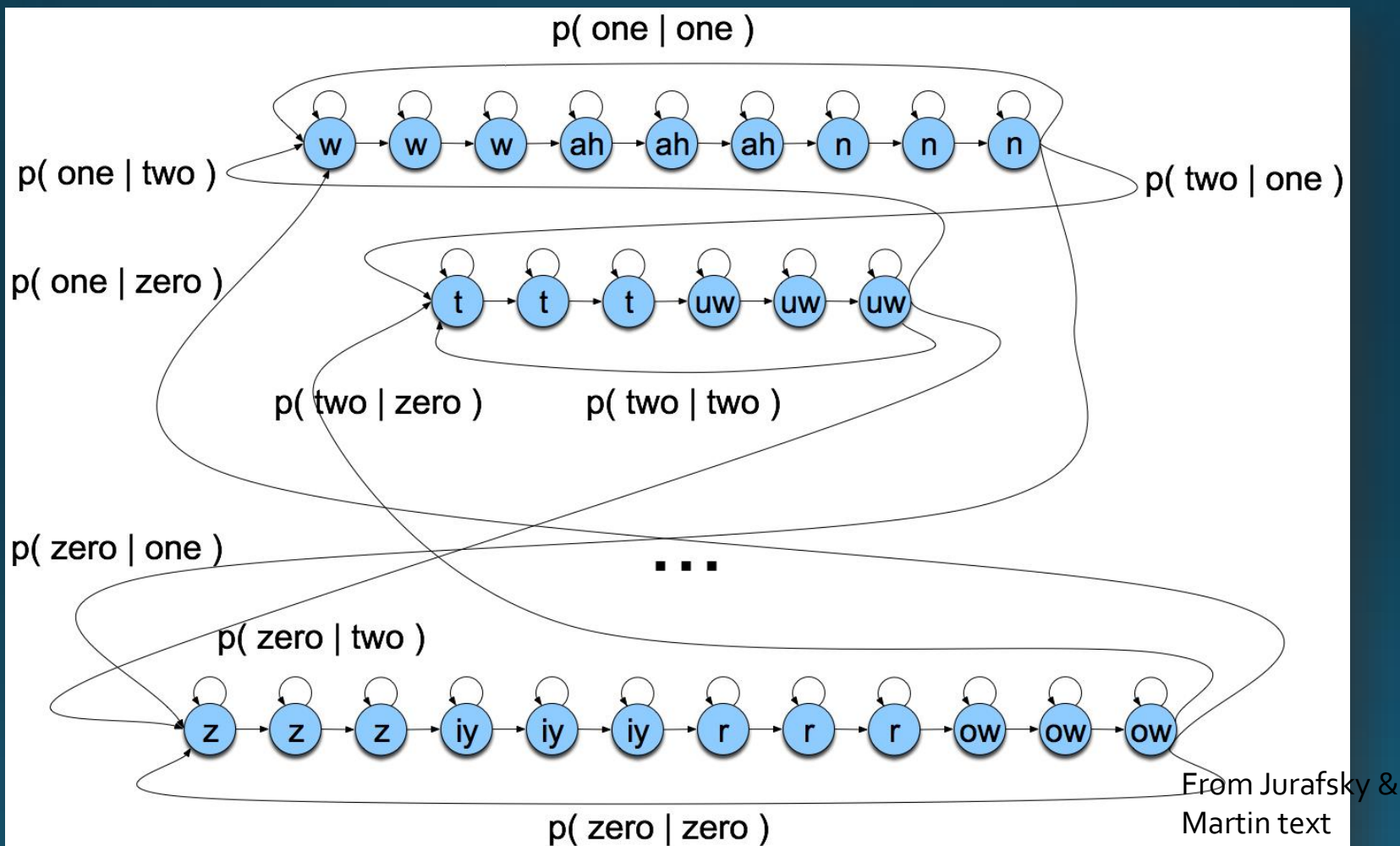


We can easily incorporate unigram probabilities through transitions, too.



From Jurafsky & Martin text

# Bigram models

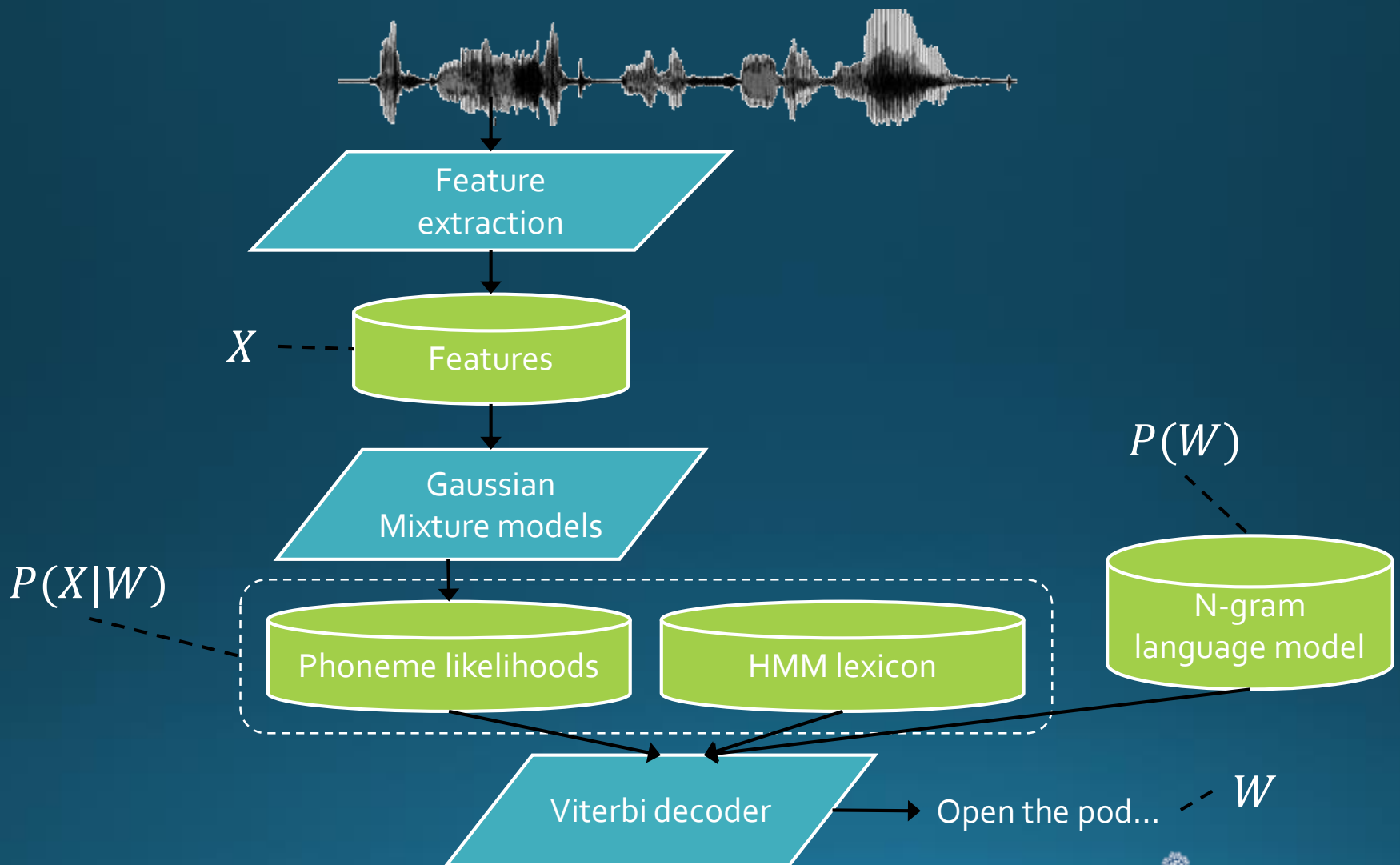


# Using HMMs



- HMMs are **generative** models that encode statistical knowledge of how output is **generated**.
- We **train** CHMMs with **Baum-Welch** (a type of Expectation-Maximization), as with discrete HMMs.
  - Here, the observation parameters,  $b_i(\vec{x})$ , are adjusted using another form of EM for GMMs.
- We find best state sequences using the **Viterbi** algorithm.
  - Here, the best state sequence returned gives us a **sequence of phonemes and words**.

# ASR architecture





# Aspects of ASR in the world

- **Speaking mode:** **Isolated** word (e.g., “yes”) vs. **continuous** (e.g., “Siri, sell my Apple stocks.”)
- **Speaking style:** **Read** speech vs. **spontaneous** speech; the latter contains many **dysfluencies** (e.g., stuttering, *uh*, *like*, ...)
- **Enrolment:** **Speaker-dependent** (all training data from one speaker) vs. **speaker-independent** (training data from many speakers).
- **Vocabulary:** **Small** (<20 words) or **large** (>50,000 words).
- **Transducer:** Cell phone? Noise-cancelling microphone? Teleconference microphone?

# Signal-to-noise ratio

- We are often concerned with the **signal-to-noise ratio** (SNR), which measures the **ratio** between the power of a **desired signal** within a recording ( $P_{signal}$ , e.g., the human speech) and **additive noise** ( $P_{noise}$ ).
  - Noise typically includes:
    - **Background noise** (e.g., people talking, wind),
    - **Signal degradation**. This is *normally* 'white' noise produced by the medium of transmission.

$$SNR_{db} = 10 \log_{10} \left( \frac{P_{signal}}{P_{noise}} \right)$$

- High  $SNR_{db}$  is  $>30$  dB. Low  $SNR_{db}$  is  $<10$  dB.

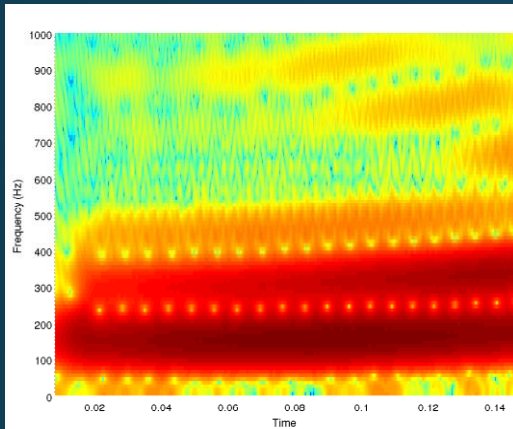
# Audio-visual speech methods



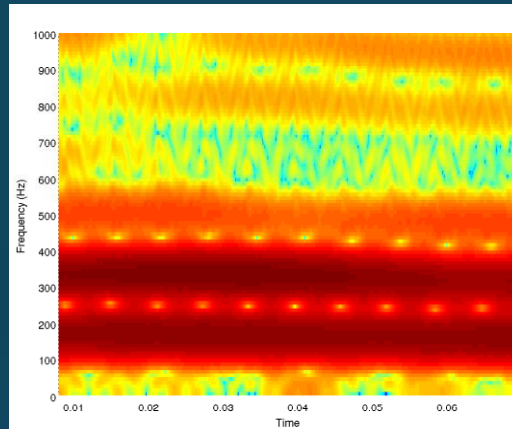
- Observing the **vocal tract** directly, rather than through inference, can be very helpful in ASR.
- The shape and aperture of the mouth gives some clues as to the phoneme being uttered.
  - Depending on the level of invasiveness, we can even measure the glottis and tongue directly.

# Lip aperture and nasals

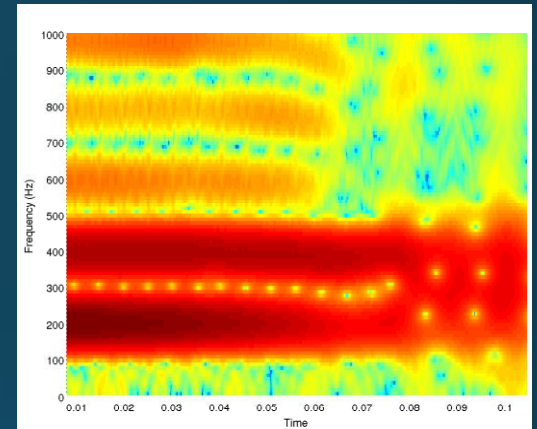
Acoustic  
spectrograms



**/m/**

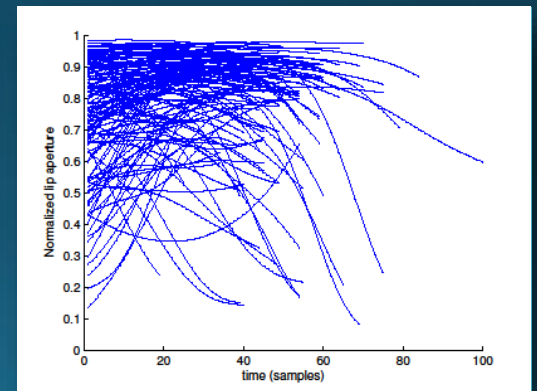
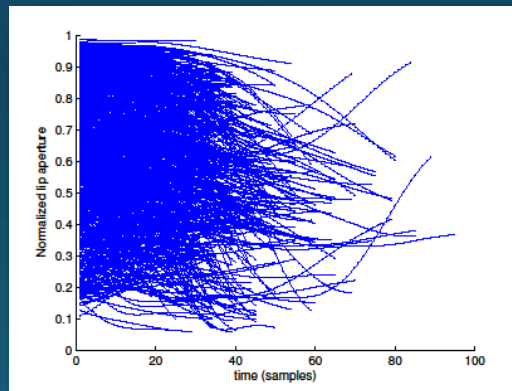
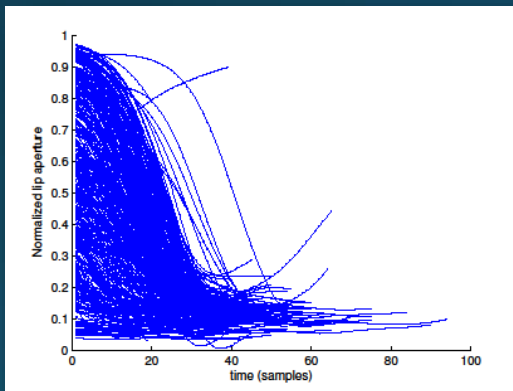


**/n/**



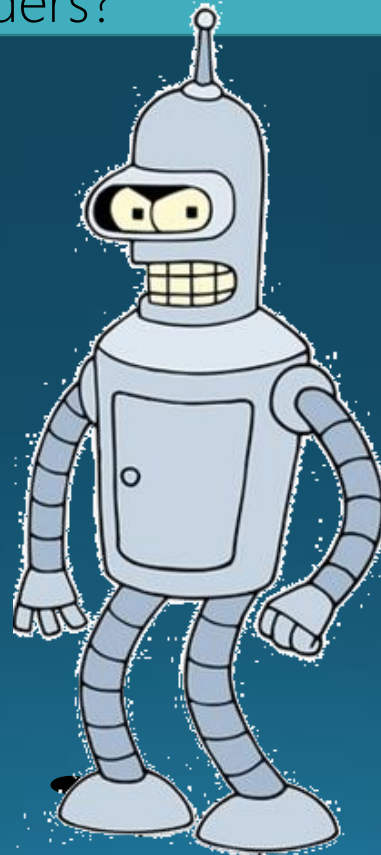
**/ng/**

Lip apertures  
over time



# Dysarthria

Can we build models of atypical articulation? What are relevant features? How will technology be used? What about cognitive disorders?



Next week:  
clinical/medical  
aspects.