

## **Editorial**

Audiology in recent years has taken a somewhat surprising turn, marked by a renewed interest in auditory training. Especially intriguing are a number of new training programs under investigation. This development may seem overdue to the readers of JARA who have long recognized that a hearing aid or cochlear implant alone does not solve communication problems. Certainly work by Brooks, Kockin, Ross and others has demonstrated the importance of looking beyond the hearing device. The difficulty has always been the practical limitations of implementing a training program outside a university or training program. With the advent of self-paced computer training, web-based training and testing, and interactive DVDs, practitioners can now afford to give patients the best in auditory and communication strategy training more easily. Internet-based training and multimedia solutions are replacing other forms of training—namely, classroom-based sessions. This type training may be better suited and more cost-effective for the busy clinician. This issue opens with a tutorial by Robert Sweetow on the Listening and Communication Enhancement (LACE) program. Dr. Sweetow shares his insights on incorporating LACE into everyday clinical practice. Using case examples, it is easy to see how one could include the program into the repertoire of clinical services. The paper is followed by Arthur Boothroyd's tutorial of the CASPERSent program designed for auditory, visual, and auditory-visual speech-perception training at the sentence level using the CUNY sentences. Dr. Boothroyd also outlines the theoretical base of his training paradigm. Finally, Musiek and colleagues discuss the Dichotic Interaural Intensity Difference (DIID) training program designed to address deficits in dichotic processing. The paper serves as a reminder that hearing ability is not limited to the peripheral auditory system. The collective work of these distinguished authors takes into account the far too often overlooked benefits of auditory training as part of the comprehensive management of hearing difficulties. I hope this issue will become a 'must read' for clinicians and graduate students alike.