

Language Alterations Associated with Other Pathologies

Code: 101722
ECTS Credits: 6

Degree	Type	Year	Semester
2500893 Speech therapy	OB	3	1

The proposed teaching and assessment methodology that appear in the guide may be subject to changes as a result of the restrictions to face-to-face class attendance imposed by the health authorities.

Contact

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Use of Languages

Principal working language: catalan (cat)
Some groups entirely in English: No
Some groups entirely in Catalan: Yes
Some groups entirely in Spanish: No

Other comments on languages

In case the student has difficulties to understand the statements of the written tests in Catalan (e.g., for being an exchange student) he/she can request the test in Spanish as long as he/she does it before week 4 in writing to the coordination of the sub

Teachers

Sonia Vilaltella Verdes

Prerequisites

In this subject the patterns of behaviour and language associated with other disorders will be dealt with, therefore, in order to take this subject, it is highly recommended that students have previously studied the milestones of typical development (including language) as well as the specific language disorders.

Also a good command of reading skills in English is desirable.

Objectives and Contextualisation

The subject aims to offer students knowledge of the behaviour and language features associated with the following disorders: intellectual disability, autism spectrum disorders, cerebral palsy, attention deficit disorders with or without hyperactivity.

When the subject is completed, the student will be able to:

- Be sensitive to understanding the overall involvement of patients who present these disorders.
- Identify the language characteristics associated with the disorders studied.
- Meet the speech therapy needs of patients who present these disorders.

Competences

- Critically evaluate the techniques and instruments of evaluation and diagnosis in speech therapy, as well as its procedures of intervention.
- Demonstrate an understanding of disorders in communication, language, speech, hearing, voice and non-verbal oral functions.
- Demonstrate an understanding of how the profession works, and the legal status of the speech therapist.
- Demonstrate knowledge of the limits of competence and be able to identify whether interdisciplinary treatment is required.
- Ethically commit oneself to quality of performance.
- Explore, evaluate, diagnose and produce a prognosis of development for disorders of communication and language, from a multidisciplinary perspective.
- Have a strategic and flexible attitude to learning.
- Identify, analyze and solve ethical problems in complex situations.
- Manage sociocultural diversity and the limitations associated with distinct pathologies.
- Master the terminology that facilitates effective interaction with other professionals.
- Use the exploratory techniques and instruments pertaining to the profession, and register, synthesise and interpret the data provided by integrating this into an overall information set.

Learning Outcomes

1. Describe and explain the usefulness and indications of language assessment tools that best fit the characteristics of each pathology or disability.
2. Describe the main methods for the exploration of language disorders.
3. Ethically commit oneself to quality of performance.
4. Explain speech therapists role in multidisciplinary teams and the legal framework of the profession.
5. Explain the alterations of secondary language in disorders within other areas.
6. Explain the limitations associated with the distinct language pathologies secondary to other disorders, as well as the cultural and socioeconomic status of the patient.
7. Explain the terminology of other professions related to patients subject to their intervention.
8. Have a strategic and flexible attitude to learning.
9. Identify normal and abnormal speech patterns in patients with distinct pathologies.
10. Identify, analyze and solve ethical problems in complex situations.
11. In a well-argued manner, explain situations that require the participation of and referral to other professionals.
12. Issue both a probable diagnosis and possible differential diagnoses, from cases presented via video or through reading reports.

Content

This subject is structured into the following blocks:

BLOCK 1 - General introduction: Language disturbances related to other disorders

BLOCK 2. - Intellectual disability (ID)

ID concept: Definition and evolution.

Cognitive profile and adaptive behaviour in intellectual disability.

Language characteristics in non-syndromic intellectual disability.

-LANGUAGE IN SYNDROMIC ID

The following syndromes will be studied: Down syndrome, Fragile X syndrome, Prader Willi syndrome, Angelman syndrome, Rett syndrome, Williams syndrome, 22q11 deletion syndrome.

For each syndrome the content is: aetiology and prevalence, physical and behavioural phenotype and speech and language profile.

BLOCK 3. - Autism Spectrum Disorders (ASD)

Aetiology and prevalence, physical and behavioural phenotype and speech and language profile.

BLOCK 4. - LANGUAGE IN ATTENTION DEFICIT DISORDERS (ADHD)

Concept and subtypes, aetiology and prevalence, cognitive and behavioural profile and speech and language characteristics.

BLOCK 5. - LANGUAGE IN CEREBRAL PALSY

Aetiology and prevalence, cognitive and behavioural phenotype and speech and language characteristics.

Methodology

Group Work

- Theory classes with multimedia support Group size 1/1 (24 hours)
- Practical classes Group size 1/3 (12 hours)

- Individual work
- Readings related to the content of the subject. (78 hours)
- Practical case analyses (20 hours)

"N.B. The proposed teaching and assessment methodologies may experience some modifications as a result of the restrictions on face-to-face learning imposed by the health authorities. The teaching staff will use the Moodle classroom or the usual communication channel to specify whether the different directed and assessment activities are to be carried out on site or online, as instructed by the Faculty".

Annotation: Within the schedule set by the centre or degree programme, 15 minutes of one class will be reserved for students to evaluate their lecturers and their courses or modules through questionnaires.

Activities

Title	Hours	ECTS	Learning Outcomes
Type: Directed			
Practical classes	24	0.96	12, 9
Theory	21	0.84	2, 1, 4, 5, 6, 9, 8
Type: Supervised			
Supervised activity	2	0.08	8
Type: Autonomous			
Study and practical case analyses	96	3.84	3, 1, 12, 11, 7, 10, 8

Assessment

Assessment activities are as follows:

EV1: 1st Interim Exam 35% of the total grade (first assessment period) Individual and on-site

EV2: 2nd Interim Exam 35% of the total grade (second assessment period) Individual and on-site

EV3: Practical cases 30% of the total grade (resit examination period) Individual and on line

Assessment is continuous

Students who have submitted less than the 40% of evidences will be Non-Assessable (NA).

The learning evidences are all face-to-face and in written format, except for the Practical cases exercise.

The subject is failed when students who having submitted evidences with a weight of 40% or more (evaluable) have an average grade less than 5.

The subject is passed when the student has an average grade of 5 or more from the three evidences

Reassessment (week 19):

To be eligible for reassessment students must:

- Have submit evidences with a weight equal to, or greater than, 66.6% of the total grade (that is, at least two exams)

- Have achieved a grade lower than 5 points and greater or equal to 3 points.

The subject is passed when the student has a grade of 5 on the reassessment test

- No unique final synthesis test for students who enrol for the second time or more is anticipated.

<https://www.uab.cat/web/estudiar/graus/graus/avaluacions-1345722525858.html>

Assessment Activities

Title	Weighting	Hours	ECTS	Learning Outcomes
EV1 Interim 1st exam	35	1	0.04	2, 1, 4, 5, 6, 9
EV2 Interim 2nd exam	35	2	0.08	2, 1, 4, 5, 6, 9
EV3 Practical case	30	4	0.16	3, 1, 12, 11, 7, 10, 8

Bibliography

CORE REFERENCES (None of this references can be considered a handbook for the subject)

AAVV(2006) *Síndrome X frágil: Libro de consulta para familias y profesionales*. Centro Español de Documentación sobre Discapacidad.

BRUN,C y ARTIGAS J. (2005) *Síndrome de Angelman: del gen a la conducta*. Ed Nau Llibres Valencia. Colección Logopedia e Intervención. Serie: Patologías.

CALLEJA REINA,M (2021) Necesidades complejas de comunicación y enfermedades minoritarias. Mc Graw-Hill- Madrid

GARAYZÁBAL,E.,FERNÁNDEZ,M.,DÍEZ-ITZA,E (2010) Guía de intervención logopédica en el síndrome de Williams. Síntesis. Madrid

HAGERMAN, R.J i HAGERMAN, P. (2002) *Fragile X syndrome. Diagnosis, Treatment and Research*. The Johns Hopkins University Press. Baltimore.

LOPEZ,MA (2017) Intervención logopédica en el síndrome de X frágil. EOS MADrid

O'BRIEN, G. & YULE, W. (1995) *Behavioural Phenotypes*. MacKeith Press. Cambridge University Press.

POSTIGO,E, CALLEJA,M i GABAU,E (2018) Disability and communication.Madrid Mc Graw Hill Education

PUYUELO et al. (1999) Casos clínicos en logopedia 2. Barcelona Ed Masson

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TORRES J, CONESA MI, BRUN C (2003) Trastornos del lenguaje en niños con necesidades educativas especiales. Ed Ceac

ADDITIONAL REFERENCES

AAIDD Asociación Americana de Discapacidades Intelectuales y del Desarrollo (2011) *Discapacidad Intelectual*. Psicología. Alianza Editorial

PEDROSA,E (2008) Criaturesd'un altre planeta Barcelona. Ed. La Magrana.

Enlaces web

<http://www.ssbp.co.uk> - SSBP: Society for the Study of Behavioural Phenotypes,

<http://www.ssbp.co.uk/files/syndromes.htm> -

<http://www.fcsd.org> Fundació catalana síndrome de Down

<http://www.dincat.cat>

<http://www.nas.org.uk> National Autistic Society UK

<http://www.rett.es/>

Software

Does not apply