

**COURSE DATA****Data Subject**

<b>Code</b>	35298
<b>Name</b>	Speech Therapy Intervention in Language Disorders of Central Aetiology
<b>Cycle</b>	Grade
<b>ECTS Credits</b>	9.0
<b>Academic year</b>	2021 - 2022

**Study (s)**

<b>Degree</b>	<b>Center</b>	<b>Acad. year</b>	<b>Period</b>
1203 - Degree in Speech Therapy	Faculty of Psychology and Speech Therapy	3	First term

**Subject-matter**

<b>Degree</b>	<b>Subject-matter</b>	<b>Character</b>
1203 - Degree in Speech Therapy	25 - Speech therapy intervention in language disorders of central etiology	Obligatory

**Coordination**

<b>Name</b>	<b>Department</b>
GIMENEZ COSTA, JOSE ANTONIO	300 - Basic Psychology
ROSELL CLARI, VICENTE JOSE	300 - Basic Psychology

**SUMMARY**

The subject "Speech Therapy Intervention in language disorders of the central aetiology" is included within the Department of Basic Psychology, belonging to the Faculty of Psychology and Speech Therapy at the University of Valencia. It is a mandatory subject and consists of 9 credits (ECTS), equivalent to 225 hours of student work. Is imparted in the third year of degree in Speech Therapy, in the first quarter.

The course is divided into 3 distinct blocks. The first, Block 1, serves as an introduction to the subject. Therefore, its objective is that students learn the neurological fundamentals and rehabilitation mechanisms in the language disorders of central etiology, the different designs and types of rehabilitation as well as the most important variables that influence the process of language recovery.

The second, Block 2, focussed on the semiological rehabilitation of oral language disorders in patients



with language disorders of central etiology, reviewing the various methods, techniques and resources to design the rehabilitation of oral communication, both in its comprehensive and expressive sides, with special interest in rehabilitation of communication and pragmatic aspects, as well as in the specific techniques for the treatment of global aphasia.

The third, Block 3, has its focus on the rehabilitation of written and reading in language disorders of central aetiology and the rehabilitation of most common associated disorders: sensory disorders, attention, perception, memory, planning and executive function.

The subject shares assessment techniques, diagnosis and rehabilitation of language disorders and associated disorders used in neurology, psychology, neuropsychology and neurolinguistics. The knowledge that this discipline provides have important clinical applications, especially in the field of aphasia and its associated disorders; educative functions since the methodologies and techniques are also useful and applicable to individuals with communication disorders in general; and social purposes because help to understand communication disorders to relatives of patients by integrating them into the rehabilitation process. Therefore, it is linked in a special way with the subjects: "General Neurology, Neuropsychology the Language" "Basic psychological processes and psychology of language", "Neurodegenerative disorders", "Language Pathology the Central Etiology", "Clinical Neurology applied to speech" and those matters related to language pathology and intervention in these diseases.

## PREVIOUS KNOWLEDGE

### Relationship to other subjects of the same degree

#### 1203 - Degree in Speech Therapy :

R4-OBLIGATION TO HAVE SUCCESSFULLY COMPLETED THE COURSE

35284 - Clinical Neurology Applied to Speech Therapy

35286 - Language Disorders

### Other requirements

Having passed the subjects of "Language Pathology from Central Etiology" and "Clinical Neurology Applied to Speech Therapy".

## OUTCOMES

#### 1203 - Degree in Speech Therapy

- Students must be able to apply their knowledge to their work or vocation in a professional manner and have acquired the competences required for the preparation and defence of arguments and for problem solving in their field of study.



- Students must have the ability to gather and interpret relevant data (usually in their field of study) to make judgements that take relevant social, scientific or ethical issues into consideration.
- Students must be able to communicate information, ideas, problems and solutions to both expert and lay audiences.
- Students must have developed the learning skills needed to undertake further study with a high degree of autonomy.
- Explore, evaluate, diagnose and predict the evolution of communication and language disorders from a multidisciplinary perspective.
- Use the exploration techniques and instruments typical of the profession and record, synthesize and interpret the data provided by integrating them into the information set.
- Design and conduct speech therapy treatments, both individual and collective, by setting targets and stages, with the most effective and adequate methods, techniques and resources, and bearing in mind the different life developmental stages as well as gender perspective.
- Advise families and other persons in the social environment of users, encourage their participation and collaboration in the speech therapy, address the peculiarities of each case and bear gender perspective in mind.
- Develop communication skills in the general population.
- Understand and be able to integrate the biological principles (anatomy and physiology), psychological principles (evolutionary development and processes), linguistic principles and pedagogical principles of speech therapy into communication, language, speech, hearing, voice and non-verbal oral communication.
- Have an adequate speech production, language structure and voice quality.
- Apply speech therapy treatments with the most effective and appropriate methods, techniques and resources in disorders of central origin.
- Know the psycholinguistic processes and other basic psychological processes that support speech therapy techniques in disorders of central origin.

## LEARNING OUTCOMES

Initially evaluating a patient as a baseline to measure progress after rehabilitation design rehabilitation programs adapted to changing factors such as age, severity, pathology, motivation and social variables. Adapting and selecting rehabilitation programs depending on the clinical picture of comprehension and verbal production. Manage and implement specific techniques for treating various aphasia.

## DESCRIPTION OF CONTENTS



## **1. Introduction to rehabilitation of language disorders of the central etiology.**

In this first part will provide the student with relevant knowledge about the neurological basis and the basis for a term outcome of patients with language disorders of the central etiology (TLEC). It will provide general knowledge about the TLEC rehabilitation, treatment effectiveness and impact of TLEC in the patient and his family as well as guidelines for patient and family.

### **UNIT 1. NEUROLOGICAL PRINCIPLES AND MECHANISMS OF REHABILITATION IN LANGUAGE DISORDERS CENTRAL ETIOLOGY.**

Neurological foundations of aphasia and related disorders. Diaschisis. Reorganization and substitution. Basis for a prognosis in Language Disorders Central etiology. General considerations on rehabilitation. Effectiveness of treatment. Impact of disorders of the central etiology for the patient and his family. Basic orientations for the patient and family.

### **UNIT 2. - DESIGNS AND TYPES OF REHABILITATION.**

Designs in rehabilitation. Effects of generalization. Types of rehabilitation. Rehabilitation group. Specific programs for each type of disorder. Using the process-centric approach. Systems augmentative and alternative communication. Intervention aimed at the pragmatic aspects. Measurement of treatment outcomes. Computer resources for rehabilitation of language disorders of the central etiology.

## **2. Rehabilitation of oral language disorders and communication in TLEC.**

In this second block will provide students the concepts, methods and techniques required to make a speech therapy effective in oral language disorders of the central etiology, both comprehensive and productive, with particular emphasis on communication disorders and the treatment of global aphasia.

### **UNIT 3. - REHABILITATION OF LISTENING.**

Rehabilitation programs for listening. Speech therapy in the alterations of auditory comprehension of words and their components. Articulatory auditory analysis. Lexical access phonological input. Semantic system and access. Acoustic-phonological conversion. Asintáctica understanding and rehabilitation of sentence comprehension.

### **UNIT 4. - ORAL REHABILITATION OF PRODUCTION.**

Rehabilitation of anomie. Rehabilitation of apraxia. Control of stereotypies. Treatment of perseveration. Syntax stimulation program. Program "back to the drawing board." Melodic intonation therapy (M.I.T.).

### **UNIT 5. - REHABILITATION OF COMMUNICATION AND PRAGMATIC ASPECTS. P.A.C.E.**

Therapy Communication systems used in augmentative and alternative rehabilitation of TLEC. Intervention aimed at the pragmatic aspects. ITEM 6. - TECHNIQUES IN THE TREATMENT OF SPECIFIC global aphasia. Visual action therapy. Other methods, resources and techniques.

## **3. Rehabilitation of the reading, writing and other disorders associated with TLEC.**

In this third section will provide students the concepts, methods and techniques for effective speech therapy intervention in written language disorders and other conditions associated with TLEC.

### **UNIT 7. REHABILITATION OF DISORDERS ASSOCIATED WITH READING TLEC.**

Speech therapy on the changes in the understanding of words. Intervention in aphasic alexia alexia and agnosia. Intervention on the direct route and the phonological.



**UNIT 8. REHABILITATION OF DISORDERS ASSOCIATED WITH WRITING TLEC.**

Rehabilitation of the alterations associated with the graphics. Rehabilitation disortogràficas alterations. Rehabilitation of writing lexical and morphosyntactic level.

**UNIT 9. REHABILITATION OF OTHER CONDITIONS ASSOCIATED WITH TLEC.**

Sensory disturbances. Attention. Perception. Report. Planning. Executive function.

**WORKLOAD**

ACTIVITY	Hours	% To be attended
Theory classes	60,00	100
Laboratory practices	30,00	100
Study and independent work	135,00	0
<b>TOTAL</b>	<b>225,00</b>	

**TEACHING METHODOLOGY**

In order to provide the student with the fundamental objectives of the course as well as specific and transversal competences are proposed:

Theoretical lessons. To be developed in various subject content, promoting participatory involvement of students through the resolution of the issues.

Practical classes, demonstrations and case studies. In order for students to acquire the necessary skills for assessment, establishing a diagnosis and developing appropriate intervention programs for each patient. At the same time, there will be individual sessions and group tutorials scheduled to be held in the supervision to students in order that they can perform adequately monitor the training activities. The materials used include: manuals, articles, chapters, reports, case studies, software and other documentation and materials science relevant to the subject. It will be necessary to use the virtual classroom, e-learning platform chosen by the University of Valencia to favor the teaching-learning processes and teacher-student interaction.

**EVALUATION**

The information to obtain the final grade for the subject will be obtained through two basic procedures: final individual assessment (final exam) and continuous or progress assessment (activities carried out in the classroom, reports and/or individual and group work, access to content available in the virtual classroom, blogs or similar, attendance at conferences, lectures or congresses, etc.).



The final individual assessment will be in accordance with the specific objectives of the teaching guide. This assessment, which will reflect the level reached at the end of the learning process of the subject, will be carried out at the end of the classroom period and will represent 60% of the grade for the subject, with a maximum value of 6. The final test to assess the specific objectives of the subject will be written, and will contain both objective and short questions.

The continuous or progress assessment of the work done by the students throughout the course will be based on the reports and written and oral comments made in the practical classes and/or in the group or individual tutorials, as well as in the different activities carried out in the theory sessions. This part of the evaluation is formative in nature, as it allows a feedback process for both the teacher and the student, and will represent 40% of the grade for the course.

Attendance to the practical is compulsory and in order to pass the course it will be necessary to attend at least 80% of the classes. Non-attendance must be due to well-documented reasons of force majeure (sudden health condition, death of a relative up to the third degree, court summons, official examination, accompanying a first-degree relative for medical reasons). For those students who do not reach the compulsory minimum of 80% attendance, the contents and activities carried out in face-to-face classes are considered to be recoverable by means of a written test to be taken at the end of the official final exam.

Within the continuous assessment there are two clearly differentiated parts: 1.- Practical reports. The value of this part is of a maximum of 3 points (30% of the grade of the subject). 2.- Other activities carried out in face-to-face classes: reports and/or individual and group work, access to contents available in the virtual classroom, notebooks or similar, tests carried out in class, etc. The value of this part is a maximum of 1 point (10% of the course grade). The final mark is obtained from the weighted sum of the marks of each part of the assessment, provided that the part corresponding to the officially called written tests and the practical report have been passed.

## **WARNING**

Copying or plagiarism of any assignment that forms part of the assessment will result in the impossibility of passing the subject, and the student will then be subject to the appropriate disciplinary procedures. Please note that, in accordance with article 13. d) of the University Student Statute (RD 1791/2010, 30 December), it is the duty of a student to refrain from using or cooperating in fraudulent procedures in assessment tests, in the work carried out or in official university documents.

During tutorial hours, the teaching staff may request individual or group interviews in order to verify the degree of participation and achievement of the objectives set for any task carried out. Failure to accept such verification will mean failing the assignment or activity in question.

## **GRADING SYSTEM**

The assessment of the subject and the challenge of the grade obtained will be subject to the provisions of the Reglament d'Avaluació i Qualificació de la Universitat de València per a títols de Grau i Màster (ACGUV 108/2017 of 30 May 2017).



[http://www.uv.es/graus/normatives/2017\\_108\\_Reglament\\_avaluacio\\_qualificacio.pdf](http://www.uv.es/graus/normatives/2017_108_Reglament_avaluacio_qualificacio.pdf)

In accordance with this, it is specified in numerical expression from 0 to 10 with one decimal place, using the following grading scale:

- 0 to 4.9: fail.
- From 5 to 6.9: pass.
- From 7 to 8.9: outstanding.
- From 9 to 10: outstanding or outstanding with honours.

The different sections contemplated in the evaluation will only be added together when the minimum requirements established for each of them are exceeded. If the student has obtained 3 points or more in the final individual test, the final mark will be the result of adding the mark obtained in this test and the continuous assessment activities. If the student has obtained less than 3 points in the final individual test, the final mark will be equal to the mark obtained in the final individual test.

The marks obtained in the first call of the course will be included in the course transcript in accordance with the following rules:

- If there is no grade in the evaluation section with the highest weighting, the grade will be **NOT PRESENTED**, regardless of the rest.
- If there is a grade in the evaluation section with the highest weighting, and this does not meet the minimum requirements, the grade for this section will be **SUSPENDED** and a numerical mark in base 10.
- If there is a grade in the evaluation section with the highest weighting, and this exceeds the minimum requirements established, but these requirements are not reached in any of the remaining sections, a **SUSPENDED** will be recorded and a numerical grade in base 10 of the grade of the section for which the subject is not passed.
- Honours will be awarded to the two best grades with an A grade. In the event of a tie in the grade of the exam and the activities, an oral or written test will be held to break the tie.

In the second call, the following rules will apply:

- The option **NOT PRESENTED** will only be possible when more than one of the evaluation sections has not been taken, including the one with the highest weighting.
- If there are marks in all the assessment sections and minimum requirements are not met in any of them, the grade will be recorded as **SUSPENDED** and the mark in base 10 corresponding to the section that has not been passed. If more than one section has not been passed, the maximum mark in base 10 will be recorded as a fail.
- If one or more of the minimum requirements are not passed and a section of the assessment is missing, the grade for the section not passed will be recorded as a **FAIL** and a numerical mark in base 10.



- If two assessment sections are passed and there is a third section in which no evidence of assessment has been presented, **SUSPENDED** will be recorded and, as a grade, the average of the scores, with 0.0 for the part not presented (maximum possible 4.9).

- If the most heavily weighted test is passed, but evidence is missing in one or more of the remaining sections, **SUSPENDED** will be recorded. The parts shall be added together and: a) if the sum is less than 5, this result shall be recorded; b) if the sum is greater than 5, 4.9 shall be recorded.

The consultation and challenge of the mark obtained in assessment tasks will be subject to the provisions of the Grade Challenge Regulation (ACGUV 108/2017).

([http://www.uv.es/graus/normatives/2017\\_108\\_Reglament\\_avaluacio\\_qualificacio.pdf](http://www.uv.es/graus/normatives/2017_108_Reglament_avaluacio_qualificacio.pdf))

## REFERENCES

### Basic

- Helm-Estrabrooks, N. y Albert, M. L. (1994). Manual de terapia de la afasia. Editorial Médica Panamericana S. A.
- Cuetos, F. (1998). Evaluación y rehabilitación de las afasias. Aproximación cognitiva. Editorial Médica Panamericana, S.A.
- Terradillos, E. y López-Higes, R. (2016). Guía de intervención logopédica en las afasias. Madrid: Síntesis. ISBN: 9788490773581.

### Additional

- Fernández Guinea, S. y López-Higes, R. (2005). Guía de intervención logopédica en las afasias. Editorial Síntesis S.A.
- Peña Casanova, J. y Pérez Pamies, M. (1990). Rehabilitación de la afasia y trastornos asociados. Editorial Masson S.A.
- Robles, A. (2002). Trastornos adquiridos del Lenguaje. Congreso Internacional de Foniatría, Audiología, Logopedia y Psicología del Lenguaje. Aportaciones al comienzo de un nuevo siglo. Publicaciones Universidad Pontificia de Salamanca.
- Rosell, V. (2006). El uso del verbo en sujetos afásicos de predominio motor. Bases para su rehabilitación. En Serra, E. y Veyrat, M. (2006) Problemas de eficacia comunicativa: descripción, detección, rehabilitación. Universitat de València.
- Saá Barra N. J. (2001). Rehabilitación de la Afasia, basado en la evidencia. Revista de Neurología. Vol. XXV. 2001. Universidad Católica de Chile.
- Urruticoechea, J. (2000). Intervención logopédica en las alteraciones de la comunicación consecutivas a daño cerebral adquirido. Boletín de A.E.L.F.A. nº 3, (5-10).





- Peña-Casanova, J. (Ed.). (2013). Manual de Logopedia. Elsevier Health Sciences.
- González Lázaro, P., y González Ortuño, B. (2012). Afasia. De la teoría a la práctica. México: Editorial Panamericana.
- Pérez, M.A. y García, J. (2019). Intervención neuropsicológica En Los Trastornos Adquiridos Del Lenguaje. Madrid, Síntesis. ISBN: 8491713867
- Papathanasiou, I., Coppens, P. & Potagas, C. (2016). Aphasia and related neurogenic communication disorders. Jones & Bartlett Publishers. ISBN: 9780763771003
- Coppens, P., & Patterson, J. L. (Eds.). (2018). Aphasia rehabilitation: Clinical challenges. Jones & Bartlett Learning. ISBN: 9781284141344
- \*\*La bibliografía se completará con bibliografía más específica y especializada para cada bloque.

## **ADDENDUM COVID-19**

**This addendum will only be activated if the health situation requires so and with the prior agreement of the Governing Council**

### **1. CONTENTS**

All the contents initially programmed in the teaching guide are maintained for both the theoretical and practical sessions.

### **2. WORKLOAD AND TIME PLANNING OF TEACHING**

The workload foreseen in the course guide is maintained for both theory classes (60 hours) and practice (30 hours). The same volume of study and autonomous work of the student is also maintained (135 hours), with a total volume of work of 225 hours.

In the event that teaching is developed in a hybrid way, theory classes will be held 100% in a non-attendance manner but synchronously according to the schedule programmed for the faculty. The practical hours will be 100% face-to-face, as long as the health and university authorities allow it.

### **3. TEACHING METHODOLOGY**

Substitution of the face-to-face theory classes by synchronous video conferencing using the Blackboard Collaborate tool on the days and times corresponding to the theory class schedule. The sessions can be recorded, and the students will have the links to the recordings. Activities can be planned during the theory sessions using different tools in the virtual classroom. These activities will also be corrected and commented on in the theoretical classes. Some of these activities, given that they are corrected synchronously in the corresponding session, may not be recoverable (in this case, prior notice will be given).

On the other hand, the practical sessions will be attended. In case of changes that require teaching entirely online, the practical sessions will be adapted to be taught with a combination of synchronous content through Blackboard Collaborate and other activities using the tools of the virtual classroom. In principle, the same materials will be used as in the original guide for face-to-face teaching. Use of the virtual classroom forum to ask and answer questions. Tutoring system: the virtual tutoring program is maintained



and tutorials are introduced through videoconferences synchronously with the face-to-face tutorials.

#### **4. EVALUATION**

In the case of a mixed teaching situation (semi-presential), the theoretical contents will be evaluated by means of a face-to-face test that will contain objective test-type questions and open-ended development questions. The percentage of the final mark associated with this test will be 40%. In the case that a classroom test is not possible, the evaluation will be done by means of the tool 'questionnaires' in the virtual classroom.

On the other hand, the practical contents will be evaluated continuously and may account for up to 60% of the grade. These percentages will be made up of the sum of 50% that can be obtained through the activities, exercises, reports, reports, etc., proposed in the practical sessions, and 10% of the classroom activities proposed during the theoretical classes. In the case of a totally online teaching situation, the final exam will represent 30% of the total grade and will be carried out by means of the virtual classroom tool 'questionnaires'.

The continuous assessment part will represent the remaining 70%, subdivided into 60% of the activities proposed in the practical sessions, and 10% of the classroom activities proposed in the theoretical sessions.

The final mark of the course is obtained from the weighted sum of the marks of each part of the evaluation, provided that the part corresponding to the written tests called officially and, in the practice, report has been passed.

#### **5. BIBLIOGRAPHY**

The recommended bibliography in the course guide is maintained as it is not mandatory and is complementary to the presentations and materials uploaded to the virtual classroom. In the case of totally on-line teaching, if some material is not accessible, it can be replaced by contents prepared by the teachers and deposited in the virtual classroom.