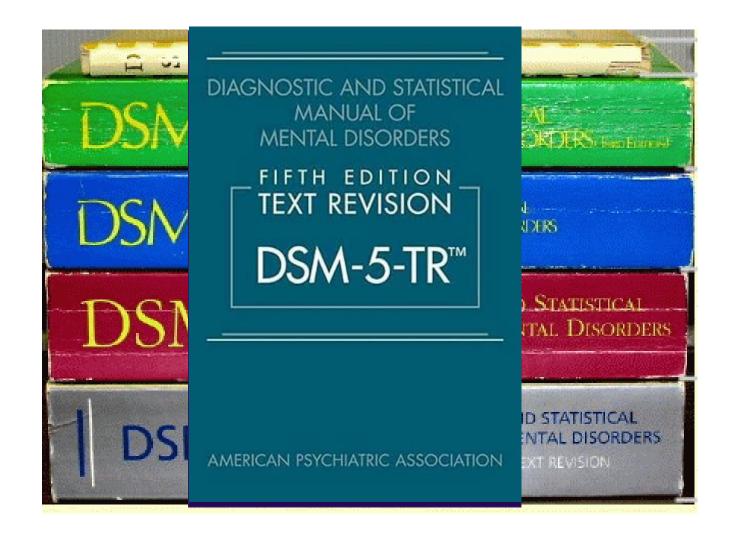
DESELUEIZA



DSM-5 F80.9-Language Disorder

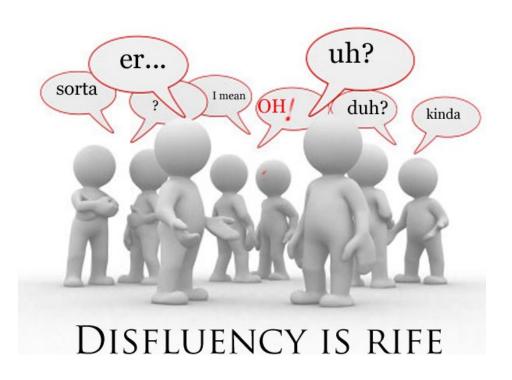
- Persistent difficulties in the acquisition and use of language across modalities (i.e. spoken, written, sign language or other) due to deficits in comprehension or production that include the following:
 - Reduced vocabulary
 - Limited sentence structure
 - Impairments in discourse

DSM-5 F80.9 Language Disorder

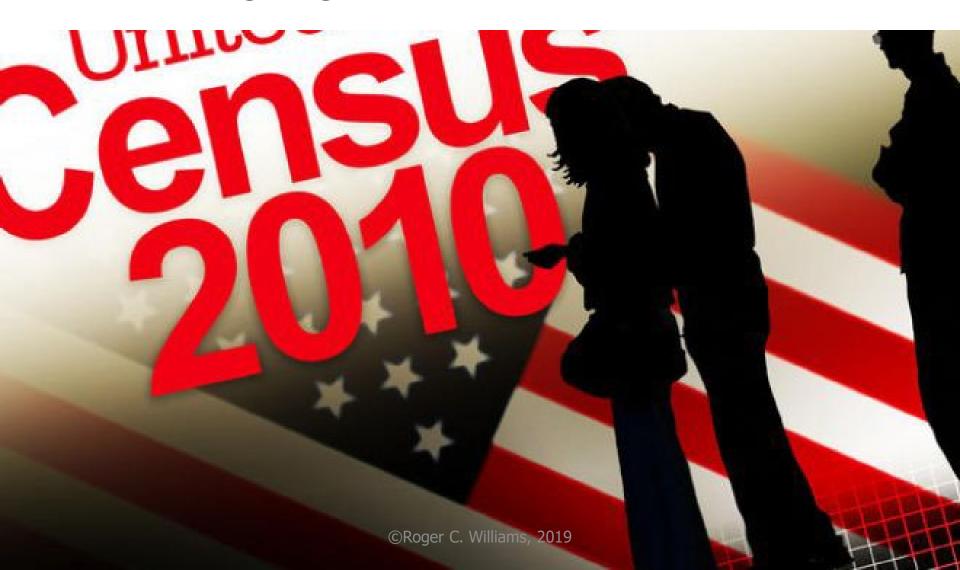
- Language abilities substantially and quantifiably below those expected for age, resulting in functional limitations in effective communication, social participation, academic achievement or occupational performance, individually or in any combination.
- Onset of symptoms is in the early developmental period.

Disfluency is rife

BILL CASSELMAN'S WORDS OF THE WORLD



For the general population, the rate of language disorder is about 2%



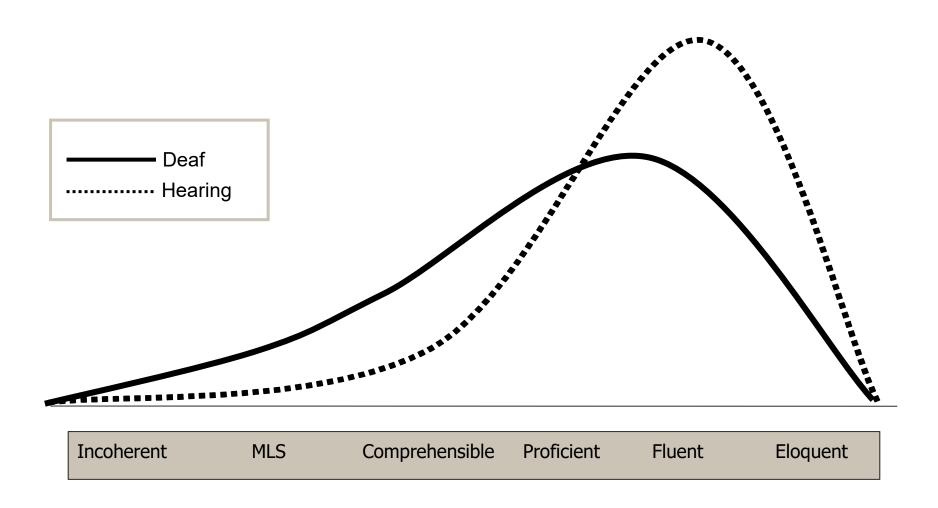


75% of deaf patients in an inpatient facility were identified as dysfluent by deaf language specialists

50% of deaf individuals convicted of felonies were identified as lacking the language competency to have been able to meaningfully participate in their legal proceedings.

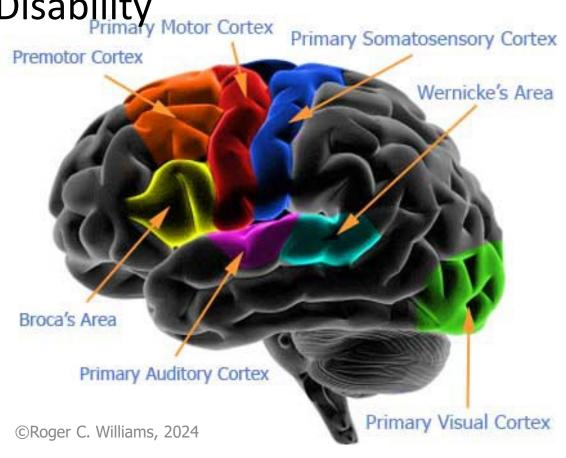


Distribution of Language Fluency



What causes Language Disorder

- Intellectual Disability
- Developmental Disability
- Aphasia
- Stroke
- Dementia
 - Schizophrenia
 - Alzheimer's
 - Wernicke's

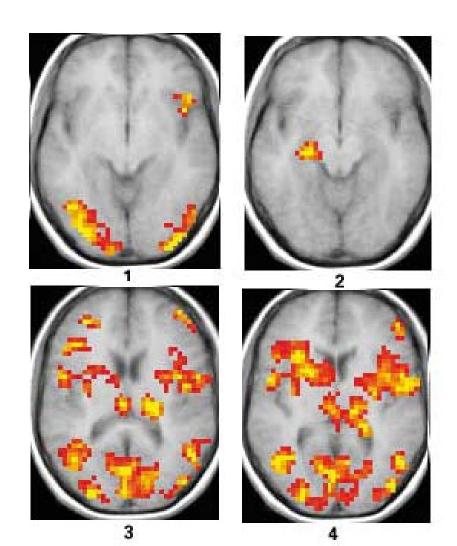


Physical Disability

- Cerebral Palsy
- Motor Tics

Psychosis

- Grammar
 - Inconsistency
 - Inappropriate
 - perceptual difficulties
- Sign Formation
 - Clanging
 - Neologisms
 - Perseveration
- Stereotypy



Psychosis

Responding to Internal Stimuli

Illogicality

Discourse

circumstantial or tangential



Motor Impairment from Psychosis

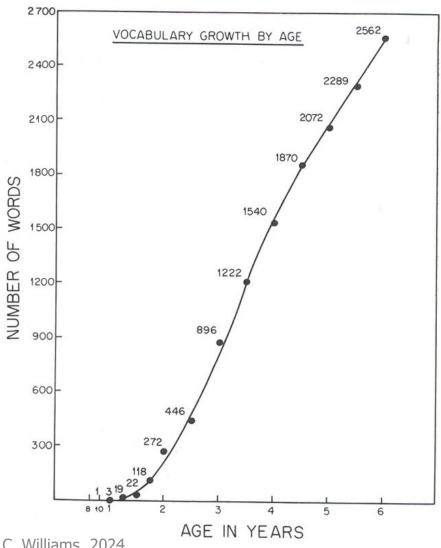
- Catatonia (rare)
- Hebephrenia (Disorganized Schizophrenia)
- Manic and Hypomanic
- Psychomotor Retardation
- Conversion Disorder

With Your Choice of Toppings

- Medication effects
 - Tardive Dyskinesia
 - Psychomotor Retardation
 - EPS (Extra Pyramidal Side-Effects)
- Street Drugs/Alcohol
 - 30%-75% co-morbidity

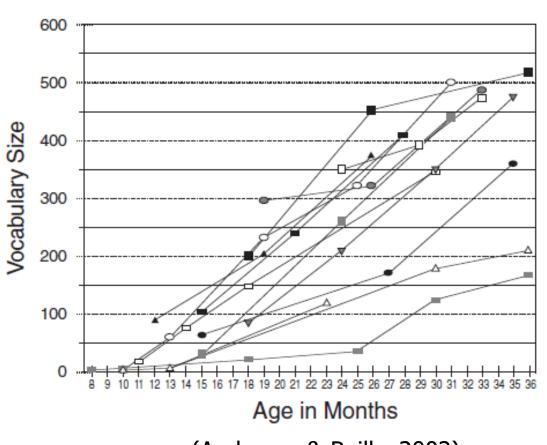
Linguistic & Educational Deprivation





©Roger C. Williams, 2024

ASL Acquisition





(Anderson & Reilly, 2002)

Language Deprivation Disorder

- The person is born with a hearing loss severe enough so as to preclude the ability to comprehend oral language.
- The hearing loss cannot be remediated, or is not remediated.
- The child is not exposed to American Sign Language (or other sign languages) sufficiently so as to acquire it as a native user.
- The person is severely dysfluent in his or her best language or communication modality.
- From childhood, the child displays a global pattern of behavioral, social, and emotional disturbances.
- The person demonstrates an enormous deficit in fund of information about the world.
- As an adult, the person experiences great difficulties developing work skills.
- The person is at least 14 years of age.

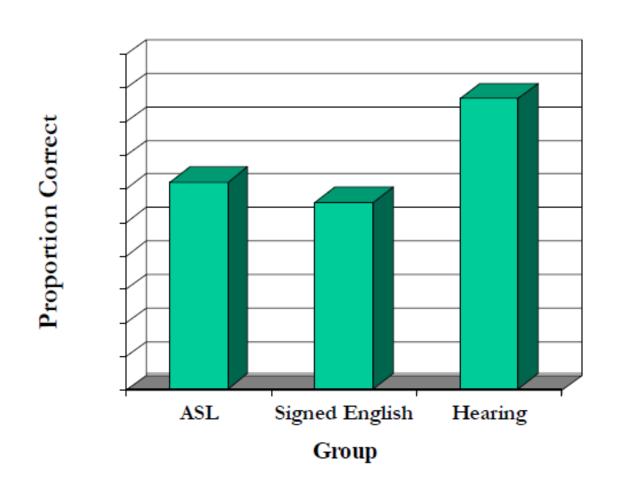
(Gulati, 2019)

Claims Made about Deaf Children with Plenty of Evidence to Back Them Up

 Deaf children do not understand as much language as they (and we) think they do

(Marc Marshark, 2010)

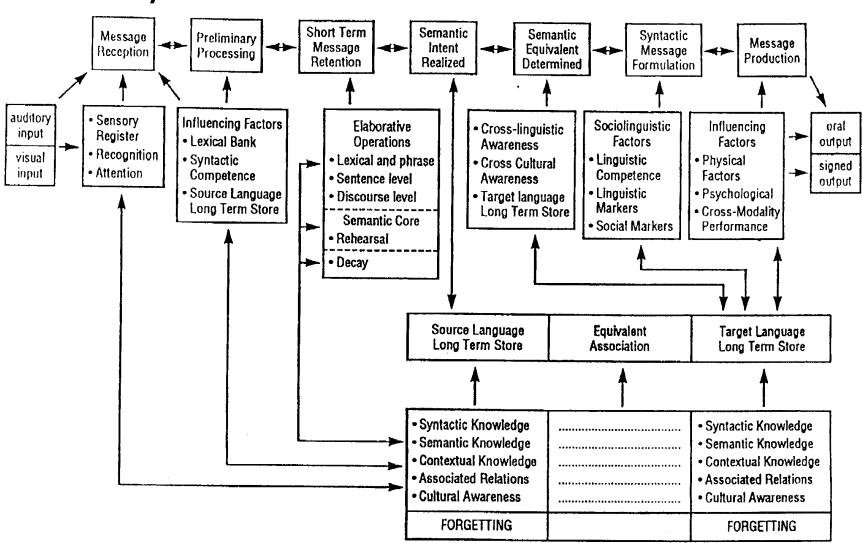
Learning in the College Classroom

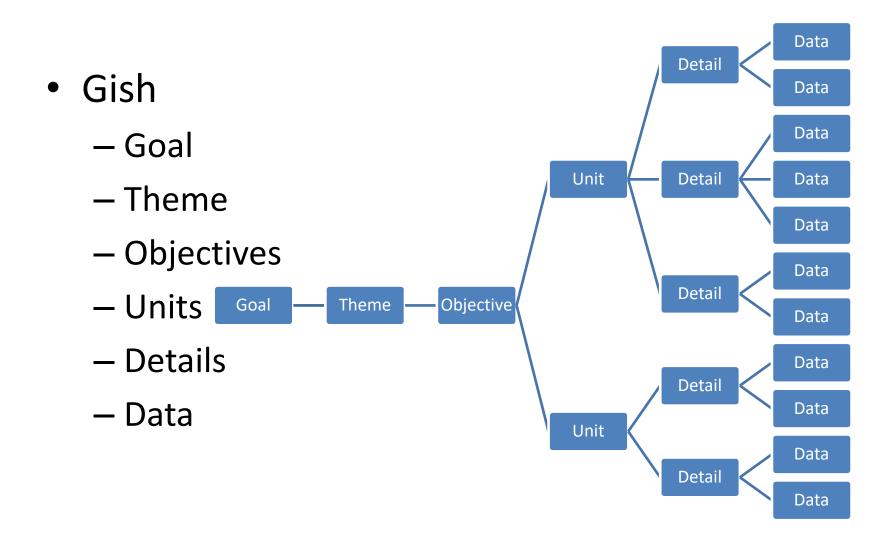


Closure

The phaonmneal pweor of the hmuan mnid, aoccdrnig to a rscheearch at Cmabrigde Uinervtisy, it dseno't mtaetr in waht oerdr the Itteres in a wrod are, the olny iproamtnt tihng is taht the frsit and Isat Itteer be in the rghit pclae. The rset can be a taotl mses and you can sitll raed it whotuit a phoerlm. Tihs is bcuseae the huamn mnid deos not raed ervey Iteter by istlef, but the wrod as a wlohe. Azanmig huh? yaeh and I awlyas tghuhot slpeling was ipmorantt!

Cokely Model



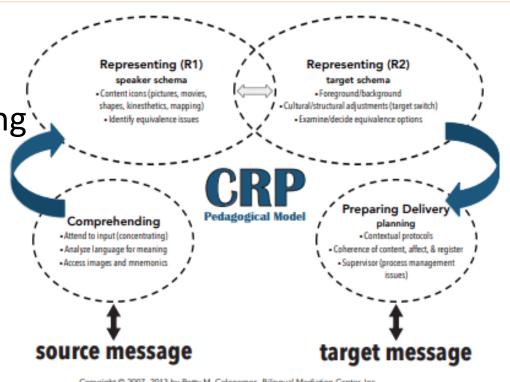


Colonomos (2013)

Comprehending

Representing

– Preparing/Planning\



Copyright © 2007, 2013 by Betty M. Colonomos, Bilingual Mediation Center, Inc.

- Yet Another Model
 - Reception
 - Comprehension
 - "Chunking" Metamessage units
 - Translation
 - Production

Reception

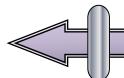
- General knowledge
- Arrive early, "scout" the site
- Lighting
- View (distance, left, right)

Comprehension

- Talk with previous interpreters
- Read the chart
- Become familiar with regional/dialectical signs

Content

- Psychosis
 - delusions & hallucinations
- Orientation
 - To person, place, time
- Suicidal or Homicidal Ideation
 - Includes ideation, intent, plan and attempt
- Client history/precipitating factors



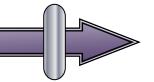
Form

- Grammar
 - consistency, age and context appropriate
 - "word salad"
 - "weird"
- Poverty of Language
- Sign Formation
 - "slips of the fingers"
 - clanging
 - paraphasia



Form

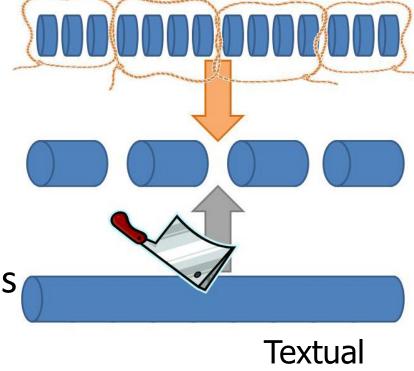
- Responding to Internal Stimuli
- Discourse
 - circumstantial or tangential
 - perseveration
 - illogicality
- Affect
- Speed of Signing
 - flight of ideas
 - pressured or psychomotor retardation



"Chunking" – Metamessage

 Decide what level you need to "chunk" (This is where I find Gish helpful)

- Lexical
- Phrasal
- Sentential
- Textual
- Concepts, Emotions, Ideas



Lexical

"Chunking"

- Visual memory practice
 - Spatial description
 - Re-order events, spaces
 - Phone books, dictionaries
 - Re-order to alphabetical
 - Increase time



Translation

- Put the Metamessage into English
 - "How do hearing people say that?"

Translation

Randali, Charles 190 Riverside Mews

1234 Parkitige Crescent

Robinson, Charles 14 East Street, Robinson, Joseph 14 East Street, Robinson, Kalle 16 Bast Street, Robinson, Rail 16 Bast Street, 14 East Street, Rail Street, Robinson, Wall 16 Bast Street, Robinson, William 14 Bast Street

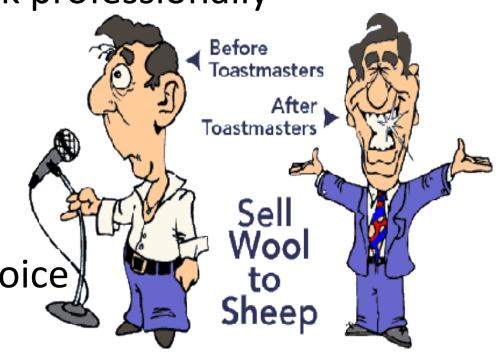
Robbins . Robert

- Auditory memory practice
 - Phone books
 - Quips
 - Spatial description
 - Extend length of time for the memory exercise
- Silent movies



Production

- Read
- Listen to others speak professionally
- Voicing practice
 - Acting
 - Public Speaking
 - Toast Masters
- Practice using your voice



Production

- If they were hearing, what would they sound like?
 - Audience
 - Age
 - Gender
 - Geographic Region
 - Educational Background
 - Employment
 - Race
 - Experience
 - SES Socio-economic Status



Choices of Perspective – First Person



First person

Third person

Narrative

Descriptive



Third person



First person Third person Narrative Descriptive

Narrative

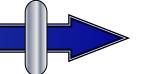


First person Third person Narrative Descriptive

Descriptive



First person Third person Narrative Descriptive



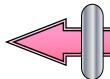
Random thoughts

- Report symptoms, not diagnosis
- Know your area of expertise
- Interpreter role

Choices of Timing

- Simultaneous
- Lagged
- Consecutive





Register

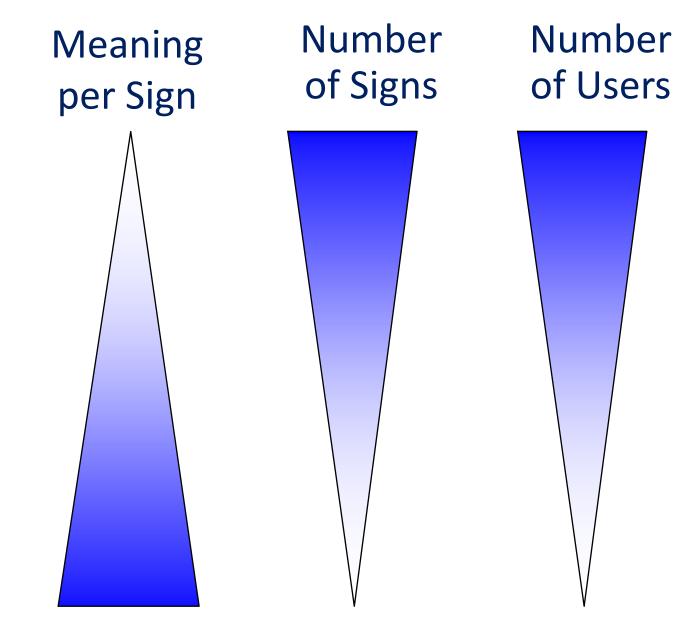
Frozen

Formal

Consultative

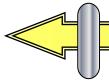
Casual

Intimate



Frozen







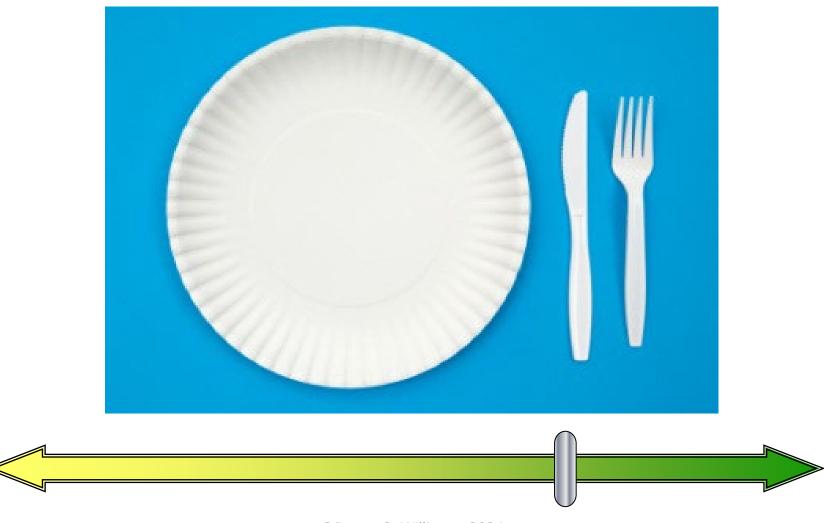
Formal



Consultative

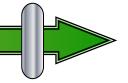


Casual



Intimate





Production

- Tape yourself
- Play it back
- Have someone else listen to it
- Review with your mentor



Controls

