



Postgraduate Certificate Dysphemia

» Modality: online

» Duration: 6 weeks

» Certificate: TECH Technological University

» Schedule: at your own pace

» Exams: online

Website: www.techtitute.com/in/education/postgraduate-certificate/dysphemia

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tech 06 | Introduction

Dysphemia is a communication disorder characterized by the appearance of involuntary interruptions in speech that prevent the construction of a fluent oral message without reception barriers for the listener. Its appearance in childhood may be caused by genetic predisposition, but in most cases it is produced by emotional conflicts or anxiety problems. For this reason, schools must have professionals who are widely trained in the management of the causes that produce it, as well as in the realization of exercises that allow the control of nerves and thoughts to help the young person to overcome this disorder.

For this reason, TECH has designed the Postgraduate Certificate in Dysphemia, which will enable the Speech Therapy professional to master the latest advances in detection and treatment in this field and increase their job opportunities. Throughout this academic period, the student will master the most avant-garde techniques to control anxiety during speech or will learn how to use new technologies as a method to help children manage their emotions properly. Additionally, they will delve into the methods of coordinating the work of the speech therapist with that of other professionals in the school, in order to extract the maximum benefits for children.

All of this, through a 100% online methodology, which will allow the compatibilization of learning with the student's personal and work tasks. In the same way, this program will be taught by speech therapists who have extensive experience in dealing with young people suffering from Dysphemia, so the knowledge they will provide will be extremely useful in their professional life.

This **Postgraduate Certificate in Dysphemia** contains the most complete and up-to-date educational program on the market. The most important features include:

- The development of case studies presented by experts in Speech Therapy specialized in Dysphemia Treatment
- The graphic, schematic, and practical contents with which they are created, provide practical information on the disciplines that are essential for professional practice
- Practical exercises where the self-assessment process can be carried out to improve learning
- Its special emphasis on innovative methodologies
- Theoretical lessons, questions to the expert, debate forums on controversial topics, and individual reflection assignments
- Content that is accessible from any fixed or portable device with an Internet connection





Take this 100% online program, making it perfectly compatible with your work or other personal and professional obligations thanks to the study facilities offered by TECH"

The program includes in its teaching staff professionals of the field who pour into this training the experience of their work, in addition to recognized specialists from reference societies and prestigious universities.

Its multimedia content, developed with the latest educational technology, will allow the professional a situated and contextual learning, that is, a simulated environment that will provide an immersive training programmed to train in real situations.

The design of this program focuses on Problem-Based Learning, in which the professional will have to try to solve the different professional practice situations that will arise throughout the academic course. For this purpose, the student will be assisted by an innovative interactive video system created by renowned experts.

Through this program, master the use of the Lidcombe program to help young children overcome Dysphemia.

In just 6 weeks, you will acquire a series of skills that will make you a reference professional in the treatment of Dysphemia.





tech 10 | Objectives



General Objectives

- Provide a Specialized Education based on a theoretical and instrumental knowledge that will allow them to obtain skills in detection, prevention, assessment and intervention in the treated logopathies
- Consolidate basic knowledge of the intervention process in the classroom and other spaces based on the latest technological advances that facilitate access to information and the syllabus for these students
- Update and develop specific knowledge about the characteristics of these disorders in order to refine the differential and proactive diagnosis that sets the intervention guidelines
- Raise awareness in the educational community of the need for educational inclusion and holistic intervention models with the participation of all agents
- Learn about educational experiences and good practices both in speech therapy and psychosocial intervention that promote personal, socio-familial and educational adaptation of students with these educational needs





Specific Objectives

- Know the concept of Dysphemia, including its symptoms and classification
- Be able to differentiate between normal dysfluency and verbal fluency impairment, such as Dysphemia
- Delve into in the marking of objectives and in the depth of the intervention of a Dysphemic child, in order to be able to carry out the most efficient and effective work possible
- Understand and be aware of the need to keep a record of all the sessions and everything that happens in them



Acquire high abilities to differentiate normal disfluencies from verbal fluency disturbances with this program"







International Guest Director

Dr. Elizabeth Anne Rosenzweig is an internationally renowned specialist dedicated to the care of children with hearing loss. As a Speech Language Expert and Certified Therapist, she has pioneered several telepractice-based early assistance strategies of broad benefit to patients and their families.

Dr. Rosenzweig's research interests have also focused on trauma support, culturally sensitive auditory-verbal practice and personal coaching. Her active scholarly work in these areas has earned her numerous awards, including Columbia University's Diversity Research Award.

Thanks to her advanced skills, she has taken on professional challenges such as the leadership of the Edward D. Mysak Communication Disorders Clinic at Columbia University. She is also known for her academic career, having served as a professor at Columbia's Teachers College and as a collaborator with the General Institute of Health Professions. On the other hand, she is an official reviewer of publications with a high impact in the scientific community such as The Journal of Early Hearing Detection and Intervention and The Journal of Deaf Studies and Deaf Education.

In addition, Dr. Rosenzweig manages and directs the AuditoryVerbalTherapy.net project, from where she offers remote therapy services to patients located in different parts of the world. She is also a speech and audiology consultant for other specialized centers located in different parts of the world. She has also focused on developing non-profit work and participating in the Listening Without Limits Project for children and professionals in Latin America. At the same time, the Alexander Graham Bell Association for the Deaf and Hard of Hearing relies on her as its vice-president.



Dra. Rosenzweig, Elizabeth Anne

- Director of the Communication Disorders Clinic at Columbia University, New York, United States
- Professor, General Hospital Institute of Health Professions, New York, United States
- Director of Private Practice AuditoryVerbalTherapy.net
- Department Head, Yeshiva University
- Attending Specialist at Teachers College, Columbia University
- Reviewer for The Journal of Deaf Studies and Deaf Education and The Journal of Early
- Hearing Detection and Intervention
- Vice-President, Alexander Graham Bell Association for the Deaf and Hard of Hearing
- Ph.D. in Education from Columbia University
- Master's Degree in Speech Therapy from Fontbonne University
- B.S. in Communication Sciences and Communication Disorders from Texas Christian University
- Member of:
- American Speech and Language Association

- American Cochlear Implant Alliance
- National Consortium for Leadership in Sensory Impairment



Thanks to TECH you will be able to learn with the best professionals in the world"

tech 14 | Course Management

Management



Ms. Vázquez Pérez, María Asunción

- Speech Therapist Specialist in Neurologopedia
- Speech therapist at Neurosens
- Speech therapist in Rehabilitation Clinic Rehasalud
- Speech Therapist at Sendas Psychology Office
- Graduate in Speech Therapy from the University of A Coruña
- Master's Degree in Neurology Therapy

Professors

Ms. Berbel, Fina Mari

- Speech Therapist Specialist in Clinical Audiology and Hearing Therapy
- Speech therapist at the Federation of Deaf People of Alicante
- Degree in Speech Therapy from the University of Murcia
- Master's Degree in Clinical Audiology and Hearing Therapy from the University of Murcia
- Training in Spanish Sign Language Interpretation (LSE)

Ms. Mata Ares, Sandra María

- Speech Therapist Specialized in Speech Therapy Intervention in Children and Adolescents
- Speech Therapist at Sandra Comunicate Speech Therapist
- Speech therapist at Fisiosaúde
- Speech therapist at Ana Parada Multi-Purpose Center
- Speech therapist at the Psychology Health Center and Family Speech Therapy
- Diploma in Speech Therapy from the from Coruña University
- Master's Degree in Speech Therapy Intervention in Childhood and Adolescence from the University of Coruña

Ms. Plana González, Andrea

- Founder and Speech Therapist at Logrospedia
 Speech therapist at ClínicActiva and Amaco Salud
- Graduate in Speech Therapy from the University of Valladolid
- Master's Degree in Orofacial Motricity and Myofunctional Therapy from the Pontifical University of Salamanca
- Master's Degree in Vocal Therapy from the CEU Cardenal Herrera University
- Postgraduate Certificate in Neurorehabilitation and Early Intervention Care by the University CEU Cardenal Herrera

Ms. Rico Sánchez, Rosana

- Director and Speech Therapist at Palabras y Más Center for Speech Therapy and Pedagogy
- Speech therapist at OrientaMedia
- Speaker at specialized conferences
- Diploma in Speech Therapy from the University of Valladolid
- Degree in Psychology from UNED
- Specialist in Alternative and Augmentative Communication Systems (SAAC)

Ms. Cerezo Fernández, Ester

- Speech therapist at Paso a Paso Neurorehabilitation Clinic
- Speech therapist at the San Jeronimo Residence
- Editor of Zona Hospitalaria Magazine
- Graduate in Speech Therapy from the University of Castilla-La Mancha
- Master's Degree in Clinical Neuropsychology by ITEAP Institute
- Expert in Myofunctional Therapy by Euroinnova Business School
- Expert in Early Childhood Care by Euroinnova Business School
- Expert in Music Therapy by Euroinnova Business School

Ms. López Mouriz, Patricia

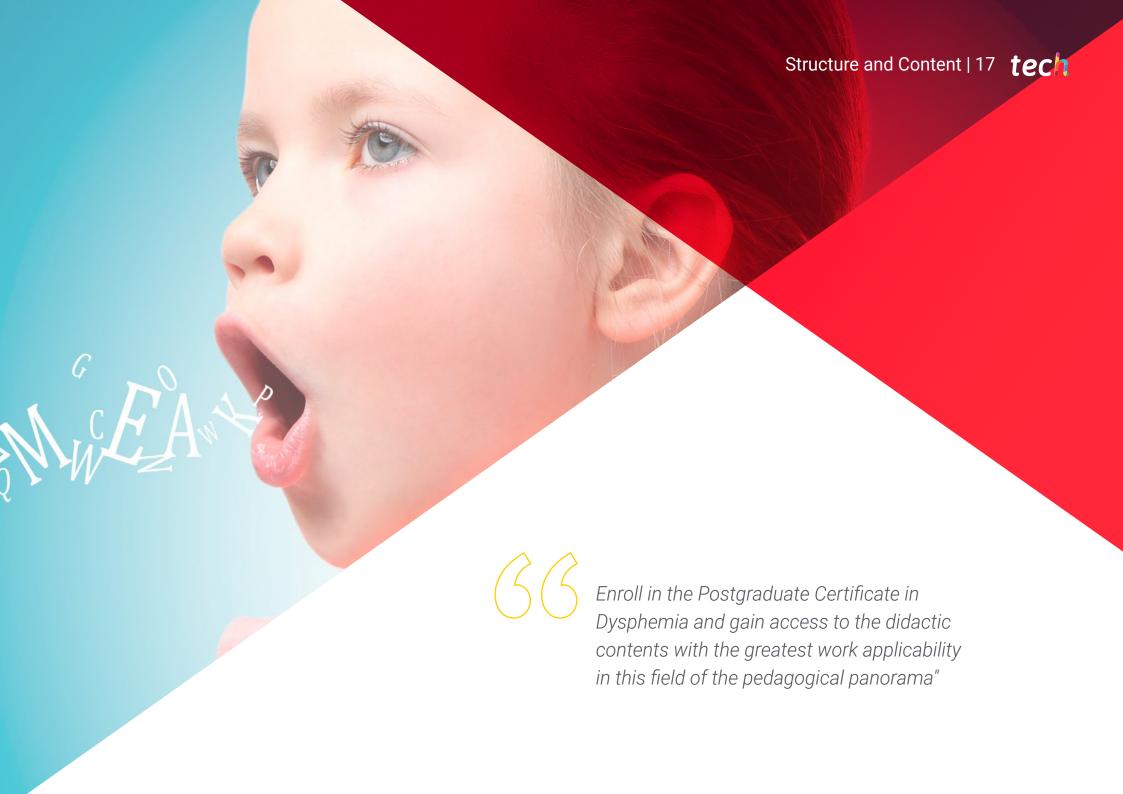
- Psychologist at FÍSICO Physiotherapy and Health
- Mediator Psychologist at Gómez ADAFAD Association
- Psychologist at Centro Orienta
- Psychologist in Psychotécnico Abrente
- Degree in Psychology from the University of Santiago de Compostela (USC)
- Master's Degree in in General Health Psychology by USC
- Training in Equality, Brief Therapy and Learning Difficulties in Children



Take the opportunity to learn about the latest advances in this field in order to apply it to your daily practice" 04

Structure and Content

The syllabus of this Postgraduate Certificate consists of 1 module with which the student will expand their knowledge and skills in the treatment of Dysphemia in both the child and the adolescent patient, with an approach oriented to the world of Education. Likewise, the didactic resources to which the student will have access throughout the course of this program are available in a wide range of textual and interactive formats. As a result, together with its 100% online methodology, they will obtain a completely optimized learning without leaving their home.



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Module 1. Dysphemia and/or stuttering: Assessment, Diagnosis, and Intervention

1.1. Introduction to the Module

1.1.2. Module Presentation

1.2. Dysphemia or Stuttering

1.2.1. History of Stuttering

1.2.2. Stuttering

1.2.2.1. Concept of Stuttering

1.2.2.2. Symptomatology of Stuttering

1.2.2.2.1. Linguistic Manifestations

1.2.2.2. Behavioral Manifestations

1.2.2.3. Bodily Manifestations

1.2.2.3.1. Characteristics of Stuttering

1.2.3. Classification

1.2.3.1. Tonic Stuttering

1.2.3.2. Clonic Stuttering

1.2.3.3. Mixed Stuttering

1.2.4. Other Specific Disorders of Fluency of Verbal Expression

1.2.5. Development of the Disorder

1.2.5.1. Preliminary Considerations

1.2.5.2. Levels of Development and Severity

1.2.5.2.1. Initial Phase

1.2.5.2.2. Borderline Stuttering

1.2.5.2.3. Initial Stuttering

1.2.5.2.4. Intermediate Stuttering

1.2.5.2.5. Advanced Stuttering

1.2.6. Comorbidity

1.2.6.1. Comorbidity in Dysphemia

1.2.6.2. Associated Disorders

1.2.7. Prognosis of Recovery

1.2.7.1. Preliminary Considerations

1.2.7.2. Key Factors

1.2.7.3. Prognosis according to the moment of Intervention

1.2.8. The incidence and prevalence of Stuttering

1.2.8.1. Preliminary Considerations

1.2.9. Etiology of Stuttering

1.2.9.1. Preliminary Considerations

1.2.9.2. Physiological Factors

1.2.9.3. Genetic Factors

1.2.9.4. Environmental Factors

1.2.9.5. Psychosocial Factors

1.2.9.6. Linguistic Factors

1.2.10. Warning Signs

1.2.10.1. Preliminary Considerations

1.2.10.2. When to Evaluate?

1.2.10.3. Is it possible to prevent the Disorder?

1.3. Evaluation of Dysphemia

1.3.1. Introduction to Unit

1.3.2. Dysphemia or normal Dysfluencies?

1.3.2.1. Initial Considerations

1.3.2.2. What are normal Disfluencies?

1.3.2.3. Differences between Dysphemia and normal Dysfluencies

1.3.2.4. When to act?

1.3.3. Objective of the Evaluation

1.3.4. Evaluation Method

1.3.4.1. Preliminary Considerations

1.3.4.2. Outline of the Evaluation Method

1.3.5. Collection of Information

1.3.5.1. Interview with Parents

1.3.5.2. Gathering Relevant Information

1.3.5.3. Medical History

1.3.6. Collecting Additional Information

1.3.6.1. Questionnaires for Parents

1.3.6.2. Questionnaires for Teachers

Structure and Content | 19 tech

1	37	Fva	luation	of the	Child
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1.3.7.1. Observation of the Child

1.3.7.2. Questionnaire for the Child

1.3.7.3. Parent-Child Interaction Profile

1.3.8. Diagnosis

1.3.8.1. Clinical Judgment of the Information Collected

1.3.8.2. Prognosis

1.3.8.3. Types of Treatment

1.3.8.4. Treatment Objectives

1.3.9. Return

1.3.9.1. Return of Information to Parents

1.3.9.2. Informing the Child of the Results

1.3.9.3. Explain Treatment to the Child

1.3.10. Diagnostic Criteria

1.3.10.1. Preliminary Considerations

1.3.10.2. Factors that May Affect the Fluency of Speech

1.3.10.2.1. Communication

1.3.10.2.2. Difficulties in Language Development

1.3.10.2.3. Interpersonal Interactions

1.3.10.2.4. Changes

1.3.10.2.5. Excessive Demands

1.3.10.2.6. Self-esteem

1.3.10.2.7. Social Resources

1.4. User-centered Speech Therapy Intervention in Dysphemia: Direct Treatment

1.4.1. Introduction to Unit

1.4.2. Direct Treatment

1.4.2.1. Treatment Characteristics

1.4.2.2. Therapist Skills

1.4.3. Therapy Goals

1.4.3.1. Goals with the Child

1.4.3.2. Objectives with the Parents

1.4.3.3. Objectives with the Teacher

1.4.4. Objectives with the Child: Speech Control

1.4.4.1. Objectives

1.4.4.2. Techniques for Speech Control

1.4.5. Objectives with the Child: Anxiety Control

1.4.5.1. Objectives

1.4.5.2. Techniques for Anxiety Control

1.4.6. Objectives with the Child: Thought Control

1.4.6.1. Objectives

1.4.6.2. Techniques for Thoughts Control

1.4.7. Objectives with the Child: Emotion Control

1.4.7.1. Objectives

1.4.7.2. Techniques for Emotion Control

1.4.8. Objectives with the Child: Social and Communication Skills

1.4.8.1. Objectives

1.4.8.2. Techniques for the Promotion of Social and Communication Skills

1.4.9. Generalization and Maintenance

1.4.9.1. Objectives

1.4.9.2. Generalization and Maintenance Techniques

1.4.10. Recommendations for User Discharge

1.5. Speech Therapy Intervention in User-centered Dysphemia: Lidcombe Early Intervention Program

1.5.1. Introduction to Unit

1.5.2. Program Development

1.5.2.1. Who Developed it?

1.5.2.2. Where was it Developed?

1.5.3. Is it Really Effective?

1.5.4. Fundamentals of the Lindcombe Program

1.5.4.1. Preliminary Considerations

1.5.4.2. Age of Application

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- 1.5.5. Essential Components
 - 1.5.5.1. Parental Verbal Contingencies
 - 1.5.5.2. Stuttering Measures
 - 1.5.5.3. Treatment in Structured and Unstructured Conversations
 - 1.5.5.4. Scheduled Maintenance
- 1.5.6. Assessment
 - 1.5.6.1. Evaluation Based on Lindcombe Program
- 1.5.7. Stages of the Lindcombe Program
 - 1.5.7.1. Stage 1
 - 1.5.7.2. Stage 2
- 1.5.8. Frequency of Sessions
 - 1.5.8.1. Weekly Visits to the Specialist
- 1.5.9. Individualization in the Lindcombe Program
 - 1.5.10. Final Conclusions
- 1.6. Speech Therapy Intervention in the Child with Dysphemia: Proposed Exercises
 - 1.6.1. Introduction to Unit
 - 1.6.2. Exercises for Speech Control
 - 1.6.2.1. Self-made Resources
 - 1.6.2.2. Resources Found on the Market
 - 1.6.2.3. Technological Resources
 - 1.6.3. Exercises for Anxiety Control
 - 1.6.3.1. Self-made Resources
 - 1.6.3.2. Resources Found on the Market
 - 1.6.3.3. Technological Resources
 - 1.6.4. Exercises for Thought Control
 - 1.6.4.1. Self-made Resources
 - 1.6.4.2. Resources Found on the Market
 - 1.6.4.3. Technological Resources
 - 1.6.5. Exercises for Emotion Control
 - 1.6.5.1. Self-made Resources
 - 1.6.5.2. Resources Found on the Market
 - 1.6.5.3. Technological Resources

- 1.6.6. Exercises to improve of Social and Communication Skills
 - 1.6.6.1. Self-made Resources
 - 1.6.6.2. Resources Found on the Market
 - 1.6.6.3. Technological Resources
- 1.6.7. Exercises that Promote Generalization
 - 1.6.7.1. Self-made Resources
 - 1.6.7.2. Resources Found on the Market
 - 1.6.7.3. Technological Resources
- 1.6.8. How To Use the Exercises Properly?
- 1.6.9. Implementation time for each Exercise
- 1.6.10. Final Conclusions
- 1.7. The family as Agent of Intervention and Support for the Child With Dysphemia
 - 1.7.1. Introduction to Unit
 - 1.7.2. The Importance of the Family in the Development of the Dysphemic Child
 - 1.7.3. Communication Difficulties Encountered by the Dysphemic child at Home
 - 1.7.4. How do Communication Difficulties in the Family Environment Affect the Dysphemic child?
 - 1.7.5. Types of Intervention with Parents
 - 1.7.5.1. Early Intervention (Brief Review)
 - 1.7.5.2. Direct Treatment (Brief Review)
 - 1.7.6. Early Intervention with Parents
 - 1.7.6.1. Orientation Sessions
 - 1.7.6.2. Daily Practice
 - 1.7.6.3. Behavioral Records
 - 1.7.6.4. Behavior Modification
 - 1.7.6.5. Organization of the Environment
 - 1.7.6.6. Structure of Sessions
 - 1.7.6.7. Special Cases
 - 1.7.7. Direct Treatment with Parents
 - 1.7.7.1. Modifying Attitudes and Behaviors
 - 1.7.7.2. Adapting Language to the Child's Difficulties
 - 1.7.7.3. Daily Practice at Home

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1.7.8. Advantages of Involving the Family in the Intervention

1.7.8.1. How Family Involvement Benefits the Child?

1.7.9. The Family as a Means of Generalization

1.7.9.1. The Importance of the Family in Generalization

1.7.10. Final Conclusions

1.8. The School as Agent of Intervention and Support for the Child With Dysphemia

1.8.1. Introduction to Unit

1.8.2. The involvement of the School during the Intervention Period

1.8.2.1. The Importance of the Involvement of the School

 $1.8.2.2.\,\mathrm{The}$ Influence of the School Center on the Development of the Dysphemic Child

1.8.3. Intervention According to the Student's Needs

1.8.3.1. Importance of Taking into Account the Needs of the Student with Dysphemia

1.8.3.2. How to Establish the Needs of the Student?

1.8.3.3. Responsible for the Elaboration of the Student's needs

1.8.4. Classroom Consequences of the Dysfemic Child

1.8.4.1. Communication with Classmates

1842 Communication with Teachers

1.8.4.3. Psychological Repercussions of the Child

1.8.5. School Supports

1.8.5.1. Who provides them?

1.8.5.2. How are they carried out?

1.8.6. The coordination of the Speech Therapist with the School Professionals

1.8.6.1. With whom does the Coordination take place?

1.8.6.2 Guidelines to be followed to achieve such Coordination

1.8.7. Orientations

1.8.7.1. Guidelines for the School to improve the child's Intervention

1.8.7.2. Guidelines for the School to improve the child's Self-esteem

1.8.7.3. Guidelines for the School to improve the Child's Social Skills

1.8.8. The School as an Enabling Environment

1.8.9. Resources Available to the School

1.8.10. Final Conclusions

1.9. Associations and Foundations

1.9.1. Introduction to Unit

1.9.2. How can Associations help Families?

1.9.3. The fundamental role of Stuttering Associations for families

1.9.4. The help of Stuttering Associations and Foundations for Health Care and Educational Professionals

1.9.5. Stuttering Associations and Foundations around the World

1.9.5.1. Argentine Association of Stuttering (AAT)

1.9.5.1.1. Association Information

1.9.5.1.2. Contact Information

1.9.6. Websites for General Information on Stuttering

1.9.6.2. American Stuttering Foundation

1.9.6.2.1. Contact Information

1.9.6.3. Speech-Therapy Space

1.9.6.3.1. Contact Information

1.9.7. Stuttering Information Blogs

1.9.7.1. Subject Blog

1.9.7.1.1. Contact Information

1.9.8. Speech Therapy magazines where information can be obtained

1.9.8.1. Speech Therapy Space magazine

1.9.8.1.1. Contact Information

1.9.8.2. Neurology Journal

1.9.8.2.1. Contact Information

1.9.10. Final Conclusions

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1.10. Annexes

- 1.10.1. Example of Anamnesis for the Assessment of Dysphemias
- 1.10.2. Fluency Questionnaire for Parents
- 1.10.3. Questionnaire for parents of emotional responses to Stuttering
- 1.10.4. Parent Record
- 1.10.5. Fluency Questionnaire for Teachers
- 1.10.6. Relaxation Techniques
 - 1.10.6.1. Instructions for the Speech Therapist
 - 1.10.6.2. Relaxation Techniques Adapted to Children
- 1.10.7. Discriminations Suffered by People that Stutter
- 1.10.8. Truths and Myths of Stuttering







Through didactic contents in formats such as video or evaluative tests, you will broaden your skills in the field of Dysphemia"



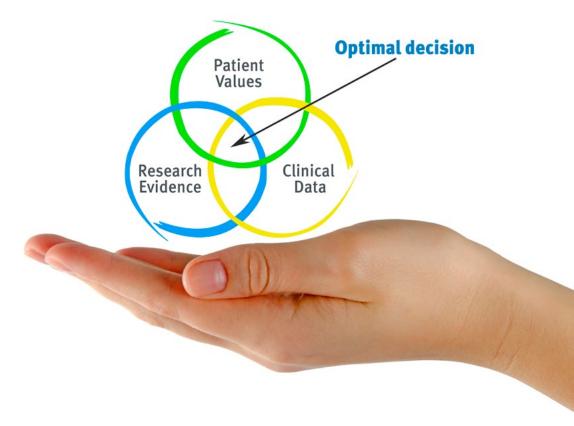


tech 28 | Methodology

At TECH Education School we use the Case Method

In a given situation, what should a professional do? Throughout the program students will be presented with multiple simulated cases based on real situations, where they will have to investigate, establish hypotheses and, finally, resolve the situation. There is an abundance of scientific evidence on the effectiveness of the method.

With TECH, educators can experience a learning methodology that is shaking the foundations of traditional universities around the world.



It is a technique that develops critical skills and prepares educators to make decisions, defend their arguments, and contrast opinions.



Did you know that this method was developed in 1912, at Harvard, for law students? The case method consisted of presenting students with real-life, complex situations for them to make decisions and justify their decisions on how to solve them. In 1924, Harvard adopted it as a standard teaching method"

The effectiveness of the method is justified by four fundamental achievements:

- Educators who follow this method not only grasp concepts, but also develop their mental capacity, by evaluating real situations and applying their knowledge.
- **2.** The learning process is solidly focused on practical skills that allow educators to better integrate the knowledge into daily practice.
- **3.** Ideas and concepts are understood more efficiently, given that the example situations are based on real-life teaching.
- **4.** Students like to feel that the effort they put into their studies is worthwhile. This then translates into a greater interest in learning and more time dedicated to working on the course.



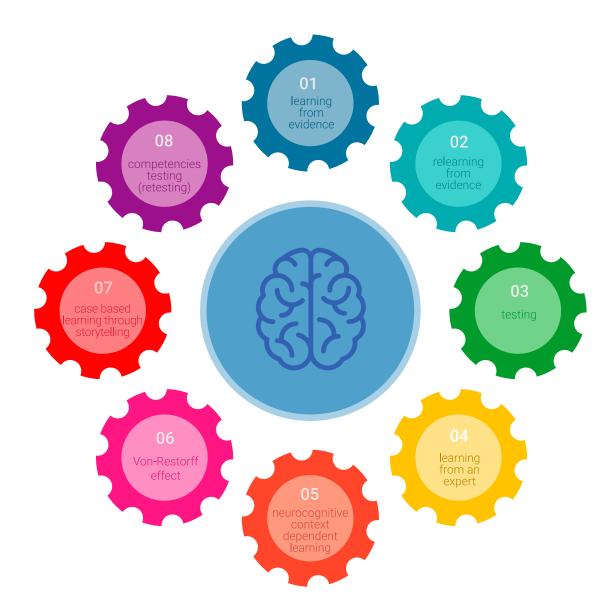
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Relearning Methodology

At TECH we enhance the case method with the best 100% online teaching methodology available: Relearning.

Our University is the first in the world to combine case studies with a 100% online learning system based on repetition, combining a minimum of 8 different elements in each lesson, which represent a real revolution with respect to simply studying and analyzing cases.

Educators will learn through real cases and by solving complex situations in simulated learning environments. These simulations are developed using state-of-the-art software to facilitate immersive learning.



Methodology | 31 tech

At the forefront of world teaching, the Relearning method has managed to improve the overall satisfaction levels of professionals who complete their studies, with respect to the quality indicators of the best online university (Columbia University).

With this methodology we have trained more than 85,000 educators with unprecedented success in all specialties. All this in a highly demanding environment, where the students have a strong socio-economic profile and an average age of 43.5 years.

Relearning will allow you to learn with less effort and better performance, involving you more in your specialization, developing a critical mindset, defending arguments, and contrasting opinions: a direct equation to success.

In our program, learning is not a linear process, but rather a spiral (learn, unlearn, forget, and re-learn). Therefore, we combine each of these elements concentrically.

The overall score obtained by our learning system is 8.01, according to the highest international standards.

tech 32 | Methodology

This program offers the best educational material, prepared with professionals in mind:



Study Material

All teaching material is produced by the specialist educators who teach the course, specifically for the course, so that the teaching content is really specific and precise.

These contents are then applied to the audiovisual format, to create the TECH online working method. All this, with the latest techniques that offer high quality pieces in each and every one of the materials that are made available to the student.



Educational Techniques and Procedures on Video

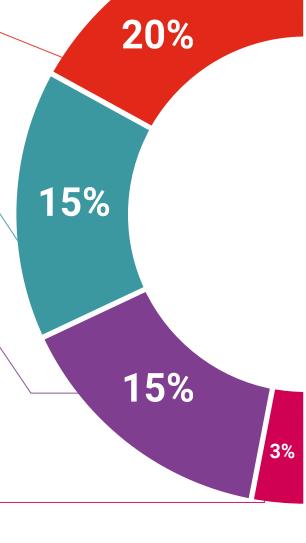
TECH introduces students to the latest techniques, with the latest educational advances, and to the forefront of Education. All this, first-hand, with the maximum rigor, explained and detailed for your assimilation and understanding. And best of all, you can watch them as many times as you want.



Interactive Summaries

The TECH team presents the contents attractively and dynamically in multimedia lessons that include audio, videos, images, diagrams, and concept maps in order to reinforce knowledge.

This exclusive multimedia content presentation training Exclusive system was awarded by Microsoft as a "European Success Story".





Additional Reading

Recent articles, consensus documents and international guidelines, among others. In TECH's virtual library, students will have access to everything they need to complete their course.

Expert-Led Case Studies and Case Analysis extual. Therefore, TECH presents real cases in cousing on and solving the different situations:

Effective learning ought to be contextual. Therefore, TECH presents real cases in which the expert will guide students, focusing on and solving the different situations: a clear and direct way to achieve the highest degree of understanding.



Testing & Retesting

We periodically evaluate and re-evaluate students' knowledge throughout the program, through assessment and self-assessment activities and exercises: so that they can see how they are achieving your goals.



There is scientific evidence suggesting that observing third-party experts can be useful.

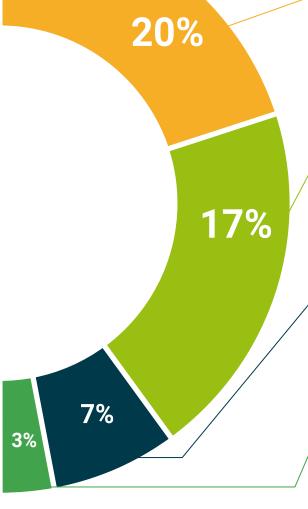
Learning from an Expert strengthens knowledge and memory, and generates confidence in future difficult decisions.



Quick Action Guides

TECH offers the most relevant contents of the course in the form of worksheets or quick action guides. A synthetic, practical, and effective way to help students progress in their learning.









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This **Postgraduate Certificate in Dysphemia** contains the most complete and up-todate program on the market.

After the student has passed the assessments, they will receive their corresponding **Postgraduate Certificate** issued by **TECH Technological University** via tracked delivery*.

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