

# Postgraduate Diploma Dyslexia and SLI





## Postgraduate Diploma Dyslexia and SLI

- » Modality: online
- » Duration: 6 months
- » Certificate: TECH Technological University
- » Schedule: at your own pace
- » Exams: online

Website: [www.techtute.com/in/education/postgraduate-diploma/postgraduate-diploma-dyslexia-sli](http://www.techtute.com/in/education/postgraduate-diploma/postgraduate-diploma-dyslexia-sli)

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# 01

# Introduction

Dyslexia and Specific Language Impairments may be closely related. Although these are two disorders with different characteristics, they also share similarities such as their basis, their unexpected nature, and the fact that there is no intellectual disability associated with their condition. However, both can severely affect children's psychosocial and cognitive development, and interfere with their academic development. Therefore, speech therapy professionals must be up to date on the advances that have been made in terms of early diagnosis and effective management of these patients, something that they can work on over the course of this program. This is an academic experience that will enable students to delve into the fundamentals of these disorders, implementing the best strategies to act in a consensual manner with pedagogical specialists in order to achieve a significant improvement in the child's situation.





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*A dynamic and highly empowering program that will bring you up to date on the latest advances in speech therapy and pedagogy in the management of patients with Dyslexia and SLI"*

Although many professionals, especially in the educational field, consider that suffering from Dyslexia implies that the child also has some type of SLI, this is erroneous. What is certain is that both conditions can be closely related and coexist in the same patient, aggravating their proper psychosocial and cognitive-behavioral development. Despite their similarities, they are disorders that require a specialized therapeutic approach, something that Speech Therapy, Education and Pedagogy professionals should place special emphasis on.

And for this they can count on this very complete and comprehensive E-Program in Dyslexia and SLI, a multidisciplinary and highly enabling academic experience that will allow you to immerse yourself in language fundamentals and its latest advances, focusing on the multiple areas of intervention in which it is possible to work. It will also delve into the diagnostic developments of Dyslexia, as well as those related to its evaluation and therapeutic treatment. Finally, you will work with the latest information related to the different types of Specific Language Impairments, their characteristics and the most effective strategies to avoid sequelae in child development.

All this 100% online and through 450 hours of theoretical, practical and additional material, which will be available in its entirety from the beginning of the academic program. This extra content includes detailed videos, research articles, complementary readings, news, self-knowledge exercises, dynamic summaries and much more, so that students can contextualize the information in the syllabus and delve in a personalized way into the sections they consider most important and relevant for their professional performance in the current context.

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

- ♦ Case studies presented by experts in Pedagogy and Education
- ♦ The graphic, schematic and practical contents of the program provide technical and practical information on those disciplines that are essential for professional practice
- ♦ The practical exercises where the self-evaluation 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



*Would you like to be able to approach SLI from its basis to its specific treatment? Choose, then, this Postgraduate Diploma and you will be able to do it thanks to the best syllabus and the exhaustive study of its developments”*

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*You will work on dyslexia assessment, diagnosis and intervention strategies, so you can implement them in your practice and collaborate with pedagogues and teachers”*

*You will be able to access the Virtual Campus at any time and from any device with internet connection, whether it is a PC, tablet or cell phone.*

*A program that will allow you to get up to date on the main SLIs and their specific therapeutic treatment.*

The program's teaching staff includes professionals from the sector who contribute their work experience to this educational program, as well as renowned specialists from leading 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.



# 02

# Objectives

The main objective of this Postgraduate Diploma is to provide students with all the material they need to achieve their own goals through the course of an academic experience adapted to their demands and needs. That is why TECH and its team of professionals have selected the most exhaustive and innovative information, as well as the best additional material, so that students can acquire an extensive knowledge of this 100% online program in only 6 months.







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*If your objectives include knowing, in-detail, how the family can intervene in cases of children with SLI, this program will provide you with everything you need to achieve it"*



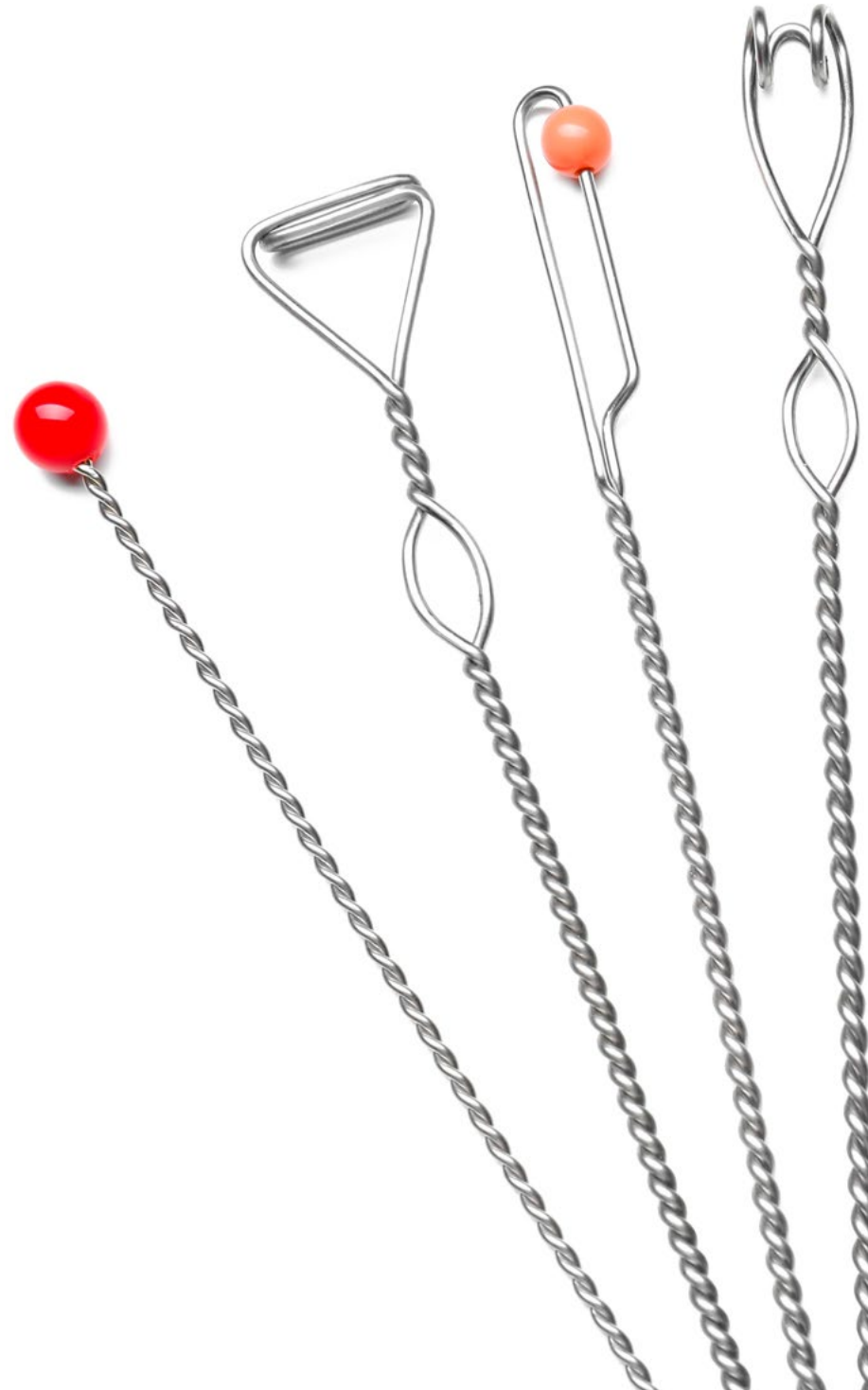
## General Objectives

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- Provide students with the best theoretical and practical material to address cases of Dyslexia and SLI from their basis to their therapeutic treatment in a specialized and effective manner
- Develop specialized knowledge of the main therapeutic techniques and strategies that exist today to work with these children and achieve significant progress in their psychosocial development



*The program includes conclusions for each section, so that you are always clear about the most important points and then you can personally delve into the aspects you think are most important"*





## Specific Objectives

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### Module 1. Basis of Speech and Language Therapy

- ♦ Delve into the concept of Speech Therapy and in the areas of action of this field's professionals
- ♦ Acquire knowledge about the concept of Language and the different aspects that compose it
- ♦ Delve into the typical development of Language, knowing its stages as well as being able to identify the warning signs in such development
- ♦ Understand and be able to classify the different Language pathologies, from the different approaches currently existing
- ♦ Know the different batteries and tests available in the discipline of Speech Therapy, to be able to carry out a correct evaluation of the different areas of Language
- ♦ Be able to develop a Speech Therapy report in a clear and precise way, both for the families and for the different professionals
- ♦ Understand the importance and effectiveness of working with an interdisciplinary team, whenever necessary and favorable for the child's rehabilitation

### Module 2. Dyslexia: Assessment, Diagnosis, and Intervention

- ♦ Know everything involved in the evaluation process, in order to be able to carry out the most effective Speech Therapy intervention possible
- ♦ Learn about the reading process from vowels and syllables to paragraphs and complex texts
- ♦ Analyze and develop techniques for a correct reading process
- ♦ Be aware and be able to involve the family in the child's intervention, so that they are a part of the process and that this collaboration is as effective as possible

### Module 3. Specific Language Disorder

- ♦ Acquire sufficient knowledge to be able to assess a Verbal Fluency Disorder
- ♦ Identify the main language disorders and their therapeutic treatment
- ♦ Know the need for an Intervention supported and supported by both the family and the team of teachers at the child's School

03

# Course Management

Having the support of a teaching team with expertise in this field is another way in which TECH demonstrates its commitment to its students' growth. For this reason, and given the need for a broad and specialized knowledge on Dyslexia and SLI required by Speech Therapy professionals, TECH has included a faculty of experts in this field in this Postgraduate Diploma, who will share the latest developments in the sector and the most innovative and effective techniques to carry out an efficient therapeutic process.





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*The teaching staff will be at your disposal to answer any questions you may have during the program through the Virtual Campus”*

## 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

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- ♦ 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

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

## Management



### Ms. Vázquez Pérez, María Asunción

- ◆ Forensic speech therapist
- ◆ Forensic Speech Therapist with teaching experience in Attention Deficit Hyperactivity Disorder (ADHD)
- ◆ Diploma in Speech Therapy with training and experience in hearing impairment, autism spectrum disorders, augmentative communication systems

## Professors

### Ms. Mata Ares, Sandra María

- ◆ Speech therapist
- ◆ Specialist in Speech Therapy Intervention in Childhood and Adolescence
- ◆ Master's Degree in Speech Therapy intervention in childhood and adolescence.
- ◆ Specific training in disorders related to Speech and Language in childhood and adulthood

### Ms. Rico Sánchez, Rosana

- ◆ Speech therapist
- ◆ Director and Speech Therapist in the Speech Therapy and Pedagogy Center "Words and More"
- ◆ Training and experience in clinical and educational Speech Therapy





# 04

## Structure and Content

Both the structure and the content of this Postgraduate Diploma have been developed by the teaching team, including the most exhaustive and innovative information in the sector. Thanks to this, it has been possible to develop a specialized syllabus based on the latest pedagogical and speech therapy advances. In addition, hours of high-quality additional material are included, presented in different formats and compacted into a convenient and accessible 100% online program. This way, students will be able to access the program whenever they want and from any device with an Internet connection.





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*Expert syllabus and quality content  
are the key to your learning success”*

## Module 1. Basis of Speech and Language Therapy

- 1.1. Introduction to the Professional Master's Degree and to the Module
  - 1.1.1. Introduction to the Professional Master's Degree
  - 1.1.2. Introduction to the Module
  - 1.1.3. Previous Aspects of the Language
  - 1.1.4. History of the Study of Language
  - 1.1.5. Basic Theories of Language
  - 1.1.6. Research in Language Acquisition
  - 1.1.7. Neurological Bases of Language Development.
  - 1.1.8. Perceptual Bases in Language Development
  - 1.1.9. Social and Cognitive Bases of Language
    - 1.1.9.1. Introduction
    - 1.1.9.2. The Importance of Imitation
  - 1.1.10. Final Conclusions
- 1.2. What is Speech Therapy?
  - 1.2.1. Speech Therapy
    - 1.2.1.1. Concept of Speech Therapy
    - 1.2.1.2. Concept of Speech Therapist
  - 1.2.2. History of Speech Therapy
  - 1.2.3. Speech Therapy in Spain
    - 1.2.3.1. Importance of the Speech Therapy professional in Spain
    - 1.2.3.2. Is the Speech Therapist valued in Spain?
  - 1.2.4. Speech Therapy in the rest of the World
    - 1.2.4.1. Importance of the Speech Therapy Professional in the rest of the World
    - 1.2.4.2. What are Speech Therapists called in other countries?
    - 1.2.4.3. Is the figure of the Speech Therapist valued in other Countries?
  - 1.2.5. Functions of the Speech-Language Pathologist
    - 1.2.5.1. Functions of the Speech Therapist according to the BOE
    - 1.2.5.2. The Reality of Speech Therapy
  - 1.2.6. Areas of Intervention of the Speech Therapist
    - 1.2.6.1. Areas of Intervention According to the BOE
    - 1.2.6.2. The Reality of the Speech-Language Pathologist's areas of intervention
  - 1.2.7. Forensic Speech Therapy
    - 1.2.7.1. Initial Considerations
    - 1.2.7.2. Concept of Forensic Speech Therapist
    - 1.2.7.3. The Importance of Forensic Speech Therapists
  - 1.2.8. The Hearing and Speech Teacher
    - 1.2.8.1. Concept of Hearing and Speech Teacher
    - 1.2.8.2. Areas of work of the Hearing and Speech Teacher
    - 1.2.8.3. Differences between Speech-Language Pathologist and Hearing and Speech Teacher
  - 1.2.9. Professional Associations of Speech-Language Pathologists in Spain
    - 1.2.9.1. Functions of the Professional Associations
    - 1.2.9.2. The Autonomous Communities
    - 1.2.9.3. Why Join a Professional Association?
  - 1.2.10. Final Conclusions
- 1.3. Language, Speech, and Communication
  - 1.3.1. Preliminary Considerations
  - 1.3.2. Language, Speech, and Communication
    - 1.3.2.1. Concept of Language
    - 1.3.2.2. Concept of Speech
    - 1.3.2.3. Concept of Communication
    - 1.3.2.4. How do they differ?
  - 1.3.3. Language Dimensions
    - 1.3.3.1. Formal or Structural Dimension
    - 1.3.3.2. Functional Dimension
    - 1.3.3.3. Behavioral Dimension
  - 1.3.4. Theories that explain Language Development
    - 1.3.4.1. Preliminary Considerations
    - 1.3.4.2. Theory of Determinism: Whorf
    - 1.3.4.3. Theory of Behaviorism: Skinner
    - 1.3.4.4. Theory of Innatism: Chomsky
    - 1.3.4.5. Interactionist positions
  - 1.3.5. Cognitive theories that explain the development of Language.
    - 1.3.5.1. Piaget
    - 1.3.5.2. Vygotsky

- 1.3.5.3. Luria
- 1.3.5.4. Bruner
- 1.3.6. Influence of the Environment on Language Acquisition
- 1.3.7. Language Components
  - 1.3.7.1. Phonetics and Phonology
  - 1.3.7.2. Semantics and Lexicon
  - 1.3.7.3. Morphosyntax
  - 1.3.7.4. Pragmatics
- 1.3.8. Stages of Language Development
  - 1.3.8.1. Prelinguistic Stage
  - 1.3.8.2. Linguistic Stage
- 1.3.9. Summary Table of Normative Language Development
- 1.3.10. Final Conclusions
- 1.4. Communication, speech, and language disorders
  - 1.4.1. Introduction to Unit
  - 1.4.2. Communication, speech, and language disorders
    - 1.4.2.1. Concept of Communication Disorder
    - 1.4.2.2. Concept of Speech Disorder
    - 1.4.2.3. Concept of Language Disorder
    - 1.4.2.4. How do they differ?
  - 1.4.3. Communication Disorders
    - 1.4.3.1. Preliminary Considerations
    - 1.4.3.2. Comorbidity with other Disorders
    - 1.4.3.3. Types of Communication Disorders
      - 1.4.3.3.1. Social Communication Disorder
      - 1.4.3.3.2. Unspecified Communication Disorder
  - 1.4.4. Speech Disorders
    - 1.4.4.1. Preliminary Considerations
    - 1.4.4.2. Origin of Speech Disorders
    - 1.4.4.3. Symptoms of a Speech Disorder
      - 1.4.4.3.1. Mild delay
      - 1.4.4.3.2. Moderate delay
      - 1.4.4.3.3. Severe delay
    - 1.4.4.4. Warning signs in Speech Disorders
- 1.4.5. Classification of Speech Disorders
  - 1.4.5.1. Phonological Disorder or Dyslalia
  - 1.4.5.2. Dysphemia
  - 1.4.5.3. Dysglossia
  - 1.4.5.4. Dysarthria
  - 1.4.5.5. Tachyphemia
  - 1.4.5.6. Others
- 1.4.6. Language Disorders
  - 1.4.6.1. Preliminary Considerations
  - 1.4.6.2. Origin of Language Disorders
  - 1.4.6.3. Conditions related to Language Disorders
  - 1.4.6.4. Warning signs in Language Development
- 1.4.7. Types of Language Disorders
  - 1.4.7.1. Receptive Language Difficulties
  - 1.4.7.2. Expressive Language Difficulties
  - 1.4.7.3. Receptive-Expressive Language Difficulties.
- 1.4.8. Classification of Language Disorders
  - 1.4.8.1. From the Clinical Approach
  - 1.4.8.2. From the Educational Approach
  - 1.4.8.3. From the Psycholinguistic Approach
  - 1.4.8.4. From the Axiological point of view
- 1.4.9. What skills are affected in a Language Disorder?
  - 1.4.9.1. Social Skills
  - 1.4.9.2. Academic Problems
  - 1.4.9.3. Other affected skills
- 1.4.10. Types of Language Disorders
  - 1.4.10.1. TEL
  - 1.4.10.2. Aphasia
  - 1.4.10.3. Dyslexia
  - 1.4.10.4. Attention Deficit Hyperactivity Disorder (ADHD)
  - 1.4.10.5. Others
- 1.4.11. Comparative Table of Typical Development and Developmental Disturbances.

- 1.5. Logopedic Evaluation Instruments
  - 1.5.1. Introduction to Unit
  - 1.5.2. Aspects to be Highlighted during the Logopedic Evaluation
    - 1.5.2.1. Fundamental considerations
  - 1.5.3. Evaluation of Orofacial Motor Skills: The Stomatognathic System
  - 1.5.4. Areas of Speech-Language, Speech, and Communication Speech-Language Evaluation
    - 1.5.4.1. Anamnesis (family interview)
    - 1.5.4.2. Evaluation of the Preverbal Stage
    - 1.5.4.3. Assessment of Phonetics and Phonology
    - 1.5.4.4. Assessment of Morphology
    - 1.5.4.5. Syntax Evaluation
    - 1.5.4.6. Evaluation of Semantics
    - 1.5.4.7. Evaluation of Pragmatics
  - 1.5.5. General Classification of the Most Commonly Used Tests in Speech Assessment
    - 1.5.5.1. Developmental Scales: Introduction
    - 1.5.5.2. Oral Language Assessment Tests: Introduction
    - 1.5.5.3. Test for the Assessment of Reading and Writing: Introduction
  - 1.5.6. Developmental Scales
    - 1.5.6.1. Brunet-Lézine Developmental Scale
    - 1.5.6.2. Battelle Developmental Inventory
    - 1.5.6.3. Portage Guide
    - 1.5.6.4. Haizea-Llevant
    - 1.5.6.5. Bayley scale of Child Development
    - 1.5.6.6. McCarthy Scale (Scale of Aptitudes and Psychomotor Skills for Children)
  - 1.5.7. Oral Language Assessment Test
    - 1.5.7.1. BLOC
    - 1.5.7.2. Monfort Induced Phonological Register
    - 1.5.7.3. ITPA
    - 1.5.7.4. PLON-R
    - 1.5.7.5. PEABODY
    - 1.5.7.6. RFI
    - 1.5.7.7. ALS-R
    - 1.5.7.8. EDAF
    - 1.5.7.9. CELF 4
    - 1.5.7.10. BOEHM
    - 1.5.7.11. TSA
    - 1.5.7.12. CEG
    - 1.5.7.13. ELCE
  - 1.5.8. Test for Reading and Writing Assessment
    - 1.5.8.1. PROLEC-R
    - 1.5.8.2. PROLEC-SE
    - 1.5.8.3. PROESC
    - 1.5.8.4. TALE
  - 1.5.9. Summary Table of the Different Tests
  - 1.5.10. Final Conclusions
- 1.6. Components That Must be Included in a Speech-Language Pathology Report
  - 1.6.1. Introduction to Unit
  - 1.6.2. The Reason for the Appraisal
    - 1.6.2.1. Request or Referral by the Family
    - 1.6.2.2. Request or Referral by School or External Center
  - 1.6.3. Medical History
    - 1.6.3.1. Anamnesis with the Family
    - 1.6.3.2. Meeting with the Educational Center
    - 1.6.3.3. Meeting with Other Professionals
  - 1.6.4. The Patient's Medical and Academic History
    - 1.6.4.1. Medical History
      - 1.6.4.1.1. Evolutionary Development
    - 1.6.4.2. Academic History
  - 1.6.5. Situation of the Different Contexts
    - 1.6.5.1. Situation of the Family Context
    - 1.6.5.2. Situation of the Social Context
    - 1.6.5.3. Situation of the School Context
  - 1.6.6. Professional Assessments
    - 1.6.6.1. Assessment by the Speech Therapist
    - 1.6.6.2. Assessments by other Professionals
      - 1.6.6.2.1. Assessment by the Occupational Therapist

- 1.6.6.2.2. Teacher Assessment
    - 1.6.6.2.3. Psychologist's Assessment
    - 1.6.6.2.4. Other Assessments
  - 1.6.7. Results of the Assessments
    - 1.6.7.1. Logopedic Evaluation Results
    - 1.6.7.2. Results of the other Evaluations
  - 1.6.8. Clinical Judgment and/or Conclusions
    - 1.6.8.1. Speech-Language Pathologist's Judgment
    - 1.6.8.2. Judgment of Other Professionals
    - 1.6.8.3. Judgment in Common with the Other Professionals
  - 1.6.9. Speech Therapy Intervention Plan
    - 1.6.9.1. Objectives to Intervene
    - 1.6.9.2. Intervention Program
    - 1.6.9.3. Guidelines and/or Recommendations for the Family
  - 1.6.10 Why is it so Important to Carry Out a Speech Therapy Report?
    - 1.6.10.1. Preliminary Considerations
    - 1.6.10.2. Areas where a Speech Therapy Report can be Key
- 1.7. Speech Therapy Intervention Program
  - 1.7.1. Introduction
    - 1.7.1.1. The need to elaborate a Speech Therapy Intervention Program
  - 1.7.2. What is a Speech Therapy Intervention Program?
    - 1.7.2.1. Concept of the Intervention Program
    - 1.7.2.2. Intervention Program Fundamentals
    - 1.7.2.3. Speech Therapy Intervention Program Considerations
  - 1.7.3. Fundamental Aspects for the Elaboration of a Speech Therapy Intervention Program
    - 1.7.3.1. Characteristics of the Child
  - 1.7.4. Planning of the Speech Therapy Intervention
    - 1.7.4.1. Methodology of Intervention to be Carried Out
    - 1.7.4.2. Factors to Take Into Account in the Planning of the Intervention
      - 1.7.4.2.1. Extracurricular Activities
      - 1.7.4.2.2. Chronological and Corrected Age of the Child
      - 1.7.4.2.3. Number of Sessions per Week
      - 1.7.4.2.4. Collaboration on the Part of the Family
      - 1.7.4.2.5. Economic Situation of the Family
- 1.7.5. Objectives of the Speech Therapy Intervention Program
  - 1.7.5.1. General Objectives of the Speech Therapy Intervention Program
  - 1.7.5.2. Specific Objectives of the Speech Therapy Intervention Program
- 1.7.6. Areas of Speech Therapy Intervention and Techniques for its Intervention
  - 1.7.6.1. Voice
  - 1.7.6.2. Speech
  - 1.7.6.3. Prosody
  - 1.7.6.4. Language
  - 1.7.6.5. Reading
  - 1.7.6.6. Writing
  - 1.7.6.7. Orofacial
  - 1.7.6.8. Communication.
  - 1.7.6.9. Hearing
  - 1.7.6.10. Breathing
- 1.7.7. Materials and Resources for Speech Therapy Intervention
  - 1.7.7.1. Proposition of Materials of Own Manufacture and Indispensable in a Speech Therapy Room
  - 1.7.7.2. Proposition of Indispensable Materials on the Market for a Speech Therapy Room
  - 1.7.7.3. Indispensable Technological Resources for Speech Therapy Intervention
- 1.7.8. Methods of Speech Therapy Intervention
  - 1.7.8.1. Introduction
  - 1.7.8.2. Types of Intervention Methods
    - 1.7.8.2.1. Phonological Methods
    - 1.7.8.2.2. Clinical Intervention Methods
    - 1.7.8.2.3. Semantic Methods
    - 1.7.8.2.4. Behavioral-Logopedic Methods
    - 1.7.8.2.5. Pragmatic Methods
    - 1.7.8.2.6. Medical Methods
    - 1.7.8.2.7. Others
  - 1.7.8.3. Choice of the Most Appropriate Method of Intervention for Each Subject

- 1.7.9. The Interdisciplinary Team
  - 1.7.9.1. Introduction
  - 1.7.9.2. Professionals Who Collaborate Directly with the Speech Therapist
    - 1.7.9.2.1. Psychologists
    - 1.7.9.2.2. Occupational Therapists
    - 1.7.9.2.3. Professors
    - 1.7.9.2.4. Hearing and Speech Teachers
    - 1.7.9.2.5. Others
  - 1.7.9.3. The Work of these Professionals in Speech-Language Pathology Intervention
- 1.7.10. Final Conclusions
- 1.8. Augmentative and Alternative Communication Systems (AACs)
  - 1.8.1. Introduction to Unit
  - 1.8.2. What are AACs?
    - 1.8.2.1. Concept of Augmentative Communication System
    - 1.8.2.2. Concept of Alternative Communication System
    - 1.8.2.3. Similarities and Differences
    - 1.8.2.4. Advantages of AACs
    - 1.8.2.5. Disadvantages: of AACs
    - 1.8.2.6. How do AACs arise?
  - 1.8.3. Principles: of AACs
    - 1.8.3.1. General Principles
    - 1.8.3.2. False myths about AACs
  - 1.8.4. How to Know the Most Suitable AACs?
  - 1.8.5. Communication Support Products
    - 1.8.5.1. Basic Support Products
    - 1.8.5.2. Technological Support Products
  - 1.8.6. Strategies and Support Products for Access
    - 1.8.6.1. Direct Selection
    - 1.8.6.2. Mouse Selection
    - 1.8.6.3. Dependent Scanning or Sweeping
    - 1.8.6.4. Coded Selection
  - 1.8.7. Types of AACs
    - 1.8.7.1. Sign Language
    - 1.8.7.2. The Complemented Word
    - 1.8.7.3. PECs
    - 1.8.7.4. Bimodal Communication
    - 1.8.7.5. Bliss System
    - 1.8.7.6. Communicators
    - 1.8.7.7. Minspeak
    - 1.8.7.8. Schaeffer System
  - 1.8.8. How to Promote the Success of the AACs Intervention?
  - 1.8.9. Technical Aids Adapted to Each Person
    - 1.8.9.1. Communicators
    - 1.8.9.2. Pushbuttons
    - 1.8.9.3. Virtual Keypads
    - 1.8.9.4. Adapted Mice
    - 1.8.9.5. Data Input Devices
  - 1.8.10. AACs Resources and Technologies
    - 1.8.10.1. AraBoard Builder
    - 1.8.10.2. Talk up
    - 1.8.10.3. #IamVisual
    - 1.8.10.4. SPQR
    - 1.8.10.5. DictaPicto
    - 1.8.10.6. AraWord
    - 1.8.10.7. Picto Selector
- 1.9. The family as Part of the Intervention and Support for the Child
  - 1.9.1. Introduction
    - 1.9.1.1. The Importance of the Family in the Correct Development of the child
  - 1.9.2. Consequences in the Family Context of a Child with Atypical Development
    - 1.9.2.1. Difficulties Present in the Immediate Environment
  - 1.9.3. Communication Problems in the Immediate Environment
    - 1.9.3.1. Communicative Barriers Encountered by the Subject at Home



- 1.9.4. Speech Therapy intervention aimed at the Family-Centered Intervention Model
  - 1.9.4.1. Concept of Family Centered Intervention
  - 1.9.4.2. How to carry out the Family Centered Intervention?
  - 1.9.4.3. The importance of the Family-Centered Model
- 1.9.5. Integration of the family in the Speech-Language Pathology Intervention
  - 1.9.5.1. How to integrate the family in the Intervention?
  - 1.9.5.2. Guidelines for the Professional
- 1.9.6. Advantages of family integration in all contexts of the subject
  - 1.9.6.1. Advantages of coordination with Educational Professionals
  - 1.9.6.2. Advantages of coordination with Health Professionals
- 1.9.7. Recommendations for the Family Environment
  - 1.9.7.1. Recommendations to Facilitate Oral Communication
  - 1.9.7.2. Recommendations for a Good Relationship in the Family Environment
- 1.9.8. The Family as a Key Part in the Generalization of the Established Objectives
  - 1.9.8.1. The Importance of the Family in Generalization
  - 1.9.8.2. Recommendations to facilitate Generalization
- 1.9.9. How do I communicate with my child?
  - 1.9.9.1. Modifications in the child's family environment
  - 1.9.9.2. Advice and Recommendations from the child
  - 1.9.9.3. The Importance of keeping a Record Sheet
- 1.9.10. Final Conclusions
- 1.10. Child Development in the School context
  - 1.10.1. Introduction to Unit
  - 1.10.2. The Involvement of the School center during the Speech Therapy Intervention
    - 1.10.2.1. The Influence of the School Center in the child's development
    - 1.10.2.2. The Importance of the Center in the Speech Therapy Intervention
  - 1.10.3. School Supports
    - 1.10.3.1. Concept of School Support
    - 1.10.3.2. Who provides School Support in the Center?
      - 1.10.3.2.1. Hearing and Speech Teacher
      - 1.10.3.2.2. Therapeutic Pedagogy Teacher (PT)
      - 1.10.3.2.3. Counselor
  - 1.10.4. Coordination with the Professionals of the Educational Center
    - 1.10.4.1. Educational Professionals with whom the Speech-Language Pathologist coordinates with
    - 1.10.4.2. Basis for Coordination
    - 1.10.4.3. The Importance of Coordination in the child's Development
  - 1.10.5. Consequences of the Child with Special Educational Needs in the classroom
    - 1.10.5.1. How the Child Communicates with Teachers and Students?
    - 1.10.5.2. Psychological Consequences
  - 1.10.6. School Needs of the child
    - 1.10.6.1. Taking Educational Needs into account in Intervention
    - 1.10.6.2. Who determines the child's Educational Needs?
    - 1.10.6.3. How are they established?
  - 1.10.7. The Different Types of Education in Spain
    - 1.10.7.1. Normal School
      - 1.10.7.1.1. Concept
    - 1.10.7.2. Special Education School
      - 1.10.7.2.1. Concept
    - 1.10.7.3. Combined Education
      - 1.10.7.3.1. Concept
  - 1.10.8. Methodological bases for Classroom Intervention.
    - 1.10.8.1. Strategies to favor the child's Integration
  - 1.10.9. Curricular Adaptation
    - 1.10.9.1. Concept of Curricular Adaptation
    - 1.10.9.2. Professionals who Apply it
    - 1.10.9.3. How does it benefit the child with Special Educational Needs?
  - 1.10.10. Final Conclusions

Module 2. Dyslexia: Assessment, Diagnosis, and Intervention

- 2.1. Basic Fundamentals of Reading and Writing
  - 2.1.1. Introduction
  - 2.1.2. The Brain
    - 2.1.2.1. Anatomy of the Brain
    - 2.1.2.2. Brain Function
  - 2.1.3. Methods of Brain Scanning
    - 2.1.3.1. Structural Imaging
    - 2.1.3.2. Functional Imaging
    - 2.1.3.3. Stimulation Imaging
  - 2.1.4. Neurobiological Basis of Reading and Writing
    - 2.1.4.1. Sensory Processes
      - 2.1.4.1.1. The Visual Component
      - 2.1.4.1.2. The Auditory Component
    - 2.1.4.2. Reading Processes
      - 2.1.4.2.1. Reading Decoding
      - 2.1.4.2.2. Reading Comprehension
    - 2.1.4.3. Writing Processes
      - 2.1.4.3.1. Written Coding
      - 2.1.4.3.2. Syntactic Construction
      - 2.1.4.3.3. Educational
      - 2.1.4.3.4. The Act of Writing
  - 2.1.5. Psycholinguistic Processing of Reading and Writing
    - 2.1.5.1. Sensory Processes
      - 2.1.5.1.1. The Visual Component
      - 2.1.5.1.2. The Auditory Component
    - 2.1.5.2. Reading Process
      - 2.1.5.2.1. Reading Decoding
      - 2.1.5.2.2. Reading Comprehension
    - 2.1.5.3. Writing Processes
      - 2.1.5.3.1. Written Coding
      - 2.1.5.3.2. Syntactic Construction
      - 2.1.5.3.3. Educational
      - 2.1.5.3.4. The Act of Writing





- 2.1.6. The Dyslexic Brain in the light of Neuroscience.
- 2.1.7. Laterality and Reading
  - 2.1.7.1. Reading with the hands
  - 2.1.7.2. Handedness and Language
- 2.1.8. Integration of the outside World and Reading
  - 2.1.8.1. Attention
  - 2.1.8.2. Memory
  - 2.1.8.3. Emotions
- 2.1.9. Chemical Mechanisms involved in Reading
  - 2.1.9.1. Neurotransmitters
  - 2.1.9.2. Limbic System
- 2.1.10. Conclusions and Appendices
- 2.2. Talking and organizing time and space for Reading
  - 2.2.1. Introduction
  - 2.2.2. Communication.
    - 2.2.2.1. Oral Language
    - 2.2.2.2. Written Language
  - 2.2.3. Relations between Oral Language and Written Language
    - 2.2.3.1. Syntactic Aspects
    - 2.2.3.2. Semantic Aspects
    - 2.2.3.3. Phonological Aspects
  - 2.2.4. Recognize Language Forms and Structures.
    - 2.2.4.1. Language, Speech, and Writing
  - 2.2.5. Develop Speech
    - 2.2.5.1. Oral Language
    - 2.2.5.2. Linguistic prerequisites for Reading
  - 2.2.6. Recognize the structures of Written Language
    - 2.2.6.1. Recognize the Word
    - 2.2.6.2. Recognize the Sequential Organization of the Sentence
    - 2.2.6.3. Recognize the meaning of Written Language.
  - 2.2.7. Structure Time
    - 2.2.7.1. Organizing Time
  - 2.2.8. Structuring Space
    - 2.2.8.1. Spatial Perception and Organization

- 2.2.9. Reading Strategies and their learning
  - 2.2.9.1. Logographic Stage and Global Method
  - 2.2.9.2. Alphabetic Stage
  - 2.2.9.3. Orthographic Stage and learning to Write
  - 2.2.9.4. Understanding to be able to Read
- 2.2.10. Conclusions and Appendices
- 2.3. Dyslexia
  - 2.3.1. Introduction
  - 2.3.2. Brief History of the Term Dyslexia
    - 2.3.2.1. Chronology
    - 2.3.2.2. Different terminological meanings
  - 2.3.3. Conceptual Approach
    - 2.3.3.1. Dyslexia
      - 2.3.3.1.1. WHO Definition
      - 2.3.3.1.2. DSM-IV Definition
      - 2.3.3.1.3. DSM-V Definition
  - 2.3.4. Other Related Concepts
    - 2.3.4.1. Conceptualization of Dysgraphia
    - 2.3.4.2. Conceptualization of Dysgraphia
  - 2.3.5. Etiology
    - 2.3.5.1. Explanatory Theories of Dyslexia
      - 2.3.5.1.1. Genetic Theories
      - 2.3.5.1.2. Neurobiological Theories
      - 2.3.5.1.3. Linguistic Theories
      - 2.3.5.1.4. Phonological Theories
      - 2.3.5.1.5. Visual Theories
  - 2.3.6. Types of Dyslexia
    - 2.3.6.1. Phonological Dyslexia
    - 2.3.6.2. Lexical Dyslexia
    - 2.3.6.3. Mixed Dyslexia
  - 2.3.7. Comorbidities and Strengths
    - 2.3.7.1. ADD or ADHD
    - 2.3.7.2. Dyscalculia
    - 2.3.7.3. Dysgraphia
    - 2.3.7.4. Visual Stress Syndrome
    - 2.3.7.5. Crossed Laterality
    - 2.3.7.6. High Abilities
    - 2.3.7.7. Strengths
  - 2.3.8. The Person with Dyslexia
    - 2.3.8.1. The Child with Dyslexia
    - 2.3.8.2. The Adolescent with Dyslexia
    - 2.3.8.3. The Adult with Dyslexia
  - 2.3.9. Psychological Repercussions
    - 2.3.9.1. The feeling of injustice
  - 2.3.10. Conclusions and Appendices
- 2.4. How to identify the Person with Dyslexia?
  - 2.4.1. Introduction
  - 2.4.2. Warning Signs
    - 2.4.2.1. Warning Signs in Early Childhood Education
    - 2.4.2.2. Warning Signs in Primary Education
  - 2.4.3. Frequent Symptomatology
    - 2.4.3.1. General Symptomatology
    - 2.4.3.2. Symptomatology by Stages
      - 2.4.3.2.1. Infant Stage
      - 2.4.3.2.2. School Stage
      - 2.4.3.2.3. Adolescent Stage
      - 2.4.3.2.4. Adult Stage
  - 2.4.4. Specific Symptomatology
    - 2.4.4.1. Dysfunctions in Reading
      - 2.4.4.1.1. Dysfunctions in the Visual Component
      - 2.4.4.1.2. Dysfunctions in the Decoding Processes.
      - 2.4.4.1.3. Dysfunctions in Comprehension Processes
    - 2.4.4.2. Dysfunctions in Writing
      - 2.4.4.2.1. Dysfunctions in the Oral-Written Language Relationship.
      - 2.4.4.2.2. Dysfunction in the Phonological Component
      - 2.4.4.2.3. Dysfunction in the Encoding Processes.
      - 2.4.4.2.4. Dysfunction in Syntactic Construction Processes
      - 2.4.4.2.5. Dysfunction in Planning

- 2.4.4.3. Motor Processes
  - 2.4.4.3.1. Visuoceptive Dysfunctions
  - 2.4.4.3.2. Visuoconstructive Dysfunctions
  - 2.4.4.3.3. Visuospatial Dysfunctions
  - 2.4.4.3.4. Tonic Dysfunctions
- 2.4.5. Dyslexia Profiles
  - 2.4.5.1. Phonological Dyslexia Profile
  - 2.4.5.2. Lexical Dyslexia Profile
  - 2.4.5.3. Mixed Dyslexia Profile
- 2.4.6. Dysgraphia Profiles
  - 2.4.6.1. Visuoceptive Dyslexia Profile
  - 2.4.6.2. Visoconstructive Dyslexia Profile
  - 2.4.6.3. Visuospatial Dyslexia Profile
  - 2.4.6.4. Tonic Dyslexia Profile
- 2.4.7. Dysorthographic Profiles
  - 2.4.7.1. Phonological Dysorthography Profile
  - 2.4.7.2. Orthographic Dysorthographic Profile
  - 2.4.7.3. Syntactic Dysorthography Profile
  - 2.4.7.4. Cognitive Dysorthography Profile
- 2.4.8. Associated Pathologies
  - 2.4.8.1. Secondary Pathologies
- 2.4.9. Dyslexia versus other Disorders
  - 2.4.9.1. Differential Diagnosis
- 2.4.10. Conclusions and Appendices
- 2.5. Assessment and Diagnosis
  - 2.5.1. Introduction
  - 2.5.2. Evaluation of Tasks
    - 2.5.2.1. The Diagnostic Hypothesis
  - 2.5.3. Evaluation of Processing Levels
    - 2.5.3.1. Sublexical Units
    - 2.5.3.2. Lexical Units
    - 2.5.3.3. Suplexical Units
  - 2.5.4. Assessment of Reading Processes
    - 2.5.4.1. Visual Component
    - 2.5.4.2. Decoding Process
    - 2.5.4.3. Comprehension Process
  - 2.5.5. Evaluation of Writing Processes
    - 2.5.5.1. Neurobiological Skills of the Auditory Component
    - 2.5.5.2. Encoding Process
    - 2.5.5.3. Syntactic Construction
    - 2.5.5.4. Educational
    - 2.5.5.5. The Act of Writing
  - 2.5.6. Evaluation of the Oral-Written Language Relationship
    - 2.5.6.1. Lexical Awareness
    - 2.5.6.2. Representational Written Language
  - 2.5.7. Other Aspects to be Assessed
    - 2.5.7.1. Chromosomal Assessments
    - 2.5.7.2. Neurological Assessments
    - 2.5.7.3. Cognitive Assessments
    - 2.5.7.4. Motor Assessments
    - 2.5.7.5. Visual Assessments
    - 2.5.7.6. Linguistic Assessments
    - 2.5.7.7. Emotional Appraisals
    - 2.5.7.8. School Ratings
  - 2.5.8. Standardized Tests and Evaluation Tests
    - 2.5.8.1. TALE
    - 2.5.8.2. PROLEC
    - 2.5.8.3. DST-J Dyslexia
    - 2.5.8.4. Other Tests
  - 2.5.9. The Dyctective Test
    - 2.5.9.1. Contents
    - 2.5.9.2. Experimental Methodology
    - 2.5.9.3. Summary of Results
  - 2.5.10. Conclusions and Appendices

- 2.6. Intervention in Dyslexia
  - 2.6.1. General Aspects of Intervention
  - 2.6.2. Selection of objectives based on the Diagnosed Profile
    - 2.6.2.1. Analysis of Collected Samples
  - 2.6.3. Prioritization and Sequencing of Targets
    - 2.6.3.1. Neurobiological Processing
    - 2.6.3.2. Psycholinguistic Processing
  - 2.6.4. Adequacy of the Objectives to the Contents to be worked on.
    - 2.6.4.1. From the Specific Objective to the Content
  - 2.6.5. Proposal of Activities by Intervention Area
    - 2.6.5.1. Proposals based on the Visual Component
    - 2.6.5.2. Proposals based on the Phonological Component
    - 2.6.5.3. Proposals based on Reading Practice
  - 2.6.6. Programs and Tools for Intervention
    - 2.6.6.1. Orton-Gillingham Method
    - 2.6.6.2. ACOS Program
  - 2.6.7. Standardized Materials for Intervention
    - 2.6.7.1. Printed Materials
    - 2.6.7.2. Other Materials
  - 2.6.8. Space Organization
    - 2.6.8.1. Lateralization
    - 2.6.8.2. Sensory Modalities
    - 2.6.8.3. Eye Movements
    - 2.6.8.4. Visuoperceptual Skills
    - 2.6.8.5. Fine Motor Skills
  - 2.6.9. Necessary Adaptations in the Classroom
    - 2.6.9.1. Curricular Adaptations
  - 2.6.10. Conclusions and Appendices
- 2.7. From Traditional to Innovative. New Approach
  - 2.7.1. Introduction
  - 2.7.2. Traditional Education
    - 2.7.2.1. Brief description of Traditional Education
  - 2.7.3. Current Education
    - 2.7.3.1. The Education of our days
  - 2.7.4. Process of Change
    - 2.7.4.1. Educational Change. From Challenge to Reality
  - 2.7.5. Teaching Methodology
    - 2.7.5.1. Gamification
    - 2.7.5.2. Project-based Learning
    - 2.7.5.3. Others
  - 2.7.6. Changes in the Development of the Intervention Sessions
    - 2.7.6.1. Applying the new changes in Speech Therapy Intervention.
  - 2.7.7. Proposal of Innovative Activities
    - 2.7.7.1. "My Logbook".
    - 2.7.7.2. The Strengths of each Student
  - 2.7.8. Development of Materials
    - 2.7.8.1. General Tips and Guidelines
    - 2.7.8.2. Adaptation of Materials
    - 2.7.8.3. Creating our own Intervention Material
  - 2.7.9. The use of Current Intervention Tools
    - 2.7.9.1. Android and iOS Operating System Applications
    - 2.7.9.2. The use of Computers
    - 2.7.9.3. Digital Whiteboard
  - 2.7.10. Conclusions and Appendices

- 2.8. Strategies and Personal Development of the Person with Dyslexia
  - 2.8.1. Introduction
  - 2.8.2. Study Strategies
    - 2.8.2.1. Study Techniques
  - 2.8.3. Organization and Productivity
    - 2.8.3.1. The Pomodoro Technique
  - 2.8.4. Tips on how to face an exam
  - 2.8.5. Language Learning Strategies
    - 2.8.5.1. First Language Assimilation
    - 2.8.5.2. Phonological and Morphological Awareness
    - 2.8.5.3. Visual Memory
    - 2.8.5.4. Comprehension and Vocabulary
    - 2.8.5.5. Linguistic Immersion
    - 2.8.5.6. Use of ICT
    - 2.8.5.7. Formal Methodologies
  - 2.8.6. Development of Strengths
    - 2.8.6.1. Beyond the Person with Dyslexia
  - 2.8.7. Improving Self-concept and Self-esteem
    - 2.8.7.1. Social Skills
  - 2.8.8. Eliminating Myths
    - 2.8.8.1. Student with Dyslexia. I am not lazy
    - 2.8.8.2. Other Myths
  - 2.8.9. Famous People with Dyslexia
    - 2.8.9.1. Well-known People with Dyslexia
    - 2.8.9.2. Real Testimonials
  - 2.8.10. Conclusions and Appendices
- 2.9. Guidelines
  - 2.9.1. Introduction
  - 2.9.2. Guidelines for the Person with Dyslexia
    - 2.9.2.1. Coping with the Diagnosis
    - 2.9.2.2. Guidelines for Daily Living
    - 2.9.2.3. Guidelines for the Person with Dyslexia as a Learner
  - 2.9.3. Guidelines for the Family Environment
    - 2.9.3.1. Guidelines for collaborating in the Intervention
    - 2.9.3.2. General Guidelines
  - 2.9.4. Guidelines for the Educational Context
    - 2.9.4.1. Adaptations
    - 2.9.4.2. Measures to be taken to facilitate the Acquisition of Content
    - 2.9.4.3. Guidelines to be Followed to Pass Exams
  - 2.9.5. Specific Guidelines for Foreign Language Teachers.
    - 2.9.5.1. The Challenge of Language Learning
  - 2.9.6. Guidelines for other Professionals
  - 2.9.7. Guidelines for the Form of Written Texts
    - 2.9.7.1. Typography
    - 2.9.7.2. Font Size
    - 2.9.7.3. Colors
    - 2.9.7.4. Character, Line, and Paragraph Spacing
  - 2.9.8. Guidelines for Text Content
    - 2.9.8.1. Frequency and Length of Words
    - 2.9.8.2. Syntactic Simplification
    - 2.9.8.3. Numerical Expressions
    - 2.9.8.4. The use of Graphical Schemes
  - 2.9.9. Writing Technology
  - 2.9.10. Conclusions and Appendices
- 2.10. The Speech-Language Pathologist's Report on Dyslexia
  - 2.10.1. Introduction
  - 2.10.2. The Reason for the Evaluation
    - 2.10.2.1. Family Referral or Request
  - 2.10.3. The Interview
    - 2.10.3.1. The Family Interview
    - 2.10.3.2. The School Interview
  - 2.10.4. The History
    - 2.10.4.1. Clinical History and Evolutionary Development
    - 2.10.4.2. Academic History

- 2.10.5. The Context
  - 2.10.5.1. The Social Context
  - 2.10.5.2. The family context
- 2.10.6. Assessments
  - 2.10.6.1. Psycho-Pedagogical Assessment
  - 2.10.6.2. Speech Therapy Assessment
  - 2.10.6.3. Other Assessments
- 2.10.7. The Results
  - 2.10.7.1. Logopedic Evaluation Results
  - 2.10.7.2. Results of Other Assessments
- 2.10.8. Conclusions
  - 2.10.8.1. Diagnosis
- 2.10.9. Intervention Plan
  - 2.10.9.1. The Needs
  - 2.10.9.2. The Speech Therapy Intervention Program
- 2.10.10. Conclusions and Appendices

### Module 3. Specific Language Disorder

- 3.1. Background Information
  - 3.1.1. Module Presentation
  - 3.1.2. Module Objectives
  - 3.1.3. Historical Evolution of SLD
  - 3.1.4. Late Language Onset vs. SLD SLD
  - 3.1.5. Differences between SLD and Language Delay
  - 3.1.6. Difference between ASD and SLD
  - 3.1.7. Specific Language Disorder vs. Aphasia
  - 3.1.8. SLD as a predecessor of Literacy Disorders
  - 3.1.9. Intelligence and Specific Language Disorder
  - 3.1.10. Prevention of Specific Language Disorder
- 3.2. Approach to the Specific Language Disorder
  - 3.2.1. Definition of SLD
  - 3.2.2. General characteristics of SLD
  - 3.2.3. Prevalence of SLD
  - 3.2.4. Prognosis of SLD
  - 3.2.5. Etiology of SLD
  - 3.2.6. Clinically based classification of SLD
  - 3.2.7. Empirically based classification of SLD
  - 3.2.8. Empirical-clinical based Classification of SLD
  - 3.2.9. Comorbidity of SLD
  - 3.2.10. SLD, not only a Difficulty in the Acquisition and Development of Language.
- 3.3. Linguistic Characteristics in Specific Language Disorder
  - 3.3.1. Concept of Linguistic Capabilities
  - 3.3.2. General Linguistic Characteristics
  - 3.3.3. Linguistic Studies in SLD in Different Languages
  - 3.3.4. General Alterations in Language Skills Presented by People with SLD
  - 3.3.5. Grammatical Characteristics in SLD
  - 3.3.6. Narrative Features in SLD
  - 3.3.7. Pragmatic Features in SLD
  - 3.3.8. Phonetic and Phonological Features in SLD
  - 3.3.9. Lexical Features in SLD
  - 3.3.10. Preserved Language Skills in SLD
- 3.4. Terminological Change
  - 3.4.1. Changes in the Terminology of SLD
  - 3.4.2. Classification According to DSM
  - 3.4.3. Changes Introduced in the DSM
  - 3.4.4. Consequences of Changes in Classification with the DSM.
  - 3.4.5. New Nomenclature: Language Disorder
  - 3.4.6. Characteristics of Language Disorder
  - 3.4.7. Main Differences and Concordances between SLD and SL
  - 3.4.8. Altered Executive Functions in SLD
  - 3.4.9. Preserved Executive Functions in SL
  - 3.4.10. Detractors of Terminology Change
- 3.5. Assessment in Specific Language Disorder
  - 3.5.1. Speech-Language Evaluation: Prior Information
  - 3.5.2. Early identification of SLD: Prelinguistic Predictors
  - 3.5.3. General Considerations to take into account in the Speech Therapy Evaluation of SLD
  - 3.5.4. Principles of Evaluation in Cases of SLD
  - 3.5.5. The Importance and Objectives of Speech-Language Pathology Assessment in SLD



- 3.5.6. Evaluation Process of SLD
- 3.5.7. Assessment of Language, Communicative Skills and Executive Functions in SLD
- 3.5.8. Evaluation Instrument of SLD
- 3.5.9. Interdisciplinary Evaluation
- 3.5.10. Diagnosis of TEL
- 3.6. interventions in Specific Language Disorder
  - 3.6.1. The Speech Therapy Intervention
  - 3.6.2. Basic Principles of Speech Therapy Intervention
  - 3.6.3. Environments and Agents of intervention in SLD
  - 3.6.4. Intervention Model in Levels
  - 3.6.5. Early Intervention in SLD
  - 3.6.6. Importance of Intervention in SLD
  - 3.6.7. Music Therapy in the intervention of SLD
  - 3.6.8. Technological Resources in the Intervention of SLD
  - 3.6.9. Intervention in the Executive Functions in SLD
  - 3.5.10. Multidisciplinary Intervention in SLD
- 3.7. Elaboration of a Speech Therapy Intervention Program for children with Specific Language Disorder
  - 3.7.1. Speech Therapy Intervention Program
  - 3.7.2. Approaches on SLD to design an Intervention Program
  - 3.7.3. Objectives and Strategies of SLD Intervention Programs
  - 3.7.4. Indications to follow in the Intervention of Children with SLD
  - 3.7.5. Comprehension Treatment
  - 3.7.6. Treatment of Expression in cases of SLD
  - 3.7.7. Intervention in Reading and Writing
  - 3.7.8. Social Skills Training in SLD
  - 3.7.9. Agents and Timing of Intervention in cases of SLD
  - 3.7.10. SAACs in the Intervention in cases of SLD
- 3.8. The School in Cases of Specific Language Disorder
  - 3.8.1. The School in Child Development
  - 3.8.2. School Consequences in children with SLD
  - 3.8.3. Schooling of children with SLD
  - 3.8.4. Aspects to take into account in School Intervention.
  - 3.8.5. Objectives of School Intervention in cases of SLD
  - 3.8.6. Guidelines and Strategies for Classroom Intervention with children with SLD
  - 3.8.7. Development and Intervention in Social Relationships within the School
  - 3.8.8. Dynamic Playground Program
  - 3.8.9. The School and the Relationship with other Intervention Agents.
  - 3.8.10. Observation and Monitoring of School Intervention
- 3.9. The Family and its Intervention in cases of children with Specific Language Disorder
  - 3.9.1. Consequences of SLD in the Family Environment
  - 3.9.2. Family Intervention Models
  - 3.9.3. General Considerations to be taken into account
  - 3.9.4. The importance of Family Intervention in SLD
  - 3.9.5. Family Orientations
  - 3.9.6. Communication Strategies for the Family
  - 3.9.7. Needs of Families of Children with SLD
  - 3.9.8. The Speech Therapist in the Family Intervention
  - 3.9.9. Objectives of the Family Speech Therapy Intervention in the SLD
  - 3.9.10. Follow-up and Timing of the Family Intervention in SLD
- 3.10. Associations and Support Guides for Families and Schools of Children with SLD
  - 3.10.1. Parent Associations
  - 3.10.2. Information Guides
  - 3.10.3. AVATEL
  - 3.10.4. ATELMA
  - 3.10.5. ATELAS
  - 3.10.6. ATELCA
  - 3.10.7. ATEL CLM
  - 3.10.8. Other Associations
  - 3.10.9. SLD Guides aimed at the Educational Field
  - 3.10.10. SLD Guides and Manuals aimed at the Family Environment

05

# Methodology

This training program offers a different way of learning. Our methodology uses a cyclical learning approach: **Relearning**.

This teaching system is used, for example, in the most prestigious medical schools in the world, and major publications such as the **New England Journal of Medicine** have considered it to be one of the most effective.





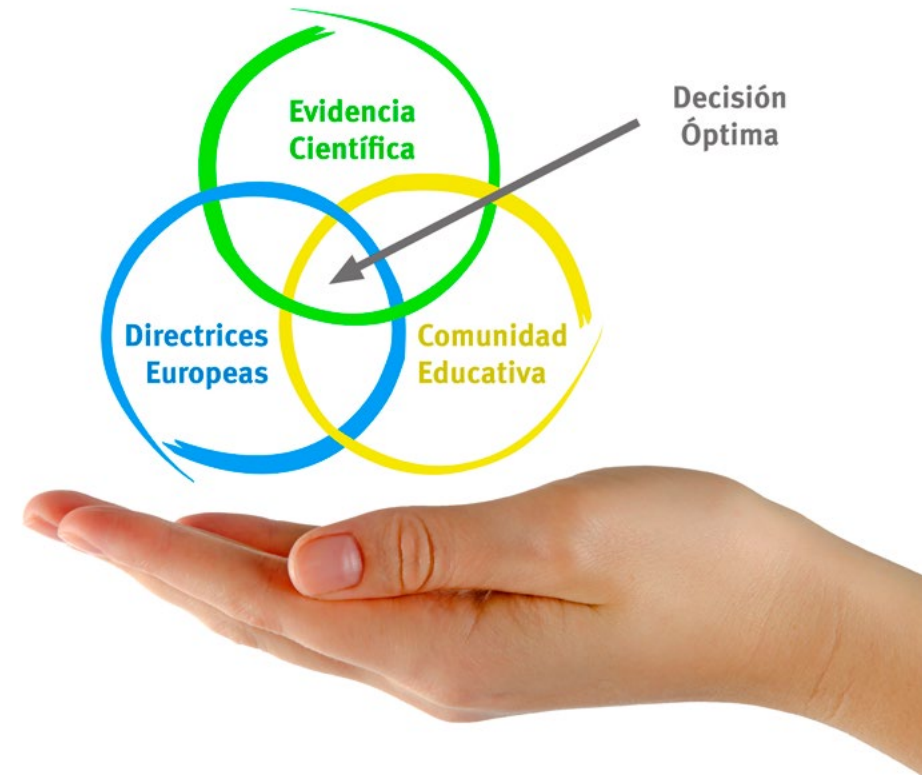
“

*Discover Relearning, a system that abandons conventional linear learning, to take you through cyclical teaching systems: a way of learning that has proven to be extremely effective, especially in subjects that require memorization"*

## 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:

1. 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.



## 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.*

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.



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

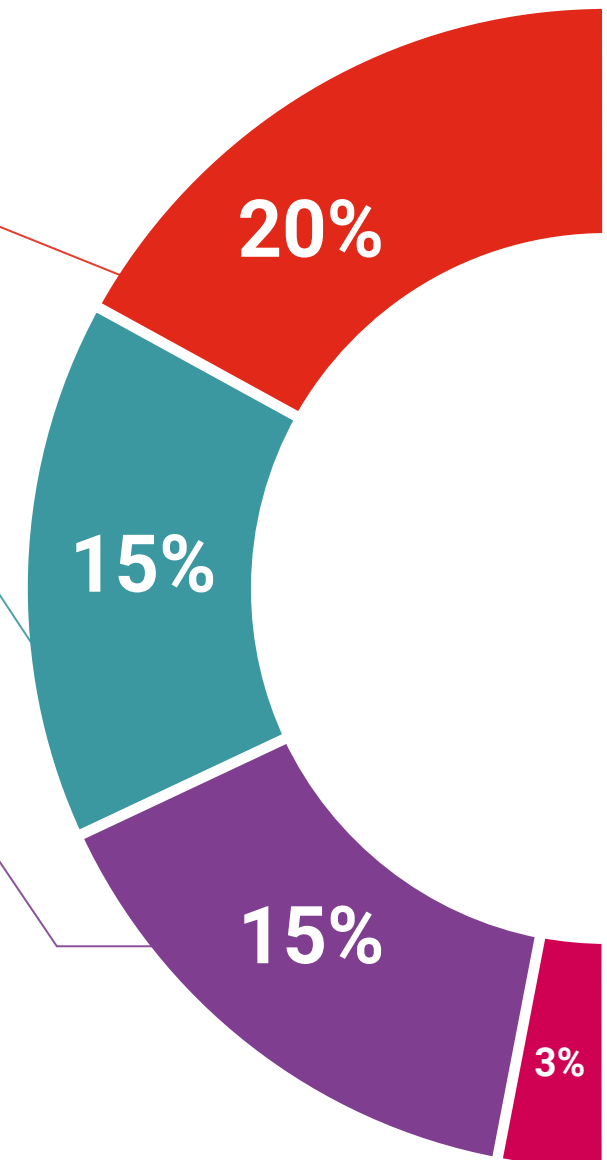
The TECH team presents the contents attractively and dynamically in multimedia lessons that include audio, videos, images, diagrams, and concept maps in order to reinforce knowledge.

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

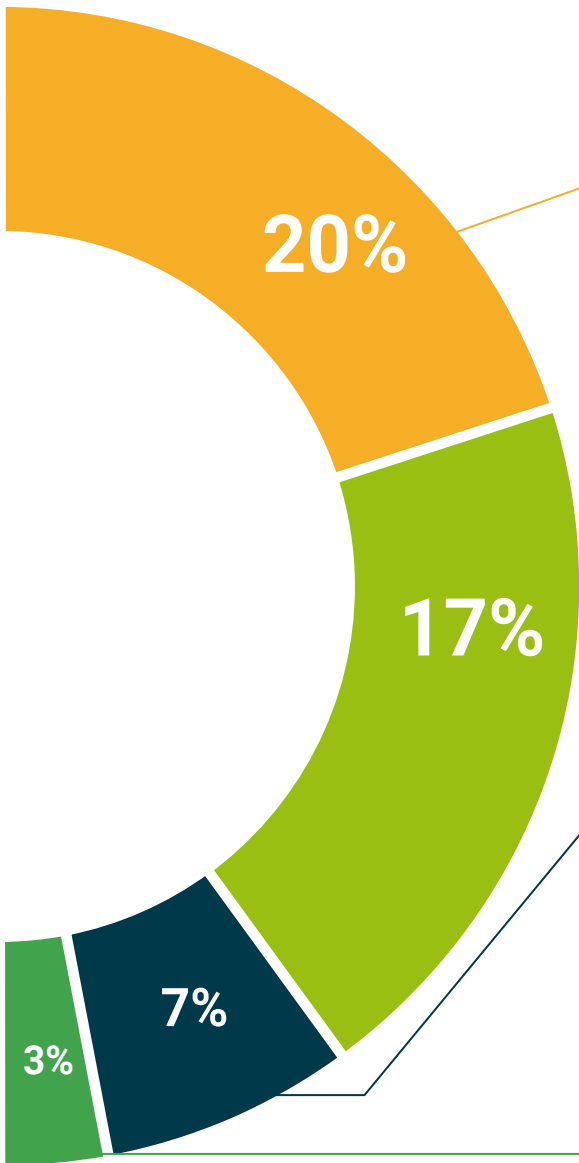


#### Additional Reading

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**

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.



**Classes**

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.



06

# Certificate

This Postgraduate Diploma in Dyslexia and SLI guarantees students, in addition to the most rigorous and up-to-date education, access to a Postgraduate Diploma issued by TECH Technological University.



“

*Successfully complete this program and receive your university qualification without having to travel or fill out laborious paperwork”*

This **Postgraduate Diploma in Dyslexia and SLI** contains the most complete and up-to-date program on the market.

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

The certificate issued by **TECH Technological University** will reflect the qualification obtained in the Postgraduate Diploma, and meets the requirements commonly demanded by labor exchanges, competitive examinations, and professional career evaluation committees.

Title: **Postgraduate Diploma in Dyslexia and SLI**

Official N° of Hours: **450 h.**



\*Apostille Convention. In the event that the student wishes to have their paper certificate issued with an apostille, TECH EDUCATION will make the necessary arrangements to obtain it, at an additional cost.

future  
health confidence people  
education information tutors  
guarantee accreditation teaching  
institutions technology learning  
community commitment  
personalized service innovation  
knowledge present quality  
development languages  
virtual classroom



## Postgraduate Diploma Dyslexia and SLI

- » Modality: online
- » Duration: 6 months
- » Certificate: TECH Technological University
- » Schedule: at your own pace
- » Exams: online

# Postgraduate Diploma Dyslexia and SLI