Arizona State University (ASU) SHS205 Exploring Communication Disorders in Children and Adults Final Practice Exam (Sample)

Study Guide



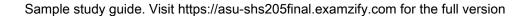
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Questions



1. True or False? Girls are more likely to experience stuttering than boys.
A. True
B. False
C. Equal likelihood
D. It varies by age
2. What distinguishes an incomplete cleft lip from a complete cleft lip?
A. An incomplete cleft extends through the nasal cavity
B. A complete cleft does not affect the lip
C. An incomplete cleft does not go through the nasal cavity
D. A complete cleft is always unilateral
3 of sounds and syllables refers to inappropriate lengthening, which may be accompanied by pitch change, such as 'Mmmmommy's home
A. Prolongations
B. Repetitions
C. Disfluencies
D. Fragmentations
4. What condition is characterized by the inability to understand or formulate language due to brain damage?
A. Aphasia
B. Dyslexia
C. Apraxia
D. Dysarthria
5. Is cluttering characterized by rapid bursts of dysrhythmic, unintelligible speech?
A. True
B. False

- 6. Which of the following is an example of non-verbal communication?
 - A. Oral speech
 - B. Crying
 - C. Written language
 - D. Listening
- 7. Which of the following is a possible emotional effect of literacy disorders?
 - A. Impaired self-image
 - B. Increased academic performance
 - C. Enhanced social skills
 - D. Improved self-esteem
- 8. What anatomical structures are involved in communication?
 - A. Heart and lungs
 - B. Respiratory and articular systems
 - C. Digestive system and kidneys
 - D. Circulatory system alone
- 9. What role does a speech-language pathologist often play in a team approach for dysphagia?
 - A. Observer
 - B. Coordinator of the team
 - C. None, they work alone
 - D. Consultant only
- 10. Which of the following can hinder spelling development?
 - A. Advanced vocabulary knowledge
 - B. Consistent letter-sound rules
 - C. Phonological difficulties combined with other inconsistencies
 - D. Regular practice of spelling words

Answers



- 1. B
- 2. C
- 3. A
- 4. A
- 5. A
- 6. B
- 7. A
- 8. B
- 9. B
- 10. C

Explanations



- 1. True or False? Girls are more likely to experience stuttering than boys.
 - A. True
 - B. False
 - C. Equal likelihood
 - D. It varies by age

The correct assertion is that girls are generally less likely to experience stuttering than boys. Research indicates that stuttering is more prevalent in males, with various studies showing that the ratio can be as high as four or five boys for every girl who stutters. The reasons behind this gender disparity are not entirely understood, but factors may include genetic predispositions and developmental differences between boys and girls. Thus, the statement that girls are more likely to experience stuttering is inaccurate, which supports the choice that asserts this is false.

- 2. What distinguishes an incomplete cleft lip from a complete cleft lip?
 - A. An incomplete cleft extends through the nasal cavity
 - B. A complete cleft does not affect the lip
 - C. An incomplete cleft does not go through the nasal cavity
 - D. A complete cleft is always unilateral

An incomplete cleft lip is characterized by the fact that it does not extend through the nasal cavity, which differentiates it from a complete cleft lip. In a complete cleft lip, the cleft extends through the lip and typically involves the alveolus, which connects to the nasal cavity, resulting in a more extensive separation of the structures of the lip and potentially affecting the nasal passage. With an incomplete cleft lip, the split may be present but is limited to the lip itself and does not reach the nasal areas. This distinction is crucial for both diagnosis and treatment, as interventions may vary significantly based on the severity and extent of the cleft. Understanding these nuances regarding the differences between incomplete and complete cleft lips aids in identifying appropriate surgical and therapeutic interventions for individuals affected by these conditions.

- 3. ______ of sounds and syllables refers to inappropriate lengthening, which may be accompanied by pitch change, such as 'Mmmmommy's home'.
 - A. Prolongations
 - B. Repetitions
 - C. Disfluencies
 - D. Fragmentations

Prolongations of sounds and syllables are characterized by the inappropriate lengthening of speech sounds, which can also include changes in pitch. This often manifests in speech as a stretching out of specific sounds within words, as seen in the example 'Mmmmommy's home,' where the sound 'M' is held longer than usual. Such occurrences can disrupt the normal flow of speech and are commonly associated with certain speech disorders, particularly stuttering. Understanding this concept is crucial for identifying patterns in communication disorders, as it differentiates prolongations from other types of speech disruptions, such as repetitions, disfluencies, or fragmentations, which have their distinct characteristics.

- 4. What condition is characterized by the inability to understand or formulate language due to brain damage?
 - A. Aphasia
 - B. Dyslexia
 - C. Apraxia
 - D. Dysarthria

Aphasia is indeed characterized by difficulties in understanding or producing language due to brain damage, which often results from a stroke, traumatic brain injury, or neurological disease affecting language areas of the brain. Individuals with aphasia may struggle with speaking, writing, and comprehending spoken or written language. This condition highlights the complex relationship between brain function and communication abilities, demonstrating how specific areas of the brain are responsible for processing language. Understanding aphasia is crucial in the field of speech-language pathology, as it directly informs therapeutic approaches aimed at helping individuals regain their communicative capacities. Other conditions listed, such as dyslexia (a reading disorder), apraxia (a motor speech disorder), and dysarthria (a speech production issue due to muscle control problems), affect communication but do not primarily stem from an inability to understand or formulate language due to brain damage.

- 5. Is cluttering characterized by rapid bursts of dysrhythmic, unintelligible speech?
 - A. True
 - B. False

Cluttering is indeed characterized by a disorganized or disrupted speech fluency, which often results in rapid bursts of speech that may be unintelligible. Individuals who clutter tend to speak quickly and may experience irregularities in their speech flow, leading to difficulties in rhythm and clarity. Therefore, the statement that cluttering is marked by rapid bursts of dysrhythmic, unintelligible speech is accurate. In contrast, the other option, suggesting that this characterization is false, would not capture the essence of cluttering as understood in communication disorders. Cluttering is distinct from stuttering, and recognizing its unique attributes—such as the rapid pace and lack of awareness of speech errors—helps in diagnosing and treating the disorder effectively.

- 6. Which of the following is an example of non-verbal communication?
 - A. Oral speech
 - B. Crying
 - C. Written language
 - D. Listening

The option identified as the correct answer exemplifies non-verbal communication because it conveys emotion and intention without the use of words or verbal language. Crying can express a range of feelings such as sadness, distress, or joy, and is recognized universally as a form of emotional expression. It serves as a signal to others about one's internal state, demonstrating how individuals communicate through physical and emotional responses. In contrast, oral speech and written language are forms of verbal communication that rely on structured language systems to convey messages. Listening, while an important aspect of communication, primarily refers to the act of receiving and processing information rather than expressing or conveying feelings or ideas without the use of language. This illustrates the distinction between different modes of communication, particularly how non-verbal cues like crying play a critical role in expression.

7. Which of the following is a possible emotional effect of literacy disorders?

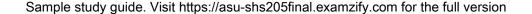
- A. Impaired self-image
- B. Increased academic performance
- C. Enhanced social skills
- D. Improved self-esteem

Impaired self-image is indeed a possible emotional effect of literacy disorders. Individuals with literacy disorders often struggle with reading and writing, which can lead to feelings of inadequacy or frustration, particularly in educational settings where literacy skills are highly valued. These challenges may contribute to a negative self-view, especially when compared to peers who do not face the same difficulties. This diminished self-image can affect various areas of life, including academic achievement and social interactions, as individuals may feel less competent or less motivated to engage due to their struggles with literacy. The other options, such as increased academic performance, enhanced social skills, or improved self-esteem, do not align with the common emotional responses associated with literacy disorders. Instead, challenges in literacy often lead to the opposite outcomes, where self-esteem might suffer due to ongoing difficulties and the pressure to perform academically.

8. What anatomical structures are involved in communication?

- A. Heart and lungs
- B. Respiratory and articular systems
- C. Digestive system and kidneys
- D. Circulatory system alone

The respiratory and articulatory systems are crucial anatomical structures involved in communication. The respiratory system is responsible for supplying the airflow that is essential for producing sound, as it provides the foundation for speech by controlling breath support. When we exhale, the airflow through the vocal cords allows for the vibration needed to create vocal sounds. On the other hand, the articulatory system includes structures such as the tongue, lips, palate, and teeth, which shape the sounds produced by the vocal cords into recognizable speech. This combination of respiratory support and precise articulation is what enables effective communication. The other choices do not encompass the primary anatomical systems directly related to the mechanics of speech. While the heart and lungs play roles in overall health and function, they are not the primary structures involved in speech production. The digestive system is unrelated to communication, as it focuses on breaking down food rather than producing sound. Similarly, the circulatory system, while vital for overall body function, does not directly contribute to the processes of speech and communication. Thus, the respiratory and articulatory systems are the most relevant to understanding how communication occurs.



- 9. What role does a speech-language pathologist often play in a team approach for dysphagia?
 - A. Observer
 - B. Coordinator of the team
 - C. None, they work alone
 - D. Consultant only

A speech-language pathologist (SLP) plays a critical role in a team approach for dysphagia, which refers to difficulty in swallowing. In this context, the SLP is often the coordinator of the team, orchestrating the efforts of various healthcare professionals to provide comprehensive care for individuals with dysphagia. This coordination involves assessing swallowing functions, developing and implementing treatment plans, and communicating effectively with other team members, including physicians, occupational therapists, and dietitians. The SLP brings specialized knowledge about the physiology of swallowing, potential safe dietary modifications, and treatment strategies that enhance the patient's ability to swallow safely and efficiently. By leading the team, the SLP ensures that interventions are aligned and tailored to the patient's specific needs, fostering a collaborative approach that yields the best outcomes for individuals facing swallowing disorders. In contrast, other roles such as being merely an observer or working alone do not encapsulate the proactive and integrative nature of the SLP's involvement in dysphagia treatment. A consultant role, while important, does not encompass the comprehensive and active coordination necessary within a multidisciplinary team, which is integral to addressing the complexities of dysphagia.

- 10. Which of the following can hinder spelling development?
 - A. Advanced vocabulary knowledge
 - B. Consistent letter-sound rules
 - C. Phonological difficulties combined with other inconsistencies
 - D. Regular practice of spelling words

The correct choice highlights that phonological difficulties, particularly when combined with other inconsistencies, can significantly impede spelling development. Phonological awareness is critical for spelling, as it involves understanding the sound structure of language, including the ability to isolate, blend, and manipulate sounds. When a child has phonological difficulties, they may struggle to connect sounds with the corresponding letters or letter patterns, which directly affects their ability to spell words accurately. Moreover, these difficulties can be exacerbated by inconsistencies in a child's learning environment or instructional methods. For instance, if a child receives mixed signals about spelling conventions, or if they encounter words that don't conform to typical spelling patterns, it can further complicate their ability to apply phonological skills effectively. This combination creates a challenging scenario for spelling development, as the child may fail to master the fundamental skills required for successful spelling, leading to ongoing difficulties in this area.