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Diglossic aphasia and the adaptation of the Bilingual Aphasia Test to Palestinian Arabic and Modern Standard Arabic



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ABSTRACT

The Bilingual Aphasia Test (BAT) is a criterion-referenced test developed in multiple languages and language-pairs to identify differential recovery in bilingual aphasia. It was developed to allow equivalent and culturally non-biased examination of all languages spoken by bi- or multilingual individuals with aphasia, to enable valid comparison of the residual abilities in each of the languages spoken. This comparison is critical for clinical practice to inform clinical decision-making, especially with respect to language of intervention and progress evaluation for bilingual adults with aphasia. This paper describes the adaptation of the BAT to expand its use to examine recovery patterns in adults with aphasia within an Arabic diglossic situation – specifically, Modern Standard Arabic (MSA) and Palestinian Arabic (PA). In diglossia, two language varieties co-exist, one acquired naturally and used for daily communication, and the other learned formally in school, used for formal communication settings, reading and writing and typically considered to be of a higher value by its community members. The theoretical, clinical and social impacts of this unique adaptation of the BAT to a diglossic situation are discussed.

1. Introduction

At present, there are no systematic studies of aphasia investigating recovery patterns in diglossic situations. Diglossia refers to a specific sociolinguistic situation in which two closely inter-related varieties of the same language are used for different social and communicative functions. One variety is acquired naturally and used for daily communication (often referred to as a Low Language Variety) and the other is a standard language variety that is explicitly taught and used for written texts and other formal contexts (referred to as a High Language Variety; Ferguson, 1959). Such diglossic situations necessitate differential engagement of implicit memory systems in the acquisition of the native dialect acquired naturally, in contrast with greater engagement of explicit memory mechanisms and metalinguistic knowledge that are used to acquire the standard language variety. One example of a diglossic situation is found in Arabic, with various spoken dialects that are specific to each speech community, and Modern Standard Arabic (MSA) acting as the formal (or "High") language variety. MSA has long been considered as a unifying variety across the Arabic-speaking communities, but Ibrahim (2009) showed that there may be regional variation in MSA too; e.g., Cairene MSA in Egypt, or Damascene MSA in Syria.

Paradis (1994, 2004) has proposed that in aphasia, implicit linguistic competence is affected, with explicit linguistic knowledge

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potentially affected to a much lesser extent – a view of acquired language pathology that relates directly to the distinction between declarative and procedural memory systems (e.g. Cohen & Squire, 1980; Squire, 1992). This approach to aphasia has been widely applied to the study and treatment of bilingual aphasia. For instance, observations of selective language loss in bilingual aphasia could be erroneously interpreted as cases of differential recovery, when a more accurate characterization could relate to the inhibition of implicit linguistic knowledge (correlated with L1) alongside a reliance on explicit metalinguistic knowledge (correlated with L2, if the L2 was formally learned) as a compensatory strategy. Under this framework it is clear that there is a pressing need to assess all languages spoken premorbidly by an adult with aphasia, using assessment instruments that are linguistically and culturally equivalent in each of the patient's languages (Paradis, 2004).

Although many researchers and practitioners have addressed bilingual aphasia from this and other theoretical perspectives, little work has been done to relate Paradis' model to diglossic aphasia. Examination of aphasic recovery patterns in diglossia necessitates the development of an assessment protocol that is culturally unbiased and enables equivalent comparison between residual language skills in both language varieties. The Bilingual Aphasia Test (BAT) was designed to enable identification of differential impairment in classic bilingual situations by assessing each of the languages of a bilingual or multilingual individual with aphasia in an equivalent way, across all linguistic domains, in both oral and written modes (Paradis, 2011). This widely used assessment tool has been adapted to several world languages and language pairs. However, the use of such a tool for assessing all language varieties in a diglossic situation has not been initiated. Such investigation is of potential benefit, not only for clinical practice with multilingual communities, but also for enhancing understanding of understudied and under-examined language varieties (typically the spoken dialects). Such knowledge would contribute to theoretical discussions related to language recovery in bilingual and diglossic speech communities, and to understanding of the different learning mechanisms associated with distinct language varieties.

In this paper, we describe the adaptation of the BAT to two language varieties in Arabic diglossia: the Palestinian Arabic (PA) spoken dialect and Modern Standard Arabic (MSA). This adaptation will enable the assessment of residual linguistic abilities in each of the two language varieties used by Palestinian adults with aphasia. This is the first aphasia test designed specifically to address a diglossic situation, and it has the potential to enable a systematic investigation of recovery patterns in diglossic aphasia.

2. Arabic diglossia, the declarative/procedural model, and recovery patterns in aphasia

Arabic is characterized as having multiple levels of variation (Holes, 2004) ranging from syntactic, phonological and lexical variation across different spoken dialects of Arabic to the sociolinguistic variation related to the presence of diglossia. In general, diglossic variation refers to the sociolinguistically governed alternation between two varieties of a language used for different pragmatic functions, one of which is acquired naturally while the other is learned formally. Holes (2004) argues that this description of Arabic diglossia is rather oversimplified, because of constant stylistic shifting between the language varieties, a situation referred to as "kaleidoscopic variation" (Holes, 2004: 49). Moreover, other foreign languages are also part of the linguistic norm in some parts of the Arab world, such as the use of French in Lebanon and Algeria or the use of Hebrew by Palestinians in Israel, as a remnant of the colonization of these areas.

The different languages and varieties spoken in Arabic speech communities necessarily interact with the speech-language pathology services provided for those with communication disorders. Nevertheless, the newly emerging literature in this field is more focused on the examination of "classic" second language(s) within a speaker's repertoire and tends not to address the different varieties used by speakers in Arabic or other diglossic situation (e.g. African American English speakers in the U.S. or Cypriot Greek speakers in Cyprus; for further discussion, see Khamis-Dakwar, 2018, in press). In Arabic, for example, a recent study by Mamdoh and Gomaa (2015) examined dysfluencies in the productions of middle-school Egyptian Arabic speaking children who stutter in their native language – the spoken dialect (Egyptian Arabic in this case) – and in English, which was learned as a second language by all participants at age 4. However, their investigation omitted any examination of dysfluency patterns in MSA, which would be expected to form part of the language repertoire for middle school children in Egypt. Hence, they did not examine the influence of diglossia on the communication disorder.

Similarly, studies of aphasia recovery in Arabic speaking individuals have compared recovery patterns across two "classic" languages such as English and Arabic (e.g., Faroqi-Shah & Waked, 2010; Vajramani, Akrawi, McCarthy & Gray, 2008), Hebrew and Arabic (e.g., Khamis, Venkert- Olenik, & Gil, 1996) or have examined cross-linguistic treatment generalization between Arabic and English for Arab-English bilingual speakers (e.g. Koumanidi Knoph, 2013). By omitting evaluation of the different varieties of Arabic, these pioneering investigations, despite addressing a gap in the bilingual aphasia research, did not include examinations of *all* languages and language varieties that make up the linguistic repertoire of Arabic speakers. Adopting an ecologically valid cross-linguistic approach to assessment has the potential to provide clinicians and/or researchers with more comprehensive clinical information that may inform best clinical practices as well as theoretical knowledge. Indeed, Jones, Gitterman, and Obler (2012) provided a case study on the manifestation of agrammatism in a diglossic native speaker of African-American English and Standard American English, and in doing so they highlighted the need to further examine bilingual recovery in diglossia and to develop culturally appropriate assessments that are equivalent across diglossic language varieties, to provide adequate services for individuals with aphasia and/or other communication disorders in diglossic speech communities.

Drawing upon the dichotomy of explicit-implicit learning mechanisms that are, by hypothesis, involved in acquiring the two language varieties in diglossic situations, studies of language recovery in diglossic aphasia may inform current theoretical approaches in this domain. For example, the declarative/procedural model of memory draws a distinction between two neurofunctionally and anatomically distinct memory systems that subserve implicit and explicit linguistic knowledge (Squire, 1992). Implicit linguistic knowledge, typically construed as the rule-governed aspects of linguistic knowledge, is "acquired incidentally, stored implicitly, used

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