

A proposal of lexical resources' development for ontological learning in the domain of speech disorders

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Abstract

Speech disorders in children are a condition that could reduce the opportunity to access education, health care and in the future could mean a worse socioeconomic outcome. Therefore, early diagnosis and timely therapy is really important to reduce their impact in later stages of life. This paper presents a method for the gathering of data for a corpus related to Speech Disorders in children; such corpus will serve as the base to generate a semi-automatic ontology intended as a tool for therapists to help in the diagnosis and shape up of a therapy strategy.

Introduction

A speech disorder is the difficulty to produce or to create the specific speech sounds to communicate. According to Global Disability Rights 7.5% of the population in Mexico has some disability (about 9.17 million people) and 4.87% of people with disability has some type of speech disorder (0.45 million people). In kids and young people the speech disabilities are in some cases twice or four times higher than in adults. The importance of the early detection and diagnosis of a speech disorder abides in the social, economic and educative impact that such disorders have in the life of infants. Technology is used in order to assist in the process of diagnosis and treatment of some speech disorders in children. Ontologies give an unambiguous and well defined structure for a clear and accurate representation of the data concerning a particular domain, in this case speech disorders, and thus, becoming a tool for diagnosis. One of the earlier steps in the development of an ontology is the conformation of a *Corpus*, in this case of documents relatives to the domain of speech disorders. Corpus analysis provide lexical information, morphosyntactic information, semantic information and pragmatic information.

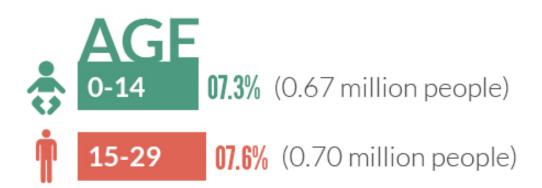




Figure 1. Percent of young people with disability by age.

State of the Art

Within the field of speech and language several works that use Information and Communication Technologies (ICT) have been conducted, focusing on some ailments such as dysphagia, on the automatic classification of the quality of pronunciation when treating disorders such as dyslalia or dysarthria, or an expert system for the initial evaluation of children with possible speech disorders.

Relevant to the building of corpus the main techniques have not varied a lot, and texts in a corpus need to be in electronic form. In the present work, a method to gather information for the corpus building is proposed. This method also has the flexibility to feedback itself; once the

initial dictionary is defined this can be updated with the extended dictionary obtained after completing the several steps into the method.

IR model for the definition of lexical resources

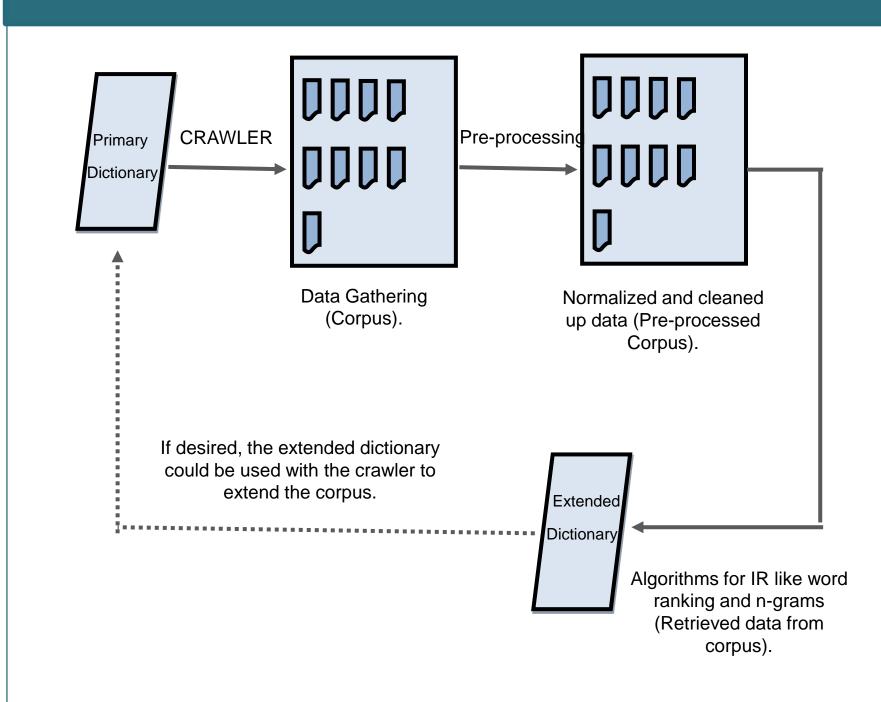


Figure 3. Diagram of the steps to build and process a corpus.

Corpus creation. The building of a corpus is divided into two stages: design and implementation. The main tool to gather the information to build a corpus is a Web crawler. This crawler is fed with some initial *seed* pages to start its task. To find documents relevant to the domain, and not just a list of links and random data contained into the seed page, it is necessary to establish a primary dictionary at the beginning of the crawling.

Dictionary creation. This dictionary is made of some of the more significative words into the domain. A simple way to identify these words is to take the domain taxonomy as a base to gather such list of words. Then the building of the primary dictionary to focus the results of the crawler can be started. The table 1 shows the very first version of the primary dictionary.

Table 1. List of terms from the primary dictionary.

| | | _ | | |
|-----|----------------------------------|-----|------------------------|--|
| No. | Term(s) | No. | Term(s) | |
| 1 | Speech | 9 | Communication disorder | |
| 2 | Disorder | 10 | Articulation disorder | |
| 3 | Dyslalia | 11 | Rhythm disorder | |
| 4 | Dysglosia | 12 | Therapy | |
| 5 | Dysarthria | 13 | Speech therapy | |
| 6 | Dysphemia | 14 | Logopedic therapy | |
| 7 | Speech sound disorder | 15 | Speech development | |
| 8 | Childhood-onset fluency disorder | | | |

After retrieving relevant data for all the primary dictionary terms the first version of our corpus is finished, but the processing of the corpus is not done.

Data preprocessing. This is done through several algorithms that normalize the texts contained in the corpus. Once all the data gathered into the corpus is normalized the next step in the process can be done. In this step, information retrieval algorithms are implemented. Algorithms like word frequency and

stemming are used. After this last step a new list of terms for the extended dictionary is obtained. The more frequent terms found into the corpus are taken and is made a comparison with the primary dictionary terms.

Testing

After applying the pre-preprocessing described in the previous section and the information retrieval algorithms, the terms shown in Table 2 were found to be the most frequent.

Table 2. 15 most frequent terms in corpus.

| No. | Term(s) | No. | Term(s) |
|-----|-------------|-----|---------------|
| 1 | Speech | 9 | Sound |
| 2 | Disorder | 10 | Communication |
| 3 | Child | 11 | Research |
| 4 | Language | 12 | Services |
| 5 | Health | 13 | Words |
| 6 | Information | 14 | Development |
| 7 | Help | 15 | Medical |
| 8 | Therapy | | |

Observing this data from word frequency, not all of the proposed terms in the primary dictionary are equally relevant to the domain of knowledge. Therefore, the web crawler can be fed with the most frequent terms obtained from the corpus and thus, gather more relevant documents.

Another way to complement the corpus is to include synonyms to the original proposed terms. Applying again the steps of crawling, preprocessing and IR algorithms more documents were added to the corpus and a new list of the most frequent terms is obtained.

Table 3. Comparison of most frequent terms in corpus.

| Primary Dictionary Terms | | | Extended with Synonyms Dictionary Terms | |
|-----------------------------|---------------|-------|---|------|
| No. | Term | Freq | Term | Freq |
| 1 | Speech | 4,036 | Speech | 9125 |
| 2 | Disorder | 2,798 | Child | 5877 |
| 3 | Child | 2,369 | Language | 5165 |
| 4 | Language | 1,695 | Disorder | 4792 |
| 5 | Health | 1,332 | Sound | 2968 |
| 6 | Information | 1,180 | Word | 2790 |
| 7 | Help | 963 | Health | 2786 |
| 8 | Therapy | 949 | Information | 2697 |
| 9 | Sound | 809 | Therapy | 2695 |
| 10 | Communication | 772 | Help | 2081 |
| 11 | Research | 742 | Service | 1939 |
| 12 | Service | 695 | Communication | 1687 |
| 13 | Word | 694 | Development | 1485 |
| 14 | Development | 651 | Research | 1476 |
| 15 | Medical | 640 | Medical | 1261 |

The 15 most frequent terms obtained after this expansion in the dictionary resulted to be the same as the ones obtained in the previous step non-using synonyms, just varying the order of appearance in the list. Terms as child and language resulted to be more frequent when synonyms were used as seeds

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Conclusions

The corpus building process starts with a list of proposed terms followed by a crawling script execution. Afterwards, normalizing and IR algorithms were applied to include the resulting list of terms into the dictionary; the crawler can be fed again with the new dictionary. Ongoing work consists on the application of word ranking and n-grams algorithms to improve the terms into the dictionary. Besides, work has been doing in expanding with hyponyms and hyperonyms in the list of terms; this task allows adding an additional semantic level to the process and to gather more relevant documents for the corpus.

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