

A corpus-based approach to LSP: using Intellitext to create study materials for Dentistry 1



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&

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How it started / impetus



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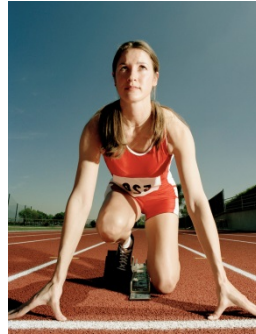
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11-13 places: IFY

4 places

- Total cohort of approx. 90
- Tough 5 year course
- Performance gap



- Type of **provision** for international students (equity)
- Lack of **integration** between international and home students
- How to identify **key target language** and study strategies for Dental Surgery 1
- **Non-specialist** (language teacher/academic adviser – some awareness of corpus-based teaching)
- **Crammed timetable** and time-poor students

James Wilson:
-corpus-based
learning
-Intellitext



Marion Bowman:
- curriculum,
- context,
- assignments

Language at Leeds project



- 'Quick and dirty corpus' (Chris Tribble) (Adv/Disadv)
- Data input (summer 2013)
- Lecture notes, e-lecture commentary, key online texts
- 4 modules (sub-corpora) and 1 Dentistry corpus
- Materials design for 8 Language of Dentistry (LOD) taught small group sessions
- 1 session on how to access database

- Numbers attending optional 1 hr weekly sessions (Sem1):

| | comm | hhp | hhp | hhp | ioe | intell | ioe | ioe |
|-----|------|-----|-----|-----|-----|--------|-----|-----|
| TTL | 19 | 16 | 8 | 10 | 13 | 13 | 10 | 0 |
| INT | 5 | 4 | 0 | 0 | 2 | 4 | 2 | 0 |

- NS, NNS, ESL, dyslexia – complex mix
- ‘Keen bean’ effect?
- Have a look at some example materials from the task-based sessions (backwards design; technical vocab & language in between)...





IntelliText

- IntelliText (<http://smlc09.leeds.ac.uk/itb>) ...
 - allows access to monolingual corpora for 12 languages (there is more than one corpus for most languages)
 - allows access to several bilingual corpora
 - has 8 search functions
 - can be used generate keyword and frequency lists
 - includes a “Build Your Own Corpus” function that allows users to create and annotate their own corpora
 - is freely available: it can be used by anybody anywhere



The Dentistry 1 corpus

- The Dentistry 1 corpus was created from lecture notes, mainly PowerPoint slides, used on the Dentistry 1 module
- The corpus contains approximately 200,000 words
- There are four subcorpora that can be uploaded and analysed separately
- Keyword lists (of single and multi-words) were extracted and used as the basis for materials design
- The lists can be saved as Excel files and cleaned manually
- Keywords were entered into IntelliText concordance and collocation searches



Sample searches (keywords)

Key Collocations

| Collocation | Count | F1 | F2 | LL | MI | T |
|------------------------------------|--------------------|-----|-----|-------|------|------|
| tooth surface | 50 | 694 | 347 | 84.71 | 6.1 | 6.97 |
| tooth morphology | 14 | 694 | 35 | 31.53 | 7.57 | 3.72 |
| tooth support | 7 | 694 | 80 | 9.81 | 5.38 | 2.58 |
| tooth decay | 3 | 694 | 6 | 7.17 | 7.89 | 1.72 |
| tooth crown | 5 | 694 | 54 | 7.15 | 5.46 | 2.19 |
| tooth type | 6 | 694 | 129 | 6.51 | 4.46 | 2.34 |
| tooth loss | 5 | 694 | 139 | 4.8 | 4.09 | 2.11 |
| tooth cleanliness | 2 | 694 | 5 | 4.49 | 7.57 | 1.41 |
| tooth alignment | 2 | 694 | 6 | 4.26 | 7.31 | 1.41 |
| tooth eruption | 2 | 694 | 7 | 4.08 | 7.08 | 1.4 |
| tooth development | 3 | 694 | 38 | 4.04 | 5.23 | 1.69 |
| tooth site | 4 | 694 | 143 | 3.36 | 3.73 | 1.85 |
| tooth relationship | 3 | 694 | 60 | 3.35 | 4.57 | 1.66 |
| tooth chronology | 1 | 694 | 1 | 3.08 | 8.89 | 1 |

Dentistry 1 Keywords

| Lemma | F1 | F2 | LL |
|-------------------------------|-------|-----|------|
| periodontal | 85 | 434 | 5219 |
| tooth | 5263 | 694 | 4813 |
| dental | 2666 | 403 | 2897 |
| patient | 41031 | 689 | 2117 |
| plaque | 993 | 225 | 1783 |
| oral | 4911 | 278 | 1486 |
| scaler | 25 | 122 | 1463 |
| gingival | 9 | 106 | 1325 |
| periodontitis | 9 | 99 | 1234 |
| bone | 6509 | 262 | 1231 |
| surface | 16342 | 347 | 1215 |
| tissue | 5267 | 235 | 1150 |
| probe | 2993 | 184 | 1012 |
| disease | 29958 | 370 | 934 |
| enamel | 344 | 109 | 928 |



Sample searches (use of keywords) UNIVERSITY OF LEEDS

Extended text

alltexts.doc.txt

id="alltexts.doc.txt"

caries prescribe daily fluoride rinse • For those 10+ years with active caries prescribe 2,800 ppm toothpaste • For those 16+ years with active disease consider prescription of 5,000 ppm toothpaste • Investigate diet Major dental conditions of caries and periodontal disease can both be reduced by regular toothbrushing with fluoride toothpaste. The fluoride in toothpaste serves to prevent, control and arrest caries. The physical removal of plaque reduces the inflammatory response of the gingivae and its sequelae. Some toothpastes contain ingredients which also reduce the initiation and progression of periodontal breakdown. There is evidence to suggest that the preventive action of toothbrushing can be maximised if the following principles are followed: • Brushing should start as soon as the first deciduous tooth erupts. • Brushing should occur twice daily – clean teeth last thing at night before bed and at least one other time each day. • Children under 3 years should use a toothpaste containing no less than 1,000 ppm fluoride. • Children under 3 years should use no more than a smear of toothpaste (a thin film of paste covering less than three-quarters of the brush) and must not be permitted to eat or lick toothpaste from the tube. • Family fluoride toothpaste (1,350–1,500 ppm fluoride) is indicated for maximum caries control for all children except those who cannot be prevented from eating toothpaste. Advice must

C2 | 1
C1 | 5
B2 | 4
B1 | 25
A2 | 12
A1 | 145
UN | 89

Extend < Move < Reset Move > Extend > Close

Concordances

| titleid | left | match | right |
|---------|---------------------------------------|--------|---|
| >> | imperfecta (Poorly formed tooth | enamel |) N. B. Lyonisation – resulting |
| >> | produce even more acid, so that | enamel | eventually demineralizes) Endogenous |
| >> | the tooth that is visible is the | enamel | of the tooth crown. Some of the |
| >> | of the tooth crown. Some of the | enamel | is hidden beneath the gum. Enamel |
| >> | enamel is hidden beneath the gum. | Enamel | is the white, hard wearing outer |
| >> | clinical ' crown. As some of the user | enamel | is normally obscured by the gum |
| >> | can see the whole extent of the | enamel | . By definition, the part of the |
| >> | the part of the tooth covered in | enamel | is called the ' anatomical ' crown |
| >> | larger than the clinical crown.: | Enamel | is a very brittle and hard- wearing |
| >> | Indeed a tooth made totally of | enamel | would be very resistant to wear |
| >> | Much of the microstructure of | enamel | has evolved to try and reduce |
| >> | possible lines of shear within the | enamel | itself to prevent fractures propagating |
| >> | propagating within it. Although | enamel | forms the outer covering of the |
| >> | the dentine and also because the | enamel | is gradually wearing thinner so |
| >> | dentine shows through more clearly. | Enamel | does not have a cell population |



- Exercises were created (1) to encourage active engagement with IntelliText (“hands-on approach”) and (2) from material in the corpus to test students on near synonyms (“hands-off approach”)
- Our focus was on both discipline-specific terminology and on general language
- International students benefited from seeing the dentistry-specific terms in context
- Home students found the discipline-specific keyword lists useful for their revision



Sample materials (hands-off)

“give” vs. “administer” vs. “deliver”

| | give | administer | deliver |
|----------------------------|------|------------|---------|
| advice | | | |
| supplemental oxygen | | | |
| tangible results | | | |
| postoperative instructions | | | |
| consent | | | |
| the correct dose of | | | |
| an indication of | | | |
| drugs | | | |



Sample materials (hands-on)

Compare:

- The driver **delivered** the drugs to the hospital.
- Nurses **administer** the drugs every four hours.
- The doctor **gave** him drugs to combat the pain.

- Students are encouraged to search for other examples in the Dentistry 1 corpus as well as reference corpora to highlight trends in the use of similar words

NS: Why did you choose to attend LOD sessions?

- Revision (4)
- Ease transition to uni (3)
- Curiosity / seemed helpful (3)
- Understand the course structure (1)
- Language / terminology (1)
- Dyslexia (1)
- Referral (1)





Evaluation of usefulness

NS: Why did you find sessions **useful?**: Revision, Transition, Content knowledge, Enhancement, Writing.

- “Relaxed, enjoyable, helped me to structure my learning and recap – communication as revision”.

NS: Why did you find sessions **not useful?**

- “Some parts were only useful for people whose first language is not English”.



- 50% of NNS respondents used the Manchester phrasebank v 20% of NS respondents
- 0% of NNS used the Intellitext database, 10% of NS used in on own.





Conclusions

- Corpus allowed non-specialist to develop accurately targeted materials for workshop design
- Corpus is flexible enough for future development (transferrable approach)
- Sessions evaluated well (NS and NNS)
- NS appreciated study strategies and content vocab (useful for revision)
- NNS attendance dropped off
- NNS (poor response on questionnaire)
- Low rate of self-access of corpus (NS and NNS)

Challenges and next steps



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- Put one session in timetable for all year 1's
- Get permission to target NNS only
- Optional but with pressure
- Mini-corpus for postgrads?
- Corpora for curriculum strands?



Any questions



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