

Narrative Skills in Tamil Speaking Young Adults

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Abstract

Narratives can be described as natural cognitive and linguistic forms through which individuals attempt to order, organize and express meaning. Through narratives individuals make sense of their experiences and represent themselves to others. Narrative analysis is an approach taken to interview data that is concerned with understanding how and why people talk about their lives as a story or a series of stories. The purpose of the study was to access narrative skills in Tamil speaking young adults. The study was carried out in 20 young Tamil speaking adults which included 10 male and 10 female. The results obtained from trouble source, repair and resolution among male and female cross comparison were nonsignificant.

1. Introduction

Language can be defined as a socially shared code or conventional system for representing concepts through the use of arbitrary symbols and rule-governed combinations of those symbols. The conventional or socially shared code of language allows listener and speaker or writer and reader of the same language to exchange information. In fact, “communication is the primary function of language” (Muma,1978). Communication is the process of exchanging information and ideas between participants. The process is an active one that involves encoding, transmitting, and decoding the intended message. It requires a sender and a receiver and each communication partner must be alert to the informational need of the other to ensure that messages are conveyed effectively and that intended meanings are preserved.

Narrative is a form of discourse. It is an uninterrupted stream of language modified by the speaker to capture and hold the listener's interest and attention (Owens, 2001). Narratives differ from conversations in a number of ways. When producing a narrative, the speaker produces a monologue throughout and must presuppose the information needed by the listener. In addition, the speaker must present all the information in an organized way by sequencing events so that the elements of the narrative are related and lead to some conclusion.

Constructing a narrative requires an appropriate use of language as a communication tool, which is a question of using language in a given situation and considering the interlocutor and the context of the interaction (Coquet, 2005). Moreover, constructing a narrative requires managing both its coherence, i.e., proposing a story structured in several steps at the temporal, causal and thematic levels (at the level of the overall macrostructure) and its cohesion which is defined by the creation of links between two statements (at the microstructure level) .

Narration has direct influence on social interactions, and it is a good indicator of development of other language abilities and academic achievements. Narrative analysis is a qualitative research methodology that involves examining and interpreting the stories or narratives

people tell in order to gain insight into the meaning, experience and perspective that underlie them. Narrative analysis can be applied to various forms of communication, including written texts, oral interviews and visual media. The goal is to understand how individuals experience certain events structure them into coherent sequences to give them a subjective meaning.

Hegde, Shruthy and Subbarao (2010) evaluated performance of narrative skills in normal young adults and found that the repair strategies used were higher in young adults than others.

Adhikary and Kumaraswamy (2016) did comparison of narrative skills in Bhojpuri speaking geriatrics and young adults. Result showed that as a comparison of trouble sources, repair strategies, type of resolution and repair sequences geriatrics showed higher score than young adults.

Rollins (2014) analysed narrative skills in young adults with high- functioning Autism Spectrum Disorder (ASD) and found that many high functioning adults with ASD have difficulty in expressing how they feel and often neglect to conclude and make sense of their experiences in a social context.

Biddle, McCabe and Bliss (1996) examined narrative skills following Traumatic Brain Injury (TBI) in 10 children and 10 adults and found that individuals with TBI were significantly more dysfluent than their matched controls. Furthermore, their performance on the narrative task revealed a striking listener burden.

Narrative or storytelling, abilities appear to represent a relative strength in Down Syndrome (DS) . Children and adolescents with DS have been found to include a similar number of plot elements as mental age-matched, typically developing children (Boudreau & Chapman 2000), and more references to plot and theme than language-matched controls (Boudreau and Chapman 2000; Miles and Chapman 2002). Even when matched on mental age alone adolescents and young adults with DS used more evaluation (e.g., references to characters' mental states) in their narratives than typically developing controls in another study (Keller-Bell & Abbeduto 2007).

Nebu and Kumaraswamy (2014) examined narrative skills in geriatrics Malayalam speakers and found that there is no significant difference between the trouble sources and type of repair strategies in familiar and unfamiliar tasks, while the difference in repair sequences and type of resolutions were highly significant. The comparison of Type Token Ratio (TTR) for familiar and unfamiliar tasks revealed highly significant difference for both open and close class words. So as the age increases there will be deterioration in the communicative skills.

Communicative repair also represents an area of vulnerability for children with William Syndrome (WS) . In an experimental task where an examiner incorrectly responded to a child's request for one of two objects, children with WS were less likely than mental age-matched typically developing controls to vary requests or rejections in response to the communication breakdown (Asada et al. 2010).

Sunny and Kumaraswamy (2015) analysed the repaired strategy and trouble sources in 20 normal geriatrics in the age range of 70-80 years and found that there is a highly significant difference between the trouble sources, type of repair strategies, repair sequences and resolutions in familiar and unfamiliar tasks. The comparison of TTR for both familiar and unfamiliar task revealed that there is a highly significant difference for both open and closed class words and also the unfamiliar tasks have more trouble sources, repair sequences, repair strategies and resolutions. Communication skills are seen to be deteriorated as a function of age.

Aishwarya and Deborah (2020) compared narrative comprehension and inference making ability in 120 native Tamil speakers in the age range 8 to 11 years in monolingual and bilingual context. The scores of the statistical analysis showed a difference of performance only across age. Qualitative analysis of inference types showed literal and coherence inferences were easier to make than simile comprehension and elaborative inferences for all groups.

Kumaraswamy, Joseph and Rakshitha (2022) researched on narratives in 5-7 years typical Tamil speaking children and found that children had more errors of morphosyntactic and lexical semantics types of trouble sources and used repetitions, reduction and unrelated repair strategies. The most resolutions type used were successful and simple than others, also they used open class words than closed class words frequently.

2. Methodology

Aim and Objective

The present study aimed at evaluating the narratives of young adults speaking Tamil in the age range eighteen years to thirty five years using the guidelines given by Orange, Lubinski and Higginbotham (1996) .

Subjects

The participants chosen were 20 young adults of age range 18-35 years among which 10 were male and 10 were females with no significant history of speech, language, hearing as well as neurological problem participated in the present study. All the participants native language was Tamil. Participant's speech was recorded using standard laptop (MacBook Air) with a standard microphone with the help of PRAAT voice recording and analysis software 6.2.17 version (Boersma & Weenick,2022). Sampling rate was 44100 Hz and quantization level set at 16 bits.

Procedure

The recording was conducted in a room with soundproofing and good lighting. All the young adults who took part in the study were told to sit comfortably and Mic was placed 10 cm away from their mouth. Every participant was required to narrate their good and bad memories of their lives in their native language. The sample's audio recordings typically lasted for 8 minutes at the least and 10 minutes at the most. The collected speech sample was transcribed and used for the purpose of analysis to determine the types of problems that could arise which included trouble

sources, repairs such as repetition, unrelatedness, elaboration, reduction, substitution and resolution given by Orange, Lubinski, and Higginbotham (1996). The TTR was used to further assess the data. TTR is the total number of unique words divided by the total number of words.

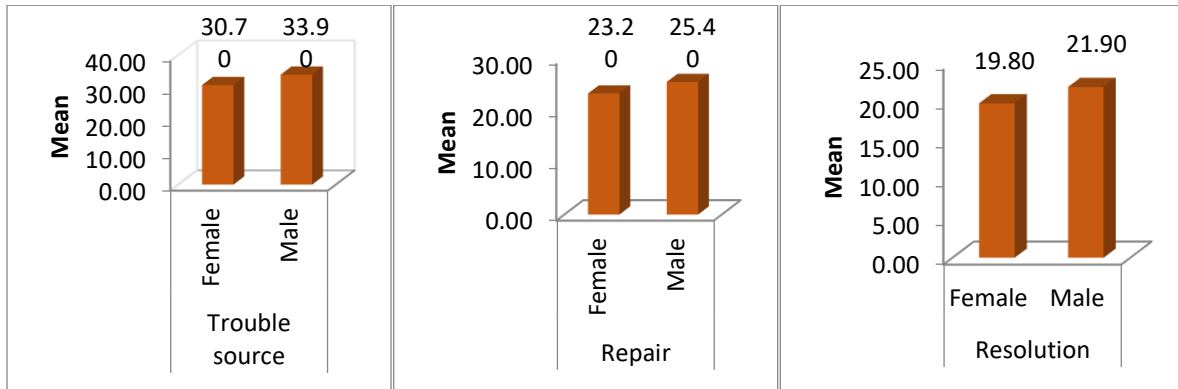
3. Results and Discussion

The objective of the current study was to describe the trouble sources, repair, resolutions, and type token ratio by analysing the narrative sample of 20 typical young adults speaking Tamil. The data obtained was statistically analysed and the results are discussed below.

Table 1 : showing mean scores of trouble source, repair and resolution

Group		N	Mean	Std. Deviation	Median	IQR		Mannwhitey test p value	
						Lower	Upper		
Trouble source	Female	10	30.70	6.86	30.50	24.50	34.25	0.684	NS
	Male	10	33.90	10.99	32.00	23.50	42.00		
Repair	Female	10	23.20	6.09	23.50	17.00	27.00	0.912	NS
	Male	10	25.40	10.30	21.50	17.00	34.75		
Resolution	Female	10	19.80	6.30	20.50	12.75	24.00	0.796	NS
	Male	10	21.90	9.92	18.50	13.75	30.75		

Figure 1 : showing mean scores of trouble source, repair and resolution .



From Table 1 and Figure 1 it is evident that the mean scores for trouble source were 30.7 and 33.9, repair were 23.2 and 25.4 and resolution were 19.80 and 21.90 for female and male respectively. On cross comparison the results were non-significant for all trouble sources, repair and resolution.

Table 2 : showing mean scores for repair strategies (repetition, unrelated, elaboration, reduction and substitution)

		N	Mean	Std. Deviation	Median	IQR		Mannwhitney test p value	
						Lower	Upper		
Repetition	Female	10	8.10	3.21	7.50	6.00	11.00	0.280	NS
	Male	10	10.30	4.16	9.50	6.75	14.50		
Unrelated	Female	10	2.20	2.04	2.00	0.00	4.00	0.393	NS
	Male	10	1.70	2.71	1.00	0.00	2.00		
Elaboration	Female	10	8.50	1.35	8.50	7.75	10.00	0.796	NS
	Male	10	9.00	3.33	9.00	5.00	12.25		
Reduction	Female	10	0.80	0.63	1.00	0.00	1.00	0.579	NS
	Male	10	1.40	1.78	1.00	0.00	2.00		
	Female	10	4.10	3.03	3.50	1.75	6.00	0.436	NS

Substitution	Male	10	3.00	2.31	2.50	1.00	5.25		
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From the above figure, it can be observed that the mean for the repair strategies was 8.10 and 10.30 for repetition, 2.20 and 1.70 for unrelated, 8.50 and 9.00 for elaboration , 0.80 and 1.40 for reduction and 4.10 and 3.00 for substitution on cross comparison with male and female respectively provided non-significant data.

The objective of the current study was to assess the narratives of young, Tamil-speaking adults between the ages of 18 to 35. The participants chosen were 20 young adults among which 10 were male and 10 were females with no significant history of speech, language, hearing as well as neurological problem participated in the present study.

The results of the present study concluded that the number of trouble source and repairs were higher than resolution in both males and females. The present study is in accordance to the study done by Hedge, Sruthy and Subbarao (2010) that the number of trouble sources and repair strategies used were higher in Kannada speaking young adults than the middle aged and older adults.

From the results it is inferred that on cross comparison among Tamil speaking young males and females yielded no significant difference. The present results was in accordance with Adhikary and Kumaraswamy (2016) researched on comparison of narrative skills in Bhojpuri speaking geriatrics and young adults and found no significant difference for repairs, resolution and trouble sources for both familiar versus unfamiliar task when compared between young adults and geriatrics .

Summary and Conclusion

The purpose of the current study was to assess narratives in Tamil speaking young adults in the age range eighteen years to thirty-five years with no significant history of speech, language, hearing as well as neurological problem. The speech samples were elicited, and the audio recordings of the samples ranged in duration from 8 to 10 minutes. The collected speech sample

was transcribed and used for the purpose of analysis to determine various types of trouble sources, repair strategies such repetition, unrelated, elaboration, reduction, and substitution, as well as the resolution proposed by Orange, Lubinski, and Higginbotham in 1996.

The results of the present study revealed that the number of trouble source and repairs were seen higher than resolution on cross comparison and no significant difference were obtained on repair strategies (repetition, unrelatedness, elaboration, reduction, substitution) among female and male.

Narratives and stories enable us to make sense of them, to identify their significance, and even, when they are painful or unpleasant, to accept them and live with them. Narratives and stories feature prominently as sense-making devices, through which events are not merely infused with meaning, but constructed and contested. Personal narratives serve an important function in virtually all societies (Peterson & McCabe, 1991). This study draws us an idea of how the narrative skills can be profiled in normal young adults. Thus the present study would serve as a reliable tool to predict the narrative skills in Tamil speaking young adults, also provides detailed information about the repair strategies.

Limitations of the Study

1. Video recording could not be done.
2. Study was not compared between other age groups.
3. Resolution types were not mentioned.

Future Directions

1. Study could be done for a greater number of subjects.
2. Study can be done for other age groups as well
3. Video recording can be done while collecting data. It will add value in nonverbal aspects of narration.
4. Familiar and non-familiar tasks can be included.
5. Complexity of resolution can be assessed

6. Can compare open set and closed set words.

7. Detailing on trouble source such as phonological, morphological-syntactic, semantic, discourse can be performed.

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