



City Gesture Checklist

This checklist has been designed to help clinicians and researchers to **structure** their **observations** of gesture. It enables you to **record** your observations of the **types of gestures** that people with aphasia use, **factors affecting gesture use** and encourages you to reflect on **how effectively** a person is using gesture.

The types of gesture described in this checklist have been drawn from numerous **research studies** investigating the use of gesture by people with aphasia. The categories have been selected because they are likely to be **useful** for people with aphasia and **feasible** to observe and document in a checklist.

There is a **reference sheet** at the **back** of the checklist explaining the categories, illustrated with examples.

We recommend using the checklist to observe a **video recording** of a person with aphasia. This would enable you to **go back and look again** if you were unsure how to categorise a gesture. If that was not possible, you could observe the person with aphasia in **conversation** with another therapist, professional or family member.

On Page 1, you can use the boxes to **tally** the number of gestures you observe in each category. This will enable you to analyse which categories the person is using **most frequently** and whether any are **absent**.

On Page 2, you can **record observations** and **reflections** on how the person uses gesture.

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This checklist is for use in real time, to describe how clients with aphasia use gesture spontaneously. You could use it while watching a video or observing a conversation.

Tally the number of each gesture type you observe the client using. There is a blank space in each box for notes. Additional space for observations and further information on each coding category is given over the page.

Name/initials:

Date:

Assessor:

Communication partner/s:

Situation being observed/topic of conversation:

Location/setting:

<p>Pointing-concrete</p>  <p>e.g. "you"</p>	<p>Pointing-abstract</p> 	<p>Emblems/ conventional gestures</p>  <p>e.g. "hello"</p>  <p>Thumbs up</p>
<p>Iconics - shape/outlining</p>  	<p>Iconics - pretending</p>  <p>e.g. "cup"</p>  <p>e.g. "camera"</p>	 <p>e.g. "cold"</p>  <p>e.g. "scissors"</p>
<p>Number</p>	<p>Air writing</p>	<p>Other</p>



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Uses both hands/arms? Y/N

Able to use dominant hand? Y/N

Perseverates on gestures? Y/N

Evidence of motor difficulties carrying out gestures (e.g. groping)? Y/N

Over-reliance on one type of gesture? Y/N

Clinical observations & notes e.g., does the client **spontaneously use gesture**?
Are they using it to **replace** or **add to speech**?

How **effective** is their use of gesture?

Are they using any other sort of **additional** communication methods (e.g. facial expression, drawing, speech, writing)?

What modes are they relying on most?

Are there any **missing gesture types** which could **extend** their communication?

Other comments/notes

City Gesture Checklist - Reference Sheet

<p>Pointing-concrete: Pointing to something the speaker is referring to in their environment</p> 	<p>Pointing-abstract: Pointing at something the speaker is thinking about/imagining/ something that is not physically present</p> 	<p>Emblems/ conventional gestures: <i>Examples: Waving hello, thumbs up, shaking head or hand for “no”, the “ok” symbol</i></p>  
<p>Iconics- shape/outlining: Indicating shape or outline of something <i>Examples: drawing the shape of an object in the air</i></p>  	<p>Iconics- pretending: <i>Examples: Pretending to use/handle an object (e.g. drinking from a cup, turning a key, stroking a cat, using a camera); Pretending to be someone/feel something (e.g. pretending to be cold/ mimicking someone); Pretending that your hands/fingers are an object (e.g. scissors, toothbrush)</i></p>    	
<p>Number: Gesture indicates number using fingers (e.g. three, four)</p>	<p>Air writing: Finger writes or traces words/ letters in the air/ on a surface</p>	<p>Other: <i>Examples: Personalised gestures. Abstract gestures indicating place/time/space Gestures that do not clearly fit into the other categories</i></p>

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CGC developed by Anna Caute, Abi Roper, Lucy Dipper & Madeleine Pritchard [July 2017], synthesised from coding criteria used in the aphasia and gesture research literature and refined through co-design with practising UK speech and language therapists.