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Titolo	Velar fronting in German dialects : A study in synchronic and diachronic phonology / / Tracy Alan Hall
Pubbl/distr/stampa	Berlin : , : Language Science Press, , 2022
ISBN	3-96110-398-4
Descrizione fisica	1 online resource (922 pages) : illustrations
Collana	Open Germanic linguistics
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Soggetti	German language - Phonology
Lingua di pubblicazione	Inglese
Formato	Materiale a stampa
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Nota di bibliografia	Includes bibliographical references and index.
Sommario/riassunto	<p>Velar Fronting (VF) is the name for any synchronic or diachronic phonological process shifting the velar place of articulation to the palatal region of the vocal tract. A well-known case of VF in Standard German is the rule specifying that the fricative [x] assimilates to [ç] after front segments. VF also refers to the change from velar sounds like [k g] to palatals ([ç c]). The book provides a thorough investigation of VF in German dialects: Data are drawn from over 300 original sources for varieties that are (or were) spoken in Germany, Austria, Switzerland, and other countries. VF differs geographically along three parameters: (A) triggers, (B) targets, and (C) outputs. VF triggers (=A) are typically defined according to vowel height: In some systems VF is induced only by high front vowels, in others by high and mid front vowels, and in yet others by high, mid, and low front vowels. Some varieties treat consonants ([r l n]) as triggers, while others do not. VF can be nonassimilatory, in which case the rule applies even in the context of back segments. In many varieties of German, VF targets (=B) consist of the two fricatives [x ç], but in other dialects the targets comprise [x] but not [ç]. In some places, VF affects not only [x ç], but also velar stops and the velar nasal. The output of VF (=C) is typically palatal [ç] (given the input [x]), but in many other places it is the alveolopalatal [ç]. A major theme is the way in which VF interacts with synchronic and diachronic changes creating or eliminating structures which can potentially undergo it or trigger it. In many dialects the</p>

relationship between velars ([x]) and palatals ([j]) is transparent because velars only occur in the back vowel context and palatals only when adjacent to front sounds. In that type of system, independent processes can either feed VF (by creating additional structures which the latter can undergo), or they can bleed it (by eliminating potential structures to which VF could apply). In other dialects, VF is opaque. In one opaque system, both velars ([x]) and palatals ([j]) surface in the context of front segments. Thus, in addition to expected front vowel plus palatal sequences ([... ic ...]), there are also unexpected ones consisting of front vowel plus velar ([... ix ...]). In a second type of opaque system, velars and palatals are found in the context of back segments; hence, expected sequences such as [... ic ...] occur in addition to unexpected ones like [...c...].

2. Record Nr.	UNINA9910739431503321
Titolo	Making the DSM-5 : concepts and controversies / / Joel Paris, James Phillips, editors
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ISBN	1-4614-6504-4
Edizione	[1st ed. 2013.]
Descrizione fisica	1 online resource (182 p.)
Altri autori (Persone)	ParisJoel PhillipsJames
Disciplina	616.89075
Soggetti	Psychiatry - History - 20th century - United States Mental illness - Classification - United States
Lingua di pubblicazione	Inglese
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Note generali	Description based upon print version of record.
Nota di bibliografia	Includes bibliographical references and index.
Nota di contenuto	pt. 1. Historical/Ideological perspectives -- pt. 2. Ideological and conceptual perspectives -- pt. 3. Conceptual perspectives.
Sommario/riassunto	In 2013, the American Psychiatric Association published the 5th edition of its Diagnostic and Statistical Manual of Mental Disorders (DSM-5). Often referred to as the "bible" of psychiatry, the manual only classifies mental disorders and does not explain them or guide their treatment. While science should be the basis of any diagnostic system, to date,

there is no knowledge on whether most conditions listed in the manual are true diseases. Moreover, in DSM-5 the overall definition of mental disorder is weak, failing to distinguish psychopathology from normality. In spite of all the progress that has been made in neuroscience over the last few decades, the psychiatric community is no closer to understanding the etiology and pathogenesis of mental disorders than it was fifty years ago. In Making the DSM-5, prominent experts delve into the debate about psychiatric nosology and examine the conceptual and pragmatic issues underlying the new manual. While retracing the historic controversy over DSM, considering the political context and economic impact of the manual, and focusing on what was revised or left unchanged in the new edition, this timely volume addresses the main concerns of the future of psychiatry and questions whether the DSM legacy can truly improve the specialty and advance its goals. .
